

Cypress-Fairbanks Independent School District

	Dr. Mark Henry, Super	rintendent		
10300 Jones Road Houston, Texas 77065	(281) 897-4000	P.G Ho	O. Box 692003 ouston, Texas 77269-2	2003
PART I: CONSULTANT SERVICES (To be completed and submitted PRIOR to agreement	REQUEST FOR APPRO being sent and signed by consultant)	<u>VAL</u>		
Consultant Name/Company ASCD		Contract	# (if applicable)	
Mailing Address of Consultant 17031	Joith Beauregard S	Street	,	A 22311
Description of Services (Include date(s), a Thomas Hoerr 6/10/17	udience, topic) RKR Co	onterence	Presentation	
TOTALES	TIMATED CONSULTANT F	FEES AND EX	PENSES: S 28	50 Hoer
Fund Function Class/Object	Subject Organization Pro	ogram/Project	Disbursement Amount	Vendor Number
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		1712		
Principal/Department Head Signature	1 Almh	Mac	Es !	
Approved by:	Anr	proved by:	2010	0 -
Assistant Superintendent/I) esignee		rector for Staff Develo	opment
Approved by: Associate Superintendent	Mach		*	
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PART II: CONSULTANT AGREEMI	\underline{SNT} (To be completed & signed by b	both the Principal/D	epartment Head and consul	tant AFTER APPROVAL)
This is an agreement between $A \leq D$ the District, for the provision of the consultant		and	Cypress-Fairbanks I.S	.D., herein known as
Description of Services (Include date(s), an				
tor ASCO Presenters	idience, topic) RRR C	-on terence	· Presentation	
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The District agrees to pay the consultant S	28,00 and travel and for rein hursement. The Dis	d-lodging exper	nses as allowed by dist	rict policy. Travel
and lodging expense receipts must be provide for this agreement.	Hoerr &6		e cost of auplication o	f materials required
it is agreed that the District is not respons	ible for any other compensation	n. including but	not limited to health	life unamplerment
and workman's compensation insurance and liability resulting from the consultant's perfo	shall be held harmless in any according	ction that might	arise regarding person	nal or professional
This instrument constitutes the entire and	only agreement between the pa	arties named and	d is made and entered	his date.
3/2-3/17. Initiated By:			0	0
Millated By.	In A	Agreement With	Day O	.)
V 2 M 1 ///		Consulta	nt/Organization	SUP!
Principal/Department Head		Social Sec	52-60789 curity Number/FED ID	980
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PART III: APPLICATION FOR PAY	MENT (To be completed and subm	nitted to Accounts F	Pavable AFTER SERVICES	are rendered
	Travel:	\$	22	The control of
Accommodations:	Meale	•		MOAK

HOEVE - \$6,500 6/27/17

L. macias 2-23-17

Cypress-Fairbanks Independent School Distri

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	And the state of t	Dr. Mark Henry, Superintendent	
Pr-followspite Beatlean	10300 Jones Road Flouston, Texas 77065	(281) 897-4000 P.O. Box 692003 Houston, Texas 77269-2003	
Statistical and an event	PART I: CONSULTANT SERVICE (To be completed and submitted PRIOR to agreement		
PER ARREST DE LA	Consultant Name/Company Legac	DV Rusinger Culture	
TATION BUTTON	Mailing Address of Consultant 1	1290 Bay Dale Dr Arrold MD 21012	
Spensy Street), audience, topic) RRR Conference Presentation on June 7, 2017	
day and day	Two 70-minute sessions	, additince, topic) RRR Conference Presentation on June 7, 2017	
and the second			
	TOTAL ES	STIMATED CONSULTANT FEES AND EXPENSES: S 5,900	
	Fund Function Class/Object 4617 36 00	Subject Organization Program/Project Disbursement Amount Vendor	Number
	35 00	881 00000 6219	1836
	Principal/Department Head Signature	Didfrido Macay	
	Approved by:		
	Approved by: Assistant Superintendent/E	Designed Director for Staff Development	
	According School St.		
	PART II: CONSULTANT AGREEM	**************************************	******
	This is an agreement hatture. Leggor P.	Unional Collins of the participant epartment Flend and consultent AFTER	APPROVALI
	the initiation for the provision of the consultar	nl services described in exchange for the stated comments 1.5.D., herein	known as
1	Description of Services (Include date(s), au	udience, topic) RRR Leadership Conference on June 7, 2017	
,*	The Dist.		
ล	The District agrees to pay the consultant \$ and lodging expense receipts must be provide	5 5900.00 and travel and lodging expenses as allowed by district policy. ed for reimbursement. The District will pay the cost of duplication of materials	Travel
fe	or this agreement.	the blanct will pay the cost of duplication of materials	required
31	nd workman's compensation insurance and s	ible for any other compensation, including but not limited to, health, life, unempensable behald harmless in any action that might arise regarding personal or profermance of the services described.	ployment
	ability resulting from the consultant's nauc-	and the state of t	essional
In	2 / 22 / 2017 nitiated By:	only agreement between the parties named and is made and entered this date,	
200	CLIVE - MA	In Agreement With:	
	12 (m) ///n	Consultant Organization	
	Principal/Department Head	Social Security Number/FED ID#	
د د		PO Number VI 12 8 CC	
P/	ART III: APPLICATION ROD DAVE	TENTO	****
	Committee of the commit	MENT (To be completed and submitted to Accounts Payable AFTER SERVICES are rendered)	
	Accommodations: 5	900 Meals: \$	pay Don
	TOTAL	LACTUAL FEES AND EXPENSES: S 101050	SIL
ig	anature:	911 227 =	SOO HEAD
	Principal/Department Head		
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Houston, Texas 77065	(281) 897-4000	P.O. Box 692003 Houston, Texas 77269-2003
PART I: CONSULTANT SERVICES (To be completed and submitted PRIOR to agreement	S REQUEST FOR APPROVAL	
Consultant Name/Company AS/	C	Ontract # (steamlissly)
Mailing Address of Consultant 1703	North Bauregard St	Ontract # (if applicable) Alexandra, VA 22311
Description of Services (Include date(s), a	udience, topic) RRR (Onference Priseations.
L'Ominique Son	milh.	1, (Islands)
	TIMATED CONSULTANT FEES	AND EXPENSES: S 22500 &Smith
Fund Function Class/Object	Subject Organization Program/F	10,500
Ho18 36 00	881 (2)19	502,50D
Principal/Department Head Signature	1 / Man 11	Talau:
Approved by:	Approved	hy/ lama
Assistant Superintendent/D	esignee // afu-	Director for Staff Development
Associate Superintendent	*******	**********
PART II: CONSULTANT AGREEME	$\overline{\mathrm{ENT}}$ (To be completed & signed by both the 1	Principal/Department Head and consultant AFTER APPROVAL)
This is an agreement between ASI the District, for the provision of the consultant	Λ	10
Description of Services (Include date(s), an	dience tonia)	ne stated compensation.
	MACO, PHECONLOCK O	
The District agrees to pay the consultant S	22 And and traval and lade	ng expenses as allowed by district policy. Travel
for this agreement.	D Short Ho 11	pay the cost of duplication of materials required
		ding but not limited to, health, life, unemployment at might arise regarding personal or professional
liability resulting from the consultant's perfor This instrument constitutes the entire and c		
Initiated By:	In Agreeme	
Maria Maria	Dn	- Jal / ASCD
Brincipal/Department Head	Cree .	onsultant/Organization 52-6078980
7 morpan behaltment Head	So PO Number	cial Security Number/FED ID#
********	******	****
PART III: APPLICATION FOR PAYM	TENT (To be completed and submitted to A	ccounts Payable AFTER SERVICES are rendered)
ACTUAL CONSULTANT FEE: \$	2,500 Travel: \$ _	DIPALE
Accommodations: S	Meals: \$	The Division of the second
CA15 / ///	L ACTUAL FEES AND EXPENSE	sis Zarou Pay 6 PINE
Signature: Principal/Department Head	rece	Transl I
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L. Macion 4-3-18

Cypress-Fairbanks Independent School District

	Dr. Mark Henry,	Superintendent	
10300 Jones Road Houston, Texas 77065	(281) 897-4000	1,0,000,0	92003 exas 77269-2003
PART I: CONSULTANT SERVIC (To be completed and submitted PRIOR to agreem	ES REQUEST FOR AP	~~~~	
Consultant Name/Company May	ny Monte Bacon	Contract # (if appl	licable)
Mailing Address of Consultant			
Description of Services (Include date(s), audience, topic) RR	2 confronce	Mesentation
TOTAL	ESTIMATED CONSULTA	NT FEES AND EXPENSES	s: s 2500
Fund Function Class/Object 4618 36 00	Subject Organization 881 6219		nent Amoint Vendor Number 500 00/27989
Principal/Department Head Signature	1 JAM	1/10/00	
Approved by: Assistant Superintenden Approved by:	nt/Désignec	Approved by: Director fo	r Staff Development
Associate Superintende	·· ÷÷÷÷÷÷÷÷÷÷÷÷××××××××××××××××××××××××	******	******
PART II: CONSULTANT AGREED This is an agreement between	mile Baca. I Imac	Cart Coltus	711
Description of Services (Include date(s),	audience, topic)	change for the stated company	cation
The District agrees to pay the consultant and lodging expense receipts must be provor this agreement.	at \$ Z DO and travided for relimbursement. The	el and lodging expenses as all e District will pay the cost of	lowed by district policy. Travel duplication of materials required
It is agreed that the District is not respond workman's compensation insurance at ability resulting from the consultant's per	nsible for any other compens ad shall be held harmless in a	sation, including but not limit my action that might arise reg	ed to, health, life, unemployment arding personal or professional
This instrument constitutes the entire are	id only agreement between t	//	and entered this date,
milated By.	1	In Agreement With	En-
Brincipal/Department Head	Offer	Consultant/Organi	zation
2 merpan Department Read		Social Security Nur PO Number:	nber/FED ID#
**********	******		\$ 4 ~ ~ 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
ART III: APPLICATION FOR PA	YMENT (To be completed and	submitted to Accounts Payable AFT	ER SERVICES are rondered)
CTUAL CONSULTANT FEE: S_	2500 Tray		_
Accommodations: \$_	TAL ACTUAL FEES AN	ls:	14.00 Pleaself
gnature: Frincipal/Department Head	alies	(S. 10.00), 19 <u></u>	Final
		00 to 10 m 10	6/19/18

3-30-19

I. macias

Cypress-Fairbanks Independent School District Dr. Mark Henry, Superintendent

10300 Jones Road Houston, Texas 77065

(281) 897-4000

P.O. Box 692003

Houston Texas 77260,2002

PARTI. CONSTITUTANTE CERTIFICAS PROGRAMMENTOS
PART I: CONSULTANT SERVICES REQUEST FOR APPROVAL (To be completed and submitted PRIOR to agreement being sent and signed by consultant)
Consultant Name/Company Hough town Mafflin twoontract # (if applicable) 18-03-2010 RFE
17076 Collections Center Chicago Ty Lange 2
Description of Services (Include date(s), audience, topic) RRR Leadership Conference
presentation on the 4+5
toward)
TOTAL ESTIMATED CONSULTANT FEES AND EXPENSES: \$ 30,050 Hou
Fund Function Class/Object Subject Organization Program/Project Disbursement Amount Vendor Number
4619 36 00 881 0000 629/ 30,650 0000653
XIA AAA
Principal/Department Head Signature
Approved by: Approved by:
Assistant Superintendent/Designee Approved by: Director for Staff Development
Associate Superintendent
PART II: CONSULTANT AGREEMENT (To be completed & signed by both the Principal/Department Head and consultant AFTER APPROVAL)
This is an agreement between \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
This is an agreement between Houghton Hiffin Havcourt and Cypress-Fairbanks I.S.D., herein known as the District, for the provision of the consultant services described in exchange for the stated compensation.
Description of Services (Include date(s), audience, topic) RRR Leadership Conference
June 4+5. RRA GROOTShip Conference
The District agrees to pay the consultant \$ 30,650 and travel and lodging expenses as allowed by district at 1
and lodging expense receipts must be provided for reimbursement. The District will pay the cost of the district policy. Travel
for this agreement. It is agreed that the District is agreed to the
It is agreed that the District is not responsible for any other compensation, including but not limited to, health, life, unemployment and workman's compensation insurance and shall be held harmless in any action that might arise regarding personal or professional liability resulting from the consultant's performance of the services described
liability resulting from the consultant's performance of the convices described that might arise regarding personal or professional
This instrument constitutes the entire and only agreement between the parties named and is made and entered this date,
Initiated By:
Consultant/Organization 04-1456030
Princ/pal/Department Head Social Security Number/FED ID#
PO Number: P1444 878

13AT 111. ATT DICATION FOR PAYMENT (To be completed and submitted to Accounts Payable AFTER SERVICES are rendered)
ACTUAL CONSULTANT FEE: \$ 30,100 Travel: \$
Accommodations: \$ Meals: \$ Ready To
TOTAL ACTUAL FEES AND EXPENSES: \$ 30 16 TO 10 10 10 10 10 10 10 10 10 10 10 10 10
Signature: The Man I Willed
Howard- \$8,500

-20-19 Ander Kah Amer

Cypress-Fairbanks Independent School District Dr. Mark Henry, Superintendent

10300 Jo	nes Ro	ad
Houston,	Texas	77065

Houston, T	es Road Texas 77065	,,	(281) 897-4000	P.O. E Houste	Box 692003 on, Texas 77269-200	3
PART I: (To be comple	CONSULTANT eted and submitted PRIC	SERVICES REOU OR to agreement being sent a	EST FOR APPR and signed by consultant)	OTTAT	5.00 • 0.00 observation (-
Consultan	nt Name/Compan	Trumper III		a tracer or	t Contract # (if appli	18-03-201 cable) RF
Mailing Ad	idress of Consultar	nt 222 Berkeley St.]	Boston MA 02116	14046 Collection	Publishing Company	age, IL 606
Description 2019.	of Services (Inclu	nde date(s), audience,	topic) Keynote and	l speaker for District S	staff Development on	August 12-16,
		TOTAL ESTIMATE	D CONSULTANT	FEES AND EXPER	ISES: \$ 48,000.00	Howar 34,000
Fund. Title II	·	lass/Object Subject			ursement Amount V	endor Number
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Principal/De	epartment Head Si	ignature (Turner	1)	
Approved by:		Loshi	Aj	oproved by:	The state of	
Approved by:	:	erintendent/Designee	3400	Directo	or for Staff Developme	ent:
*****	Associate Supe	- + + + + + + + + + + + + + + + + + + +	******	******	• • • • • • • • • • • • • • • • • • • •	
		ZOZEDI/IDIYE (10:DE	e completed & signed by	both the Principal/Departn	nent Head and consultant A	FTER APPROVALL
This is an agre herein known	eement between <u>T</u> as the District, for t	yrone Howard and the provision of the co	Honsultant services de	oughton Mifflin Harco	^Publishing Comp purt and Cypress-Faut	pany panks LS.D.,
Danisinting	f Complete (T. 1: 1	wa bearing	montraill oct vices ne	SUIDED IN exchange to	or the state I	
Description o	1 Services (Include	e date(s), audience, to	pic) Keynote and	speaker for District S	taff Development on	American 12-16
		e date(s), audience, to	pic) <u>Keynote and</u>	speaker for District S	taff Development on .	August 12-16,
The District	t agrees to pay the c	consultant 5 (3) (3)	pic) Keynote and	speaker for District S	taff Development on	August 12-16.
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10300 Jones Road Houston, Texas 77065 (281) 897-4000

P.O. Box 692003 Houston, Texas 77269-2003

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(To be completed and submitted PRIOR to agreement being sent and signed by consultant)

	Consultant Name/Company Drafyrone-Howard/Houghton Mifflin Harcourt Contract # (if applicable)_18-03-2010RFP-2 Publishing Company
	Muiling Address of Consultant 1-Piecce Place, Suite 900W, Hasea, H-60443 14046 Collections Center Drive, Chicago, IL 60693
	Description of Services (Include date(s), audience, topic) Dates: January 13-16, 2020; Audience: Assistant Principals and Behavior Interventionists; Topic: Cultural Relevance and Disproportionality of Student Discipline in Public Schools
	TOTAL ESTIMATED CONSULTANT FEES AND EXPENSES: S 31200 \$25,500
	Fund Function Class/Object Subject Organization Program/Project Disbursement amount Vendor Sumber
	2550 131 Fle 999 COOV 6 6291
	Principal/Department Head Signature
	Approved by: Approved by:
	Approved by: Associate Superintendent Associate Superintendent Associate Superintendent Associate Superintendent
*	***************************************
	Publishing Company This is an agreement between Houghton Mifflin Harcourt (District, for the provision of the consultant services described in exchange for the stated compensation.
	Description of Services (Include date(s), audience, tonic lanuary 13-16, 2020; audience, compute and district admits to
-	Topic: Cultural Relevance and Disproportionality of Student Discipline in Public Schools
i	The District agrees to pay the consultant S 34000 and travel and lodging expenses as allowed by district policy. Travel and lodging expense receipts must be provided of reimbursement. The District will pay the cost of duplication of materials required for this agreement.
Ü	It is agreed that the District is not responsible for any other compensation, including but not limited to, health, life, unemployment and workman's compensation insurance and shall be held harmless in any action that might arise regarding personal or professional liability resulting from the consultant's performance of the services described.
	This instrument constitutes the entire and only agreement between the parties named and is made and onto and outcode this dec
1	11/6_2019 Initiated By: In Agreement With: NO.01 Sandy
	Consultant Organization O4-1456030 Principal Department Head Social Security Number (1970)
	PO Number: P201 0389
it 	***************************************
T.	ART HI: APPLICATION FOR PAYMENT (To be completed and submitted to Accounts Payable AFTER SERVICES are rendered)
Α	CTUAL CONSULTANT FEE: S 25,500 Travel: S
	Accommodations: S Meals: S
Si	ignature: Heather Deignam 3/23/2020

Principal Department Hold

10300 Jones Road Houston, Texas 77065

(281) 897-4000

P.O. Box 692003 Houston, Texas 77269-2003

PART I: CONSULTANT SERVICES REQUEST FOR APPROVAL

(10 be completed and submitted PRIOR to agreement being sent and signed by consultant)										
Consultant Name/Company: International Center for Leadership in Education from Houghton Mifflin Harcour	International Center for Leadership in Education from Houghton Mifflin Harcourt									
Mailing Address: 14046 Collections Center Drive, Chicago IL 60693	14045 Collections Center Drive, Chicago IL 60693									
Description of Services: 4-Hour Virtual Presentation with Dr. Tyrone Howard, November 7, 2020 8-00 p.m.	4-Hour Virtual Presentation with Dr. Tyrone Howard, November 7, 2020 8:00 a.m. –									
12.00 p.m. GT TOPIC: Teaching with Equity. Audience: Campus Administration	12.00 p.m. GT TOPIC: Teaching with Equity. Audience: Campus Administration									
reacties, Paraprofessionals and District Administrators	,									
Total Estimated Expenses: \$										
Fund Function Class/Object Subject Organization Program/ Disbursement Vendor Number Project Amount										
699 F02W8 6291 7,000.00 00006053										
Approvals: Principal/Department Head: Lauri Barnes										
Assistant Superintendent/Designee: Barbara Levandoski	-									
Associate Superintendent: Linda Macias										
Director of Staff Development: Glenda Horner										
PART II: CONSULTANT AGREEMENT (To be completed & signed by both the Principal/Department Head and consultant AFTER.) This is an agreement between International Center for Load arrhive in Editor of the Principal Center of the Consultant AFTER.										
Harcourt and Cypress-Fairbanks I.S.D., herein known as the District, for the provision of the consultant services described exchange for the stated compensation.	d in									
Description of Services: 4-Hour Virtual Presentation with Dr. Tyrone Howard, November 7, 2020 8:00 a.m										
12:00 p.iii, CST TOPIC: Teaching With Equity. Alidience: Campus Administration	. –									
The District agrees to pay the consultant \$ 7,000,00 for the Virtual Presentation. The District will pay the cost of duplica materials required for this agreement.	tion of									
It is agreed that the District is not responsible for any other										
and workman's compensation insurance and shall be held harmless in any action that might arise regarding personal or profe	loyment									
liability resulting from the consultant's performance of the services described.	ssional									
This instrument constitutes the entire and only agreement between the parties named and is made and entered this date,										
In Agreement with:										
hoald hodson										
Consultant/Ohamilani Si										
Department 1124 Executive										
04-1456030										
Social Security Number/FED ID #										
PART III: APPLICATION FOR PAYMENT (To be completed and submitted to Accounts Payable AFTER SERVICES are rendered) ACTUAL CONSULTANT FEE: \$ 7,000.00 Travel: \$										
A commodational E										
micals.										
TOTAL ACTUAL PEES & EXPENSES: \$7,000.00 PURCHASE ORDER #1, D2414220										
PURCHASE ORDER #: P2114238										
- $ -$										
Department Head Signature										
- H										

10300 Jones Road Houston, Texas 77065

(281) 897-4000

P.O. Box 692003 Houston, Texas 77269-2003

PART I: CONSULTANT SERVICES REQUEST FOR APPROVAL

(10000	Mathema and some	DEEDER PROPERTY	agreement bein	if acut and all	igned by consultant)						
Const	ultant Name/		The Hower	rd Group							
		g Address:		29551 Haclenda Drive, Valencia, CA 91354							
	Description of lude dates, au		February 1	.5, 2021; [or. Tyrone How	ard will pro	esent Keynote F	Race & Culture In	the		
	ocation and to		Teachers D	Virtual 4-	-Hour & Q & A;	8:00 a.m. ~	- 12:00 p.m. Au	dlence: Administ	trators &		
		Spic,	The second secon	CONTRACTOR OF THE PARTY OF THE	ted Expenses:	¢7500 01	1				
	Fund	Function	Class/Object	Subject	Organization	Program/ Project	Disbursement Amount	Vendor Number			
	2241	13	D8	899	F02W8	6299	PATRICIA				
Approv		epartment He	lead: Lauri 8	Jarnes	From 1	2			j		
Assist	tant Superinten	and the second s		ra Levandos	ski B/A	Munople					
	Associate !	Superintend	lent: Linda N	Macias	homital	ma	212				
	Director of Staf		Accepted Addition a resource	STATE OF THE PARTY	1 /	en	11	, , , , , , , , , , , , , , , , , , ,			
PART	II: CONSU	LTANTA	GREEMEN	TT (To be co	ampleted & signed by	v both the Prin	election and there Her	ed and consultant AFT			
This is a the cons	an agreement b sultant services	setween The	Howard Gr in exchange for	oup and Co	ypress-Fairbanks d compensation.	s I.S.D., her	ein known as the	od and consultant AFTi District, for the p	en approval		
D	Description of	Services:	February 1	5, 2021; D	or. Tyrone Howa	ard will pre	sent Kevnote R	ace & Culture in	44-0		
	ude dates, aud		Classroom v	VIRTUAL 4-F	Mour & Q & A, E	3:00 a.m	12:00 p.m. Au	dience: Administ	trators		
	ecation and to District agrees		er rescuerz	S DISTRICT-W	vide				1		
								uary 15, 2021. T			
It is s	agreed that the	a District is n	ant sagmangible	a far any at		on, includin	g but not limited	to, health, life, une	employment		
liability	resulting from	n the consults	ant's norfound	an oe neiu	namicas in any	action that n	might arise regard	ding personal or pr	rofessional		
This	instrument cor	nstitutes the	entire and on	ily agreeme	ent between the p	parties name	d and is made an	id entered this date	1/11/2021.		
Initiated				In A	greement with:		11				
	1	0			N	Tarant	Housed		•		
D-11 mad	The state of the s	YIX	>	-		Cor	ısultanı/Organi	ization Signature			
Departi	ment Wead Si	gnature			38.	3979518					
		•			50-5		dal Campity Mr.	ımber/FED ID#			
PART	III: APPLIC	TATION F	OD PAVM	ENT Cal	and and and	500	ilai Security ivu	mber/FED ID #			
ACTUA	L CONSULT	PANT PEE	**************************************	City (10 %	t completes and sup			R SERVICES are render	red)		
19010.0					A STATE OF THE STA	***************************************					
20-420			ns: \$	-	Meals:	\$					
T	TOTAL ACTU	JAL PEES	&					0-1-			
		EXPENSE	5: 5			PI	JRCHASE ORD	ER#: P213	8672		
					Tol	1					
					Deb	riment He	ad Signature				
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4 P	ease n	oturn)	itn Di	anas t	FLOWES @	750	3				