



**Attachment K
State Term Contract
ITB No. 14111700-17-01
For
Disposable Paper**

This Contract is between the State of Florida, Department of Management Services (Department), an agency of the State of Florida and **Insert Contractor Name** (Contractor), collectively referred to herein as the "Parties."

The Contractor submitted a bid to the Department's solicitation, **ITB No. 14111700-17-01 for Disposable Paper**. After concluding all evaluations, the Department has determined that the Contractor's response provides the lowest responsive and responsible price to the State of Florida.

Accordingly, the Parties agree as follows:

I. Initial Contract Term.

The Initial Contract Term shall be for five years. The Initial Contract Term shall begin on November 3, 2017. The Contract shall expire on November 2, 2022. unless terminated earlier in accordance with the General Contract Conditions.

II. Renewal Term.

Upon mutual written agreement, the Parties may renew this Contract, in whole or in part, for a Renewal Term not to exceed the Initial Contract Term, pursuant to the incorporated General Contract Conditions.

III. Contract.

As used in this document, "Contract" (whether or not capitalized) shall, unless the context requires otherwise, include this document and all incorporated Exhibits, which set forth the entire understanding of the Parties and supersedes all prior agreements. All modifications to this Contract must be in writing and signed by all Parties.

All Exhibits attached and listed below are incorporated in their entirety into, and form part of this Contract. The Contract Exhibits shall have priority in the order listed:

- a) Exhibit A: Statement of Work.
- b) Exhibit B: Price Sheet.
- c) Exhibit C: Definitions.
- d) Exhibit D: General Contract Conditions.
- e) Exhibit E: The Contractor's Bid to this solicitation.

State Term Contract No. 141111700-17-01
For
Disposable Paper

IV. Contract Management.

Department's Contract Manager:

Frank Miller
Division of State Purchasing
Florida Department of Management Services
4050 Esplanade Way, Suite 360
Tallahassee, Florida 32399-0950
Telephone: (850) 488-8855
Email: frank.miller@dms.myflorida.com

Contractor's Contract Manager:

[Insert Contractor Manager Name]
[Insert Contractor name]
[Insert Contractor's physical address]
Telephone: [(XXX) 555-XXXX]
Email: [jane.doe@business.gmail.com]

IN WITNESS WHEREOF, the Parties hereto have caused this Contract, which includes the attached and incorporated Exhibits, to be executed by their undersigned officials as duly authorized. This Contract is not valid and binding until signed and dated by the Parties.

Insert Contractor Name

**Rosalyn Ingram
STATE OF FLORIDA,
DEPARTMENT OF MANAGEMENT SERVICES**

[Name]

[Name]

DATE:

DATE: