

Modification A to Contract #21-167

This contract modification is between RACINE COUNTY HUMAN SERVICES DEPARTMENT whose business address is 1717 Taylor Avenue, Racine, Wisconsin 53403 and Provider PREMIER WORKFORCE SOLUTIONS, whose principal business address is 1652 N Main Street, Racine, Wisconsin 53402.

The modification to this agreement will be in effect from June 1, 2021 to December 31, 2021. The Provider agrees to abide by all of the terms of the original agreement dated June 1, 2021 through December 31, 2021 with addition of the following:

Eliminate 1 FTE Contracted Child Care Authorization/Certification Specialist with 1 FTE Contracted Child Care Authorization/Certification Specialist remaining.

This reduces the overall contract to \$30,500

MP
MP

Any modifications to the total amount allocated for provision of the services outlined in this contract are indicated on the attached Budget Sheet (Attachment A).

In accordance with the Contract Administration Manual of Racine County, (Section III. A.1. Contract Modification and Extension), the approval for this change is executed by the Human Services Department Director, Finance Director, Corporation Counsel and County Board Chairperson with signatures affixed.

(signed) <u><i>Dragica (Dee) Djurovic</i></u> <small>Dragica (Dee) Djurovic (Jul 27, 2021 10:14 CDT)</small>	<u>Jul 27, 2021</u>
Provider's Authorized Representative	Date
(signed) <u><i>Hope M. Otto</i></u> <small>Hope M. Otto (Jul 27, 2021 08:12 CDT)</small>	<u>Jul 27, 2021</u>
Racine County Human Services Director	Date
(signed) <u><i>[Signature]</i></u>	<u>08-04-21</u>
Racine County Executive	Date
(signed) <u><i>[Signature]</i></u>	<u>7.30-2021</u>
Racine County Corporation Counsel	Date
(signed) <u><i>[Signature]</i></u>	<u>7/30/21</u>
Racine County Finance Director	Date
(signed) <u><i>Wendy M. Cleveland</i></u>	<u>8/5/2021</u>
Racine County Clerk	Date
(signed) _____	_____
Racine County Board Chairperson	Date

XII. COST AND SERVICES TO BE PROVIDED

- A. Provider and Purchaser understand and agree that the eligibility of individuals to receive the services purchased under this agreement will be determined by the Purchaser.
- B. Purchaser agrees to pay Provider for the actual services which are described in Exhibit A and which are rendered by Provider and authorized by Purchaser at the contracted amount.
- C. The total amount to be paid to Provider by Purchaser for programs and services as specified in this section will not exceed the total contracted dollar amount.

Account #	Program	Total	Units	Unit Rate	Method of Payment
91748.009.600.404500	Child Care Authorization Certification Specialists	\$ 30,500.00 <i>MP</i> MP	N/A	Hourly	Actuals

Steven Zimmer

Jul 27, 2021

Approved by HSD Fiscal Manager _____

Dragica (Dee) Djurovic
Dragica (Dee) Djurovic (Jul 27, 2021 10:14 CDT)

Jul 27, 2021

Approved by Contracted Agency _____

Signature: *Mary Perman*

Email: mary.perman@racinecounty.com












Premier #21-167 Combined


Final Audit Report


2021-07-27


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 Agreement completed.
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