

(ATTACHMENT 21) ACTION ON THE AWARD OF PROFESSIONAL SERVICES CONTRACTS

Purchase Requisition Number: CR061564
Contract Number: B0001546
Vendor Number: V021983

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

On July 1, 2023, the Milwaukee Board of School Directors and Lakeside Ventures, Inc. d/b/a International Languages entered into Professional Services Contract number B0001546 (“Contract”), with a term of July 1, 2023 through June 30, 2024. On September 18, 2023, Section 3 of the Contract, Compensation, was modified to provide additional detail around billing increments. The Contract, provided for two additional one-year extensions upon mutual written consent of the parties and in consideration of the performance metrics listed therein.

As such, the Contract will be extended for the second one-year term, from July 1, 2024 through June 30, 2025 (Year 2), under the same terms and conditions as set forth in the original Contract, except for those specifically modified below.

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

MODIFIED TERMS:

1. Section 2, TERM, is modified, striking the language “July 1, 2023 through June 30, 2024” and replacing with “July 1, 2024 through June 30, 2025”.
2. Section 3, COMPENSATION, is modified, striking the language “Total compensation shall not exceed \$200,000.00 for the initial term” and replacing with “Total compensation shall not exceed \$200,000.00 for the second one-year term (Year 2).”

CONTRACTOR

MILWAUKEE BOARD OF SCHOOL DIRECTORS

By: _____

By: _____

*Janine Adamczyk, Director
Procurement & Risk Management*

Date: _____

Date: _____

Lakeside Ventures, Inc. d/b/a International Languages
131 W Layton Ave, Suite #204
Milwaukee, WI 53201
(414) 226-1980

By: _____

*Eduardo Galvan
Acting Superintendent*

Tax ID: XXXXXXXXXX

Date: _____

Budget code(s): 000-0-0-000-BL-ECTS

By: _____

*Marva Herndon, President
Milwaukee Board of School Directors*

Date: _____

Reviewed By: _____

Date: _____

Insurance Compliance