SIP-6125.D (Sample Form - State Employee other than Southern Employee)

Approved / Revised 12/13/17

(Date)

State of West Virginia **Purchasing Division**

AGENCY DELEGATED AGREEMENT

Purchase Order #	wvOASIS Vendor/ Customer #	
I, (1) John Doe, 123 ABC Street, Logan, WV 25601 (Mus (Name and address) for (2) Southern WV CTC at _(3) Mount Ga	t match Banner, wvOasis, and W-9 , agree to perform the followay.	wing services
(Agency)	(Location) classes for Workforce Development unit at various date, times, and location:	
	(Detailed description of services to be performed)	5.
(The description should clearly define the services being d	elivered/performed.)	
Date(s) of Service: from (5) i.e. 5/7/19	to_(5) i.e. 6/30/19	·
	per (6) i.e. workshop	
\$ _(7) i.e. \$5,000.00 for th	ne entire term of the contract.	
completed and signed if the version (8) Please check the appropriate box below:	esponsibility of the vendor. The following certification and or is a full-time employee of the State of West see employee of the State of West Virginia;	
•	nployee of the State of West Virginia,	-4:
from the full-time duties of the empl	e performed under this agreement will not interfere wo oyee and the amount of annual compensation e named vendor) from the State of West Virginia will be \$ The vendor serves as	received by
with the title of	eartified by	esition)
with the title of	, certified by	·
and Conditions located on the Purchas <i>TCA.pdf</i> , ("Terms and Conditions") are her	the General Terms and Conditions for Agency Delegated I ing Division's website at http://www.state.wv.us/adm reby made a part of this agreement and are specifically ent, Vendor certifies that it has reviewed the Terms and Cod by their provisions.	nin/purchase/ incorporated
APPROVED BY:		
Agency	Vendor (9)	
(Authorized Signature of Agency)	(Vendor's Signature)	
(Title)	(10) (Title)	
(Date)	(Date)	