

Local Public Agency Formal Contract

Contractor's Name	- 0					
Samron Midwest Contracting						
Contractor's Address	City			State	Zip Code	
P.O. Box 1555	Murph	nysboro		IL.	62966	
					<u> </u>	
STATE OF ILLINOIS						
Local Public Agency		County Section Number		lumber		
Franklin County	Franklin 24-00195-00-R		95-00-RS			
Street Name/Road Name		Type of Funds				
FAS 1877/Yellowbanks Road		RBI				
CONTRACT BOND (when required)						
	ř					
For a County and Road District Project	For a Municipal Project					
Submitted/Approved		Submitted/Approved/Passed				
Highway Commissioner Signature & Date	Sign	Signature & Date				
	Offic	cial Title				
Submitted/Approved		idi Titio				
County Engineer/Superintendent of HighwaysSignature & Date						
	1000000					
3/17/2 Department of Transportation					n	
	Concurrence in approval of award					
	Reg	Regional Engineer Signature & Date				
	- L					

Local Publ	ic Agency	Local Street/Road Name		County	Section Number		
Franklin	County	FAS 1877/Yellowbar	nks Road	Franklin	24-00195-00-RS		
1. THIS A	AGREEMENT, made and concluded the	7	PCN 2025 between	een the County	Public Agency Type		
of Franklin , known as the party of the first part, and Samron Midwest Contraction							
its suc	Local Public Agency cessor, and assigns, known as the pa	rty of the second part.		Contracto	or .		
the pa	d in consideration of the payments an rty of the first part, and according to the aid party of the first part, at its own pro- ate the work in accordance with the plantract.	ne terms expressed in the E oper cost and expense, to d	Bond referring this conti to all the work, furnish a	ract, the party of thall materials and al	ne second part agrees		
3. It is als	o understood and agreed that the LP	A Formal Contract Proposa	al, Special Provisions, A	Affidavit of Illinois E	Business Office,		
Apprer	nticeship or Training Program Certifica	ation, and Contract Bond he	ereto attached, and the	Plans for Section	24-00195-00-RS Section Number		
in <u>Fra</u>	nklin County	approved by the Illinois De	epartment of Transport	The second secon			
docum	Local Public Agency ents of this contract and are a part he	reof.		Dat	e		
4. IN WIT	NESS WHEREOF, the said parties h	ave executed this contract	on the date above men	tioned.			
Attest:		The County	of Frankl				
Clerk Sig	nature & Date	Local Public Agenc		Name of Local P	ublic Agency		
Olon Olg			Party of the First Part	Signature & Date			
	Tem Wills	By	1///				
1 2 2 3 3 4 3 c	KEVI		14-2		3/17/25		
(SEAP, if re	quired by the LPA)			(If a Corporation)	0 &		
F	12 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Corporate Name				
	9:		Samron Mid	West Contra	icting Inc.		
			President, Party of the Second Part Signature & Date				
2	3.	Ву	0		504		
ISEAL if to	autraid by the LPA)		_ \ <i>U</i>		2.11.2025		
(SLAG, IIIC	(SEAL, if required by the LPA) (If a Limited Liability Corporation) LLC Name						
* # ts	3 6 5 5						
			Manager or Authorize	d Member Party	of the Second Part		
		Ву	: Manager of Authorize	d Member, Farty C	of the Second Part		
2 1, 100	-g**		121 1 221 E 12	(If a Partnership)			
457-2244-45794	10,,,,,		Partner Signature & D	Date			
Samon	Mark						
Attest:	0						
Secretary S	Igrature & Date		Partner Signature & D	Date			
203	7 9/3/						
5	2.11.20	125					
214	1100		Partners doing	Business under th	ne firm name of		
(SEAL, if re-	quired by the LPA)		Party of the Second F	Part			
			(If an individual)				
			Party of the Second P		ate		