



Purchasing Division
 2019 Washington Street East
 Post Office Box 50130
 Charleston, WV 25305-0130

**State of West Virginia
 Solicitation Response**

Proc Folder : 659529
 Solicitation Description : Addendum 3 -SMARTnet Renewals, or Equal
 Proc Type : Agency Purchase Order

Date issued	Solicitation Closes	Solicitation Response	Version
	2019-12-11 11:30:00	SR 0402 ESR12081900000003432	1

VENDOR

VS0000015031
 SEMM LLC

Solicitation Number: ARFQ 0402 EDD2000000072

Total Bid : \$0.00 Response Date: 2019-12-08 Response Time: 15:50:32

Comments: Thank you very much for this opportunity. We look forward to working with you.

FOR INFORMATION CONTACT THE BUYER

Michelle L Childers
 (304) 558-2686
 michelle.childers@k12.wv.us

Signature on File

FEIN #

DATE

All offers subject to all terms and conditions contained in this solicitation

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
2	SmartNet Renewals, or Equal	1.00000	EA	\$0.000000	\$0.00

Comm Code	Manufacturer	Specification	Model #
81111818			

Extended Description : **If Vendor is submitting bid online, Vendor must upload and attach the Exhibit A-Pricing Page. Vendor should enter zero (0) as the amount bid in wvOASIS commodity line when submitting online.

WvOASIS Vendor # VS0000015031

FEIN: 82-4088190

Solicitation #: EDD2000000072

Published On: 11/25/2019

Closing On: 12/9/2019 11:30AM EST

REQUEST FOR QUOTATION
SMARTnet Renewals, or Equal

8. MISCELLANEOUS:

8.1 Contract Manager: During its performance of this Contract, Vendor must designate and maintain a primary contract manager responsible for overseeing Vendor's responsibilities under this Contract. The Contract manager must be available during normal business hours to address any customer service or other issues related to this Contract. Vendor should list its Contract manager and his or her contact information below.

Contract Manager: Matthew McEvoy

Vendor's Address: 120 Webber Springs Dr
Inwood, WV 25428

Telephone Number: 540-486-0799

Fax Number: 681-214-2999

Email Address: matt@semminc.com

EXHIBIT A - PRICING PAGE

ARFQ EDD200000072

Location: 1900 Kanawaha Boulevard East, Charleston, WV

RFQ Section Number	QTY	Item ID	Description	Model Number	Serial Number or Pak #	Alternative Part number	Year 1	Renewal Year 2	Renewal Year 3	Extended Total	Optional Pricing Contract	3YR
3.1.1	1		SNTC 8x5xNBD UCS C240 1/115 24 SFF + 2 Rear Drives without CPU, mem, or equal		WZP22340DHH		\$450.24	\$402.97	\$402.97	\$ 1,256.18		\$1,224.60
3.1.2	2	CON-ECMU-ISEVM	SMARTnet Software Support for ISE-VM-K9		PAK: 21LKW6LXJGK		\$ 1,180.00	\$ 1,060.00	\$ 1,060.00	\$ 3,300.00		\$ 2,574.00
3.1.3	1		SNTC 8x5xNBD Cisco 3945 Integrated Services Router		FTX1442AKF6		\$1,595.14	\$1,595.14	\$1,595.14	\$ 4,785.42		\$4,665.77
3.1.4	1	WARR-90-DAY-LTD-HW	SNTC 8x5xNBD Cisco Catalyst 6513 Switch	WS-C6513-E#	FXS1650Q1WB		\$ 9,240.00	\$ 8,269.80	\$ 8,269.80	\$ 25,779.60		\$25,135.12
3.1.5	1		SNTC 24x7x4 Cisco Catalyst 4507 Switch,	WS-C4507R4E	FXS1920Q3K2		\$ 4,010.97	\$ 3,589.82	\$ 3,589.82	\$ 11,190.61		\$ 10,910.84
3.1.6	1		SNTC 24x7x4 Cisco Catalyst 4500X-24 SFP+ Switch	WS-C4500X-24X-IPB	JAE17220ALR		\$ 1,943.20	\$ 1,739.16	\$ 1,739.16	\$ 5,421.52		\$ 5,285.99
3.1.7	1	WARR-90-DAY-LTD-HW	SNTC 8x5xNBD Cisco FirePOWER Management Center 4000	F54000-K9	FCH2039V2T2		\$ 8,831.20	\$ 5,107.58	\$ 5,107.58	\$ 19,046.36		\$ 18,570.20
3.1.8	2	WARR-1YR-LTD-HW	SNTC 8x5xNBD Cisco Nexus 3172TQ Switch	M3K-C3172TQ-10GT	FOC1838R12E FOC1838R11P		\$ 1,534.08	\$ 1,372.96	\$ 1,372.96	\$ 4,280.00		\$ 4,173.08
3.1.9	1	WARR-90-DAY-LTD-HW	SNTC 24x7x4 Cisco 2951 Integrated Services Router	C2951-V5EC/K9	FTX1722AM70		\$ 1,672.80	\$ 1,497.16	\$ 1,497.16	\$ 4,667.12		\$ 4,550.43
3.1.10	1	WARR-90-DAY-LTD-HW	SNTC 8x5xNBD Cisco 5508 Wireless Controller	AIR-CT5508-K9	FCW2118B21Q		\$ 2,104.00	\$ 1,883.08	\$ 1,883.08	\$ 5,870.16		\$ 5,723.41
3.1.11	1	WARR-1YR-LTD-HW	SNTC 8x5xNBD Cisco Catalyst 6807-XL Modular Switch	C6807-XL	SMC1835002N		\$ 5,072.00	\$ 4,539.44	\$ 4,539.44	\$ 14,150.88		\$ 13,797.11
3.1.12	1	WARR-1YR-RTF-20	SNTC 24x7x4 Cisco ASR 9904 Router	ASR-9904	FOX2002GHDC		\$ 1,006.40	\$ 900.80	\$ 900.80	\$ 2,808.00		\$ 2,739.16
3.1.12	2		SNTC 24x7x4 ASR9K Route Switch Processor with 440G/slot Fabric and 6GB	A9K-RSP440-TR	FOC2009NCNH FOC2009NC2K		\$ 7,913.60	\$ 6,168.00	\$ 6,168.00	\$ 20,249.60		\$ 19,745.58
3.1.12	1		SNTC 24x7x4 36-port 10GE, Packet Transport Optimized LC	A9K-36X10GE-TR	FOC2002NSBL		\$ 32,256.00	\$ 28,869.12	\$ 28,869.12	\$ 89,994.24		\$ 87,744.38
3.1.12	1		SNTC 24x7x4 24-port 10GE, Packet Transport Optimized LC	A9K-24X10GE-TR	FOC2008NAWJ		\$ 16,128.00	\$ 14,434.56	\$ 14,434.56	\$ 44,997.12		\$ 43,872.19
3.1.12	1		SNTC 24x7x4 Cisco IOS XR IP/MPLS Core Software 3DES	XR-A9K-PXK9-05.03	Chassis: FOX2002GHDC		\$ 1,006.95	\$ 901.22	\$ 901.22	\$ 2,809.39		\$ 2,739.16
3.1.13	2	WARR-3YR-HW-90D-SW	SNTC 8x5xNBD Cisco UCS C220 M3 Rack Server	UCUCS-EZ-C220M3S	FCH1720V0RM FCH1720V171		\$ 697.60	\$ 181.56	\$ 181.56	\$ 1,060.72		\$ 1,246.64
Location: 837 Chestnut Ridge Rd., Morgantown, WV												
3.1.14	1		SNTC 8x5xNBD UCS C240 1/115 SFF + 2 Rear Drives without, CPU, mem		WZP223004HS		\$ 450.24	\$ 402.97	\$ 402.97	\$ 1,256.18		\$ 1,224.76
3.1.15	2	WARR-90-DAY-LTD-HW	SNTC 8x5xNBD Cisco ASA 5585-X with FirePOWER SSP-60	ASA5585-SSP-60	JMX192480BL JMX192480BM		\$ 39,744.00	\$ 30,982.90	\$ 30,982.90	\$ 101,709.80		\$ 99,167.05

EXHIBIT A - PRICING PAGE

ARFQ EDD200000072


Location: 1900 Kanawaha Boulevard East, Charleston, WV

RFQ Section Number	QTY	Item ID	Description	Model Number	Serial Number or Pak #	Alternative Part number	Year 1	Renewal Year 2	Renewal Year 3	Extended Total	Optional Pricing Contract	3YR
3.1.16	1	WARR-90-DAY-LTD-HW	SNTC 8x5xNBD Cisco Catalyst 6513 Switch	WS-C6513-E=	FXS1651Q1WX		\$ 9,240.00	\$ 8,269.80	\$ 8,269.80	\$ 25,779.60		\$ 25,135.12
3.1.17	1	WARR-LTD-LIFE-HW	SNTC 24x7x4 Cisco Catalyst 4507 Switch	WS-C4507R+E	FXS2019Q3C9		\$ 4,010.97	\$ 3,589.82	\$ 3,589.82	\$ 11,190.61		\$ 10,910.84
3.1.18	1		SNTC 8x5xNBD Cisco Catalyst 6807-XL Modular Switch	C6807-XL	SMC1953001F		\$ 5,072.00	\$ 4,539.44	\$ 4,539.44	\$ 14,150.88		\$ 13,797.11
3.1.19	1	WARR-1YR-RTF-20	SNTC 24x7x4 Cisco ASR 9904 Router	ASR-9904	FOX2002GHD9		\$ 1,006.95	\$ 901.22	\$ 901.22	\$ 2,809.39		\$ 2,739.16
3.1.19	2		SNTC 24x7x4 ASR9K Route Switch Processor with 440G/slot Fabric and 6GB	A9K-RSP440-TR	FOC2009NCJW FOC2009NCH1		\$ 7,913.60	\$ 6,169.14	\$ 6,169.14	\$ 20,251.88		\$ 19,745.58
3.1.19	1		SNTC 24x7x4 36-port 10GE, Packet Transport Optimized LC	A9K-36X10GE-TR	FOC1931N0PB		\$ 32,256.00	\$ 28,868.96	\$ 28,868.96	\$ 89,993.92		\$ 87,744.38
3.1.19	1		SNTC 24x7x4 Cisco IOS XR IP/MPLS Core Software 3DES	XR-A9K-PXK9-05.03	FOX2002GHD9		\$ 1,006.95	\$ 901.22	\$ 901.22	\$ 2,809.39		\$ 2,739.16
<i>Location: 501 22nd Street, Dunbar, WV</i>												
3.1.20	1	WARR-90-DAY-LTD-HW	SNTC 8x5xNBD Cisco ASA 5506W-X with FirePOWER Services	ASA5506W-A-K9	JAD19290100		\$ 140.00	\$ 120.00	\$ 120.00	\$ 380.00		\$ 296.40
TOTAL AMOUNT:										\$ 531,998.57	\$ 518,197.22	

Exhibit B

ARFQ EDD200000072 – SmartNet Renewals

If there are no additional Terms and Conditions that the West Virginia Department of Education will need to agree to as part of the contract for various SmartNet renewals, or equal, your signature below confirms that the contract will be governed by the West Virginia General Terms and Conditions as part of this solicitation.

Signature:  _____ Date: 12/7/2019

Print Name: Matthew McEvoy Title: President

Business Name: SEMM

Address: 120 Webber Springs Drive
Inwood, WV 25428

Contact Name: Matthew McEvoy

Email Address: matt@semminc.com

DESIGNATED CONTACT: Vendor appoints the individual identified in this Section as the Contract Administrator and the initial point of contact for matters relating to this Contract.

Matthew McEvoy - President

(Name, Title) **Matthew McEvoy - President**

(Printed Name and Title) **120 Webber Springs Drive, Inwood, WV 25428**

(Address) **540-486-0799 / 681-214-2999**

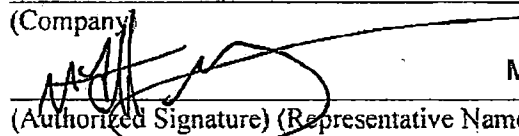
(Phone Number) / (Fax Number) **matt@semminc.com**

(E-mail address)

CERTIFICATION AND SIGNATURE: By signing below, or submitting documentation through wvOASIS, I certify that I have reviewed this Solicitation in its entirety; that I understand the requirements, terms and conditions, and other information contained herein; that this bid, offer or proposal constitutes an offer to the State that cannot be unilaterally withdrawn; that the product or service proposed meets the mandatory requirements contained in the Solicitation for that product or service, unless otherwise stated herein; that the Vendor accepts the terms and conditions contained in the Solicitation, unless otherwise stated herein; that I am submitting this bid, offer or proposal for review and consideration; that I am authorized by the vendor to execute and submit this bid, offer, or proposal, or any documents related thereto on vendor's behalf; that I am authorized to bind the vendor in a contractual relationship; and that to the best of my knowledge, the vendor has properly registered with any State agency that may require registration.

SEMM

(Company)

 **Matthew McEvoy - President**

(Authorized Signature) (Representative Name, Title)

Matthew McEvoy - President

(Printed Name and Title of Authorized Representative)

12/7/2019

(Date)

540-486-0799 / 681-214-2999

(Phone Number) (Fax Number)

ADDENDUM ACKNOWLEDGEMENT FORM

SOLICITATION NO.:

Instructions: Please acknowledge receipt of all addenda issued with this solicitation by completing this addendum acknowledgment form. Check the box next to each addendum received and sign below. Failure to acknowledge addenda may result in bid disqualification. Acknowledgment: I hereby acknowledge receipt of the following addenda and have made the necessary revisions to my proposal, plans and/or specification, etc.

Addendum Numbers Received:

(Check the box next to each addendum received)

- | | |
|---|--|
| <input type="checkbox"/> Addendum No. 1 | <input type="checkbox"/> Addendum No. 6 |
| <input type="checkbox"/> Addendum No. 2 | <input type="checkbox"/> Addendum No. 7 |
| <input type="checkbox"/> Addendum No. 3 | <input type="checkbox"/> Addendum No. 8 |
| <input type="checkbox"/> Addendum No. 4 | <input type="checkbox"/> Addendum No. 9 |
| <input type="checkbox"/> Addendum No. 5 | <input type="checkbox"/> Addendum No. 10 |

I understand that failure to confirm the receipt of addenda may be cause for rejection of this bid. I further understand that any verbal representation made or assumed to be made during any oral discussion held between Vendor's representatives and any state personnel is not binding. Only the information issued in writing and added to the specifications by an official addendum is binding.

SEMM

Company

Matthew McEvoy

Authorized Signature

12/7/2019

Date

NOTE: This addendum acknowledgment should be submitted with the bid to expedite document processing.

ARFQ_EDD2000000072_SmartNet Renewals

VENDOR: (Please submit with your bid)

Contract Manager: During its performance of this Contract, Vendor must designate and maintain a primary contract manager responsible for overseeing Vendor's responsibilities under this Contract. The Contract manager must be available during normal business hours to address any customer service or other issues related to this Contract. Vendor should list its Contract manager and his or her contact information below.

Contract Manager: Matthew McEvoy

Company Name: SEMM

Vendor's FEIN: 82-4088190

Vendor's Address: 120 Webber Springs Drive
Inwood, WV 25428

Telephone Number: 540-486-0799

Fax Number: 681-214-2999

Email Address: matt@semminc.com

STATE OF WEST VIRGINIA
Purchasing Division

PURCHASING AFFIDAVIT

CONSTRUCTION CONTRACTS: Under W. Va. Code § 5-22-1(i), the contracting public entity shall not award a construction contract to any bidder that is known to be in default on any monetary obligation owed to the state or a political subdivision of the state, including, but not limited to, obligations related to payroll taxes, property taxes, sales and use taxes, fire service fees, or other fines or fees.

ALL CONTRACTS: Under W. Va. Code §5A-3-10a, no contract or renewal of any contract may be awarded by the state or any of its political subdivisions to any vendor or prospective vendor when the vendor or prospective vendor or a related party to the vendor or prospective vendor is a debtor and: (1) the debt owed is an amount greater than one thousand dollars in the aggregate; or (2) the debtor is in employer default.

EXCEPTION: The prohibition listed above does not apply where a vendor has contested any tax administered pursuant to chapter eleven of the W. Va. Code, workers' compensation premium, permit fee or environmental fee or assessment and the matter has not become final or where the vendor has entered into a payment plan or agreement and the vendor is not in default of any of the provisions of such plan or agreement.

DEFINITIONS:

"Debt" means any assessment, premium, penalty, fine, tax or other amount of money owed to the state or any of its political subdivisions because of a judgment, fine, permit violation, license assessment, defaulted workers' compensation premium, penalty or other assessment presently delinquent or due and required to be paid to the state or any of its political subdivisions, including any interest or additional penalties accrued thereon.

"Employer default" means having an outstanding balance or liability to the old fund or to the uninsured employers' fund or being in policy default, as defined in W. Va. Code § 23-2c-2, failure to maintain mandatory workers' compensation coverage, or failure to fully meet its obligations as a workers' compensation self-insured employer. An employer is not in employer default if it has entered into a repayment agreement with the Insurance Commissioner and remains in compliance with the obligations under the repayment agreement.

"Related party" means a party, whether an individual, corporation, partnership, association, limited liability company or any other form or business association or other entity whatsoever, related to any vendor by blood, marriage, ownership or contract through which the party has a relationship of ownership or other interest with the vendor so that the party will actually or by effect receive or control a portion of the benefit, profit or other consideration from performance of a vendor contract with the party receiving an amount that meets or exceeds five percent of the total contract amount.

AFFIRMATION: By signing this form, the vendor's authorized signer affirms and acknowledges under penalty of law for false swearing (W. Va. Code §61-5-3) that: (1) for construction contracts, the vendor is not in default on any monetary obligation owed to the state or a political subdivision of the state, and (2) for all other contracts, that neither vendor nor any related party owe a debt as defined above and that neither vendor nor any related party are in employer default as defined above, unless the debt or employer default is permitted under the exception above.

WITNESS THE FOLLOWING SIGNATURE:

Vendor's Name: Matthew McEvoy

Authorized Signature: [Signature] Date: Dec. 6, 2019

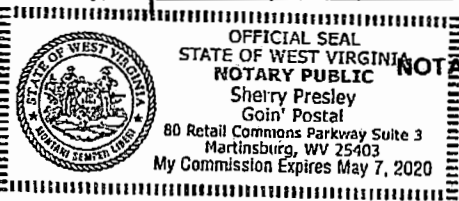
State of West Virginia

County of Berkeley, to-wit:

Taken, subscribed, and sworn to before me this 6 day of December, 2019.

My Commission expires May 7, 2020.

AFFIX SEAL HERE



NOTARY PUBLIC

[Signature]

Request for Taxpayer Identification Number and Certification

**Give Form to the
 requester. Do not
 send to the IRS.**

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. SEMM LLC	
2 Business name/disregarded entity name, if different from above	
3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input checked="" type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ <u>C</u> <small>Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.</small> <input type="checkbox"/> Other (see instructions) ▶	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>
5 Address (number, street, and apt. or suite no.) See instructions. 120 Webber Springs Drive	Requester's name and address (optional)
6 City, state, and ZIP code Inwood, WV 25428	
7 List account number(s) here (optional)	

Print or type. See Specific Instructions on page 3.

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number									
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25px; height: 25px; border: 1px solid black;"></td> <td style="width: 25px; height: 25px; border: 1px solid black;"></td> <td style="width: 25px; height: 25px; border: 1px solid black;"></td> <td style="width: 25px; height: 25px; border: 1px solid black;"></td> </tr> <tr> <td style="text-align: center;">-</td> <td style="width: 25px; height: 25px; border: 1px solid black;"></td> <td style="width: 25px; height: 25px; border: 1px solid black;"></td> <td style="width: 25px; height: 25px; border: 1px solid black;"></td> </tr> </table>					-				
-									
or									
Employer identification number									
8 2 - 4 0 8 8 1 9 0									

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here Signature of U.S. person

Date ▶ 12-5-2019

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.