

Dear \_\_\_\_\_:

The following describes the terms and conditions for the agreed upon services and will constitute our letter of agreement and contract for services. If you agree with the terms as stated, please have signed and retain one copy for your records and return the other to *Manion & Associates*, 5725 Oak Lake Trail, Oviedo, FL, 32765. If you have any questions about the terms of the contract, please contact our office by telephone prior to making any modifications.

**A. SERVICES:**

Provision of a full day, on-site presentation of “Creating a Positive Workplace: It’s In Our Hands!” for Community Hospital on Friday, September 17, 2010. The session is scheduled for 8:30 – 4:15.

**B. FEES AND PAYMENT CONDITIONS:**

The fee for this service is \$\_\_\_\_\_ plus normal and customary travel expenses. The fee is due upon receipt of the invoice. A statement of expenses will be submitted to you within one week of the completion of the work and payment of all undisputed amounts is due within 30 days of receipt. All checks should be made payable to Jo Manion.

**C. HANDOUT MATERIALS:**

An original copy of handout materials will be provided for duplication for participant handouts.

**D. RESCHEDULING:**

Session dates may be changed and rescheduled by the client without penalty if done so by direct communication with me or my office 30 days or more in advance of the scheduled date for the program. Dates rescheduled by the client less than 30 days prior to the originally scheduled program date will be charged a rescheduling fee equal to 60% of the contract fee.

**E. CANCELLATION:**

If the contract is cancelled by the client less than 30 days prior to the scheduled date, the client is liable for and agrees to pay the total amount of the contract plus any airline penalties or other documented out-of-pocket expenses incurred due to cancellation.

**The above constitutes the terms and conditions of this letter of agreement and contract for services and is hereby:**

**APPROVED ON BEHALF OF *MANION & ASSOCIATES*:**

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**Jo Manion**

**Date**

**APPROVED ON BEHALF OF *Community Hospital***

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**Jane Smith, Director of Education**

**Date**