Contract for Service Form

Rock Island-Milan School District 41

VENDOR NAME: Augustana College EMAIL	_mikezapolski@augustana.edu		
ADDRESS: 639 38th St Rock Island, IL 61201			
DATES OF SERVICE TO BE COMPLETED: July 2025 to May 2026 SCHOOL DISTRICT CONTACT: Mike Emendorfer COMPENSATION: \$ not to exceed 25,000.00			
		DESCRIPTION OF DUTIES:	
		Rental of Augustana Swim Pool for girls, boys, and jr high swim teams.	
Is this a Subscription/Software: Yes □ or No 🖹			
<u>If NO, go to next section.</u> If YES, complete below, then go to next section (no vendor signature)			
Subscription/Software Name:Websi	te:		
Subscription/Software Start Date:End D	ate:		
SOPPA Approved: Yes 🗆 cr No 🗆			
Requesting School: RIHS, EJHS, WJHS			
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Budget Code: 1-5-100-000-1501-3250	- 1.1		
Signature of Vendor:	1 Bate: 6/16/2025		
Signature of Budget Administrator Date: 7-1-25			
Superintendent or School Board President	Date		