

STATE OF MISSISSIPPI  
DEPARTMENT OF FINANCE AND ADMINISTRATION  
OFFICE OF PURCHASING AND TRAVEL  
501 NORTH WEST STREET  
JACKSON, MISSISSIPPI 39201

RENEWAL INFORMATION FORM

Contract Vendor Name: **Shorts Travel Management**

Contract Name: **Travel Agency Services**

Contract Nos. **Contract No. 8200062655**  
**Contract Smart No. 1130-22-C-SWCT-00220**

Please sign one and only one of the statements below and return this form to Demetra Hayes at [Demetra.Hayes@dfa.ms.gov](mailto:Demetra.Hayes@dfa.ms.gov)

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**Statement No. 1:** **Shorts Travel Management will renew the above-referenced contract for an additional twelve (12) months:**

\_\_\_\_\_ With price adjustments

X With the same prices, terms and conditions

Shane Morin 5/24/23  
Signature Date

**Statement No. 2:** **Shorts Travel Management will not renew the above-referenced contract:**

\_\_\_\_\_  
Signature Date

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**Renewal Approved: Demetra M. Hayes**

Demetra M. Hayes 5-4-23  
Date