

## **Supplier Contract Notification Form**

Contract # (if existing)
Supplier Name
Supplier ID

Please complete and attach the following information to the contract and send to Contracts and Procurement for processing.

Hard Copy of Fully Executed Cont	ract Returned to:		
Contact Name	Courier Address		
Special Instructions:			
Notice of Approved Contract			
Attention to	Email		
Attention to	Email	Email	
Attention to	Email		
Contract Expiration (Must have a Po	eopleSoft User ID)		
Notice of Expiration 120 days prior	90 days prior	60 days prior	other
Contact Name	Contact Email		
Special Instructions:			
Contract Insurance Expiration (M			
Notice of Expiration 120 days prior	90 days prior	60 days prior	other
Contact Name	Contact Email		
Special Instructions:			
Not to Evaced Contracts Only	Votice of Annuageh	ing Limit	
Not-to-Exceed Contracts Only: N		ing Limit	
Notify when% of contract limit spe	nt.		
Contact Name	Contact Email		