

# Purchase Change Request



Marshall University  
Office of Purchasing  
One John Marshall Drive  
Huntington, WV 25755-4100

**Order #**  
MU22TEMPS\_A

FY 24	Buyer MD	Date 08/01/23	Account Varies	P.O. Date 08/27/2021	Contract MU22TEMPS_A
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<b>Document</b> <input type="checkbox"/> Requisition (Cancellation only) <input type="checkbox"/> Regular Purchase Order <input type="checkbox"/> Contract Purchase Order <input checked="" type="checkbox"/> Open End Contract Purchase <input type="checkbox"/> Agreement	<b>Document Action</b> <input type="checkbox"/> Cancellation <input type="checkbox"/> Increase/Decrease <input type="checkbox"/> Unused Balance <input type="checkbox"/> Freight <input checked="" type="checkbox"/> Renewal <input type="checkbox"/> Extension Error	<input type="checkbox"/> Error in Total Amount <input type="checkbox"/> Change of Account <input type="checkbox"/> Change of Vendor Name/Address <input type="checkbox"/> Other
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Vendor Name, Address, Phone #, etc. <b>Adecco USA Inc.</b> 10151 Deerwood Park Blvd. 200-400 Jacksonville, FL 32256	Vendor Code <b>943286700</b>	BOG Unit Name & Address Marshall University Office of Purchasing One John Marshall Drive Huntington, WV 25755-4100
Ph# 304-345-8367	Fax	FEIN# 943286700

Item#	Quantity	Description of Change	Unit Price	Extended Price
		<b>Change Order # 3</b>  Open End Temporary Employment Services  To renew the original contract according to all terms and conditions, pricing, and specifications contained in the original contract and all authorized change orders.  Renewal Effective: September 1, 2023 - August 31, 2024  Renewal #: two (2) of four (4) one-year renewals Renewals remaining: two (2) renewals remaining  Vendor Contact: Ryan Howard at Ryan.Howard@Adeccona.com		

Reason for Change: Renewal	Previous Total	\$ Open-End
	Increase	\$ -
	Decrease	\$ -
	New Total	\$ Open-End

Approved: Michelle W. Greder 8/2/2023  
 Authorized Signature Date

N/A Date  
 Attorney General if required

# Adecco USA Inc.

Proposed Rates Effective:

4/17/2023

Items	Job Classification	Hourly Pay Rate	MU Hourly Billable Rate
15.1	Accounting Assistant I	\$ 11.51	\$ 14.61
15.2	Accounting Assistant II	\$ 13.01	\$ 16.52
15.3	Administrative Assistant	\$ 13.85	\$ 17.58
15.4	Administrative Assistant Senior	\$ 15.78	\$ 20.04
15.5	Administrative Assistant - Fairfield	\$ 14.05	\$ 17.84
15.6	Administrative Secretary Sr.	<b>\$ 15.00</b>	<b>\$ 19.33</b>
15.7	Business Clerk	\$ 9.48	\$ 12.03
15.8	Cashier	\$ 8.75	\$ 11.11
15.9	Cashier Lead	\$ 10.05	\$ 12.76
15.10	Customer Service Representative	\$ 9.48	\$ 12.03
15.11	Data Entry Operator	\$ 9.48	\$ 12.03
15.12	Data Technician I	\$ 10.21	\$ 12.96
15.13	Medical Records Assistant	\$ 10.05	\$ 12.76
15.14	Receptionist	\$ 9.22	\$ 11.70
15.15	Records Assistant I	\$ 8.97	\$ 11.39
15.16	Records Assistant II	\$ 10.21	\$ 12.96
15.17	Residence Hall Desk Coordinators	\$ 9.48	\$ 12.03
15.18	Secretary	<b>\$ 12.48</b>	<b>\$ 16.08</b>
15.19	Applications Systems Analyst Programmer	\$ 16.50	\$ 20.95
15.20	System Programmer	\$ 15.78	\$ 20.04
15.21	Building Service Worker	\$ 8.97	\$ 11.57
15.22	Campus Service Worker	\$ 8.97	\$ 11.57
15.23	Laborer	<b>\$ 12.48</b>	<b>\$ 16.08</b>
15.24	Parking Attendant	<b>\$ 13.48</b>	<b>\$ 17.37</b>
15.25	Receiving Position	\$ 10.05	\$ 12.76
15.26	Trades Specialist I	\$ 15.78	\$ 20.04

Office of Purchasing

Renewal Letter

June 15, 2023

Adecco USA Inc.  
10151 Deerwood Park Boulevard  
200-400  
Jacksonville, FL 32256

**Re: Contract Renewal for MU22TEMPS A**

Hello,

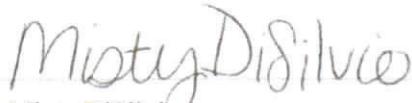
The above referenced contract expires on 8/31/23. There is a provision for renewal upon written mutual agreement of the parties.

Please annotate on the bottom of this letter, with your signature and date, if you agree to renew contract, MU22TEMPS A, effective 9/1/23 through 8/31/24 under the same terms and conditions as the original contract including all approved change orders.

Please return the executed letter via email at your earliest convenience.

If you have any questions, please feel free to call me at [delong16@marshall.edu](mailto:delong16@marshall.edu).

Sincerely,



Misty DiSilvio  
Contract Specialist

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I agree to the current MU22TEMPS\_A for an additional one (1) year period under the same terms and conditions as the original contract.

Yes       No

Yes, subject to the following changes indicated below or in the attached letter.

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Signature      RYAN HOWARD

7/26/23  
Date

Vendor/Customer

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Vendor/Customer	Legal Name	Alias/DBA	Vendor Active Status	Customer Active Status	Previous Name
✓ 00000231854	ADECCO USA INC		Active	Inactive	
00000231855	ADECCO CORPORATION		Inactive	Inactive	
00000231856	ADECCO USA INC		Inactive	Inactive	
VC0000104557	ADECCO EMPLOYMENT SERVICES		Active	Inactive	

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**General Info**

Vendor/Customer : 00000231854	Restrict Use by Department : <input type="checkbox"/>
Legal Name : ADECCO USA INC	Miscellaneous Account : <input type="checkbox"/>
Alias/DBA : <input type="text"/>	Internal Account : <input type="checkbox"/>
Vendor Active Status : Active <input type="text"/>	Third Party Only : <input type="checkbox"/>
Vendor Approval Status : Complete <input type="text"/>	Third Party Vendor : <input type="checkbox"/>
Customer Active Status : Inactive <input type="text"/>	Third Party Customer : <input type="checkbox"/>
Customer Approval Status : Incomplete <input type="text"/>	Inventory Customer : <input type="checkbox"/>
Location Name : <input type="text"/>	Healthcare Provider : <input type="checkbox"/>
First Name : <input type="text"/>	Never Archive : <input type="checkbox"/>
Middle Name : <input type="text"/>	Restrict VSS Access : No <input type="text"/>
Last Name : <input type="text"/>	Discontinue - No New Business : <input type="checkbox"/>
Company Name : ADECCO USA INC	Prevent MA Reference : <input type="checkbox"/>
Previous Name : <input type="text"/>	PunchOut Enabled : <input type="checkbox"/>
Previous Street : <input type="text"/>	Re-PunchOut Enabled : <input type="checkbox"/>
Previous City : <input type="text"/>	Electronic Order Enabled : <input type="checkbox"/>
Previous State/Province : <input type="text"/>	W-9 Received : <input type="checkbox"/>
Previous Country : <input type="text"/>	W-9 Received Date : <input type="text"/>
	W-8 Received : <input type="checkbox"/>
	W-8 Received Date : <input type="text"/>
	Accepts Credit Cards : <input type="checkbox"/>
	Active From : 01/01/1999 <input type="text"/>
	Active To : <input type="text"/>
	Last Usage Date : 06/30/2023 <input type="text"/>
	Department : <input type="text"/>
	Unit : <input type="text"/>

▶ **Headquarters**

▶ **Organization**

▶ **Disbursement Options**

▶ **Prenote/EFT**

▶ **Remittance Advice**

▶ **Vendor Terms**

▶ **Accounts Receivable**

▶ **eMALL**

▶ **Location Information**

▶ **Fee and Vendor Compliance Holds**

Fee Exempt : <input type="checkbox"/>	Tax Clearance : <input type="checkbox"/>
Registration Application Date : 06/25/2020 <input type="text"/>	Unemployment Insurance : <input type="checkbox"/>
Registration Effective Date : 06/25/2020 <input type="text"/>	Worker's Compensation : <input type="checkbox"/>
Registration Expiration Date : 06/25/2021 <input type="text"/>	Secretary of State Registration : <input type="checkbox"/>
Pre-Registration Code : <input type="text"/>	Federal Debarred : <input type="checkbox"/>

▶ **Executive Compensation**

▶ **Additional Information**

▶ **Travel**

▶ **Change Management**

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