

THE SCHOOL BOARD OF SARASOTA COUNTY, FLORIDA  
 FINANCIAL SERVICES DEPARTMENT  
 1960 LANDINGS BLVD. -- SARASOTA, FL 34231-3331  
 PHONE (941) 927-9000 -- FAX (941) 927-4017

**CONTRACT FOR SERVICES BY INDEPENDENT CONTRACTORS**  
 (See reverse side for definition of independent contractor)

NAME <u>YMCA of Sarasota Homeless Service Project</u> STREET/BOX <u>One S. School Ave., Suite 301</u> CITY/STATE/ZIP <u>Sarasota, FL 34237</u>	ACCOUNTS PAYABLE USE ONLY
	VENDOR # <u>C33418</u>
	CONTRACT # _____

LAST 4 DIGITS OF SS# \_\_\_\_\_ FEDERAL IDENTIFICATION # 59 - 1618413  
 CONTACT PERSON Colleen Moore CONTACT PHONE x34061

**DESCRIPTION - COST STRIP - APPROVAL**

**SERVICES RENDERED:** The School Board of Sarasota County, Florida, hereinafter called the School Board, and the above named Independent Contractor, agree as follows:

The School Board shall pay the Independent Contractor for the following services: Title I funding for shelter tutoring, push-in tutors, salary for case mgr for unaccompanied & foster care youth, after school / summer enrichment activities, school uniform logo shirts, book fair funds, expedited evaluations for special needs students, homeless ED  
To be performed during the following time period: program staff state & national conference funds 7/1/11-6/30/12\*Pls note funds include salaries & can be paid 2 weeks in advance  
 Payment shall be made (with submission of request for payment form 006-80-FIN) as follows:  
10 Monthly payments of \$7500.00 each (totaling \$75,000.00)

I have read the reverse side of this document, and I certify that I am not an employee of the School Board of Sarasota County, Florida and that I will perform the duties as indicated above. I shall provide evidence of the services performed to the cost center head indicated below. I agree to release and hold the School Board of Sarasota County, Florida and/or its employee agents and volunteers harmless from and against all claims, judgments, costs, or other expenses arising out of bodily injury or property damage resulting from my performance of the services specified in this contract. The State of Florida and its political subdivisions are governed by FS 768.28(18)

Signature of Acceptance by Independent Contractor \_\_\_\_\_

Date 7/1/11

**COST STRIP:**

Line	Fund Source *	Function	Object	Cost Center	Project	Amount
1	4421	6100	310	9055	6012	\$75,000.00
2			310			
Total **						\$75,000.00

[ If more than 2 cost strips attach addendum ]

(\*) For fund source 4421 see reverse side for special instructions, provisions & procedures

(\*\*) If total amount is \$50,000 or over please indicate:

SCHOOL BOARD APPROVAL DATE 7/19/11 AGENDA ITEM # \_\_\_\_\_

**FINGERPRINTING:**

Do the duties associated with this contract involve direct contact with students, access to school grounds when students are present or access to District funds?  YES  NO If yes, you must report to Human Resources for fingerprinting at your expense. Fingerprints were taken and criminal history was reviewed on \_\_\_\_\_. This person is approved to contract with the District

Human Resources Executive Director \_\_\_\_\_ Date \_\_\_\_\_

**APPROVALS:**

I certify that this contract is essential and internal resources are not available within the School District

Cost Center Head/Director: Peggy Higgins DATE: 7/6/2011

Supervisor of Above: Anna Higginbotham DATE: 7/6/2011

Financial Services, Treasurer \_\_\_\_\_ DATE: \_\_\_\_\_

**INSTRUCTIONS**

This contract must be signed and approved by all parties before the services may commence. If the independent contractor is to receive payment for travel, the payment cannot exceed the travel allowances permitted under Florida Statute 112.061. This contract must be approved by the School Board of Sarasota County, if it is in the amount of \$25,000 or greater. The dividing contracts in order to circumvent the \$25,000 limit will result in notification to the School Board

An IRS Form 1099 will be issued for all transactions covered by Federal regulation.