



Personal Service Contract (\$10,000 or less)

Personal Service Contract Number: _____ (To be assigned by Purchasing)

This Personal Services Contract for professional services to _____
is made and entered into this _____ day of _____, 20____ by and between

Name of Individual or Firm (The Second Party) Social Security or Federal ID Number

Street Address City State Zip Code

Services: University of Kentucky has determined that personnel are not available to perform the described services or use of personnel would not be feasible. Therefore, the Second Party will perform the services described below:

Payment: As fee for the services described, University of Kentucky agrees to pay the Second Party a sum Not to exceed \$ _____ upon receipt of signed invoice(s). No other fees or expenses are authorized unless specifically identified in this contract. Payment will be made as described below:

Other Expenses: The Second Party shall be reimbursed for no other expenses of any kind, except as specifically described below:

Contract Dates: Beginning: _____ Ending: _____ Cancellation by either party upon 30 days written notice.

The Second Party is an independent contractor for University of Kentucky therefore, University of Kentucky is not liable for Social Security Contributions pursuant to Section 418. 42 U.S. Code. Furthermore, IRS Form 1099 will be forwarded at the end of the calendar year if total payments exceed \$600.00.

FIRST PARTY:

SECOND PARTY:

Department Signature Date

Type Name of Firm/Individual

Dean, Vice President or Provost (if necessary)

Signature Date

OFFICIAL PURCHASING APPROVAL:

Purchasing Director/Asst. Director Date