Effective Date: 09/11/16

State of Mississippi – Office of Purchasing and Travel
2017 – 2018 Lodging Rate Proposal
(Please print legibly or type)

Hotel Name:	Cabot Lodge Jackson - North	
Hotel Information:	MAGIC Supplier Number: 3100019502	
	Mailing Address: 120 Dyess Road	
	City: Ridgeland	Zip: 39157
	County: Madison	
Onsite Hotel Phone and Fax:	Onsite Hotel Phone: 601-957-0757	
	Onsite Hotel Fax: 601-326-0753	
Onsite Hotel Email and Website:	Email: jfranks@mmhg.com	
	Website: www.cabotlodgejacksonnorth.com	
Daily Base Room Rate *(Do not include tax)*:	$ 93.00 Single	$ 93.00 Double
In addition to Daily Rates, please list base rates for weekly and monthly if available *(Do not include tax)* :	$ N/A Weekly	$ N/A Monthly
Have desk clerks and other personnel been informed of the agreed upon rates and policies?	☒ Yes	☐ No
Sleeping Room Door Entrances:	☒ Inside	☐ Outside
Minority Vendor Status:	☐ Yes	☒ No

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 ☒ Visa ☒ Diner's Club ☒ American Express ☐ Personal Check ☒ Other Direct Bill, School Check *Please note that the State of MS Visa Travel Card is sales tax exempt within the state of Mississippi. All other fees may be applied.	
Is direct billing available? Note: Individual agencies will be responsible for arrangements.	☒ Yes ☐ No *Please note that direct bill is sales tax exempt within the state of MS. All other fees may be applied	
Check-in/check-out times:	3pm Check-in 12pm Check-out	
Cancellation Policy:	6pm - Day of Arrival	
Contract Onsite Contact Information for Questions, Disputes, etc.	Contact Name/Position: Jimmy Franks Director of Sales	Contact Phone: 601-326-0740

Print Authorized Name: Jimmy Franks

Authorized Signature: Jimmy Franks

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, 2017, through September 30, 2018. 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.