Contract for Service Form

Rock Island-Milan School District 41

VENDOR NAME: Amplify	_ _{EMAIL:} kmcdonald@amplify.com
ADDRESS: 55 Washington St, Ste 800	, Brooklyn, NY 11201
DATES OF SERVICE TO BE COMPLETED: 2025-2026	
school district contact: Stacey Golz	
COMPENSATION: \$ 195,171.49	
DESCRIPTION OF DUTIES:	
mCLASS intervention digital licenses - \$34,650.00 Boost Reading Site licenses - \$42,750.0 Amplify Science licenses - \$34,175.00 K-2 CKLA materials - 52,390.27 6-8 Amplify Science materials - 31,205.62	
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: CKLA/Boost Website: WWW.amplify.com	
Subscription/Software Start Date: 07/01/2025 End Date: 06/30/2026	
SOPPA Approved: Yes ≡ or No □	
Requesting School: RIMSD #41 6-8 (9 elementary, 2 jr. high, TMLC) Budget Code: Title 1 Funding Signature of Vendor: NA Date: Signature of Budget Administrator: Roller Date: 5/20/25	
Superintendent or School Board President	Date