

SERVICE PROVIDER
 TRUSTEES



SERVICE AGREEMENT 2021-0520

For use on any CSU project.

This AGREEMENT is made and entered into this [Day] day of [Month], [Year] pursuant to the Public Contract Code 10700, *et seq.*, by and between the Trustees of the California State University on behalf of

<i>Campus, hereafter referred to as Trustees, and</i> California State University Lorem Ipsum	Amendment No.: 123456	Agreement No.: 123456	Is agreement for Design Professional services: Yes (GP-8b)	Project No.: 123456
<i>Service Provider, hereafter referred to as Service Provider.</i> Ipsum Lorem Service Provider, Inc.	CSU Vendor ID No.: 123456	License Number: C-123456		DIR No.: 123456

WITNESSETH: That the Service Provider in consideration of the statements and conditions herein contained, agrees to furnish labor, materials, and equipment and to perform work necessary to complete, in a skillful manner: [Provide a brief [summary description of the work] for [Project Name] located at [Campus Name].

The Service Provider shall provide such services as more fully described in the following Rider and Exhibits, which by this reference are incorporated herein and made part of this Agreement:

Rider	A	Agreement General Provisions,	consisting of six (6) pages;
Exhibit	A	Scope of Work,	consisting of [Number] pages;
Exhibit	B	Fee and Payment Schedule,	consisting of one (1) page;
Exhibit	C	Service Provider Hourly Rate Schedule	applicable to this project.

The term shall begin upon receipt of an executed Agreement from the Trustees and shall end as of [Date]. Work elements started during the term shall continue to their completion and acceptance by the Trustees.

The Service Provider shall not perform services in excess of the Agreement without prior written authorization to proceed from the Trustees.

Service Provider shall report to: [Campus and Name of Project Administrator]

The basic services amount to be expended under this Agreement shall not exceed [Insert Value].

Payment shall be made in accordance with Rider A and Exhibits A, B, C.

Trustees of the California State University							Service Provider						
Campus California State University Lorem Ipsum							Firm Name Ipsum Lorem Service Provider, Inc.						
By (Trustees' Authorized Signature)							By (Authorized Signature)						
Printed Name and Title of Person Signing John Smith, Campus Representative							Printed Name and Title of Person Signing Jack Smith, Service Provider Authorized Signatory						
Address of Campus Project Administrator 99999 Lorem Ipsum Drive, Ipsum, CA 99999							Address of Service Provider 11111 Ipsum Lorem Drive, Lorem CA 11111						
SCO Acct Data:	Fund	Sub Fund	Agency	Yr.	Ref/Item	Category	Program	Element	Component	Chapter	Fiscal Yr.	Legal Ref.	
	123456	123456	123456		123456	123456	123456	123456	123456	123456	123456	123456	
Fund Name 123456				PS Account 123456		PS Fund 123456		PS Dept. ID 123456		PS Program 123456		PS Class 123456	
Amount Encumbered \$999,999,999			<i>I hereby certify upon my personal knowledge that budgeted funds are available for the period and purpose of the expenditures stated above.</i>										
Amount of Increase \$999,999,999			Signature of Accounting Officer									Date	
Amount of Decrease \$999,999,999			<i>I hereby certify that I have examined the written Agreement and find the same to be in accordance with the requirements of California State University Contract Law. G. ANDREW JONES, General Counsel</i>										
Total Amount Encumbered \$999,999,999			By Attorney									Date	

This Agreement may be executed in counterparts all of which taken together shall constitute one and the same Agreement. The exchange of copies of this Agreement by electronic mail in "portable document format" ("PDF") form or by other similar electronic means shall constitute effective execution and delivery of this Agreement and shall have the same effect as copies executed and delivered with original signatures.