

Contract for Service Form

Rock Island-Milan School District 41

VENDOR NAME: Dr. Matthew Beck EMAIL: beckmatthew@gmail.com

ADDRESS: 6215 Utica Ridge Road #102, Davenport, IA 52807

DATES OF SERVICE TO BE COMPLETED: 8/01/2025 - 5/22/2026

SCHOOL DISTRICT CONTACT: Alicia Sanders, Director of Student Services

COMPENSATION: \$ \$12,500 (\$9,500 District Funds) (\$3,000 IDEA Funds)

DESCRIPTION OF DUTIES:

See attached Contract Specification for K-12 School Counseling 2025-2026

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 ☐

Requester Name/Building: Districtwide

Budget Code: (\$9,500) 1-5-080-000-2122-3141-0 (\$3,000) 1-5-080-046-2210-3140-0

Signature of Vendor: [Signature] Date: 7.15.2025

Signature of Budget Administrator: [Signature] Date: 7.14.2025

Superintendent or School Board President

Date