

Solicitation Type: Request for Proposal

Project Title: Temporary Staffing for Clerical Positions

Due Date: March 31, 2022 at 11:00 AM CT

Submitted to:





**Arkansas Department of Human Services
Attn: Office of Procurement
700 Main Street Slot W345
Little Rock, AR 72201
501-682-6327**

Submitted by:

VTECH SOLUTION, INC.

Anisha Vataliya, President

 1100 H St NW, STE 750, Washington DC, 20005

 202.644.9774 (O) | 866.733.4974 (F)

 <https://www.vtechsolution.com/>

 vTech.SLED@vtechsolution.com

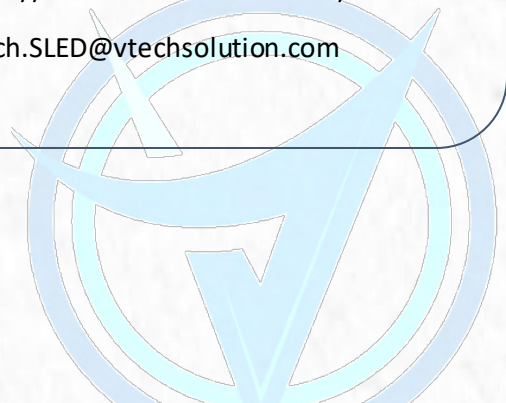


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Vendor’s signature on this page shall signify vendor’s agreement that either of the following shall cause the vendor’s bid to be disqualified4

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BID SIGNATURE PAGE

Type or Print the following information.

PROSPECTIVE CONTRACTOR'S INFORMATION				
Company:	vTech Solution Inc			
Address:	100 H Street, N.W. Suite 750			
City:	Washington	State:	DC	Zip Code: 20005
Business Designation:	<input type="checkbox"/> Individual	<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Public Service Corp	
	<input type="checkbox"/> Partnership	<input type="checkbox"/> Corporation	<input type="checkbox"/> Nonprofit	
Minority and Women-Owned Designation*:	<input type="checkbox"/> Not Applicable	<input type="checkbox"/> American Indian	<input type="checkbox"/> Service Disabled Veteran	
	<input type="checkbox"/> African American	<input type="checkbox"/> Hispanic American	<input type="checkbox"/> Women-Owned	
	<input type="checkbox"/> Asian American	<input type="checkbox"/> Pacific Islander American		
	AR Certification #: _____ * See <i>Minority and Women-Owned Business Policy</i>			

PROSPECTIVE CONTRACTOR CONTACT INFORMATION			
<i>Provide contact information to be used for bid solicitation related matters.</i>			
Contact Person:	Anisha Vataliya	Title:	President
Phone:	202-644-9774	Alternate Phone:	
Email:	vtech.sled@vtechsolution.com		


CONFIRMATION OF REDACTED COPY
<input type="checkbox"/> YES, a redacted copy of submission documents is enclosed. <input type="checkbox"/> NO, a redacted copy of submission documents is <u>not</u> enclosed. I understand a full copy of non-redacted submission documents will be released if requested.
<p><i>Note: If a redacted copy of the submission documents is not provided with Prospective Contractor's response packet, and neither box is checked, a copy of the non-redacted documents, with the exception of financial data (other than pricing), will be released in response to any request made under the Arkansas Freedom of Information Act (FOIA). See Bid Solicitation for additional information.</i></p>

ILLEGAL IMMIGRANT CONFIRMATION
By signing and submitting a response to this <i>Bid Solicitation</i> , a Prospective Contractor agrees and certifies that they do not employ or contract with illegal immigrants. If selected, the Prospective Contractor certifies that they will not employ or contract with illegal immigrants during the aggregate term of a contract.

ISRAEL BOYCOTT RESTRICTION CONFIRMATION
By checking the box below, a Prospective Contractor agrees and certifies that they do not boycott Israel, and if selected, will not boycott Israel during the aggregate term of the contract.
<input type="checkbox"/> Prospective Contractor does not and will not boycott Israel.

An official authorized to bind the Prospective Contractor to a resultant contract must sign below.

The signature below signifies agreement that any exception that conflicts with a Requirement of this *Bid Solicitation* will cause the Prospective Contractor's bid to be disqualified:

Authorized Signature:  Title: President
 Printed/Typed Name: Anisha Vataliya Date: 03/24/2022

VENDOR'S SIGNATURE ON THIS PAGE SHALL SIGNIFY VENDOR'S AGREEMENT THAT EITHER OF THE FOLLOWING SHALL CAUSE THE VENDOR'S BID TO BE DISQUALIFIED:

a. Additional terms or conditions submitted intentionally or inadvertently.

I **Anisha Vataliya** the **President** of **vTech Solution Inc.** ensure that vTech "does not have any additional terms& conditions to this solicitation". All the information provided is true to my knowledge

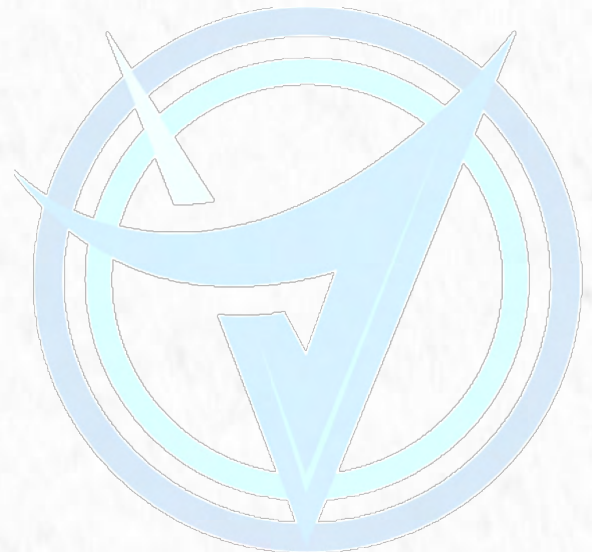
b. Any exception that conflicts with a Requirement of this Bid Solicitation.

I **Anisha Vataliya** the **President** of **vTech Solution Inc.** ensure that vTech "No exceptions made which can conflicts with a requirement of this bid Solicitation".

Sincerely,



Anisha Vataliya,
President
vTech Solution Inc.



You Seek, We Deliver.

CONTRACT AND GRANT DISCLOSURE AND CERTIFICATION FORM

Failure to complete all of the following information may result in a delay in obtaining a contract, lease, purchase agreement, or grant award with any Arkansas State Agency.

SUBCONTRACTOR: _____ SUBCONTRACTOR NAME: _____
 Yes No

IS THIS FOR:

TAXPAYER ID NAME: _____ **Goods? Services? Both?**

YOUR LAST NAME: _____ FIRST NAME _____ M.I.: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____ COUNTRY: _____

AS A CONDITION OF OBTAINING, EXTENDING, AMENDING, OR RENEWING A CONTRACT, LEASE, PURCHASE AGREEMENT, OR GRANT AWARD WITH ANY ARKANSAS STATE AGENCY, THE FOLLOWING INFORMATION MUST BE DISCLOSED:

FOR INDIVIDUALS *

Indicate below if: you, your spouse or the brother, sister, parent, or child of you or your spouse is a current or former: member of the General Assembly, Constitutional Officer, State Board or Commission Member, or State Employee:

Position Held	Mark (√)		Name of Position of Job Held <small>[senator, representative, name of board/ commission, data entry, etc.]</small>	For How Long?		What is the person(s) name and how are they related to you? <small>[i.e., Jane Q. Public, spouse, John Q. Public, Jr., child, etc.]</small>	
	Current	Former		From MM/YY	To MM/YY	Person's Name(s)	Relation
General Assembly							
Constitutional Officer							
State Board or Commission Member							
State Employee							

None of the above applies

FOR AN ENTITY (BUSINESS) *

Indicate below if any of the following persons, current or former, hold any position of control or hold any ownership interest of 10% or greater in the entity: member of the General Assembly, Constitutional Officer, State Board or Commission Member, State Employee, or the spouse, brother, sister, parent, or child of a member of the General Assembly, Constitutional Officer, State Board or Commission Member, or State Employee. Position of control means the power to direct the purchasing policies or influence the management of the entity.

Position Held	Mark (√)		Name of Position of Job Held <small>[senator, representative, name of board/commission, data entry, etc.]</small>	For How Long?		What is the person(s) name and what is his/her % of ownership interest and/or what is his/her position of control?		
	Current	Former		From MM/YY	To MM/YY	Person's Name(s)	Ownership Interest (%)	Position of Control
General Assembly								
Constitutional Officer								
State Board or Commission Member								
State Employee								

None of the above applies

Contract and Grant Disclosure and Certification Form

Failure to make any disclosure required by Governor's Executive Order 98-04, or any violation of any rule, regulation, or policy adopted pursuant to that Order, shall be a material breach of the terms of this contract. Any contractor, whether an individual or entity, who fails to make the required disclosure or who violates any rule, regulation, or policy shall be subject to all legal remedies available to the agency.

As an additional condition of obtaining, extending, amending, or renewing a contract with a state agency I agree as follows:

1. Prior to entering into any agreement with any subcontractor, prior or subsequent to the contract date, I will require the subcontractor to complete a **CONTRACT AND GRANT DISCLOSURE AND CERTIFICATION FORM**. Subcontractor shall mean any person or entity with whom I enter an agreement whereby I assign or otherwise delegate to the person or entity, for consideration, all, or any part, of the performance required of me under the terms of my contract with the state agency.

2. I will include the following language as a part of any agreement with a subcontractor:

Failure to make any disclosure required by Governor's Executive Order 98-04, or any violation of any rule, regulation, or policy adopted pursuant to that Order, shall be a material breach of the terms of this subcontract. The party who fails to make the required disclosure or who violates any rule, regulation, or policy shall be subject to all legal remedies available to the contractor.

3. No later than ten (10) days after entering into any agreement with a subcontractor, whether prior or subsequent to the contract date, I will mail a copy of the **CONTRACT AND GRANT DISCLOSURE AND CERTIFICATION FORM** completed by the subcontractor and a statement containing the dollar amount of the subcontract to the state agency.

I certify under penalty of perjury, to the best of my knowledge and belief, all of the above information is true and correct and that I agree to the subcontractor disclosure conditions stated herein.

Signature _____  Title _____ Date _____

Vendor Contact Person _____ Title _____ Phone No. _____

Agency use only

Agency _____ Agency _____ Agency _____ Contact _____ Contract
Number _____ Name _____ Contact Person _____ Phone No. _____ or Grant No. _____



vTech Solution Inc.
1100 H Street, N.W. Suite 750
Washington DC 20005
202.644.9774
rfp.vtech@vtechsolution.com

EQUAL EMPLOYMENT OPPORTUNITY (EEO) POLICY STATEMENT

vTech Solution Inc. SHALL NOT DISCRIMINATE AGAINST ANY EMPLOYEE OR APPLICANT FOR EMPLOYMENT BECAUSE OF ACTUAL OR PERCEIVED: RACE, COLOR, RELIGION, NATIONAL ORIGIN, SEX, AGE, MARITAL STATUS, PERSONAL APPEARANCE, SEXUAL ORIENTATION, GENDER IDENTITY OR EXPRESSION, FAMILIAL STATUS, FAMILY RESPONSIBILITIES, MATRICULATION, POLITICAL AFFILIATION, GENETIC INFORMATION, DISABILITY, SOURCE OF INCOME, OR PLACE OF RESIDENCE OR BUSINESS.

vTech Solution Inc. AGREES TO AFFIRMATIVE ACTION TO ENSURE THAT APPLICANTS ARE EMPLOYED, AND THAT EMPLOYEES ARE TREATED DURING EMPLOYMENT WITHOUT REGARD TO THEIR ACTUAL OR PERCEIVED: RACE, COLOR, RELIGION, NATIONAL ORIGIN, SEX, AGE, MARITAL STATUS, PERSONAL APPEARANCE, SEXUAL ORIENTATION, GENDER IDENTITY OR EXPRESSION, FAMILIAL STATUS, FAMILY RESPONSIBILITIES, MATRICULATION, POLITICAL AFFILIATION, GENETIC INFORMATION, DISABILITY, SOURCE OF INCOME, OR PLACE OF RESIDENCE OR BUSINESS. THE AFFIRMATIVE ACTION SHALL INCLUDE, BUT NOT BE LIMITED TO THE FOLLOWING: (A) EMPLOYMENT, UPGRADING, OR TRANSFER; (B) RECRUITMENT OR RECRUITMENT ADVERTISING; (C) DEMOTION, LAYOFF, OR TERMINATION; (D) RATES OF PAY, OR OTHER FORMS OR COMPENSATION; AND (E) SELECTION FOR TRAINING AND APPRENTICESHIP.

vTech Solution Inc. AGREES TO POST IN CONSPICUOUS PLACES THE PROVISIONS CONCERNING NON-DISCRIMINATION AND AFFIRMATIVE ACTION.

vTech Solution Inc. SHALL STATE THAT ALL QUALIFIED APPLICANTS WILL RECEIVE CONSIDERATION FOR EMPLOYMENT PURSUANT TO SUBSECTION 1103.2 THROUGH 1103.10 OF MAYOR’S ORDER 85-85; “EQUAL EMPLOYMENT OPPORTUNITY REQUIREMENTS IN CONTRACTS.”

vTech Solution Inc. AGREES TO PERMIT ACCESS TO ALL BOOKS PERTAINING TO ITS EMPLOYMENT PRACTICES, AND TO REQUIRE EACH SUBCONTRACTOR TO PERMIT ACCESS TO BOOKS AND RECORDS.

vTech Solution Inc. AGREES TO COMPLY WITH ALL GUIDELINES FOR EQUAL EMPLOYMENT OPPORTUNITY APPLICABLE IN THE DISTRICT OF COLUMBIA.

vTech Solution Inc. SHALL INCLUDE IN EVERY SUBCONTRACT THE EQUAL OPPORTUNITY CLAUSES, SUBSECTION 1103.2 THROUGH 1103.10 SO THAT SUCH PROVISIONS SHALL BE BINDING UPON EACH SUBCONTRACTOR OR VENDOR.

Anisha Vataliya, President

AUTHORIZED OFFICIAL AND TITLE

AUTHORIZED SIGNATURE
NAME

3/4/2022

DATE

vTech Solution Inc.

FIRM/ORGANIZATION

EQUAL EMPLOYMENT OPPORTUNITY EMPLOYER INFORMATION REPORT

GOVERNMENT OF THE DISTRICT OF COLUMBIA DC Office of Contracting and Procurement Employer Information Report (EEO)	Reply to: Office of Contracting and Procurement 441 4 th Street, NW, Suite 700 South Washington, DC 20001
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Instructions:
 Two (2) copies of DAS 84-404 or Federal Form EEO-1 shall be submitted to the Office of Contracting and Procurement.
 One copy shall be retained by the Contractor.

Section A – TYPE OF REPORT

1. Indicate by marking in the appropriate box the type of reporting unit for which this copy of the form is submitted (MARK ONLY ONE BOX)

Single Establishment Employer (1) Single-establishment Employer Report	Multi-establishment Employer: (2) <input checked="" type="checkbox"/> Consolidated Report (3) <input type="checkbox"/> Headquarters Report (4) <input type="checkbox"/> Individual Establishment Report (submit one for each establishment with 25 or more employees) (5) <input type="checkbox"/> Special Report
---	---

1. Total number of reports being filed by this Company. 1

Section B – COMPANY IDENTIFICATION *(To be answered by all employers)*

1. Name of Company which owns or controls the establishment for which this report is filed
vTech Solution Inc.

Address (Number and street) 1100 H Street, N.W. Suite 750	City or Town Washington	Country	State DC	Zip Code 20005	b.
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b. Employer Identification No.	<table border="1" style="border-collapse: collapse; width: 100%;"> <tr> <td style="width: 12.5%; text-align: center;">2</td> <td style="width: 12.5%; text-align: center;">0</td> <td style="width: 12.5%; text-align: center;">4</td> <td style="width: 12.5%; text-align: center;">2</td> <td style="width: 12.5%; text-align: center;">7</td> <td style="width: 12.5%; text-align: center;">1</td> <td style="width: 12.5%; text-align: center;">0</td> <td style="width: 12.5%; text-align: center;">8</td> <td style="width: 12.5%; text-align: center;">8</td> </tr> </table>	2	0	4	2	7	1	0	8	8
2	0	4	2	7	1	0	8	8		

2. Establishment for which this report is filed.

a. Name of establishment **vTech Solution Inc.**

Address (Number and street) 1100 H Street, N.W. Suite 750	City or Town Washington	Country	State DC	Zip Code 20005	d.
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b. Employer Identification No.	<table border="1" style="border-collapse: collapse; width: 100%;"> <tr> <td style="width: 12.5%; text-align: center;">2</td> <td style="width: 12.5%; text-align: center;">0</td> <td style="width: 12.5%; text-align: center;">4</td> <td style="width: 12.5%; text-align: center;">2</td> <td style="width: 12.5%; text-align: center;">7</td> <td style="width: 12.5%; text-align: center;">1</td> <td style="width: 12.5%; text-align: center;">0</td> <td style="width: 12.5%; text-align: center;">8</td> <td style="width: 12.5%; text-align: center;">8</td> </tr> </table>	2	0	4	2	7	1	0	8	8
2	0	4	2	7	1	0	8	8		

3. Parent of affiliated Company **N/A**

a. Name of parent or affiliated Company	b. Employer Identification No.									
	<table border="1" style="border-collapse: collapse; width: 100%;"> <tr> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> </tr> </table>									

Address (Number and Street)	City or Town	Country	State	Zip Code
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Section C - ESTABLISHMENT INFORMATION

1. Is the location of the establishment the same as that reported last year? <input checked="" type="checkbox"/> Yes No Did not report last year Report on combined basis	2. Is the major business activity at this establishment the same as that reported last year? <input checked="" type="checkbox"/> Yes No No report last year Reported on combined basis	OFFICIAL USE ONLY
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2. What is the major activity of this establishment? (Be specific, i.e., manufacturing steel castings, retail grocer, wholesale plumbing supplies, title insurance, etc. Include the specific type of product or service provided, as well as the principal business or industrial activity.)
Professional Services & Consulting

3. MINORITY GROUP MEMBERS: Indicate if you are a minority business enterprise (50% owned or 51% controlled by minority members).
 Yes No

SECTION D – EMPLOYMENT DATA

Employment at this establishment – Report all permanent, temporary, or part-time employees including apprentices and on-the-job trainees unless specifically excluded as set forth in the instructions. Enter the appropriate figures on all lines and in all columns. Blank spaces will be considered as zero. *In columns 1, 2, and 3, include ALL employees in the establishment including those in minority groups*

JOB CATEGORIES	TOTAL EMPLOYEES IN ESTABLISHMENT			MINORITY GROUP EMPLOYEES							
	Total Employees Including Minorities (1)	Total Male Including Minorities (2)	Total Female Including Minorities (3)	MALE				FEMALE			
				Black (4)	Asian (5)	American Indian (6)	Hispanic (7)	Black (8)	Asian (9)	American Indian (10)	Hispanic (11)
Officials and Managers	28	15	13	5	7	0	3	5	8	0	0
Professionals	11	4	7	2	2	0	0	3	4	0	0
Technicians	2	2	0	2	0	0	0	0	0	0	0
Sales Workers	7	3	4	0	3	0	0	1	3	0	0
Office and Clerical	0	0	0	0	0	0	0	0	0	0	0
Craftsman (Skilled)	0	0	0	0	0	0	0	0	0	0	0
Operative (Semi-Skilled)	0	0	0	0	0	0	0	0	0	0	0
Laborers (Unskilled)	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0
TOTAL	48	24	24	9	12	0	3	9	15	0	0
Total employ reported in previous report	48	24	24	9	12	0	3	9	15	0	0

(The trainee below should also be included in the figures for the appropriate occupation categories above)

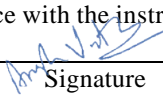
Formal On-The-Job Trainee	White collar	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
		0	0	0	0	0	0	0	0	0	0	0
	Production	0	0	0	0	0	0	0	0	0	0	0

1. How was information as to race or ethnic group in Section D obtained?
 a. Visual Survey c. Other Specify _____
 b. Employment Record _____
 2. Dates of payroll period used **Feb 28, 2022**
 3. Pay period of last report submitted for this establishment. **N/A**

Section E – REMARKS Use this Item to give any identification data appearing on last report which differs from that given above, explain major changes in composition or reporting units, and other pertinent information.

Section F - CERTIFICATION

Check 1. All reports are accurate and were prepared in accordance with the instructions (check on consolidated only)
 One 2. This report is accurate and was prepared in accordance with the instructions.

Name of Authorized Official Anisha Vataliya	Title President	Signature 	Date 3/4/22
Name of person contact regarding This report (Type of print) President	Address 1100 H Street, N.W. Suite 750 (Number and street) Washington, DC	20005	202-644-9774
Title	City and State	Zip Code	Telephone Number Extension

INFORMATION CITED HEREIN SHALL BE HELD IN CONFIDENCE.

STATE OF ARKANSAS



Mark Martin

ARKANSAS SECRETARY OF STATE

To All to Whom These Presents Shall Come, Greetings:

I, Mark Martin, Arkansas Secretary of State of Arkansas, do hereby certify that the following and hereto attached instrument of writing is a true and perfect copy of

Application for Certificate of Authority

of

VTECH FAMILY

filed in this office

April 05, 2018

In Testimony Whereof, I have hereunto set my hand and affixed my official Seal. Done at my office in the City of Little Rock, this 5th day of April 2018.



Mark Martin
Secretary of State

Online Certificate Authorization Code: 1635515ac791a28dd13
To verify the Authorization Code, visit sos.arkansas.gov





**Arkansas Secretary of State
John Thurston**

State Capitol Building ♦ Little Rock, Arkansas 72201-1094 ♦ 501-682-3409

Certificate of Good Standing

I, John Thurston, Secretary of State of the State of Arkansas, and as such, keeper of the records of domestic and foreign corporations, do hereby certify that the records of this office show

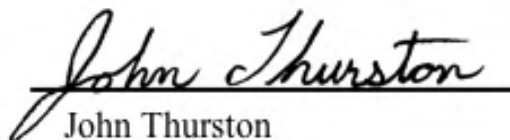
VTECH FAMILY

formed under the laws of the state of Virginia, and authorized to transact business in the State of Arkansas as a Foreign For Profit Corporation, was granted a Application for Certificate of Authority by this office April 5, 2018.

Our records reflect that said entity, having complied with all statutory requirements in the State of Arkansas, is qualified to transact business in this State.



In Testimony Whereof, I have hereunto set my hand and affixed my official Seal. Done at my office in the City of Little Rock, this 23rd day of March 2022.


John Thurston
Secretary of State

Online Certificate Authorization Code: 4d08d9d5fc65ae4

To verify the Authorization Code, visit sos.arkansas.gov

PROPOSED SUBCONTRACTORS FORM

- **Do not** include additional information relating to subcontractors on this form or as an attachment to this form.

PROSPECTIVE CONTRACTOR PROPOSES TO USE THE FOLLOWING SUBCONTRACTOR(S) TO PROVIDE SERVICES.

Type or Print the following information

Subcontractor's Company Name	Street Address	City, State, ZIP

PROSPECTIVE CONTRACTOR DOES NOT PROPOSE TO USE SUBCONTRACTORS TO PERFORM SERVICES.

SECTIONS 1 - 4 VENDOR AGREEMENT AND COMPLIANCE

- Any requested exceptions to items in this section which are NON-mandatory **must** be declared below or as an attachment to this page. Vendor **must** clearly explain the requested exception and should label the request to reference the specific solicitation item number to which the exception applies.
- Exceptions to Requirements **shall** cause the vendor's proposal to be disqualified.

By signature below, vendor agrees to and **shall** fully comply with all requirements as shown in the bid solicitation.

Vendor Name:	vTech Solution Inc	Date:	03/24/2022
Signature:		Title:	President
Printed Name:	Anisha Vataliya		

REFERENCES

Organization Name	Accurate Conceptions, LLC
Address	19 O St Sw, Washington, DC 20024-4105
Contact Person	Aeon Clarke
Title	President
Contact Number	202-498-5388
Email Address	aclarke@accurateconceptions.com

Client	Obverse Inc
Address	6856 Eastern Ave # 210, Washington, DC 20012
Contact Name	James Detherage
Title	President
Telephone number	202-213-3422
Email Address	jdetherage@obverse.net



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OFFICIAL BID PRICE SHEET

- All costs must be included in the hourly rate. The price per hour is a set price for all hours approved under contract.
- Quantities are estimated for bidding purposes only.
- The State may increase or decrease the number of positions as needed.

ITEM	DESCRIPTION	ESTIMATED ANNUAL HOURS PER POSITION	ESTIMATED NUMBER OF POSITIONS	PRICE PER HOUR	ANNUAL AMOUNT <i>(Estimated annual hours x estimated number of positions)</i>
1.	Temporary Clerical Positions	2,080	75	\$ 37.00	\$ 5,772,000.00

- Please select the area(s) the prospective contractor has the capacity to provide services. Bidders may select multiple areas:

DIVISION OF COUNTY OPERATIONS					
<u>AREA I</u> <input type="radio"/>	<u>AREA II</u> <input type="radio"/>	<u>AREA III</u> <input type="radio"/>	<u>AREA IV</u> <input type="radio"/>	<u>AREA V</u> <input type="radio"/>	<u>AREA VI</u> <input type="radio"/>
Baxter	Clay	Cleburne	Calhoun	Arkansas	Pulaski East
Benton	Craighead	Conway	Clark	Ashley	Pulaski Jacksonville
Boone	Crittenden	Faulkner	Columbia	Bradley	Pulaski North
Carroll	Cross	Johnson	Dallas	Chicot	Pulaski South
Crawford	Fulton	Lonoke	Garland	Cleveland	Pulaski Southwest
Franklin	Greene	Perry	Hempstead	Desha	Central Office
Logan	Independence	Pope	Hot Springs	Drew	
Madison	Izard	Prairie	Howard	Grant	
Marion	Jackson	Stone	Lafayette	Jefferson	
Newton	Lawrence	Van Buren	Little River	Lee	
Polk	Mississippi	White	Miller	Lincoln	
Scott	Poinsett	Woodruff	Montgomery	Monroe	
Searcy	Randolph	Yell	Nevada	Phillips	
Sebastian	Sharp		Ouachita	St Francis	
Washington			Pike		
			Saline		
			Sevier		
			Union		