	Effective Date: 08/31/16	_	
Sta	te of Mississippi – Office of Purchasing and Travei 2016 – 2017 Lodging Rate Proposal (Please print legibly or type)		
Hotel Name:	Drury Inn and Suites Meridian		
Hotel Information:	MAGIC Supplier Number: 310000 9230		
	Mailing Address: 112 Highway 11 and 80		
	city: Meridian zio: 39301		
	county Lauderdale County		
Onsite Hotel Phone:	601.483.5570 Onsite Hotel Fax: 866.714.9613		
Onsite Hotel Email and Website:	Email: dis. merid. 143. gm @drucy hotels.com		
	Website: www.druryhotels.com		
Daily Base Room Rate (Do not include tax):	\$ 9 Single \$ 9 Double		
In addition to Daily Rates, please list base rates for weekly and monthly if available (Do not include tax):	\$Weekly \$Monthly		
Have desk clerks and other personnel been informed of the agreed upon rates and policies?	No		
Sleeping Room Door Entrances:	Outside		
Rates will be needed Sunday — Thursday. If you will also honor the rates for Friday and Saturday for official state business, please check the line indicating so:	Yes, rates are available Sunday – Thursday. Yes, rates are available Friday – Saturday. No, rates are not available Friday – Saturday		

Rates available to city/county workers, community college employees, school districts and cost reimbursable contractors on official state business?	Yes	No		
Payment options:	MasterCard Discover American Express Personal C *Please note that the State of MS Visa Travel C Mississippi. All other fees may be applied.	Visa Diner's Club heck Other Card is sales tax exempt within the state of		
Is direct billing available? Note: Individual agencies will be responsible for arrangements.	Yes *Please note that direct bill is sales tax exempt applied.	within the state of MS. All other fees may be		
Check-in/check-out times:	<u>3ρm</u> Check-in	<i>∐am</i> ,Check-out		
Cancellation Policy:	12pm same day reservation			
On-site Contact Information for Questions, Disputes, etc.	Contact Name/Position:	Contact Phone:		
	Randall Sims Creneral Manager	601,483.5570		
Print Authorized Name: Emily Skinner Authorized Signature: Emily Skinner				

Note: By signing the above, you are indicating your rates will be effective according to the guidelines as set forth in the Proposal Format and Guidelines and Check List Form for Hotel and Motel Services for the period of October 1, 2016, through September 30, 2017. No rate changes will be acceptable during this contract period unless the Federal Register publishes a rate change. In addition, you are indicating that rates will be made available to desk clerks for state employees who request "state rate" to be given these rates.