

Fee for Service SERVICE PROPOSAL



COST

DATE ____

CONTRACTOR INFORMATION

DISTRICT/AGENCY LEGAL NAME: Newport-Mesa USD

SIGNATURE _____

CONTACT NAME/TITLE: Michelle O'Neill

CONTACT PHONE: 949-515-6793 CONTACT EMAIL: moneill@nmusd.us

ADDRESS FOR CONTRACT: 220 23rd St. Costa Mesa CA 92627

TODAYS DATE: October 9, 2018

	COST
CLASS Assessment - Instructional Support Domain with an emphasis in Concept Development Dimension	\$500.00
Total Proposed Services not to exceed:	\$500.00
JUSTIFICATION: Newport-Mesa USD is requesting professional development	
DATE(S) OF SERVICE: November 1, 2018	
TIME OF SERVICE: 8:30-12:30pm	
SERVICE LOCATION (location of training): Lindbergh Bldg. C., 220 23 rd St. Costa Mesa, CA 92627	
TOTAL DOLLAR AMOUNT: \$500.00	
ORIGINATOR: Susan Shepardson	
To be completed by contracting agency	
I have reviewed the above service proposal and find it to be correct.	
NAME	