

Contract for Service Form

Rock Island-Milan School District 41

VENDOR NAME: Graves Enviromental EMAIL: jaci1965@msn.com

ADDRESS: P.O.Box 1415, Moline, IL 61265

DATES OF SERVICE TO BE COMPLETED: July 1, 2025-June 30, 2026

SCHOOL DISTRICT CONTACT: Joshua Becker / Frank Mendoza

COMPENSATION: \$ Not to exceed \$30,000 / \$40,000

DESCRIPTION OF DUTIES:

To provide state required 6 month surveillances for all buildings, any necessary air samplings, any required training for staff and any PM ASP services needed for the 25-26 school year.

Amended 6/1 to increase amount.

Is this a Subscription/Software: Yes or No

If NO, go to next section. If YES, complete below, then go to next section (no vendor signature)

Subscription/Software Name: _____ Website: _____

Subscription/Software Start Date: _____ End Date: _____

SOPPA Approved: Yes or No

Requesting School: District

Budget Code: O & M Budget

Signature of Vendor: [Signature] Date: 5/24/25

Signature of Budget Administrator: [Signature] Date: 5/20/25

[Signature] Date: + 6/2/25

[Signature] Date: 5/27/25

Superintendent or School Board President

Date