

MA 18P 1803160000000000105  
MODIFICATION

**State of Maine**



**Master Agreement**

**Effective Date:** 04/02/18

**Expiration Date:** 06/30/24

**Master Agreement Description:** Written translation services

**Buyer Information**

Kathy Paquette 207-624-7877 ext. KATHY.L.PAQUETTE@MAINE.GOV

**Issuer Information**

Kathy Paquette 207-624-7877 ext. KATHY.L.PAQUETTE@MAINE.GOV

**Requestor Information**

Kathy Paquette 207-624-7877 ext. KATHY.L.PAQUETTE@MAINE.GOV

**Agreement Reporting Categories**

**Reason For Modification:** To allow time for new RFP evaluation

**Authorized Departments**

ALL

**Vendor Information**

**Vendor Line #:** 1

**Vendor ID**  
VC0000226507

**Vendor Name**  
LATIN AMERICAN TRANSLATORS NETWORK INC

**Alias/DBA**  
LATN

**Vendor Address Information**  
845 SPRING ST NW STE C

ATLANTA, GA 30308  
US

**Vendor Contact Information**

CYNTHIA ERICSON  
404-634-2635 ext.  
PROPOSALS@LATN.COM

**Commodity Information**

**Vendor Line #: 1**

**Vendor Name: LATIN AMERICAN TRANSLATORS NETWORK INC**

**Commodity Line #: 1**

**Commodity Code: 96175**

**Commodity Description: Written translation services**

**Commodity Specifications:**

**Commodity Extended Description:**

<b>Quantity</b>	<b>UOM</b>	<b>Unit Price</b>
0.00000		0.000000
<b>Delivery Days</b>	<b>Free On Board</b>	
<b>Contract Amount</b>	<b>Service Start Date</b>	<b>Service End Date</b>
0.00	04/02/18	06/30/24
<b>Catalog Name</b>	<b>Discount</b>	
	0.0000 %	
	<b>Discount Start Date</b>	<b>Discount End Date</b>

Please see authorized signatures displayed on the next page

Each signatory below represents that the person has the requisite authority to enter into this Contract. The parties sign and cause this Contract to be executed.

State of Maine - Department of Administrative and Financial Services

DocuSigned by:  
David Morris 12/22/2023  
Signature \_\_\_\_\_ Date \_\_\_\_\_  
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David Morris, Acting Chief Procurement Officer

Vendor

Loana A. Denis 12/22/2023  
Signature \_\_\_\_\_ Date \_\_\_\_\_

LOANA A. DENIS VICE PRESIDENT  
Print Representative Name and Title



## CONTRACT AMENDMENT

DATE: 12/22/2023
ADVANTAGE CONTRACT #: MA 18P 1803160000000000105
SERVICE: Written Document Translation Services
AMENDMENT AMOUNT: \$ 0.00 State Agencies will use on an as needed basis

This Contract Amendment is between the following State of Maine Department and Provider:

STATE OF MAINE DEPARTMENT		
DEPARTMENT NAME: Administrative and Financial Services, Division of Procurement Services		
ADDRESS: 111 Sewall Street, Burton Cross Building, 4 <sup>th</sup> Floor		
CITY: Augusta	STATE: ME	ZIP CODE: 04330-0009

PROVIDER		
PROVIDER NAME: Latin American Translation Network (L A T N)		
ADDRESS: 845 Spring St NW, Suite C		
CITY: Atlanta	STATE: GA	ZIP CODE: 30308
PROVIDER'S VENDOR CUSTOMER #: VC0000226507		

Each signatory below represents that the person has the requisite authority to enter into this Contract. The parties sign and cause this Contract Amendment to be executed.

**Department of Administrative and Financial Services, Division of Procurement Services**

**Provider: Latin American Translation Network (L A T N)**

DocuSigned by:

*David Morris*

12/22/2023

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Signature David Morris, Acting Chief Procurement Officer

Date

*On Behalf of / Janiene McCartney*

Signature Janiene McCartney, Proposals Administrator

Date

*LOANA A. DENIS - VICE PRESIDENT  
12/22/2023*

Contract Amendment – Revised January 2023

Upon final approval by the Division of Procurement Services, a case details page will be made part of this contract.

**STATE OF MAINE | CONTRACT AMENDMENT****AMENDMENT**

The contract is hereby amended as follows: (Check and complete all that apply)

<input checked="" type="checkbox"/>	<b>Amended Period:</b>	Original Start Date: <b>4/2/2018</b> Current End Date: <b>12/31/2023</b> Amendment Start Date: <b>1/1/2024</b> New End Date: <b>6/30/2024</b> Reason: <b>Extend to allow time for new RFP evaluation</b>
<input type="checkbox"/>	<b>Amended Contract Amount:</b>	Amount of Adjustment: \$      New Contract Amount: \$ Reason:
<input type="checkbox"/>	<b>Amended Scope of Work:</b>	The Scope of work in Rider A is amended as follows:
<input type="checkbox"/>	<b>Other:</b>	Describe the Changes:

All other terms and conditions of the original contract and subsequent contract amendments remain in full force and effect.

Price to remain the same

**Fixed Cost per English Word rate for the eight (8) most commonly spoke non-English languages in the State: Somali, Arabic (Modern Standard), French (Canadian is more prevalent), Spanish (Latin American format), Chinese, Khmer, Russian, Vietnamese      \$ 0.19/word**

**Fixed Cost per English Word rate for all other languages      \$ 0.22/word**

**Ordering Process: Request can be received by the following methods:**

Email: [translations@latn.com](mailto:translations@latn.com)

Fax: 1-888-511-6233

Online: <https://latn.com/online-request/>

Available via telephone at 1-800-943-5286 24/7/365