

(ATTACHMENT 6) ACTION ON THE AWARD OF EXCEPTION-TO-BID CONTRACTS

Contract Requisition Number: CR059848

Contract Number: C031361

Vendor Number: V0000000432

**MILWAUKEE BOARD OF SCHOOL DIRECTORS
PROFESSIONAL SERVICES CONTRACT
SECOND EXTENSION & MODIFICATION**

On March 24, 2023, the Milwaukee Board of School Directors and Cream City Futsal, LLC entered into Professional Services Contract number C031361 (“Contract”), with a term of March 27, 2023 through March 26, 2024. The Contract, Section 2, provided for two additional one-year extensions upon mutual written consent of the parties. The first extension was exercised, and now the parties have agreed to extend the Contract for the second and final one-year term.

As such, the Contract will be extended for the final one-year term, from March 27, 2025 through March 26, 2026 (“Year 3”), under the same terms and conditions as set forth in the original Contract, except for those specifically modified below.

In accordance with (Section 19) (Section 20) of the Contract, the parties modify those terms and conditions identified below.

MODIFIED TERMS:

1. Section 2, TERM, of the Contract is modified as follows: “This Contract shall be in effect from March 27, 2025 through March 26, 2026 (“Year 3”).
2. Section 3, COMPENSATION, of the Contract is modified as follows: “Total compensation under this Contract for year three (March 27, 2025 – March 26, 2026) shall not exceed \$64,836.00.”

CONTRACTOR

MILWAUKEE BOARD OF SCHOOL DIRECTORS

By: _____

By: _____

*Janine Adamczyk, Director
Procurement & Risk Management*

Date: _____

Date: _____

Cream City Futsal, LLC
401 W. Michigan Street Apt 620
Milwaukee, WI 53203
(414) 209-2588

By: _____

*Eduardo Galvan
Interim Superintendent of Schools*

Tax ID: XXXXXXXXXX

Date: _____

Budget code(s):
RYS-0-0-PRC-RC-ECTS (\$31,636.00)
RMS-0-0-PRC-RC-ECTS (\$10,950.00)
RTW-0-0-MCC-RC-ECTS (\$16,250.00)
RAS-0-0-MCC-RC-ECTS (\$6,000.00)

By: _____

*Marva Herndon, President
Milwaukee Board of School Directors*

Date: _____

Reviewed by Insurance Compliance:

By: _____

Date: _____