STD-274F REV.01/17/03

SERVICE PURCHASE CONTRACT

ICS: ☐ 310 ☐ 320

ISSUING OFFICE	CONTRACTOR'S NAME & ADDRESS	SHOW THIS CONTRACT INQUIRY NUMBER ON INVOICE
Lock Haven University of PA - East Campus Contracts Administration Office Attn: Kelly Hibbler 301 West Church Street, Room J211 Lock Haven, PA. 17745	FAIRFIELD INN & SUITES 50 SPRING STREET LOCK HAVEN, PA 17745 Contact Person Phone: 570-748-1580 Rachel Young Fax: 570-748-1529	SP 4000019724 PROVIDE SERVICE AND BILL TO: Lock Haven University of PA Accounts Payable Office 301 West Church Street, Room J211 Lock Haven, PA. 17745
Contracting Officer Phone: 570-484-2015 Kelly Hibbler Fax: 570-484-2844 Reference Number : SP 10268891	Contractor's Federal Id or Soc.Sec.No 26-2252886	Contact Person Phone: 570-484-2013 Michele Wenker Fax: 570-484-2844
Effective Date: / Expiration Date: 06/30/2010	Contractor's License or Registration No.	CONTRACT NOT TO EXCEED $ 5,000.00

SPECIFIED	QUANTITY	UNIT PRICE	TOTAL PRICE
HOTEL ACCOMMODATIONS FOR LOCK HAVEN UNIVERSITY ON AN AS-NEEDED BASIS. Dates of Service: December 2009 - June 30, 2010. Fairfield Inn & Suites will provide lodging for Lock Haven University Volunteers, Visitors, Prospective Students, Members of the Council of Trustees, Members of the Foundation Board of Directors, Members of the Alumni Executive Board, Contractors, and Pennsylvania State System of Higher Education (PASSHE) Personnel, on an as needed basis. Accommodations can be booked by University personnel who provide the above referenced contract number #4000019724. Itemized invoices required. Invoices are to be directed to Accounts Payable with Contract Number: #4000019724 referenced. All invoices must reflect the current Clinton County State Rate of $70.00 per night (State rate is subject to change). Note: No miscellaneous charges allowed. Lock Haven University is Tax Exempt. Invoices will be charged back to the appropriate University budgets. Contractor shall not exceed contract amount without prior written approval from the University. The University will not be liable for costs in excess of the contract amount without such approval.	1 AU	$ 5,000.00	$ 5,000.00
SERVICE CODE:		TOTAL ▸	$ 5,000.00

EFFECTIVE DATE
JAN 19 2010
OF CONTRACT

In compliance with the contract terms, conditions and specifications, the undersigned, on behalf of the Contractor, which intends to be legally bound hereby, offers and agrees, to provide the specified services at the price(s) set forth above at the time(s) and point(s) specified. In addition to this document, the following contract terms, conditions and specification are a part of the contract :
1. STD-274 available at http://www.passhe.edu/executive/finance/Procurement/Documents/STD-274Rev050704.pdf

▼ COMMONWEALTH SIGNATURE ▼

PURCHASING AGENCY HEAD OR DESIGNEE — DATE

1/13/10

APPROVED AS TO FISCAL RESPONSIBILITY, BUDGETARY ▼APPROPRIATENESS AND AVAILABILITY OF FUNDS▼

COMPTROLLER — DATE

▼ CONTRACTOR'S SIGNATURE (IN INK) ▼

PRESIDENT/VICE PRESIDENT/MANAGER/PARTNER/OWNER (SIGN BELOW, PRINT NAME AND CIRCLE TITLE) — DATE

X Rachel E Young
X General Manager — X 1/1/2010

SECRETARY/ASSISTANT SECRETARY/TREASURER/ASSISTANT TREASURER (SIGN BELOW, PRINT NAME, AND CIRCLE TITLE) — DATE

Rachel E Young

COMMONWEALTH ATTORNEY APPROVALS
APPROVED AS TO FORM AND LEGALITY

PURCHASING AGENCY ATTORNEY — DATE: 1/19/10

OFFICE OF GENERAL COUNSEL(IF REQUIRED) — DATE

OFFICE OF ATTORNEY GENERAL(IF REQUIRED) — DATE

FUND	DEPT	APP.	YR	LDG	ORG	COST FUNCTION	OBJ	AMOUNT OF ENCUMBRANCE	PRE-EMCUMBRANCE NUMBER	AMT.OF PRE-ENC. LIQUIDATED	CODED
											PRE-AUDIT
											POSTED