

Information requested to issue a Contract for Services: IPUMS-Europe

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Please examine the following information, adding or correcting as necessary, and return by email (rmccaa@umn.edu) at your earliest convenience. Once approved by the University, a formal contract will be issued according to the terms stated below. After the formal contract is signed by the contracting party and registered by the University, work may begin.

Company name: _____

Address: _____

Phone: _____

Fax: _____

Name of contact person: _____

Email of contact person: _____

Maximum amount of contract: US\$ _____

Contract Type:
____ Specific deliverables for agreed-upon price US\$ _____
____ Project-related services at stated rates: US\$ _____ per _____

Begin date: _____ **End date:** _____

Description and Purpose of Contracted Project:

Vendor qualifications and background:

Basis for price:

Assurance of reasonable price:

Payment schedule:

- **Date first invoice/deliverables:** _____
- **Date last invoice/deliverables:** _____
- **Invoices to be approved by:** _____

