

(ATTACHMENT 4) ACTION ON THE AWARD OF PROFESSIONAL SERVICES CONTRACTS

Purchase Requisition Number: CR045207

Contract Number: C028587

Vendor Number: V018476

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

On September 1, 2018, the Milwaukee Board of School Directors and Wheaton Franciscan Healthcare – Southeast Wisconsin, Inc. and Columbia St. Mary’s, Inc. entered into Professional Services Contract number C028587 (“Contract”), with a term of September 1, 2019 through August 31, 2020. The Contract, (¶ 2), provided for two additional one-year extensions upon mutual written consent of the parties and in consideration of the performance metrics listed therein. The Contract was previously extended for the first one-year term (the “First Extension) from September 1, 2020 through August 31, 2021. Based on the Contractor’s achievement of those performance metrics, the parties now mutually agree to extend the Contract for the second and final one-year term.

As such, the Contract will be extended for the second additional one-year term, from September 1, 2021 through August 31, 2022 (“Year 3”), under the same terms and conditions as set forth in the original Contract, except for those specifically modified below.

In accordance with (¶ 21) of the Contract, the parties modify those terms and conditions identified below.

MODIFIED TERMS:

- 1. ¶ 3 is modified as follows: “Total compensation under this Contract for the period from September 1, 2021 through August 31, 2022 (“Year 3”) shall not exceed \$69,550.00” is added.

CONTRACTOR

MILWAUKEE BOARD OF SCHOOL DIRECTORS

By: _____

By: _____

*Martha Kreitzman
Chief Financial Officer*

Date: _____

Date: _____

Ascension Wisconsin
400 West River Woods
Glendale, WI 53212
(414) 465-3000

By: _____

*Keith P. Posley, Ed.D.
Superintendent of Schools*

Tax ID: XXXXXXXXXX

Date: _____

Budget code(s):
ATH001ATDW-ECTS

By: _____

*Robert E. Peterson, President
Milwaukee Board of School Directors*

Date: _____

Reviewed By: _____

Date: _____

Risk Management