MA 18P 1607070000000000000000004 MODIFICATION

State of Maine



Master Agreement

Effective Date: 07/18/16 Expiration Date: 06/30/21

Master Agreement Description: Temporary Staffing Services

Buyer Information

Kathy Paquette 207-624-7877 **ext.** KATHY.L.PAQUETTE@MAINE.GOV

Issuer Information

KATHY PAQUETTE 207-624-7877 ext. KATHY.L.PAQUETTE@MAINE.GOV

Requestor Information

Kathy Paquette 207-624-7877 ext. KATHY.L.PAQUETTE@MAINE.GOV

Agreement Reporting Categories

Authorized Departments

ALL

Vendor Information

Vendor Line #: 1

Vendor ID Vendor Name

VS0000019411 Atlantic Staffing and Payroll Services

Alias/DBA

100

Vendor Address Information

5 Talbot Way

South Portland, ME 04106

US

Vendor Contact Information

Edward Gott

2076505499 ext.

ed.gott@atlantic-staffing.com

Commodity Information

Vendor Line #: 1

Vendor Name: Atlantic Staffing and Payroll Services

Commodity Line #: 1

Commodity Code: 96102

Commodity Description: Administrative Services, All Kinds (Incl. Clerical, Secret

Commodity Specifications:

Commodity Extended Description: As per BP54 contract attached and made part of this MA

 Quantity
 UOM
 Unit Price

 0.00000
 0.000000

Delivery Days Free On Board

Contract Amount Service Start Date Service End Date

0.00 07/18/16 06/30/21

Catalog Name Discount

0.0000 %

Discount Start Date Discount End Date

Please see authorized signatures displayed on the next page

Each signatory below represents that the person has the requisite authority to enter into this Contract. The parties sign and cause this Contract to be executed.

State of Maine - Department of Administrative and Financial Services

DocuSigned by:	
Jaime Schorr	12/14/2020
Signature	Date

Jaime C. Schorr, Chief Procurement Officer

Vendor

12/15/2020

Signature Date

Ed Gott President

Print Representative Name and Title



DATE: 12/14/2020

ADVANTAGE CONTRACT #: MA 18P 16070700000000000004

AMENDMENT AMOUNT: \$ See Rate Table below

This Amendment, is between the following Department of the State of Maine and Provider:

State of Maine DEPARTMENT

DEPARTMENT: Department of Administrative and Financial Services

Address: 111 Sewall Street, Burton M. Cross Building

City: Augusta State: ME Zip Code: 04333-0009

PROVIDER

PROVIDER: Atlantic Staffing and Payroll Services

Address: 5 Talbot Way

City: **South Portland** State: **ME** Zip Code: **04106**

Provider's Vendor Customer #: VS0000019411

Each signatory below represents that the person has the requisite authority to enter into this Contract Amendment. The parties sign and cause this Contract Amendment to be executed.

Department of Administrative and Financial Services, Division of Procurement Services

Atlantic Staffing and Payroll Services

-DocuSigned by:

Jaime Schorr

12/14/2020

Signature Jaime Schorr

Date

5EBF6C6E38E24AB...

Signature Ed Gott

Date

AMENDMENT

The contract is hereby amended as follows: (Check and complete all that apply)

	Amended Period: Amended Contract Amount:	Original Start I Amendment Start I Reason:	tart Date: New End D	rent End Date: Date:							
	Amended										
		Amount of Adju			Reason:						
1	Contract Amount:		Amount of Adjustment: \$ New Contract Amount: \$								
		New Rate Table									
		Vendor Co	ost 1/1/2021 - 6/30/2021	Atlantic Staffing 160707*0004							
		Category		State Identified	Provider						
		Cat I	Office Environment	1.193	1.213						
		Cat II	Driving Related	1.264	1.284						
		Cat III	Lab/Med	1.294	1.314						
		Cat IV	Outdoor	1.294	1.314						
		Cat V	Power Equip.	1.314	1.334						
		Cat VI	At Sea	1.440	1.414						
		Cat VII	Security	1.284	1.310						
		Cat VIII	Trades	1.304	1.324						
		Reason: There is a new state law going into effect 1/1/2021 requiring employees receive Paid Time Off at a rate of 1 hour earned for every 40 hours worked with a maximum of 40 hours earned per year.									
_	Amended Scope of Work:	The Scope of work in Rider A is amended as follows:									
	Other:	Describe the C	changes:								

All other terms and conditions of the original contract and subsequent contract amendments remain in full force and effect.

CODING

LINE TOTAL	FUND	DEPT	UNIT	SUB UNIT	OBJ	PROGRAM	PROGRAM PERIOD	BOND FUNDING	FISCAL YEAR
\$									