



THE SCHOOL BOARD OF MIAMI-DADE COUNTY, FLORIDA

TRANSMITTAL FOR AGREEMENT FORM FOR CONTRACTED SERVICES

TO: SUPERINTENDENT OF SCHOOLS

VIA: School Board Attorney

FROM: [Name/Title], [Date], [Location Name], [Location Number], [Region Superintendent/Division Head], [Date], [Bureau of Grants Administration]

SUBJECT: LEGAL REVIEW AND APPROVAL OF AGREEMENT FORM FOR CONTRACTED SERVICES

The attached Agreement Form for Contracted Services is submitted for approval. Funds have been identified for these services under Shopping Cart Number _____.

This agreement is contingent on the continuation of adequate funding.

Please sign both copies of the Agreement and return both copies to the originator for further processing.

PROCUREMENT AUTHORITY

- Quotes Obtained
Professional Services Contract Committee (Attach Minutes)
Board Approval (Attach Agenda Item)
Waiver Pursuant to Florida Statutes
Other (State Reason)

Attachments: Agreement Forms (two original copies)