

Rock Island-Milan School District 41

VENDOR NAME: Tri State Travel **EMAIL:** ekaiser@tristatetravel.com

ADDRESS: 530 W 76th St Davenport, IA 52806

DATES OF SERVICE TO BE COMPLETED: 2025-2026 Season

SCHOOL DISTRICT CONTACT: Mike Emendorfer

COMPENSATION: \$ not to exceed ~~70,000~~ \$85,000.00

DESCRIPTION OF DUTIES:

Transportation to and from Event's.

Is this a Subscription/Software: Yes or No

NO, go to next section. If YES, complete below, then go to next section (no vendor signature)

Subscription/Software Name: _____ **Website:** _____

Subscription/Software Start Date: _____ **END Date:** _____

DPPA Approved: Yes or No

Requesting School: RIHS, EJHS, WJHS

Budget Code: 1-5-100-000-1501-3250

Signature of Vendor: Celeste Cook **Date:** 6/10/2025

Signature of Budget Administrator: [Signature] **Date:** 7-15-25

Superintendent or School Board President **Date**