Contract Committee Review Request MUST BE COMPLETED IN FULL

Summary

MOST BE COMPLETED IN FULL	Date: 4.23.24
Contract/Agreement Vendor:	The Willie Spears Experience/Crystal Mills
Contract/Agreement vendor.	Name of Vendor & Contact Person
	crystal.mills913@gmail.com
	Vendor Email Address
	Back to School Kickoff Speaker
	Describe Contract (Technology, program, consultant-prof Development, etc.)
	Please use Summary below to fully explain the contract purchase , any titles, and details for the Board of Education to review.
	Kickoff/District Staff
	Reason/Audience to benefit
	6.3.24 \$5,000.00 BOE Date Amount of agreement
	BOE Date
Person Submitting Contract/A	greement for Review: Steve Dunn
PLEASE SEND THROUGH A	APPROPRIATE APPROVAL ROUTING BEFORE SENDING TO BOARD CLERK
Principal <u>&/or</u> Director or Adn	ninistrator:
Does this Contract/Agreemen	t utilize technology? YES/NO
If yes, Technology Admin:	C 40 (10 C C C C C C C C C C C C C C C C C C C
	S1
Cabinet Team Member:	An L. Dura
Funding Source: 60.987	
Funding Source: 60.987	ocas Coding
Back to Scho	ool Kickoff Speaker
<u> </u>	
Consent	
_	
Action	

The Contract/Agreement should be received at least 2 weeks prior to a Board Meeting to ensure placement on the Agenda. The Contract Committee meets most Tuesdays at 8:00a.m. All Contracts/Agreements, regardless the amount, must be first approved by the Contract Committee and then presented to the Board of Education for approval and signature. The item will be placed on Electronic School Board for the board agenda by Janet Brown. By following this process, the liability of entering into an agreement is placed with the district rather than an individual.

This area must be complete with full explanation of contract

Addison, Melissa A

From:

To:

Dunn, Steve L

Sent: Tuesday, April 23, 2024 1:59 PM

Addison, Melissa A

Subject: FW: TWSE Services Agreement

From: Smith, Dustin <dpsmith@baschools.org>

Sent: Sunday, April 21, 2024 6:03 PM
To: Dunn, Steve L <sldunn@baschools.org>
Subject: Fwd: TWSE Services Agreement

Get Outlook for iOS

From: Crystal Mills < crystal.mills913@gmail.com>

Sent: Sunday, April 21, 2024 5:44:29 PM **To:** Smith, Dustin <<u>dpsmith@baschools.org</u>>

Subject: TWSE Services Agreement

CAUTION: This email originated from outside of the district. Do not click links or open attachments unless you recognize the sender and know the content is safe.



Hello Dustin,

Please review the TWSE Services Agreement and let me know if any changes need to be made. You can access it by clicking the link below. Sign and return at your earliest convenience, thank you!

Contract Review/Sign

Enjoy the day!
Crystal Mills
405.370.9355
TWSE The Willie Spears Experience
Please visit our website at http://www.williespears.com.



Please review and sign the agreement below after filling in the spaces with the necessary information needed. Just let us know if you have any questions. Thank you!

Services Agreement

Services will be performed by **Willie Spears** of **The Willie Spears Experience** [referred to as Vendor]. This agreement made on March 14, 2024 agrees to perform services for Broken Arrow Public Schools [Referred to as Client].

Client: OK Broken Arrow Public Schools [Referred to as Client]

Client Address: 701 S. Main St. Broken Arrow, OK 74012

Date of Service: August 9, 2024

Time of Event: CST

Location of Event: 701 S. Main St. Broken Arrow, OK 74012

Contact: Dustin Smith [Referred to as Contact]

Contact Email: dpsmith@baschools.org

Contact Phone: 918-259-5700

Contact Cell Phone: 479-461-5524

Please select one of the following that best suits your event needs: Professional Development

- Keynote Speaker
- Motivational Speaker
- Professional Development
- Book Reading
- Mentorship
- Consulting
- Zoom
- Pre-Recorded Presentation
- · Faith Based Presentation
- Other

Speaking to all district staff for their Back-to-School Kickoff event.

Our mission at The Willie Spears Experience is to inspire others through dynamic presentations and other resources in an effort to add value.

Retainer

Broken Arrow Public Schools is not obligated to pay a retainer fee due to the district state purchasing laws and district purchasing policies and regulations. The amount in full will be paid after services are rendered.

An initial retainer (deposit amount indicated below) and a signed contract must be secured prior to any services being performed by Vendor. We request that a deposit of half of the fee be paid as soon as possible to hold the date. The balance is to be paid on the day of the event unless otherwise communicated. See the "Fee Schedule" below. A check, money order, or cashier's check can be mailed to *Willie Spears 7322 Rachel Way Panama City, FL 32404*. Other forms of payment are also available and include paying via PayPal or credit card. There will be a 5% processing fee for payments made via credit card. An invoice and receipt will be sent electronically.

Item Description	Fee	Due Date		
Event Fee (deposit)	0.00	8/9/24		
Event Fee (remainder)	0.00	8/9/24		
TOTAL FEE	5000	8/9/24		

Speaker Requests:

- Please provide information needed for the itinerary.
- Please provide room temperature bottled water for the event.
- Please provide a handheld microphone for the event.
- Please provide payment upon arrival on the day of the event.

Any copies of audio/video/photos that can be provided by you for our promotional and publicity purposes are greatly appreciated! Please forward to wspears05@gmail.com.

Feel free to use photos from our website for flyers if needed at www.williespears.com.

TWSE will provide the relevant biography for the event if needed.

All documentation created and provided to client is owned and copy written by Vendor and cannot be used or given to any other 3rd party.

Cancellation Policy

If event is canceled, no portion of the fees paid to Vendor will be returned. If the event is rescheduled, services contracted can be applied to an agreed upon new date.

In Witness Thereof, the parties hereto have determined this Services Agreement to be effective as of the day, month, and year first input above in Agreement Date. The undersigned have read this contract, understand its terms, and agree to be bound thereby. Any additions, deletions, or revisions must be made in writing and approved by all responsible parties. The parties agree that this contract is the complete and exclusive statement of the mutual understanding of the parties.

Contract Date: May 15, 2024

wspears05@gmail.com

Steve Allen ,BOE President
sjallen@baschools.org

**Signature required
Sjallen@baschools.org

**Willie Spears

Signed: May 20, 2024

The Willie Spears Experience

Willie Spears | (405) 370-9355 | crystal.mills913@gmail.com 7322 Rachel Way Panama City, FL, 32404

https://www.williespears.com











TWSE The Willie Spears Experience

Willie Spears
7322 Rachel Way
Panama City, FL 32404
405-370-9355
www.williespears.com

crystal.mills913@gmail.com

INVOICE

QUOTE7330

DATE

04/21/2024

DUE DATE

08/09/2024

BALANCE DUE

USD \$5,000.00

BILL TO

Broken Arrow Public Schools

Dustin Smith

701 S. Main St.

Broken Arrow, OK 74012

9182595700

4794615524

dpsmith@baschools.org

	RATE	QTY	AMOUNT
	\$5,000.00	1	\$5,000.00
l Kickoff			
TOTAL			\$5,000.00
		1100.0	hE 000 00
BALANCE DUE		บรบร	\$5,000.00
		\$5,000.00 Kickoff	\$5,000.00 1 Kickoff TOTAL

is paid online.

BY CHECK

The Willie Spears Experience

Contact Crystal Mills with any questions. crystal.mills913@gmail.com 405.370.9355 Thank you for the opportunity to add value!

Form **W-9**(Roy, October 2018)

(Rev. October 2018)

Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

Give Form to the requester. Do not send to the IRS.

	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.									
	WILLIE DAVID SPEARS, JR.									
	2 Business name/disregarded entity name, if different from above									
	THE WILLIE SPEARS EXPERIENCE		_					_		
page 3.	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.				4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):					
e. ns on	✓ Individual/sole proprietor or ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate single-member LLC			- 1	Exempt payee code (if any)					
r typ uctio	Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not					Exemption from FATCA reporting				
Print or type. Specific Instructions on page	LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.			;	code (if any)					
eci	☐ Other (see instructions) ▶					ccounts n		ed ou	side the	U.S.)
S	5 Address (number, street, and apt. or suite no.) See instructions.	quester's	nam	e and a	addres	s (opti	onal)			
See	7322 RACHEL WAY									
0,	6 City, state, and ZIP code									
	PANAMA CITY, FL 32404									
	7 List account number(s) here (optional)									
Par		10-	-1-10			.h.a.u			_	
Enter	rour TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid o withholding. For individuals, this is generally your social security number (SSN). However, for a		ciai s	ecurit	y nun	Der		-1	-	$\overline{}$
reside	nt alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other				-		-			
entitie	s, it is your employer identification number (EIN). If you do not have a number, see How to get a					\perp		_		\perp
T/N, later. Note: If the account is in more than and name see the instructions for line 1. Also see What Name and Employer identification number					7					
Note:	f the account is in more than one name, see the instructions for line 1. Also see What Name and or To Give the Requester for guidelines on whose number to enter.	H	, p.c.,						╡	
7 441116	, ro dito the requester to galeonice or three terms of the second	9	2	1=-1	3 2	7	8	4	2 9	9
Par	II Certification									
	penalties of perjury, I certify that:									
2.1 an Ser	number shown on this form is my correct taxpayer identification number (or I am waiting for a nu not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I hat rice (IRS) that I am subject to backup withholding as a result of a failure to report all interest or di onger subject to backup withholding; and	ave not l	beer	ı notifi	ed by	/ the li	ntern	al R	even that	ue : I am
	a U.S. citizen or other U.S. person (defined below); and									
	FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is	correct								
Certifi you ha	cation instructions. You must cross out item 2 above if you have been notified by the IRS that you are failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does tion or abandonment of secured property, cancellation of debt, contributions to an individual retirementary interest and dividends, you are not required to sign the certification, but you must provide your contents.	re curren es not ap ent arran	tly s ply. geme	For m ent (IR	ortga A), an	ge inte id geni	rest erally	paid , pa	, ymen	ts
Sign Here	Signature of U.S. person ► Willis D. Spears, Or. Date	•	4	123	12	4				
Ger	• Form 1099-DIV (divide funds)	ends, inc	ludir	ng tho	se fro	om sto	cks	or m	nutua	I

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

• Form 1099-INT (interest earned or paid)

- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.



TWSE The Willie Spears Experience

Willie Spears
7322 Rachel Way
Panama City, FL 32404

405-370-9355

www.williespears.com crystal.mills913@gmail.com INVOICE

INV7330

DATE

05/21/2024

DUE DATE

08/09/2024

BALANCE DUE

USD \$5,000.00

BILL TO

Broken Arrow Public Schools

Janet Brown
701 S. Main St.
Broken Arrow, OK 74012
9182595731
jlbrown@baschools.org

Professional Development \$5,000.00 • Speaking to all district staff for their Back-to-School Kickoff TOTAL Payment Info BALANCE DUE U		
Speaking to all district staff for their Back-to-School Kickoff TOTAL Payment Info BALANCE DUE U	ATE QTY	/ AMOUNT
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	LISD	\$5,000.00
		Ψ0,000.00

Contact Crystal Mills with any questions. crystal.mills913@gmail.com 405.370.9355 Thank you for the opportunity to add value!

The Willie Spears Experience

Brown, Janet L

From:	Crystal Mills <crystal.mills913@gmail.com></crystal.mills913@gmail.com>						
Sent:	Tuesday, May 21, 2024 2:42 PM						
To:	Brown, Janet L						
Subject:	Re: BROKEN ARROW PUBLIC SCHOOLS						
Attachments:	W-9 RACHEL WAY-2.pdf						
CAUTION: This email origin and know the content is sa	nated from outside of the district. Do not click links or open attachments unless you recognize the sender afe.						
problems, but I can send	u right away. Our invoices come from an app called Invoice Simple. You shouldn't have any d in pdf if you prefer. I'm also attaching a copy of our W-9 that we send out to all clients. Just le docusign with a signature and/or dated and I can get that. Thank you!						
On Tue, May 21, 2024 a	t 2:28 PM Brown, Janet L < <u>ilbrown@baschools.org</u> > wrote:						
Great!							
Thank you so much!	So you will submit an invoice to BAPS?						
Janet Brown							
Board Clerk							
701 South Main St	reet						
Broken Arrow, O	रlahoma 74012						
(918) 259-5731							
ilhroung @haschook							

On Tue, May 21, 2024 at 10:14 AM Brown, Janet L < ilbrown@baschools.org wrote: Hello! On the Willie Spears Experience contract, the payment terms listed are that we pay the day of the event. Being a public school district, we can't do that. We will need an invoice to pay from and net 30 day payment terms. Are you able to provide these things for us? I do not need you to redo the contract, just respond to this email letting me know that you agree to these new terms. Please let me know as soon as possible. Thank you! Janet Brown **Board Clerk**

(918) 259-5731

jlbrown@baschools.org

701 South Main Street

Broken Arrow, Oklahoma 74012

