



DR. BUU NYGREN *PRESIDENT*
RICHELLE MONTOYA *VICE PRESIDENT*

The Navajo Nation | Yideeskáądi Nitsáhákees

January 11, 2023

GALLUP BUSINESS SYSTEMS
1100 E. AZTEC SUITE B
GALLUP, NEW MEXICO 87301

ATTENTION: MICHAEL JONES, OWNER

REFERENCE: 164 Review 019732/Contract

Dear Michael:

Attached please find your copy of the approved Contract (CO15803) with the Navajo Nation Fiscal Recovery Fund (FRF) Office. The contract has been awarded in the amount of \$3,180.00. The contract is effective October 1, 2022 and expires on September 30, 2023.

The above contract number must be referenced on all invoices, documents, and correspondence as it relates to this contract.

Should you have any questions, please contact Lisa Jymm at 928-309-5532.

Sincerely,

A handwritten signature in blue ink that reads "J. Ben".

Jeremy Ben, Accounting Manager
OOC – Contract Administration

cc: Lisa Jymm, Navajo Nation FRF Office
Merlin Johnson, Contract Accounting/Navajo Nation Office of the Controller
Contract Folder: CO15803

**FORM 1
(ADMINISTRATIVE PURPOSES ONLY)**

**SERVICES CONTRACT BETWEEN
THE NAVAJO NATION AND**

Gallup Business Systems

Consultant's Legal Name (this must match the name on the Contractor's W-9 and Certificate of Insurance)

1100 E. Aztec, Suite B, Gallup NM 87301

Consultant's physical address, state and zip code

(505)863-4461

Consultant's telephone number

CONTRACT NO: _____

FOR THE PERIOD: BEGINNING October 1, 2022
 ENDING September 30, 2023

PAYMENTS TO BE MADE FROM:

Account:	<u>K211504_6140</u>	Fees:	\$	<u>3,000.00</u>
Account:	<u> - </u>	Expenses:	\$	<u> </u>
Account:	<u>K211504_6140</u>	Taxes:	\$	<u>180.00</u>

TOTAL PAYMENTS ON THIS CONTRACT NOT TO EXCEED: \$ 3,180.00

UNDER THE TERMS AND CONDITIONS OUTLINED IN:

ATTACHMENT A – Mutual Promises and Agreements

ATTACHMENT B – Scope of Work

EXHIBITS:

EXHIBIT A – Accounting Codes and Budget

EXHIBIT B – Consultant Credentials

EXHIBIT C – Certificate of Insurance

Employer's Identification No.: 85-0478873
or
Consultant's Social Security No.: _____ *this number must match Form W-9*

has been previously withheld and paid to the Office of the Navajo Tax Commission. It is hereby acknowledged that the NATION withholding amounts pursuant to this section in no way removes responsibility from the CONSULTANT as a taxpayer for timely filing of tax returns and timely payment of any other amounts, which may be owed for taxes.

The CONSULTANT is subject to the Tuba City Chapter Sales Tax on gross receipts for all work performed within the Tuba City Chapter pursuant to the To'Nanees'Dizi Local Government Tax Code, as may be amended from time to time, and shall pay the sales tax directly to the Tuba City Chapter. The CONSULTANT is subject to the Kayenta Township Sales Tax on gross receipts for all work performed within the Kayenta Township pursuant to the Kayenta Township Tax Ordinances, as may be amended from time to time, and shall pay the sales tax directly to the Kayenta Township. The NATION shall not withhold this portion of the tax that is directly payable to Tuba City Chapter or Kayenta Township.

The CONSULTANT is solely responsible for the payment of all applicable taxes.

19. **Consultant Debarment; Suspension.** If the CONSULTANT in its present form or any other identifiable capacity as an individual, business corporation, partnership or other entity is deemed ineligible, debarred, or suspended pursuant to the Navajo Business and Procurement Act, 12 N.N.C. §§1501, *et seq.* or the Navajo Nation Procurement Act, 12 N.N.C. §§301, *et seq.*, the CONSULTANT is not legally able to enter into this Contract, and this Contract shall be null and void unless the factors that warranted the ineligibility, debarment or suspension have been sufficiently addressed as provided by applicable Navajo Nation laws.
20. **Insurance Coverage.** The CONSULTANT shall obtain and maintain adequate insurance coverage as recommended and verified by the Navajo Nation Risk Management Program ("RMP") for the entire term of the Contract. The insurance coverage shall name the NATION as an additional insured as specified by the RMP, and the CONSULTANT shall notify the contracting program and the RMP, c/o The Navajo Nation, P.O. Box 1690, Window Rock, Arizona 86515 within five days of any change in the insurance policy. Proof of such insurance is attached as **Exhibit C – Certificate of Insurance**, which is made part of this Contract. The failure to fully comply with this provision shall render this Contract null and void.
21. **Conflicting and Additional Terms.** Any additional terms and conditions of the CONSULTANT are attached hereto and incorporated into this Contract, provided however that in the event of any conflict between the terms and conditions of this Contract and any of the CONSULTANT'S additional terms and conditions, the terms and conditions of this Contract shall control and govern. Any additional terms and conditions not attached to this Contract shall have no force or effect.

SIGNATURES OF THE CONTRACT

For the Consultant:

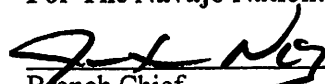


Michael Jones, Owner
Gallup Business Systems
1100 E Aztec, Suite B
Gallup, NM 87301

11/21/22

Date

For The Navajo Nation:



Branch Chief
The Navajo Nation
Post Office Box 9000
Window Rock, Arizona 86515

12-28-22

Date

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