Board 6/17 #76

Mission Linen Supply
MISSION LINEN & UNIFORM SERVICE

RENTAL SERVICE AGREEMENT

Acct. No. _____ Date 6/7/2019 Phone 209-895-7721 Email kwhite@patterson.k12.ca.us

Business Name Patterson Unified School District Contact Name Kelly White

Delivery/Street Address 2280 Keystone Pacific Pkwy. City Patterson State CA Zip 95363

ITEM	TYPE OF SERVICE TYPE	COLOR	IC	UNIT PRICE	TOTAL INVENTORY	NO. OF EMP.	NO. OF CHANGES WKLY	SERVICE CHARGE	WKLY. MIN. CHARGE PER ITEM/EMP.	SPECIAL ITEMS
Industrial Flex Pant	65/35	Any		$.23	11	30	5		100%	☐
Industrial Shirt	65/35	Microcheck		$.22	11	30	5		100%	☐
Double Knot Jean	100% Cotton	Blue		$.30	11	1	5		100%	☐
Cornerstone Polo Snag Proof	Poly	Navy		$.35	11	1	5		100%	☐
Walk Off Mat	3 x 4	Slate		$2.50	1		1		100%	☐
Walk Off Mat	4 x 6	Slate		$3.50	1		1		100%	☐
Bagged Shop Towel	Cotton	Blue		$.07	100		100		100%	☐
Service Charge	Per Location							$5.00	$5.00	☐
										☐
										☐
										☐
										☐
										☐
										☐
This Agreement covers 3 Locations										☐
Maintenance(2280 Keystone Pacific Pkwy)										☐
Creekside(535 Peregrine Dr.)										☐
Patterson High(200 N 7th St.)										☐

TERMS OF PAYMENT (Check one box) ☑ C.O.D. ☐ CHARGE (if approved)

All invoices of MISSION shall be deemed to be true and correct, and unless an objection to an invoice is made by the CUSTOMER in writing on or before the due date, or unless the account is C.O.D. etc., all charges are due and payable by the 10th of the month following service. A late charge of 1½% percent per month (18% per annum) for any amount in arrears may be charged. In the event CUSTOMER charges are not paid in a timely manner, MISSION has the option to place CUSTOMER on a C.O.D. basis, plus a percentage of any past due bills. MISSION shall apply any payment received toward the current bills first and any balance against past due bills until the CUSTOMER is again current.

☑ **There is an Addendum associated with this agreement.** _____ **(initial)**

☐ **There is not an Addendum associated with this agreement.** _____ **(initial)**

$ 30.00 **Stop Minimum**

MISSION LINEN SUPPLY (dba Mission Linen & Uniform Service)

Signature _____ (Authorized Representative)

Accepted by DM/GM _____ (Signature)

Date _____

BUSINESS NAME _____

Authorized Representative _____ (Please Print Name)

Signature _____

Title _____ Date _____

By initialing below, I acknowledge that I have read the terms and conditions on the back of this agreement.

_____

Item #148611 (05/17)