

11/17/2016 18:19 FAX

001/001



STATE OF MISSOURI  
MISSOURI DEPARTMENT OF CORRECTIONS  
CONTRACT AMENDMENT

RETURN AMENDMENT NO LATER THAN December 1, 2016 TO:

Danice Chaidez, Procurement Officer I

[Danice.Chaidez@doc.mo.gov](mailto:Danice.Chaidez@doc.mo.gov)

(573) 522-2109 (Phone)

(573) 522-1562 (Fax)

FMU/PURCHASING SECTION

P.O. BOX 236

JEFFERSON CITY, MISSOURI 65102

| DATE              | VENDOR IDENTIFICATION   | CONTRACT NUMBER             | CONTRACT DESCRIPTION   |
|-------------------|---|-----------------------------|--|
| November 15, 2016 | Mineral Area Pathology, LLC<br>P. O. Box 868<br>1212 Weber Road<br>Farmington, MO 63640 | Amendment #001<br>Y16708175 | Forensic Autopsy Services<br>for<br>Various DOC Institutions |

CONTRACT Y16708175 IS HEREBY AMENDED AS FOLLOWS:

Pursuant to Section 3.3.1 on page 6, the Missouri Department of Corrections hereby exercises its option to renew the above-referenced contract for the period of December 15, 2016 through December 14, 2017.

All other terms, conditions and provisions of the previous contract period, including prices, shall remain and apply hereto.

The contractor shall complete, sign, and return this document as acceptance on or before the date indicated above.

IN WITNESS THEREOF, THE PARTIES HERETO EXECUTE THIS AGREEMENT.

Company Name: Mineral Area Pathology, LLC

Mailing Address: P.O. Box 868

City, State Zip: Farmington, MO 63640

Telephone: 573-518-2159

E-Mail Address: pathdoc@hotmail.com

Authorized Signer's Printed Name and Title: ~~Russell Deidiker~~ Russell Deidiker  
*owner*

Authorized Signature: ~~Russell Deidiker~~ Date: 11/16/16

THIS AMENDMENT IS ACCEPTED BY THE MISSOURI DEPARTMENT OF CORRECTIONS AS FOLLOWS: In its entirety.

*[Signature]*  
Dave Dophire, Director, Division of Adult Institutions

11/25/16  
Date

# INVITATION FOR BID



Missouri Department of Corrections  
Fiscal Management Unit  
Purchasing Section  
2729 Plaza Drive, P.O. Box 236  
Jefferson City, MO 65102

Buyer of Record:  
Beth Lambert  
Telephone: (573) 526-6494  
[Beth.Lambert@doc.mo.gov](mailto:Beth.Lambert@doc.mo.gov)

# IFB 16708175

Forensic Autopsy Services  
FOR  
Department of Corrections  
Various Institutions

Contract Period: Date of Award through One  
Year  
Date of Issue: November 2, 2015

Page 1 of 31

Bids Must Be Received No Later Than:

2:00 p.m., December 2, 2015

Sealed bids must be delivered to the Missouri Department of Corrections, Purchasing Section, 2729 Plaza Drive, Jefferson City, MO 65109, or P.O. Box 236, Jefferson City, Missouri 65102. The bidder should clearly identify the IFB number on the lower right or left-handed corner of the container in which the bid is submitted to the Department. This number is essential for identification purposes.

We hereby agree to provide the services and/or items, at the price quoted, pursuant to the requirements of this document and further agree that when this document is countersigned by an authorized official of the Missouri Department of Corrections, a binding contract, as defined herein, shall exist. The authorized signer of this document certifies that the contractor (named below) and each of its principals are not suspended or debarred by the federal government.

Company Name: Mineral Area Pathology LLC  
Mailing Address: P.O. Box 868  
City, State, Zip: Farmington, MO 63640  
Telephone: 513-701-7292 Fax: 513-701-7431  
Federal EIN #: 43-1872655 State Vendor #: \_\_\_\_\_  
Email: Pathdoc@hotmail.com

Authorized Signer's Printed Name and Title: Russell Deidiker, MD

Authorized Signature: [Signature] Bid Date: 11/3/15

## NOTICE OF AWARD:

This bid is accepted by the Missouri Department of Corrections as follows:

**In its entirety.**

Contract No. **Y16708175**

[Signature]  
Dave Dormire, Director, Division of Adult Institutions

12/15/15  
Date

The original cover page, including amendments, should be signed and returned with the bid.

**EXHIBIT A, Pricing Page**

**Forensic Autopsy Services** - The bidder shall provide a firm, fixed price for the original contract period and a maximum price for each potential renewal period for providing the services in accordance with the provisions and requirements of this IFB. All costs associated with providing the required services shall be included in the stated prices.

| <b>Forensic Autopsy Services</b> |   |
|----------------------------------|---|
| Original Contract Period         | \$ <u>1,875<sup>00</sup></u> firm, fixed price per case |
| First Renewal Period             | \$ <u>1,875<sup>00</sup></u> maximum price per case     |
| Second Renewal Period            | \$ <u>1,950<sup>00</sup></u> maximum price per case     |
| Third Renewal Period             | \$ <u>1,950<sup>00</sup></u> maximum price per case     |
| Fourth Renewal Period            | \$ <u>2,000<sup>00</sup></u> maximum price per case     |

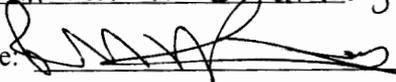
**Terms:**

The bidder should state below its discount terms offered for the prompt payment of invoices.

  0   % if paid within   0   days of receipt of invoice.

By signing, the bidder hereby declares understanding, agreement and certification of compliance to provide the items at the prices quoted, in accordance with all requirements and specification contained herein and the Terms and Conditions. The bidder further agrees that the language of this IFB shall govern in the event of a conflict with his/her bid.

Company Name: Mineral Area Pathology, LLC

Authorized Signature:  Printed Name: Russell DeJoker, MD

Date: 11/3/15 Email: Pathdoc@hotmail.com

**EXHIBIT B**

**MISCELLANEOUS INFORMATION**

**Licensure**

Provide the name of the person providing autopsies and proof of licensure to practice medicine in the State of Missouri pursuant to Chapter 334 RSMo and proof of board certification in pathology with specialty certification in forensic pathology.

Name: Russell Deidiker, MD

Certification: AP/CP/FP

**Employee Bidding/Conflict of Interest:**

Bidders who are elected or appointed officials or employees of the State of Missouri or any political subdivision thereof, serving in an executive or administrative capacity, must comply with sections 105.450 to 105.458, RSMo, regarding conflict of interest. If the bidder or any owner of the bidder's organization is currently an elected or appointed official or an employee of the State of Missouri or any political subdivision thereof, please provide the following information.

Name and title of elected or appointed official or employee of the State of Missouri or any political subdivision thereof:

none

If employee of the State of Missouri or political subdivision thereof, provide name of state agency or political subdivision where employed:

none

Percentage of ownership interest in bidder's organization held by elected or appointed official or employee of the State of Missouri or political subdivision thereof:

0 %

# State of Missouri

Department of Insurance, Financial Institutions and Professional Registration  
Division of Professional Registration

Missouri State Board of Registration for the Healing Arts  
Physician and Surgeon



VALID THROUGH JANUARY 31, 2016  
ORIGINAL CERTIFICATE/LICENSE NO. 113238

RUSSELL D. DEIDIKER, M.D.  
1212 WEBER ROAD  
FARMINGTON MO 63640  
USA

*Connie Clark*  
EXECUTIVE DIRECTOR

*Jan A. Rackus*  
DIVISION DIRECTOR

# The American Board of Pathology

Russell D. Heidiker, M.D.

*has pursued an accepted course of graduate study and coursework and has demonstrated proficiency to the satisfaction of the Board of Examiners. Therefore, on this twelfth day of December, 2000,*

The American Board of Pathology

*grants this certificate and declares the above physician to be a Diplomate and is satisfied*

Forensic Pathology



*R. D. Heidiker*  
President  
*James A. Dancy*  
Secretary  
*W. J. ...*  
Treasurer

# The American Board of Pathology

Herewith affirms that

Russell A. Heidiker, M.D.

Has pursued an accepted course of graduate study and clinical work and has demonstrated proficiency to the satisfaction of the Board of Trustees.

Therefore, on this fourth day of October 1999.

The American Board of Pathology

grants this certificate and declares the above physician  
to be a Diplomate and certified in

Anatomic Pathology and Clinical Pathology



Augusta Orly *President* Rose E. Jumbala *Vice President* Kit W. Wudum *Secretary* David B. Ford *Treasurer*  
Stephen D. Allen *Arthur Cotton* to Lewis Park Ramzi Cotton  
Frederick A. Dewey *Jeffrey McCullough* Edward E. Powell *James Rossi*

**EXHIBIT C**

**CURRENT/PRIOR EXPERIENCE VERIFICATION**

The bidder should copy and complete this form documenting the bidder and subcontractor's current/prior experience considered relevant to the services required herein. In addition, the bidder is advised that if the contact person listed for verification of services is unable to be reached during the evaluation, the listed experience may not be considered.

|   |  |
|---|--|
| <b>Bidder Name or Subcontractor Name:</b> <u>Mineral Area Pathology, LLC</u>  |  |
| <b>Reference Information (Current/Prior Services Performed For):</b>          |  |
| Name and Address of Reference Company:  | <u>St. Francois County Coroner<br/>PO Box 702<br/>PARK HILLS, MO 63601</u> |
| Name, Title, Telephone Number, and Email Address of Reference Contact Person: | <u>Jim Coplin<br/>CORONER ST. FRANCOIS COUNTY<br/>(573) 431-4273</u>       |
| Dates of Service:   | <u>1998 - present</u>  |
| If contract has terminated, specify reason:                                   | <u>Ø</u>   |
| Annual Dollar Value of Services   |  |
| Description of Services Performed   | <u>Forensic Autopsies</u>  |

As the contact person for the company/client provided above, my signature below verifies that the information presented on this form is accurate. I understand that the information provided on this form is for verification purposes and does not address the quality of the services provided. I am available for contact by the Department for additional discussions regarding my/my company's association with the bidder referenced above:

James W Coplin  
Signature of Person Verifying Information

10-21-15  
Date of Signature

**EXHIBIT D**  
**BUSINESS ENTITY CERTIFICATION, ENROLLMENT DOCUMENTATION,**  
**AND AFFIDAVIT OF WORK AUTHORIZATION**

**BUSINESS ENTITY CERTIFICATION:**

**The bidder must certify their current business status by completing either Box A or Box B or Box C on this Exhibit.**

- |               |   |
|---------------|---|
| <b>BOX A:</b> | To be completed by a non-business entity as defined below.  |
| <b>BOX B:</b> | To be completed by a business entity who has not yet completed and submitted documentation pertaining to the federal work authorization program as described at <a href="http://www.dhs.gov/files/programs/gc_1185221678150.shtm">http://www.dhs.gov/files/programs/gc_1185221678150.shtm</a> . |
| <b>BOX C:</b> | To be completed by a business entity who has current work authorization documentation on file with a Missouri state agency including Division of Purchasing and Materials Management.   |

**Business entity**, as defined in section 285.525, RSMo, pertaining to section 285.530, RSMo, is any person or group of persons performing or engaging in any activity, enterprise, profession, or occupation for gain, benefit, advantage, or livelihood. The term “**business entity**” shall include but not be limited to self-employed individuals, partnerships, corporations, contractors, and subcontractors. The term “**business entity**” shall include any business entity that possesses a business permit, license, or tax certificate issued by the state, any business entity that is exempt by law from obtaining such a business permit, and any business entity that is operating unlawfully without such a business permit. The term “**business entity**” shall not include a self-employed individual with no employees or entities utilizing the services of direct sellers as defined in subdivision (17) of subsection 12 of section 288.034, RSMo.

Note: Regarding governmental entities, business entity includes Missouri schools, Missouri universities (other than stated in Box C), out of state agencies, out of state schools, out of state universities, and political subdivisions. A business entity does not include Missouri state agencies and federal government entities.

**BOX A – CURRENTLY NOT A BUSINESS ENTITY**

I certify that Mineral Area Pathology, LLC (Company/Individual Name) **DOES NOT CURRENTLY MEET** the definition of a business entity, as defined in section 285.525, RSMo pertaining to section 285.530, RSMo as stated above, because: (check the applicable business status that applies below)

- I am a self-employed individual with no employees; **OR**  
 The company that I represent employs the services of direct sellers as defined in subdivision (17) of subsection 12 of section 288.034, RSMo.

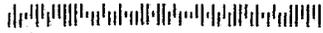
I certify that I am not an alien unlawfully present in the United States and if Mineral Area Pathology, LLC (Company/Individual Name) is awarded a contract for the services requested herein under 15708450 (IFB Number) and if the business status changes during the life of the contract to become a business entity as defined in section 285.525, RSMo pertaining to section 285.530, RSMo then, prior to the performance of any services as a business entity, Mineral Area Pathology, LLC (Company/Individual Name) agrees to complete Box B, comply with the requirements stated in Box B and provide the State of Missouri with all documentation required in Box B of this exhibit.

Russell DeJoker MD  
 Authorized Representative's Name (Please Print)

[Signature]  
 Authorized Representative's Signature

Mineral Area Pathology, LLC  
 Company Name (if applicable)

11/13/15  
 Date



Mineral Area Pathology, LLC  
PO Box 868  
Farmington, MO 63640



1000



65100

U.S. POSTAGE  
PAID  
FARMINGTON, MO  
63640  
NOV 05, 16  
AMOUNT

**\$1.42**

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Missouri Department of Corrections  
Purchasing Section  
2729 Plaza Drive  
Jefferson City, MO 65109

IFB 16708175

**RECEIVED**  
MO DEPT. OF CORRECTIONS  
PURCHASING SECTION  
11/9/2015 11:24 AM