

PROFESSIONAL SERVICES ENGAGEMENT AGREEMENT

Jackson County, Missouri
Office of the County Counselor of Jackson County
and
Branch Recruiting

This Professional Services Engagement Agreement ("Agreement") is entered into as of the ___ day of _____, 20__, by and between Legal Analytics LLC dba Branch Recruiting, a Limited Liability Company ("Contractor"), and Jackson County, Missouri ("County").

1. PURPOSE

Jackson County engages Contractor to provide professional recruiting and talent acquisition services for the Office of the County Counselor of Jackson County.

2. SCOPE OF SERVICES

Contractor shall perform recruiting services including sourcing, outreach, screening, job posting, candidate review, interview coordination, reporting, and additional mutually agreed services.

3. TERM

Agreement begins on the date this Agreement is signed and ends on December 31, 2026, unless terminated earlier.

4. COMPENSATION

County will compensate Contractor per agreed fee structure of twelve percent (12%) of the hired new employee's first year's annual salary exclusive of benefits, signing bonus or other incentives. "Hired" is defined as "an offer extended by the County to one of Contractor's candidates and accepted by candidate." Invoices will be submitted to Jackson County for electronic payment within 20 days of receipt.

5. GUARANTEE

Contractor will provide the County with a 90-day guarantee, provided the County pays the invoice per the terms of this Agreement, should the hired employee leave the position on their own accord or should the County terminate the hired employee for cause. The 90-day guarantee begins on the first day of the hired employee's employment.

6. INDEPENDENT CONTRACTOR STATUS

Contractor is an independent contractor and not an employee or agent of the County.

6. CONFIDENTIALITY

Contractor must maintain confidentiality of non-public information.

FILED

JAN 13 2026

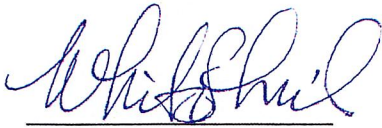
MARY JO SPINO
COUNTY CLERK

7. TERMINATION

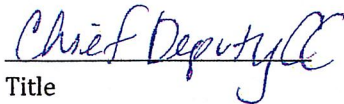
County may terminate for convenience with 30 days' notice. Either party may terminate for cause with 10 days' notice. All unpaid invoices are due and payable at the time of termination.

8. GOVERNING LAW

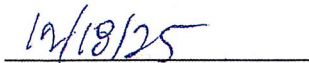
This Agreement is governed by Missouri law with venue in Jackson County.



Name



Title



Date

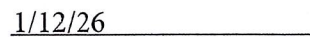
On behalf of Jackson County, Missouri
Office of the County Counselor



Name

Owner

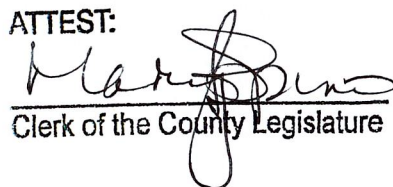
Title



Date

On behalf of Legal Analytics LLC dba Branch Recruiting

ATTEST:


Clerk of the County Legislature

R. 22142

REVENUE CERTIFICATE

There is a balance otherwise unencumbered to the credit of the appropriation to which the expenditure is chargeable, and there is a cash balance otherwise unencumbered in the treasury to the credit of the fund from which payment is to be made, each sufficient to provide for the obligation of \$15,000.00 which is herein authorized.

1/8/2026
Date

Cheryl L. Colter
Director of Finance and Purchasing
Account No. 001-1101-56020

SCON-10001530 DM

**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.

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific Instructions on page 3.	1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.) Legal Analytics LLC	
	2 Business name/disregarded entity name, if different from above. DBA Branch Recruiting	
	3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input checked="" type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) C Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions)	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____ (Applies to accounts maintained outside the United States.)
	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions <input type="checkbox"/>	
	5 Address (number, street, and apt. or suite no.). See instructions. 6324 N. Chatham Ave, #185	Requester's name and address (optional)
6 City, state, and ZIP code Kansas City, MO 64151		
7 List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Social security number								
			-					
or								
Employer identification number								
8	1	-	4	2	1	1	1	5

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person	Date
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General Instructions

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.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they