| Board Office Use: Le | gislative File Info. |
|----------------------|----------------------|
| File ID Number       | 13-1040              |
| Introduction Date    | 6/12/3               |
| Enactment Number     | 13-0963              |
| Enactment Date       | 6/12/13              |
|                      | 0,A                  |



Community Schools, Thriving Students

| Memo   |   |  |  |  |  |  |
|--|---|--|--|--|--|--|
| То   | The Board of Education  |  |  |  |  |  |
| From   | Tony Smith, Ph.D., Superintendent<br>By: Maria Santos, Deputy Superintendent, Instruction, Leadership &<br>Equity-in-Action<br>Vernon Hal, Deputy Superintendent, Business & Operations   |  |  |  |  |  |
| <b>Board Meeting Date</b><br>(To be completed by<br>Procurement)                                       |   |  |  |  |  |  |
| Subject  | Professional Services Contract -         Eric Clayton       Oakland       CA (contractor, City State)         Oakland Technical H. S.Safe and Supportive school       (site/department)   |  |  |  |  |  |
| Action Requested   | Ratification of a professional services contract between Oakland Unified School<br>District and <u>Eric Clayton</u> . Services to<br>be primarily provided to <u>Oakland Technical H. S.Safe and Supportives</u> for the period of<br>04/01/2013 through <u>06/30/2013</u> .  |  |  |  |  |  |
| <b>Background</b><br>A one paragraph<br>explanation of why<br>the consultant's<br>services are needed. | Oakland Technical High School's California Healthy Kids Data indicates the need for substance use/abuse prevention and intervention services for students; the Safe and Supportive Schools grant supports services that respond to the needs indicated by the surveys of the site's students, staff and parents.  |  |  |  |  |  |
| <b>Discussion</b><br>One paragraph<br>summary of the<br>scope of work.                                 | A contract of services between OUSD and Eric Clayton Oakland, California, for the latter to provide 390 hours of Brief Intervention for Substance Abuse techniques with students' facilitation of individual and group counseling sessions, development and maintenance of a student tracking system, support the implementation of a substance abuse program at Oakland Technical High School, and participation in biweekly Coordination of Services Team meetings for the period of April 1, 2013 through June 30, 2013 in an amount Not to exceed \$11,700.00 |  |  |  |  |  |
| Recommendation   | Ratification of professional services contract between Oakland Unified School<br>District and <u>Eric Clayton</u> . Services to<br>be primarily provided to <u>Oakland Technical H. S.Safe and Supportive</u> for the period of<br>04/01/2013 through <u>06/30/2013</u> .   |  |  |  |  |  |
| Fiscal Impact  | Funding resource name (please spell out)       Safe and Supportive Schools        not to exceed \$ 11,700.00  |  |  |  |  |  |
| Attachments  | <ul> <li>Professional Services Contract including scope of work</li> <li>Fingerprint/Background Check Certification</li> <li>Commercial General Liability Insurance Certification</li> <li>TB screening documentation</li> <li>Statement of qualifications</li> </ul>   |  |  |  |  |  |

| Board Office Use: Legis | slative File Info. |
|-------------------------|--------------------|
| File ID Number          | 13-1040            |
| Introduction Date       | 6/12/13            |
| Enactment Number        | 13-0963            |
| Enactment Date          | 6/12/13            |



# **PROFESSIONAL SERVICES CONTRACT 2012-2013**

This Agreement is entered into between the Oakland Unified School District (OUSD) and <u>Eric Clayton</u> (CONTRACTOR). OUSD is authorized by Government Code Section 53060 to contract for the furnishing of special services and advice in financial, economic, accounting, engineering, legal, and administrative matters with persons specially trained, experienced, and competent to perform such services. CONTRACTOR warrants it is specially trained, experienced, and competent to provide such services. The parties agree as follows:

- 1. Services: The CONTRACTOR shall provide the ("Services" or "Work") as described in Exhibit "A," attached hereto and incorporated herein by reference.
- Terms: CONTRACTOR shall commence work on <u>04/01/2013</u>, or the day immediately following approval by the Superintendent if the aggregate amount CONTRACTOR has contracted with the District is below \$81,000 in the current fiscal year; or, approval by the Board of Education if the total contract(s) exceed \$81,000, whichever is later. The work shall be completed no later than 06/30/2013
- 3. Compensation: OUSD agrees to pay CONTRACTOR for services satisfactorily rendered pursuant to this Agreement, a total fee not to exceed <u>Eleven Thousand Seven hundred</u> Dollars (\$<u>11,700,00</u>). This sum shall be for full performance of this Agreement and includes all fees, costs, and expenses incurred by Contractor including, but not limited to, labor, materials, taxes, profit, overhead, travel, insurance, subcontractor costs, and other costs.

If CONTRACTOR will be compensated hourly for services provided under this Contract, CONTRACTOR shall describe in Exhibit "A," attached hereto, the specific scope of services to be delivered on an hourly basis to OUSD.

OUSD shall not be liable to CONTRACTOR for any costs or expenses paid or incurred by CONTRACTOR in performing services for OUSD, except as follows: none

Payment for Work shall be made for all undisputed amounts in monthly installment payments within forty-five (45) days after the CONTRACTOR submits an invoice to OUSD for Work actually completed and after OUSD's written approval of the Work, or the portion of the Work for which payment is to be made.

The granting of any payment by OUSD, or the receipt thereof by CONTRACTOR, shall in rio way lessen the liability of CONTRACTOR to correct unsatisfactory work, although the unsatisfactory character of that work may not have been apparent or detected at the time a payment was made. Work, which does not conform to the requirements of this Agreement, may be rejected by the District and in that case must be replaced by CONTRACTOR without delay.

- 4. Submittal of Documents: CONTRACTOR shall not commence the Work under this Contract until CONTRACTOR has submitted and OUSD has approved evidence of the following:
  - 1. Individual consultants:

Tuberculosis Clearance – Documentation from health care provider showing negative TB status within the last four years.

Completion of Pre-Consultant Screening Process – Attach letter from Human Resources Support Services showing completion of Pre-Consultant Screening for this current fiscal year.

Insurance Certificates and Endorsements – General Liability insurance in compliance with section 9 herein.

2. Agencies or organizations:

Insurance Certificates and Endorsements -- Workers' Compensation insurance in compliance with section 9 herein.

- 5. Equipment and Materials: CONTRACTOR shall provide all equipment, materials, and supplies necessary for the performance of this Agreement *except*: \_\_\_\_\_\_\_\_which shall not exceed a total cost of \$ 0.00 \_\_\_\_\_.
- 6. **CONTRACTOR Qualifications / Performance of Services.**

**CONTRACTOR Qualifications.** CONTRACTOR warrants it is specially trained, experienced, competent and fully licensed to provide the Services required by this Agreement in conformity with the laws and regulations of the State of California, the United States of America, and all local laws, ordinances and,/or regulations, as they may apply.

Standard of Care. CONTRACTOR warrants that CONTRACTOR has the qualifications and ability to perform the Services in a professional manner, without the advice, control, or supervision of OUSD. CONTRACTOR's services will be performed, findings obtained, reports and recommendations prepared in accordance with generally and currently accepted principles and practices of its profession for services to California school districts.

7. Notices: All notices and invoices provided for under this Agreement shall be in writing and either personally delivered during normal business hours or sent by U.S. Mail (certified, return receipt requested) with postage prepaid to the other party at the address set forth below:

### Professional Services Contract

| OUSD Representative:   | CONTRACTOR.  |    |       |  |  |  |  |
|--|--|----|-------|--|--|--|--|
| Name: Sandra Simmons   | Name: Eric Clayton   |    |       |  |  |  |  |
| Site /Dept.: Oakland Technical H. S.Safe and Supportive school | Title: Basic Interviewing Specialist   |    |       |  |  |  |  |
| Address: FSCP, 495 Grand Avenue                                | Address: 7031 Colton Blvd.   |    |       |  |  |  |  |
| Oakland, CA 94610  | Oakland  | CA | 94611 |  |  |  |  |
| Phone: (510) 450-5400  | Phone: (510) 338-0944  |    |       |  |  |  |  |
|  | the state of the s |    |       |  |  |  |  |

CONTRACTOR.

Notice shall be effective when received if personally served or, if mailed, three days after mailing. Either party must give written notice of a change of address. CONTRACTOR shall submit invoices in a form that includes the name of the person providing the service, the service performed, the date service was rendered, and the hours spent on the work.

#### 8. Invoicing

Invoices furnished by CONTRACTOR under this Agreement must be in a form acceptable to OUSD. All amounts paid by OUSD shall be subject to audit by OUSD.

- Invoices shall include, but not be limited to: Consultant name, consultant address, invoice date, invoice sequence number, purchase order number, name of school or department service was provided to, period of service, number of hours of service, brief description of services provided, hourly rate, total payment requested.
- 2. Invoices from Agencies or Organizations must include evidence of compliance with section 19 herein:
  - i. Fingerprinting of Employees and Agents: Agency or organization must provide a current list of all employees, agents and volunteers working at an OUSD site when invoicing, and must include the Department of Justice ATI number for each person, and at statement that subsequent arrest records have been requested for each person listed.
  - ii. Tuberculosis Screening: The list must also include a statement that TB Clearance is on file for each person.
- 9. Status of Contractor: This is not an employment contract. CONTRACTOR, in the performance of this Agreement, shall be and act as an independent contractor. CONTRACTOR understands and agrees that it and all of its employees shall not be considered officers, employees, agents, partner, or joint venture of OUSD, and are not entitled to benefits of any kind or nature normally provided employees of OUSD and/or to which OUSD's employees are normally entitled, including, but not limited to, State Unemployment Compensation or Worker's Compensation. CONTRACTOR shall assume full responsibility for payment of all Federal, State, and local taxes or contributions, including unemployment insurance, social security and income taxes with respect to CONTRACTOR's employees. In the performance of the work herein contemplated, CONTRACTOR is an independent contractor or business entity, with the sole authority for controlling and directing the performance of the details of the work, OUSD being interested only in the results obtained.

#### 10. Insurance:

- 1. Commercial General Liability Insurance: Unless specifically waived by OUSD, the following insurance is required:
  - i. If CONTRACTOR employs any person to perform work in connection with this Agreement, CONTRACTOR shall procure and maintain at all times during the performance of such work, Workers' Compensation Insurance in conformance with the laws of the State of California and Federal laws when applicable. Employers' Liability Insurance shall not be less than One Million Dollars (\$1,000,000) per accident or disease.

Check one of the boxes below:

- CONTRACTOR is aware of the provisions of Section 3700 of the Labor Code which require every employer to be insured against liability for workers' compensation or to undertake self-insurance in accordance with the provisions of that code, and will comply with such provisions before commencing the performance of the Work of this Contract.
- CONTRACTOR does not employ anyone in the manner subject to the workers' compensation laws of California.
- ii. CONTRACTOR shall maintain Commercial General Liability insurance, including automobile coverage with limits of One Million Dollars (\$1,000,000) per occurrence for bodily injury and property damage. The coverage shall be primary as to OUSD and shall name OUSD as an additional insured. Evidence of insurance must be attached. Endorsement of OUSD as an additional insured shall not affect OUSD's rights to any claim, demand, suit or judgment made, brought or recovered against CONTRACTOR. The policy shall protect CONTRACTOR and OUSD in the same manner as though each were separately issued. Nothing in said policy shall operate to increase the Insurer's liability as set forth in the policy beyond the amount or amounts shown or to which the Insurer would have been liable if only one interest were named as an insured.
- iii. If CONTRACTOR is offering OUSD professional advice under this Contract, CONTRACTOR shall maintain Errors and Omissions insurance or Professional Liability insurance with coverage limits of One Million Dollars (\$1,000,000) per claim.

OR

- iv. CONTRACTOR is not required to maintain any insurance under this agreement. (Completed and approved Waiver of Insurance Form is required.) Waiver of insurance does not release CONTRACTOR from responsibility for any claim or demand.
- 11. Licenses and Permits: CONTRACTOR shall obtain and keep in force all licenses, permits, and certificates necessary for the performance of this Agreement.

#### Professional Services Contract

- 12. Assignment: The obligations of CONTRACTOR under this Agreement shall not be assigned by CONTRACTOR without the express prior written consent of OUSD.
- 13. Anti-Discrimination. It is the policy of OUSD that in connection with all work performed under Contracts there be no discrimination against any employee engaged in the work because of race, color, ancestry, national origin, religious creed, physical disability, medical condition, marital status, sexual orientation, gender, or age and therefore the CONTRACTOR agrees to comply with applicable Federal and California laws including, but not limited to, the California Fair Employment and Housing Act beginning with Government Code Section 12900 and Labor Code Section 1735 and OUSD policy. In addition, the CONTRACTOR agrees to require like compliance by all its subcontractor(s). Contractor shall not engage in unlawful discrimination in employment on the basis of actual or perceived; race, color, national origin, ancestry, religion, age, marital status, pregnancy, physical or mental disability, medical condition, veteran status, gender, sex or sexual orientation.
- 14. Drug-Free / Smoke Free Policy. No drugs, alcohol, and/or smoking are allowed at any time in any buildings and/or grounds on OUSD property. No students, staff, visitors, CONTRACTORS, or subcontractors are to use drugs on these sites.
- 15. Indemnification: CONTRACTOR agrees to hold harmless, indemnify, and defend OUSD and its officers, agents, and employees from any and all claims or losses accruing or resulting from injury, damage, or death of any person, firm, or corporation in connection with the performance of this Agreement. CONTRACTOR also agrees to hold harmless, indemnify, and defend OUSD and its elective board, officers, agents, and employees from any and all claims or losses incurred by any supplier, contractor, or subcontractor furnishing work, services, or materials to CONTRACTOR in connection with the performance of this Agreement. This provision survives termination of this Agreement.
- 16. Copyright/Trademark/Patent/Ownership. CONTRACTOR understands and agrees that all matters produced under this Agreement shall become the property of OUSD and cannot be used without OUSD's express written permission. OUSD shall have all right, title and interest in said matters, including the right to secure and maintain the copyright, trademark, and/or patent of said matter in the name of OUSD. CONTRACTOR consents to use of CONTRACTOR's name in conjunction with the sale, use, performance and distribution of the matters, for any purpose and in any medium. These matters include, without limitation, drawings, plans, specifications, studies, reports, memoranda, computation sheets, the contents of computer diskettes, artwork, copy, posters, billboards, photographs, videotapes, audiotapes, systems designs, software, reports, diagrams, surveys, source codes or any other original works of authorship, or other documents prepared by CONTRACTOR or its Sub-CONTRACTORs in connection with the Services performed under this Agreement. All works shall be works for hire as defined under Title 17 of the United States Code, and all copyrights in those works are the property of OUSD.
- 17. Waiver: No delay or omission by either party in exercising any right under this Agreement shall operate as a waiver of that or any other right or prevent a similar subsequent act from constituting a violation of the Agreement.
- 18. Termination: OUSD may at any time terminate this Agreement upon written notice to CONTRACTOR. OUSD shall compensate CONTRACTOR for services satisfactorily provided through the date of termination. In addition, OUSD may terminate this Agreement for cause should CONTRACTOR fail to perform any part of this Agreement. In the event of termination for cause, OUSD may secure the required services from another contractor. If the cost to OUSD exceeds the cost of providing the services pursuant to this Agreement. CONTRACTOR shall pay the additional cost.
- 19. Conduct of Consultant. CONSULTANT will adhere to the following staff requirements and provide OUSD with evidence of staff qualifications, consistent with invoicing requirements outlined in Section 8, which include:
  - 1. Tuberculosis Screening
  - 2. Fingerprinting of Employees and Agents. The fingerprinting and criminal background investigation requirements of Education Code section 45125.1 apply to CONTRACTOR's services under this Agreement and CONTRACTOR certifies its compliance with these provisions as follows: "CONTRACTOR certifies that CONTRACTOR has complied with the fingerprinting and criminal background investigation requirements of Education Code section 45125.1 with respect to all CONTRACTOR's employees, subcontractors, agents, and subcontractors' employees or agents ("Employees") regardless of whether those Employees are paid or unpaid, concurrently employed by OUSD, or acting as independent contractors of CONTRACTOR, who may have contact with OUSD pupils in the course of providing services pursuant to the Agreement, and the California Department of Justice has determined that none of those Employees has been convicted of a felony, as that term is defined in Education Code section 45122.1. Contractor further certifies that it has received and reviewed fingerprint results for each of its Employees and Contractor has requested and reviews subsequent arrest records for all Employees who may come into contract with OUSD pupils in providing services to the District under this Agreement.

Contractor initial

In the event that OUSD, in its sole discretion, at any time during the term of this contract, desires the removal of any CONSULTANT related persons, employee, representative or agent from an OUSD school site and, or property, CONSULTANT shall immediately upon receiving notice from OUSD of such desire, cause the removal of such person or persons.

- 20. No Rights in Third Parties. This Agreement does not create any rights in, or inure to the benefit of, any third party except as expressly provided herein.
- 21. OUSD's Evaluation of CONTRACTOR and CONTRACTOR's Employees and/or Subcontractors. OUSD may evaluate the CONTRACTOR's work in any way that OUSD is entitled to do so pursuant to applicable law. The OUSD's evaluation may include, without limitation:
  - 1. Requesting that OUSD employee(s) evaluate the CONTRACTOR and the CONTRACTOR's employees and subcontractors and each of their performance.
  - 2. Announced and unannounced observance of CONTRACTOR, CONTRACTOR's employee(s), and/or subcontractor(s).

#### **Professional Services Contract**

- 22. Limitation of OUSD Liability. Other than as provided in this Agreement, OUSD's financial obligations under this Agreement shall be limited to the payment of the compensation provided in this Agreement. Notwithstanding any other provision of this Agreement, in no event, shall OUSD be liable, regardless of whether any claim is based on contract or tort, for any special, consequential, indirect or incidental damages, including, but not limited to, lost profits or revenue, arising out of, or in connection with, this Agreement for the services performed in connection with this Agreement.
- 23. Confidentiality. The CONTRACTOR and all CONTRACTOR's agents, personnel, employee(s), and/or subcontractor(s) shall maintain the confidentiality of all information received in the course of performing the Services. CONTRACTOR understands that student records are confidential and agrees to comply with all state and federal laws concerning the maintenance and disclosure of student records. This requirement to maintain confidentiality shall extend beyond the termination of this Agreement. Contractors will be permitted access to student data only where permissible under state and federal law and only after executing OUSD's Confidentiality Agreement Regarding Student Data.
- 24. Conflict of Interest. CONTRACTOR shall abide by and be subject to all applicable OUSD policies, regulations, statutes or other laws regarding conflict of interest. CONTRACTOR shall not hire any officer or employee of OUSD to perform any service by this Agreement.

CONTRACTOR affirms to the best of his/her/its knowledge, there exists no actual or potential conflict of interest between CONTRACTOR's family, business or financial interest and the services provided under this Agreement, and in the event of change in either private interest or services under this Agreement, any question regarding possible conflict of interest which may arise as a result of such change will be brought to OUSD's attention in writing.

Through its execution of this Agreement, CONTRACTOR acknowledges that it is familiar with the provisions of section 1090 et seq. and section 87100 et seq. of the Government Code of the State of California, and certifies that it does not know of any facts which constitute a violation of said provisions. In the event CONTRACTOR receives any information subsequent to execution of this Agreement, which might constitute a violation of said provisions, CONTRACTOR agrees it shall notify OUSD in writing.

- 25. Integration/Entire Agreement of Parties. This Agreement constitutes the entire agreement between the Parties and supersedes all prior discussions, negotiations, and agreements, whether oral or written. This Agreement may be amended or modified only by a written instrument executed by both Parties.
- 26. Litigation: This Agreement shall be performed in Oakland, California and is governed by the laws of the State of California. The Alameda County Superior Court shall have jurisdiction over any state court litigation initiated to enforce or interpret this Agreement. If litigation is initiated, the prevailing party shall be entitled to reasonable attorney's fees and costs.
- 27. Contract Contingent on Governing Board Approval: The District shall not be bound by the terms of this Agreement until it has been formally approved by the District's Governing Board, and no payment shall be owed or made to CONTRACTOR absent formal approval. This Agreement shall be deemed to be approved when it has been signed by the Board of Education, and/or the Superintendent as its designee.
- 28. Signature Authority: Each party has the full power and authority to enter into and perform this Agreement, and the person signing this Agreement on behalf of each Party has been given the proper authority and empowered to enter into this Agreement.
- 29. Counterparts: This Agreement and all amendments and supplements to it may be executed in counterparts, and all counterparts together shall be construed as one document.
- 30. Incorporation of Recitals and Exhibits: The Recitals and each exhibit attached hereto are hereby incorporated herein by reference.
- 31. Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion: The prospective primary participant certifies to the best of its knowledge and belief, that it and its principals: Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency according to Federal Acquisition Regulation Subpart 9.4, and by signing this contract, certifies that this vendor does not appear on the Excluded Parties List. (https://www.epls.gov/epls/search.do)

### Summary of terms and compensation:

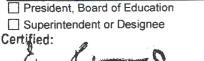
Anticipated start date: 04/01/2013

Work shall be completed by: 06/30/2013

Total Fee: \$11,700.00

OAKLAND UNIFIED SCHOOL DISTRICT

Maria Santas



Secretory Edgar Rakestraw, Jr., Secretary Board of Education

CONTRACTOR Contractor Signature

Eric Clayton Print Name, Title

Basic Interviewing Specialist

File ID Number: 13-10 Introduction Date: 612 Enactment Number: 175 Enactment Date: By: OA Page 4 of 6

## **EXHIBIT "A" Scope of Work**

## DESCRIPTION OF SERVICES TO BE PERFORMED BY CONTRACTOR

CONTRACTOR'S entire Proposal is <u>not</u> made part of this Agreement. [IF A CONTRACTOR PROVIDES AN ACCEPTABLE DESCRIPTION OF SERVICES AS PART OF A PROPOSAL, THAT DESCRIPTION OF SERVICES CAN BE ATTACHED <u>WITHOUT</u> ANY TERMS, CONDITIONS, LIMITATIONS, ETC., FROM THAT PROPOSAL.]

#### Summary for Board Memo and Board Agenda - Must accurately align with scope of work below.

A contract of services between OUSD and Eric Clayton Oakland, California, for the latter to provide 390 hours of Brief Intervention for Substance Abuse techniques with students' facilitation of individual and group counseling sessions, development and maintenance of a student tracking system, support the implementation of a substance abuse program at Oakland Technical High School, and participation in biweekly Coordination of Services Team meetings for the period of April 1, 2013 through June 30, 2013 in an amount Not to exceed \$11,700,00

# SCOPE OF WORK

Eric Clayton will provide a maximum of <u>390.00</u> hours of services at a rate of <u>\$ 30.00</u> per hour for a

total not to exceed \$11,700.00 . Services are anticipated to begin on 04/01/2013 and end on 06/30/2013 .

1. Description of Services to be Provided: Provide a description of the service(s) the contractor will provide. Be specific about what service(s) OUSD is purchasing and what this Contractor will do.

Contractor will provide 390 hours (30 hours per week) of Basic Interviewing Interventions (derived from Motivational Interviewing evidenced-based practice) for Oakland Technical High School students who are identified as using substances on school site or during school hours to reduce students' risk of continued and/or escalating substance use/abuse and as alternative suspension.

2. Specific Outcomes: What are the expected outcomes from the services of this Contract? Be specific. For example, as a result of the service(s): 1) How many more Oakland children are graduating from high school? 2) How many more Oakland children are attending school 95% or more? 3) How many more students have meaningful internships and/or paying jobs? 4) How many more Oakland children have access to, and use, the health services they need? Provide details of program participation (Students will...) and measurable outcomes (Participants will be able to...). NOT THE GOALS OF THE SITE OR DEPARTMENT.

The expected outcomes specified from this contract, identified as an objective in the Safe and Supportive Schools grant, is for the Basic Interviewing Specialist to serve 100 students per year with the Basic Interviews to motivate students to consider the of substance use/ abuse, psychoeducation and support groups to support reduction and cessation of substance use and abuse. the outcome expected of the reduction and/or cessation of substance use is that the perception of Oakland Technical as a safe community will increase as evidenced by the CHKS survey.

| 3. | Alignment with District Strategic Plan: | Indicate the goals and visions supported by the services of this contract: |
|----|---|--|
|    | (Check all that apply.)                 |  |

| Prepare students for success in college and careers |
|---|
| Safe, healthy and supportive schools                |
| Accountable for quality                             |
| Full service community district                     |
|   |

# 4. Alignment with Single Plan for Student Achievement (required if using State or Federal Funds) Please select:

Action Item included in Board Approved SPSA (no additional documentation required) – Action Item Number:\_\_\_\_

Action Item added as modification to Board Approved SPSA – Submit the following documents to the Resource Manager either electronically via email of scanned documents, fax or drop off.

- 1. Relevant page of SPSA with action item highlighted. Page must include header with the word "Modified", modification date, school site name, both principal and school site council chair initials and date.
- 2. Meeting announcement for meeting in which the SPSA modification was approved.
- 3. Minutes for meeting in which the SPSA modification was approved indicating approval of the modification.
- 4. Sign-in sheet for meeting in which the SPSA modification was approved.

| THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND COM<br>CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND O<br>BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONT<br>REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.<br>IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(les) i<br>the terms and conditions of the policy, certain policies may require an endorsement<br>certificate holder in like of such andorsement(s).<br>REPORTANT: Wether & Williams Insurance<br>License No.: OC01370<br>Son Mortgomerry St., Suite 550<br>San Francisco CA 94111<br>INSURED<br>Bric Clayton<br>351 Broadway<br>Dakland CA 94611<br>INSURER D<br>INSURER D<br>INSURER D<br>EXCLUSIONS AND CONDITIONS OF SUCH FINITE END OR CONDITION of ANY EQUIRENT.<br>THIS IS TO CERTIFY THAT THE POLICES OF INSURANCE LISTO BELOW HAVE BEEN IS<br>INSURED<br>EXCLUSIONS AND CONDITIONS OF SUCH POLICES UNITS SHOWN MAY HAVE BEEN RED<br>INSURER D<br>INSURER I INSURER I INSURER CLISTED BELOW HAVE BEEN RED<br>EXCLUSIONS AND CONDITIONS OF SUCH POLICES UNITS SHOWN MAY HAVE BEEN RED<br>INSURER I INSURER I INSURANCE AFFORDED BY THE<br>EXCLUSIONS AND CONDITIONS OF SUCH POLICES UNITS SHOWN MAY HAVE BEEN RED<br>INSURER I INSURER I INSURER I INSURANCE AFFORDED BY THE<br>EXCLUSIONS AND CONDITIONS OF SUCH POLICES UNITS SHOWN MAY HAVE BEEN RED<br>INSURER I INSURER I INSURANCE AFFORDED BY THE<br>EXCLUSIONS AND CONDITIONS OF SUCH POLICES UNITS SHOWN MAY HAVE BEEN RED<br>INSURER I UNITS I OCCUR<br>ANY AUTO<br>AUTOS MATTER INSURANCE AFFORDED BY THE<br>EXCLUSIONS AND CONDITIONS OF SUCH POLICES UNITS SHOWN MAY HAVE BEEN RED<br>INSURER I UNITS I OCCUR<br>I AUTONOBLE LIABULTY<br>A CLAMMSMADE I INSURANCE AFFORDED BY THE<br>EXCLUSIONS AND CONDITIONS OF SUCH POLICES UNITS SHOWN MAY HAVE BEEN RED<br>INSURER I INSURANCE AFFORDED BY THE<br>EXCLUSIONS COMPENSATIONS AND CONDITIONS OF SUCH POLICES INTER SHOWN MAY HAVE BEEN RED<br>INSURER I INSURANCE AFFORDED BY THE<br>EXCLUSIONS AND CONDITIONS OF SUCH POLICES INTER SHOWN MAY HAVE BEEN RED<br>INSURER I INSURER I INSURANCE AFFORDED BY THE<br>EXCLUSIONS AND CONDITIONS OF SUCH POLICES INTER INSURANCE AFFORDED BY THE  | Y IN                           | SURA                                    | NCE   | 4/24     | 1M/DD/YYYY)<br>/2013     |
|--|--------------------------------|---|---|----------|--------------------------|
| IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(IES) the terms and conditions of the policy, certain policies may require an endorsement certificate holder in lisu of such endorsement(s).       CONTACT AN INSURED certain policies may require an endorsement certificate holder in lisu of such endorsement(s).         COUVER       Erriwether £ Williams Insurance       INSURE FASS         Carsis whether £ Williams Insurance       INSURE FASS         1cense No.: 0C01378       INSURE FASS         50 Montgomery St., Suite 550       INSURE FASS         an Francisco       CA 94111         Insure FASS       INSURE FASS         SIRED       INSURE FASS         sure FASS       CERTFICATE NUMBER: CLI341203960         THIS IS TO CERTFY THAT THE POLICIES INTE NUMBER: CLI341203980       INSURE FASS         COLLED: NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION FAVY CERTFICATE MAY BE ISSUED OR MAY PERTAIN. THE INSURANCE AFFORDED BY THE EXCLUSIONS AND CONDITIONS OF SUCH POLICIES LIMITS SHOWN MAY HAVE BEEN RED         Reference INSURANCE ALIGENERAL LIABILITY       AC CAMBERCIAL LIABILITY         AC CAMBERCIAL GENERAL LIABILITY       CEPS1744528         AUTOR MADE       CLAMS-AMORE         AUTOR       AUTOR         AUTOR MADE       CLAMS-AMORE         AUTOR MADE       CLAMS-AMORE         AUTOR MADE       CLAMS-AMORE         AUTOR MADE       CLAMS   | NFERS NO<br>OR ALTE<br>TRACT B | R THE COV                               | PON THE CERTIFICATI<br>ERAGE AFFORDED B'<br>IE ISSUING INSURER( | S), AU   | THORIZED                 |
| GOUCER     MARE: A       erriwsther & Williams Insurance     ADDES       icense No.: CC01376     ADDES       50 Montgomery St., Suite 550     ADDES       an Francisco     CA 94111       INSURERD     INSURERD:       stic Clayton     INSURERD:       atland     CA 94611       OVERAGES       CERTIFICATE NUMBER: CL1341203980       THIS ITO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISINDLATED. NOTWITHSTANDING ANY REQUIREMENT. TERM OR CONDITION OF ANY CC       OVERAGES       OVERAGES <td>must be<br/>nt. A state</td> <td>endorsed. I<br/>ement on this</td> <td>f SUBROGATION IS WA<br/>s certificate does not co</td> <td>onfer ri</td> <td>ghts to the</td>   | must be<br>nt. A state         | endorsed. I<br>ement on this            | f SUBROGATION IS WA<br>s certificate does not co                | onfer ri | ghts to the              |
| Provesting and the second  | sh Wil                         |   |   |          |                          |
| LCENSE NO.: OCO1378 50 Montgomery St., Suite 550 an Francisco CA 94111 INSURERAS Tic Clayton S51 Broadway INSURERAS AND CA 94611 INSURERES AND CA 94611 INSURERES AND CA 94611 INSURERES CERTIFICATE NUMBER: CL3341203980 THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN IS INDICATED. NOTWITHSTANDING ANY PERTAIN, THE INSURANCE AFFORDED BY THE EXCLUSIONS AND CONDITIONS OF SUCH POLICIES UNITS SHOWN MAY HAVE BEEN RED INSURERAS INSURERAS INSURERAS INSURERAS INSURERAS CERTIFICATE MAY DE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE EXCLUSIONS AND CONDITIONS OF SUCH POLICIES UNITS SHOWN MAY HAVE BEEN RED INSURANCE AFFORDED BY THE EXCLUSIONS AND CONDITIONS OF SUCH POLICIES (ANITS SHOWN MAY HAVE BEEN RED INSURANCE INSURANCE INST SHOWN MAY HAVE BEEN RED INSURERAS COMMERCIAL GENERAL LIABILITY A COMMERCIAL GENERAL LIABILITY A CLAMS-MADE X OCCUR GENERAL LUABILITY A COMMERCIAL GENERAL LIABILITY A CLAMS-MADE X OCCUR CERSITIFY THAT THEP POLICIES (ANIACH ACORD 191, AddBional Remarks Echodule, #1 DEGENERAL LUABILITY ANY ROPRETORMER EXCUINEY A SEXUAL / Physical Abuse CERSITIFICATE HOLDER CERTIFICATE HOLDER CE   | . (415)                        | 986-3999                                | FAX<br>(A/C, No):   | (415) 98 | 6-4421                   |
| Connerganery St., Suite 550 an Francisco CA 94111 INSURERAS SURED InSURERO INSURERO INSURERCE ASSISTED AND   | sh@imw.                        | is.com                                  |   |          |                          |
| ALL Francisco CA 94111 INSURERAS SURED INSURERO INSURACE LASUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN RED INSURERO INSURERO INSURACIA CENERAL LIABILITY INSURERO ICLAMS-MADE INSURERO ICLAMS-MADE INSURERO INSURACIA CENERAL LIABILITY INSURERO INSURACIA CENERAL LIABILITY INSURERO INSURACIAL CENERAL LIABILITY INSURERO ICLAMS-MADE INSURACIA CENERAL LIABILITY INSURERO INTO INSURACIA CENERAL LIABILITY INSURERO INSURACIA CENERAL LIABILITY INSURERO INTO INTO INSURACIA CENERAL LIABILITY INSURERO INTO INTO INSURACIA CENERAL LIABILITY INSURERO INSURACIA CENERAL LIABILITY INSURERO INTO INTO INSURACIA CENERAL LIABILITY INSURERO INTO INTO INTO INTO INTO INTO INTO INT   |                                |   | DING COVERAGE   |          | NAIC #                   |
| ALT FIRITCIPCO DI CALENDAL DI CONTROLO DI CONTROLO DI CONDITIONO DI CALENDALI DI CONDITIONO DI CONDITIONO DI CALENDALI DI CONDITIONO DI CONDITIONI DI CONDIT  | Scotts                         | dale Ins                                | surance Co.   |          |                          |
| AUTOMOBILE LIABILITY     AUTOMOBILE LIABI  |                                |   |   |          |                          |
| 351 Broadway     INSURER D:<br>INSURER D:<br>INSURANCE INSURANCE INSURANCE AFFORDED BY THE<br>EXCLUSIONS AND CONDITIONS OF SUCH POLICIES, LIMITS SHOWN MAY HAVE BEEN RED<br>INSURANCE INSURANCE INSURANCE INSURANCE AFFORDED BY THE<br>EXCLUSIONS AND CONDITIONS OF SUCH POLICIES, LIMITS SHOWN MAY HAVE BEEN RED<br>INSURANCE INSURANCE INSURANCE INSURANCE AFFORDED BY THE<br>EXCLUSIONS AND CONDITIONS OF SUCH POLICIES, LIMITS SHOWN MAY HAVE BEEN RED<br>INSURANCE INSURANCE INSURANCE INSURANCE INSURANCE AFFORDED BY THE<br>EXCLUSIONS AND CONDITIONS OF SUCH POLICIES, LIMITS SHOWN MAY HAVE BEEN RED<br>INSURANCE INSURANCE INSURANCE INSURANCE INSURANCE AFFORDED BY THE<br>EXCLUSIONS AND CONDITIONS OF SUCH POLICIES, LIMITS SHOWN MAY HAVE BEEN RED<br>INSURANCE INSURANCE INSURANCE INSURANCE INSURANCE INSURANCE<br>EXCLUSIONS AND CONDITIONS OF SUCH POLICIES, LIMITS SHOWN MAY HAVE BEEN RED<br>AUTOS INSURANCE   |                                |   |   |          |                          |
| SS1 BOOLdway       INSURERE:         akland       CA 94611         DVERAGES         CERTIFICATE NUMBER:CL1341203980         OVERAGES         CERTIFICATE NUMBER:CL1341203980         THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISED BELOW HAVE BEEN IS:<br>INDICATED. NOTWITHSTANDING ANY PERTAIN, THE INSURANCE AFFORDED BY THE<br>EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. UMITS SHOWN MAY HAVE BEEN RED.<br>INDICATED. NOTWITHSTANDING ANY PERTAIN. THE INSURANCE AFFORDED BY THE<br>EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. UMITS SHOWN MAY HAVE BEEN RED.<br>INDICATED. LABILITY         Image: Colspan="2">AND CONDITIONS OF SUCH POLICIES. UMITS SHOWN MAY HAVE BEEN RED.<br>INDICATED. LABILITY         Image: Colspan="2">INDICATED. INDICATED. INDICATED. INTERVIEW         Image: Colspan="2">INDICATED. INDICATED. INTERVIEW         Image: Colspan="2">INDICATED. INTERVIEW         Image: Colspan="2">INDICATED. INTERVIEW         Image: Colspan="2">INTERVIEW         Image: Colspan="2">Image: Colspan="2">Interview         Image: Colspan= 2"       Image: Colspan="2"  | :                              |   |   |          |                          |
| OVERAGES         CERTIFICATE NUMBER:CL1341203980           THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISINDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CC           CERTIFICATE MAY BE ISSUED OR MAY PEDTAIN, THE INSURANCE AFFORDED BY THE EXCLUSIONS AND CONDITIONS OF SUCH POLICIES, LIMITS SHOWN MAY HAVE BEEN RED.           INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CC           EXCLUSIONS AND CONDITIONS OF SUCH POLICIES, LIMITS SHOWN MAY HAVE BEEN RED.           INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CC           INDICATED. LIMITS SHOWN MAY HAVE BEEN RED.           INDICATED. LIMIT APPLIES PER           GENERAL LIABILITY           AUTONOBILE LIABILITY           ANY AUTO           ANTONS           HIRED AUTOS           AUTONS           AUTONS           AUTONS           AUTOS  |                                |   |   |          |                          |
| OVERAGES         CERTIFICATE NUMBER:CL1341203980           THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISINICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CC           INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CC           CERTIFICATE MAY BE ISSUED OR MAY PEBTAIN, THE INSURANCE AFFORDED BY THE           EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN RED.           INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CC           CERTIFICATE MAY BE ISSUED OR MAY PEBTAIN, THE INSURANCE AFFORDED BY THE           EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN RED.           INDICATIONS ANDE           GENERAL LIMBILITY           A COMMERCIAL GENERAL LIABILITY           A COLINS           GENIL AGGREGATE LIMIT APPLIES PER.           X POLICY           ANY AUTO           ANTOS           MORNOBUL LIABILITY           ANY AUTO           AUTOS           MORNED           AUTOS           MORNER COMPERSTATION & CCCUR           EXCESS LIAB           OLOWARD AUTOS           MORNER SCOMPARTNERPEXECUTIVE Y // N           MAY PROPRETORPARTNERPEXECUTIVE Y // N           MAY PROPRETORPARTNERPEXECUTIVE Y // N           MAY PROPRETORPARTNERPEXECUTIVE Y // N <t< td=""><td></td><td></td><td></td><td></td><td></td></t<>  |                                |   |   |          |                          |
| THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN IS         THIS IS TO CERTIFICATE MAY BE ISSUED OR MAY PERTAIN. THE INSURANCE AFFORDED BY THE         EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN RED.         INDICATED. NOTWITHSTANDING ON Y PERTAIN. THE INSURANCE AFFORDED BY THE         EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN RED.         Image: Constraint of the state state of the state of the state of the st  |                                |   | REVISION NUMBER:  |          |                          |
| TYPE OF INSURANCE     ADDL/SUBR     POLICY NUMBER     ADDL/SUBR       GENERAL LABILITY     INSR WOD     POLICY NUMBER     AMD       COMMERCIAL GENERAL LIABILITY     INSR WOD     POLICY NUMBER     AMD       CLAIMS-MADE     ICLAIMS-MADE     CPS1744528     4/12       GENL AGGREGATE LIMIT APPLIES PER     CPS1744528     4/12       GENL AGGREGATE LIMIT APPLIES PER     IOC     INTOS     INTOS       AUTOMOBILE LIABILITY     ANY AUTO     SCHEDULED     IOC     INTOS       AUTONOBILE LIABILITY     ANY AUTO     SCHEDULED     IOC     INTOS       HIRED AUTOS     AUTOS     IOCCUR     IOCUR     IOCUR       EXCESS LIAB     CLAIMS-MADE     IOCUR     IOCUR     IOCUR       UMBRELLA LIAB     OCCUR     INTOS     IOCUR     IOCUR       WORKERS COMPENSATION     AUTOS     IN / A     IOCUR     IOCUR       IVENCES CLABELIST     INTOS     IN / A     IOCUR     IOCUR       DED     RETENTION 5     OCCUR     IOCUR     IOCUR       IVENCES COMPENSATION     INTOS     IOCUR     IOCUR       AND EMPORETOR/PARTINER/EXECUTIVE     IN / A     IOCUR     IOCUR       IVENCERS LIABELITY     IN / A     IOCUR     IOCUR       IVENCERS LIABELITY     IN / A<   | E POLICIE                      | S DESCRIBED<br>PAID CLAIMS.             | HEREIN IS SUBJECT TO  | CT TO    | WHICH THIS<br>THE TERMS, |
| R       TTPEOP INSURANCE       INSU TO THE INSTRUMENT OF THE INSTRUMENT  | OLICY EFF                      | POLICY EXP<br>(MM/DD/YYYY)              | LIMIT   | S        |                          |
| X     COMMERCIAL GENERAL LIABILITY     CPS1744528     4/11       GENL AGGREGATE LIMIT APPLIES PER     CPS1744528     4/11       GENL AGGREGATE LIMIT APPLIES PER     CPS1744528     4/11       AUTOMOBILE LIABILITY     ANY AUTO     SCHEDULED     4       ALL OWNED     SUTOS     AUTOS     4/000000000000000000000000000000000000  |                                |   | EACH OCCURRENCE   | \$       | 1,000,00                 |
| CLAIMS-MADE     X     OCCUR     CPS1744528     4/1:       GENL AGGREGATE LIMIT APPLIES PER.     LOC     AUTOMOBILE LABILITY     AUTOS     AUTOS       ANY AUTO     ALITOS     NONOWED     AUTOS     AUTOS     AUTOS       HIRED AUTOS     SCHEDULED     AUTOS     AUTOS     AUTOS       UMBRELLA LIAB     OCCUR     CLAIMS-MADE     AUTOS       UMBRELLA LIAB     OCCUR     CLAIMS-MADE     AUTOS       WORKERS COMPENSATION     AUTOS     N/A     ANY POPRIETON/PARTHER/EXECUTIVE Y/N       MORKERS COMPENSATION     MY POPRIETON/PARTHER/EXECUTIVE Y/N     N/A     HIRED AUTOS       WORKERS COMPENSATION     OCCUR     CLAIMS-MADE     ANY POPRIETON/PARTHER/EXECUTIVE Y/N       MAY POPRIETON/PARTHER/EXECUTIVE Y/N     N/A     HIRED AUTOS     HIRED AUTOS       MORKERS COMPENSATION     OPERATIONS below     CPS1744528     4/3       DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schodule, HIRED AUTOS)     HIRED AUTOS       DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schodule, HIRED AUTOS)     HIRED AUTOS)       CERTIFICATE HOLDER     CANCE       Oakland Unified School District     ACORD   |                                |   | DAMAGE TO RENTED<br>PREMISES (Ea occurrence)                    | \$       | 100,0                    |
| GENL AGGREGATE LIMIT APPLIES PER.         X       POLICY       PRO:         AUTOMOBILE LIABILITY       LOC         AUTOS       AUTOS         HIRED AUTOS       SCHEDULED         AUTOS       AUTOS         HIRED AUTOS       AUTOS         WORKERS COMPENSATION       OCCUR         EXCESS LIAB       CLAMS-MADE         DED       RETENTIONS         WORKERS COMPENSATION       N/A         MOEMENTER/EXECUTIVE Y/N       N/A         AND EMPLOYER'S LIABLITY       N/A         WORKERS COMPENSATION       N/A         OFFICEPRIMEMER EXCLUDED?       N/A         (Mandatory in NH)       N/A         JESCRIPTION OF OPERATIONS below       CPS1744528         DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, # DROOT of insurance         CERTIFICATE HOLDER       CANCE         Oakland Unified School District       SHOUL   | 12/2013                        | 4/12/2014                               | MED EXP (Any one person)  | \$       | 1,0                      |
| X       POLICY       PRO:       LOC         AUTOMOBILE LIABILITY       ANY AUTO         AUTOS       AUTOS         AUTOS       AUTOS         HRED AUTOS       AUTOS         HRED AUTOS       AUTOS         UMBRELLA LIAB       OCCUR         EXCESS LIAB       CLAIMS-MADE         DED       RETENTION 3         WORKERS COMPENSATION         ANY PROPRIETOR/PARTMER/EXECUTIVE         MAY       N/A         OFFICER/MEMBER EXECUTIVE         MAY       N/A         Gescribe Under       N/A         JESCRIPTION OF OPERATIONS JEDOW         DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 191, Additional Remarks Schodule, # DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 191, Additional Remarks Schodule, # DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 191, Additional Remarks Schodule, # DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 191, Additional Remarks Schodule, # DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 191, Additional Remarks Schodule, # DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 191, Additional Remarks Schodule, # DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 191, Additional Remarks Schodule, # DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 191, Additional Remarks Schodule, # DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 191, Additional Remarks Schodule, # DESCRIPTION OF OPERATIONS / LOCATIONS / LOCATIONS / LOCATI  |                                |   | PERSONAL & ADV INJURY   | \$       | 1,000,0                  |
| X       POLICY       PRO:       LOC         AUTOMOBILE LIABILITY       ANY AUTO         AUTOS       AUTOS         AUTOS       AUTOS         HRED AUTOS       AUTOS         HRED AUTOS       AUTOS         UMBRELLA LIAB       OCCUR         EXCESS LIAB       CLAIMS-MADE         DED       RETENTION 3         WORKERS COMPENSATION         ANY PROPRIETOR/PARTMER/EXECUTIVE         MAY       N/A         OFFICER/MEMBER EXECUTIVE         MAY       N/A         Gescribe Under       N/A         JESCRIPTION OF OPERATIONS JEDOW         DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 191, Additional Remarks Schodule, # DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 191, Additional Remarks Schodule, # DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 191, Additional Remarks Schodule, # DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 191, Additional Remarks Schodule, # DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 191, Additional Remarks Schodule, # DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 191, Additional Remarks Schodule, # DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 191, Additional Remarks Schodule, # DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 191, Additional Remarks Schodule, # DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 191, Additional Remarks Schodule, # DESCRIPTION OF OPERATIONS / LOCATIONS / LOCATIONS / LOCATI  |                                |   | GENERAL AGGREGATE   | \$       | 2,000,0                  |
| X       POLICY       PRO:       LOC         AUTOMOBILE LIABILITY       ANY AUTO         AUTOS       AUTOS         AUTOS       AUTOS         HRED AUTOS       AUTOS         HRED AUTOS       AUTOS         UMBRELLA LIAB       OCCUR         EXCESS LIAB       CLAIMS-MADE         DED       RETENTION 3         WORKERS COMPENSATION         ANY PROPRIETOR/PARTMER/EXECUTIVE         MAY       N/A         OFFICER/MEMBER EXECUTIVE         MAY       N/A         Gescribe Under       N/A         JESCRIPTION OF OPERATIONS JEDOW         DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 191, Additional Remarks Schodule, # DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 191, Additional Remarks Schodule, # DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 191, Additional Remarks Schodule, # DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 191, Additional Remarks Schodule, # DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 191, Additional Remarks Schodule, # DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 191, Additional Remarks Schodule, # DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 191, Additional Remarks Schodule, # DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 191, Additional Remarks Schodule, # DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 191, Additional Remarks Schodule, # DESCRIPTION OF OPERATIONS / LOCATIONS / LOCATIONS / LOCATI  |                                |   | PRODUCTS - COMP/OP AGG  | \$       | 2,000,0                  |
| AUTOMOBILE LIABILITY       AUTOS         AUTOS       AUTOS         AUTOS       AUTOS         AUTOS       AUTOS         HIRED AUTOS       AUTOS         UMBRELLA LIAB       OCCUR         EXCESS LIAB       CLAIMS-MADE         DED       RETENTION 3         WORKERS COMPENSATION         AND REMPLOYERS LIABILITY         YIN         ANY PROPRIETOR/PARTMER/EXECUTIVE         YIN         ASEXUAL/ Physical Abuse         CPS1744528         ASEXCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schodule, W         Proof of insurance         CANCE         Oakland Unified School District   |                                |   | Errors & Omissions  | \$       | 1,000,0                  |
| ANY AUTO<br>ALL OWNED<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AUTOS<br>AU |                                |   | COMBINED SINGLE LIMIT<br>(Ea accident)                          | s        |                          |
| ALLOWMED       AUTOS       SCHEDULED         AUTOS       NON-OWNED       NON-OWNED         HIRED AUTOS       NON-OWNED         HIRED AUTOS       OCCUR         EXCESS LIAB       CLAIMS-MADE         DED       RETENTION 3         WORKERS COMPENSATION       N/A         AND EMPLOYERS LIABILITY       Y/N         OFFICERMEMBER EXCLUDED?       N/A         OFFICERMEMBER EXCLUDED?       N/A         If yes, describe under       N/A         DESCRIPTION OF OPERATIONS below       CPS1744528         A       Sexual / Physical Abuse       CPS1744528         DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, #         Proof of insurance       Shoul         CERTIFICATE HOLDER       CANCE         Oakland Unified School District       SHOUL  |                                |   | BODILY INJURY (Per person)                                      | \$       |                          |
| HIRED AUTOS       NON-OWNED         AUTOS       AUTOS         UMBRELLA LIAB       OCCUR         EXCESS LIAB       CLAIMS-MADE         DED       RETENTION \$         WORKERS COMPENSATION       AND EMPLOYERS' LIABILITY         AND EMPLOYERS' LIABILITY       Y/N         AND EMPLOYERS' LIABILITY       Y/N         AND EMPLOYERS' LIABILITY       Y/N         AND PROPRIETOR/PARTINER/EXECUTIVE       N/A         OFFICER/MEMBER EXCLUDED?       N/A         (Mandatory in NH)       I'yes, describe under         DESCRIPTION OF OPERATIONS below       CPS1744528         A       Sexual / Physical Abuse       CPS1744528         DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, #         Proof of insurance       SHOUL         CERTIFICATE HOLDER       CANCE         Oakland Unified School District       SHOUL  |                                |   | BODILY INJURY (Per accident)                                    |          |                          |
| UMBRELLA LIAB       OCCUR         EXCESS LIAB       CLAIMS-MADE         DED       RETENTION 3         WORKERS COMPENSATION       AND EMPLOYERS' LIABLITY         AND EMPLOYERS' LIABLITY       Y/N         AND EMPLOYERS' LIABLITY       Y/N         OFFICER/MEMBER EXCLUDED?       N/A         (Mandatory in NH)       N/A         UBSCRIPTION OF OPERATIONS below       CPS1744528         A Sexual/ Physical Abuse       CPS1744528         DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schodule, #         Proof of insurance       SHOUL         CERTIFICATE HOLDER       CANCE         Oakland Unified School District       SHOUL  |                                |   | PROPERTY DAMAGE<br>(Per accident)                               | \$       |                          |
| EXCESS LIAB       CLAIMS-MADE         DED       RETENTION 3         WORKERS COMPENSATION       AND EMPLOYERS' LIABILITY         ANY PROPRIETOR/PARTNER/EXECUTIVE       Y/N         OFFICER/MEMBER EXCLUDED?       N / A         DESCRIPTION OF OPERATIONS below       DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schodule, # and the second of the second  |                                |   |   | \$       |                          |
| EXCESS LIAB       CLAIMS-MADE         DED       RETENTION \$         WORKERS COMPENSATION       AND EMPLOYERS' LIABILITY         ANY PROPRIETOR/PARTNER/REXECUTIVE       Y/N         OFFICE/EMMEMBER EXCLUDED?       N / A         OFFICE/EMMEMBER EXCLUDED?       N / A         DESCRIPTION OF OPERATIONS below       CPS1744528         DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schodule, # and a conditional remarks Schodule, # and conditional remarks Schodule, # and a conditio  |                                |   | EACH OCCURRENCE   | \$       |                          |
| DED       RETENTION 3         WORKERS COMPENSATION<br>AND EMPLOYERS' LIABILITY<br>ANY PROPRIETOR/PARTNER/EXECUTIVE<br>OFFICE/EMMEMBER EXCLUDED?       N/A         OFFICE/EMMEMBER EXCLUDED?       N/A         OFFICE/EMMEMBER EXCLUDED?       N/A         OFFICE/EMMEMBER EXCLUDED?       N/A         DESCRIPTION OF OPERATIONS below       CPS1744528         A       Sexual/ Physical Abuse       CPS1744528         DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schodule, # of the second of t   |                                |   | AGGREGATE   | \$       |                          |
| WORKERS COMPENSATION<br>AND EMPLOYERS LIABILITY<br>ANY PROPRIETOR/PARTINER/EXECUTIVE<br>OFFICER/MEMBER EXCLUDED?<br>(Mandatory in NH)<br>If yes, describe under<br>DESCRIPTION OF OPERATIONS below       N/A       4/1         A Sexual/ Physical Abuse       CPS1744528       4/1         DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schodule, # 1<br>Proof of insurance       1         CERTIFICATE HOLDER       CANCEL         Qakland Unified School District       ShOUL  |                                |   | WC STATU- OTH   | \$       |                          |
| AND EMPLOYERS LIABILITY Y/N<br>ANY PROPRIETOR/PARTNER/EXECUTIVE N/A<br>AND EMPLOYERS LIABILITY Y/N<br>ANY APPOPRIETOR AND  |                                |   | TORY LIMITS   ER  |          |                          |
| CERTIFICATE HOLDER Cakland Unified School District Corrigination Corrigi   |                                |   | E.L. EACH ACCIDENT  | \$       |                          |
| If yes, describe under       Image: Comparison of OPERATIONS below       Image: Comparison of OPERATIONS below         A       Sexual/ Physical Abuse       CPS1744528       4/1         DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schodule, # 1       Additional Remarks Schodule, # 1         DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schodule, # 1       Additional Remarks Schodule, # 1         DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schodule, # 1       Additional Remarks Schodule, # 1         CERTIFICATE HOLDER       CANCE         Oakland Unified School District       SHOUL  |                                |   | E.L. DISEASE - EA EMPLOYE                                       |          |                          |
| A Sexual/ Physical Abuse CPS1744528 4/1<br>DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schodule, # 1<br>Proof of insurance CANCE<br>CERTIFICATE HOLDER CANCE<br>Oakland Unified School District   |                                |   | E.L. DISEASE - POLICY LIMIT                                     | \$       |                          |
| CERTIFICATE HOLDER CANCE<br>CANCE<br>SHOUL<br>THE E<br>ACCOF   | 12/2013                        | 4/12/2014                               | Occurrence<br>Aggregate   |          | \$25,<br>\$50,           |
| CERTIFICATE HOLDER<br>SHOUL<br>THE E<br>ACCOF  | f more space                   | is required)                            | Aggrogaro   |          |                          |
| Oakland Unified School District  | ELLATION                       |   | DESCRIBED POLICIES BE   | CANCE    |                          |
| 900 High Street<br>Oakland, CA 94601   | EXPIRATIO                      | ON DATE TI<br>WITH THE POL<br>SENTATIVE | HEREOF, NOTICE WILL<br>ICY PROVISIONS.<br>Hom                   | BEL      | EIVERED                  |
| ACORD 25 (2010/05)   | 0                              | 988-2010 A                              | CORD CORPORATION  | . All r  | ights reser              |

# Search Results

# **Current Search Terms: Eric\* clayton\***

### No records found for current search.

SAM | System for Award Management 1.0

**Note to all Users:** This is a Federal Government computer system. Use of this system constitutes consent to monitoring at all times.





1.

Checklist

# ity Schools, Thring Students PROFESSIONAL SERVICES CONTRACT ROUTING FORM 2012-2013

### **Basic Directions**

Additional directions and related documents are in the School Operations Library (http://intranet.ousd k12.ca.us)

Services cannot be provided until the contract is fully approved and a Purchase Order has been issued.

- Contractor and OUSD contract originator (principal or manager) reach agreement about scope of work and compensation.
- Ensure contractor meets the consultant requirements (including The Excluded Party List, Insurance and HRSS Consultant Verification ) 2.
- Contractor and OUSD contract originator complete the contract packet together and attach required attachments. 3.
- Within 2 weeks of creating the requisition the OUSD contract originator submits complete contract packet for approval to Procurement. 4
- For individual consultants: HRSS Pre-Consultant Screening Letter for the current fiscal year.
   For individual consultants: Proof of negative tuberculosis status within past 4 years. Attachment

For All Consultants: Results page of the Excluded Party List (https://www.epis.gov/epis/search.do)

For All Consultants: Statement of qualifications (organization); or resume (individual consultant).

For All Consultants: Proof of Commercial General Liability insurance naming OUSD as an Additional Insured.

For All Consultants with employees: Proof of Workers' Compensation Insurance. (Ref. to Section 10 of the Contract)

OUSD Staff Contact Emails about this contract should be sent to: (required) Sandra.Simmons@ousd.k12.ca.us

| Contractor Information   |                   |                   |                |       |                  |                               |       |          |  |
|--|-------------------|-------------------|----------------|-------|------------------|-------------------------------|-------|----------|--|
| Contractor Name Eric Clayton Agency's Contact Sandra Simmons LCSW  |                   |                   |                |       |                  |                               |       |          |  |
| OUSD Vendor ID #   | 1005994           | Title             | Title Region 1 |       |                  | Mental health Program Manager |       |          |  |
| Street Address   | 7031 Colton Blvd. | City Oakland      |                | State | CA               | Zip                           | 94611 |          |  |
| Telephone (510) 338-0944 Email (required) coachclayton33@yahoo.com |                   |                   |                |       |                  |                               |       |          |  |
| Contractor History Previously been an OUSD contractor?             |                   | contractor? 🔳 Yes | No             | Wo    | orked as an OUSD | employ                        | ee? 🔳 | Yes 🗌 No |  |

| Compensation and Terms – Must be within the OUSD Billing Guidelines |            |                            |            |                |        |  |  |  |
|---|------------|----------------------------|------------|----------------|--------|--|--|--|
| Anticipated start date  | 04/01/2013 | Date work will end         | 06/30/2013 | Other Expenses | \$0.00 |  |  |  |
| Pay Rate Per Hour (required)  | \$ 30.00   | Number of Hours (required) | 390.00     |                |        |  |  |  |

| de.  |   |                            |                |                     | Budget Infor        |                     | A Real Providence and and |                        | del a Salation                                     |  |  |
|------|---|----------------------------|----------------|---------------------|---------------------|---------------------|---------------------------|------------------------|--|--|--|
|      | If you a  | are planning to mu         | ti-fund a cor  | ntract using LEP fu | unds please cor     | tact the State and  | d Federal Offi            | ce <u>before</u> compl | eting requisition                                  |  |  |
| R    | esource #   | Resource Na                | ime            |                     | Org Key             |                     |                           | Object Code            | Amount   |  |  |
|      | 3725  | Safe and Sup               | porti          |                     | 305111030           | )5                  |                           | 5825                   | \$ 11,700.00                                       |  |  |
|      |   |                            |                |                     |                     |                     |                           | 5825                   | \$   |  |  |
|      |   |                            | -              |                     |                     |                     |                           | 5825                   | \$   |  |  |
| R    | Requisition No. (required) R0314854 Total Contract Amou |                            |                |                     |                     |                     | ct Amount                 |                        | \$ 11,700.00                                       |  |  |
|      | 9   |                            |                | Approval and F      | Routing (in or      | der of approva      | l steps)                  |                        |  |  |  |
| Sei  |   |                            |                | services were       | not provided be     | fore a PO was iss   | sued.                     |                        | ns that to your knowledge<br>s.gov/epls/search.do) |  |  |
|      | Administra  | ator / Manager (Or         | iginator)      | Name Sandr          | a Simmons           |                     | Phone                     | (510) 450-5-           | 400  |  |  |
| 1.   | Site / De   | epartment                  | <b>Oakland</b> | Technical H. S.S    | Safe and Supp       | ortive school       | Fax                       | (510) 450-5428         |  |  |  |
|      | Signature   | Mala                       | oh A           | ndus-               |                     | Da                  | te Approved               | 41                     | 25/13  |  |  |
|      | Resource  | Manager, if using          | unds manag     | ed by: State and    | Federal Quality     | , Community, School | Development               | Family, Schools, an    | d Community Partnerships                           |  |  |
| 2.   | Scope of  | f work indicates co        | mpliant use    | of restricted resou | urce and is in alig | gnment with scho    | ol site plan (S           | ipsa)                  | nn n   |  |  |
| ۷.   | Signature   | Ja                         | SI             | mas                 | s.ICSW              | Da                  | te Approved               | 211                    | 11/an 15   |  |  |
|      | Signature (   | if using multiple restrict | ed resources)  |                     | /                   | Da                  | te Approved               |                        | 1 -  |  |  |
|      | Regional E  | Executive Officer          |                |                     |                     |                     |                           |                        |  |  |  |
| 3.   |   | described in the s         |                |                     |                     |                     |                           |                        |  |  |  |
|      |   |                            |                |                     |                     |                     | Date Approved 4-26-13     |                        |  |  |  |
| 4.   | Deputy Su   | perintendent Inst          | ructional L    | adership / Depu     | ty Superintend      | ent Business Op     | erations                  | Consultant Aggrega     | ate Under ], Over \$50,000                         |  |  |
| 4.   | Signature Maria Scintos                                 |                            |                |                     |                     | Da                  | te Approved               | 5-                     | 23-2013  |  |  |
| 5.   | Superinter  | ndent, Board of E          | ducation S     | ignature on the leg | gal contract        |                     |                           |                        |  |  |  |
| Lega | Required i  | f not using standar        | d contract     | Approved            |                     | Denied - Reas       | on                        |                        | Date   |  |  |
| Proc | urement   | Date Received              |                |                     |                     | PO Number           |                           | 13181                  | 03   |  |  |

Rev. 5/2012 v1



THIS FORM IS NOT A CONTRACT