

CONTRACT FORM 1684 R5 (Refer to ADMINISTRATIVE MANUAL Section 1.13, for procedures)

Mail to: Preliminary: Office of the Comptroller, Contract Signatures, Room 301 Courthouse Final: Office of the Comptroller, Accounts Payable, Room 301 Courthouse Community Business Development Partners, 8th Floor City Campus	CONTRACT TYPE	
	Professional Service - Operating	X
	Professional Service - Capital	
	Purchase of Service	
	Preliminary	Final

DEPARTMENT NAME	AGENCY NO.	DEPARTMENT (HIGH) ORG
UW-EXTENSION	991	9910

VENDOR INFORMATION

VENDOR NO.	ORDER TYPE	NEW or	AMEND	CONTRACT NO.
21211			X	

NAME OF VENDOR	ADDRESS
UNIVERSITY OF WISCONSIN EXTENSION	US BANK LOCKBOX
	BOX 78138
	MILWAUKEE, WI 53278-0138

TAX I.D. NO.	EFFECTIVE DATES: begin date end date	LENGTH OF CONTRACT (IN MONTHS)	AMENDMENT ONLY: DOLLAR CHANGE	TOTAL CONTRACT AMOUNT
391-80-5963	01/01/17 12/31/17	12	\$ 175,212.00	\$ 509,365.00

ACCOUNTING INFORMATION

Year to be Expended	Line No	Fund	Agency	Org Unit	Activity	Function	Object	Job Number	Report Cat	Units	Amount to be Expended/ Amendment
2017	01		991	9910	U1AD		6148				\$ 175,212.00

PURPOSE OF CONTRACT

FOR PROFESSIONAL STAFF OF THE UNIVERSITY OF WISCONSIN - EXTENSION FOR PROVISION OF COOPERATIVE EXTENSION PROGRAMS IN MILWAUKEE COUNTY. AMENDMENT NO. 2 TO CONTRACT (133-PRJ89TM)

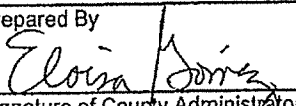
Was County Board approval received prior to contract execution or contract amendment or extension?

If YES, give County Board File No. _____ Date Approved _____

If NO, why is County Board approval not required? _____

Was Contract fully executed prior to work being performed (all signatures received)? YES NO

Is Vendor a certified professional service DBE? YES NO

Tami Griffin	11/01/16	Sr. Executive Assistant
Prepared By	Date	Title
	11/01/16	County Director
Signature of County Administrator	Date	Title