APPENDIX B

**PLOS-NERL/CRL**

**PARTICIPATING INSTITUTION ACKNOWLEDGEMENT FORM**

**Name of NERL/CRL member institution:**

**Institution’s address:**  **Name of authorized representative:**

**Title:**

**Email address:**

1. I hereby confirm that I have read the PLOS Master Publishing Terms of Service and Order Form signed between Public Library of Science (“PLOS”), Center for Research Libraries (“CRL”) and NorthEast Research Libraries (“NERL”) effective as of October 1, 2021 “Agreement”), incorporated by reference herein, and agree to bind my institution to all the terms of the Agreement as applicable to “Customer” or “Participating Institution”.

2. The “Effective Date” of the Agreement, as between PLOS and my institution (hereinafter, “Participating Institution”), will be:

\_\_ May 1, 2022

\_\_ June 1, 2022

\_\_ July 1, 2022

**NOTE: PLOS will not accept a retroactive Effective Date. The Effective Date selected must be prospective from the date this Acknowledgement Form is signed.**

3. \_\_\_ **(check only if applicable).** Participating Institution elects to apply an Article Transaction Fee (ATF) to the Annual Flat Fee services. The ATF will be:

$400❑ $800❑

5. \_\_\_ **(check only if applicable).** Participating Institution will make an annual Equity Contribution of $1,500 or more, as follows:

Equity Contribution

PLOS Climate $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PLOS Water $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PLOS Global Public Health $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6. I understand that NERL cannot fulfill its financial obligations to PLOS until the annual fees for PLOS Services are received by NERL. Participating Institution agrees to abide by the payment terms stated in all NERL invoices for the PLOS Services.

7. I represent and warrant that I have the legal authority to bind Participating Institution to this Acknowledgement Form.

**Accepted and agreed to by:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(Signature of authorized representative)*

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(Month/date/year)*

**\*\*THIS ACKNOWLEDGEMENT FORM WILL BE CONSIDERED VALID ONLY**

**IF SENT TO PLOS VIA EMAIL A****T institutionalaccounts@plos.org,** **cc****: nerl@crl.edu\*****\***

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