

**AGENDA ITEM:** Independent Contractor Agreements

**Prepared by:** Kevin Bultema

☒ Consent

Board Date September 7, 2016

☐ Information Only

☐ Discussion/Action

### **Background Information**

Per Board Policy 3600 Consultants/Independent Contractor, all Consultant/Independent Contractor Agreements shall be brought before the board for approval.

### **Educational Implications**

Per Board Policy 3600, the Board of Education authorizes the use of consultants/independent contractors to provide expert professional advice or specialized technical or training services which are not needed on a continuing basis and which cannot be provided by district staff because of limitations of time, experience or knowledge. Individuals, firms or organizations employed as consultants may assist management with decisions and/or project development related to financial, economic, accounting, engineering, legal, administrative, instructional or other matters.

### **Fiscal Implications**

Consultant/Independent Contractor Agreement(s) to be paid from accounts noted on approval forms.



Administrative Offices  
1163 E. Seventh Street  
Chico, CA 95928-5999

530/891-3000  
fax 891-3220  
www.ChicoUSD.org

### Independent Contractor Agreement

Completed By: Jeff Webber

Phone: (630) 520-6157

1. This Agreement is made by and between Chico Unified School District and:

Name: Webb Air  
Email Address: Jeff@webbairchico.com  
Street Address/POB: 1287 Glenshire Lane  
City, State, Zip Code: Chico, Ca 95973  
Phone: (630) 520-6157  
Taxpayer ID/SSN:

This agreement will be in effect From: 8/25/16  
Site Code:

To: 9/30/16  
Location(s) of Services: District wide

2. Scope of Work to be performed and Goal (Strategic Plan, Site Plan, Other) to be achieved as a result of Independent Contractor Services (attach separate sheet if necessary):

a. Scope of Work: HVAC Repairs

b. Goal (if applicable):

3. Funding/Program/Grant Affected (corresponding to accounts listed in item 4):

a. 01-8150-0-0000-8140-5600-600-6000

b.   
c.

4.	Percent (%)	Fund	Resource	Project/Year	Goal	Function	Object	Site	Manager
1	0.00%						5800		
2	0.00%						5800		
3	0.00%						5800		

5. Payment to Independent Contractor for services actually rendered and supported by Independent Contractor initiated Invoices, the District will pay the Independent Contractor not to exceed the payment criteria as follows:  
\$ 7500 Hourly Rate X 1 # Hours = \$ 7500 Total for Services  
(For Flat Rate fees, please place the flat rate under "hourly rate" and use "1" for number of hours.)

Additional Expenses (if applicable, in the event of changes to service or other expense types)

Item:

\$

Item:

\$

\$ 0.00 Total of Additional Expenses

\$ 0.00 Grand Total (Services + Additional Expenses)

6. Completed BS10A "Certificate of Independent Consultant Agreement" guideline is: ☐ On File ☒ Attached

7. Completed W9 "Request for Taxpayer Identification Number/Certification" form is: ☐ On File ☒ Attached

BP 3600 states all Consultants/Independent Contractor contracts shall be brought to the Board for Approval.

Board Approval Date:

Board authorizing signature:




INDEPENDENT CONTRACTOR TERMS AND CONDITIONS

Independent Contractor Name: Jeff Webber

CA#

1. The Independent Contractor will perform said services independently, not as an employee of the District; therefore, the District is not liable for worker's compensation or unemployment benefits in connection with this Independent Contractor Agreement. Independent Contractor shall assume full responsibility for payment of all Federal, State and Local taxes or contributions, including Unemployment Insurance, Social Security, and Income Taxes with respect to Independent Contractor's employees.
2. Independent Contractor shall furnish, at his/her own expense, all labor, materials, equipment and other items necessary to carry out the terms of this Agreement, unless agreed upon under Additional Expenses on page 1 of this Agreement.
3. In the performance of the work herein contemplated, the Independent Contractor with the authority to control and direct the performance of the details of the work, the District being interested in the results obtained.
4. If applicable, the Independent Contractor will certify in writing, using Administration Form #3515.6, that criminal background checks have been completed as per Board Policy #3515.6 prior to commencement of services. This requirement also applies to any subcontractors or employees utilized by the Independent Contractor.
5. Independent Contractor agrees to defend, indemnify and hold harmless the District, its Board of Trustees, employees and agents from any and all liability or loss arising in any way out of Independent Contractor's negligence in the performance of this Agreement, including, but not limited to, any claim due to injury and/or damage sustained by Independent Contractor, and/or the Independent Contractor's employee or agents.
6. Independent Contractor will provide to Assistant Superintendent, Business Services, upon request, a Certificate of Insurance showing a minimum \$1,000,000 combined single limits of general liability and automobile coverage as required by the District.
7. Neither party shall assign nor delegate any part of this Agreement without the written consent of the other party.
8. The work completed herein must meet the approval of the District and shall be subject to the District's general right of inspection to secure the satisfactory completion thereof. Independent Contractor agrees to comply with all Federal, State, Municipal and District laws, rules and regulations that are now, or may in the future become applicable to Independent Contractor, Independent Contractor's business, equipment and personnel engaged in operations covered by this Agreement or occurring out of the performance of such operations.
9. The Independent Contractor will be paid by vendor check as an Independent Contractor.
10. Independent Contractor shall provide an original invoice to the Originating Administrator. Independent Contractor shall be paid within 30 days of receipt of invoice and authorization of payment forwarded to the CUSD Accounts Payable department along with the original invoice.
11. Either party may terminate this agreement, with or without cause, upon 30 days' written notice to the other. Vendor shall be paid for work actually performed as of the date of receipt of such notice.

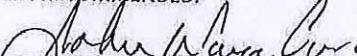
12. AGREED TO AND ACCEPTED:

  
Signature of Independent Contractor

Jeff Webber  
Printed Name

8/24/16  
Date

13. RECOMMENDED:

  
Signature of Originating Administrator

John Craven  
Printed Name

8-24-16  
Date

14. APPROVED:

\_\_\_\_\_  
Signature of District Administrator OR  
Director of Categorical Programs

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

15. APPROVED:

\_\_\_\_\_  
Signature of District Administrator,  
Business Services

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

16. AUTHORIZATION FOR PAYMENT  
CHECK REQUIRED

(Invoice to accompany payment request):

☐ Partial Payment through: \_\_\_\_\_

☐ Full or Final Payment

DISPOSITION OF CHECK by Accounts Payable:  
(check released upon completion of services)

☐ Send to Site Administrator (date): \_\_\_\_\_

☐ Mail to Independent Contractor

\$ \_\_\_\_\_  
Amount

\_\_\_\_\_  
Originating Administrator Signature (Blue Ink)

\_\_\_\_\_  
Date





ICA# \_\_\_\_\_



Administrative Offices  
1163 E. Seventh Street  
Chico, CA 95928-5999

530 891 3000  
Fax 891 3220  
www.ChicoUSD.org

### ASB Independent Contractor Agreement

Completed By: Dene EhrhartPhone: (530) 864-0586

1. This Agreement is made by and between Chico Unified School District Chico High ASB and:

Name: Jennifer StuartEmail Address: jstuartster@gmail.comStreet Address/POB: 1450 Springfield Drive Apt. # 177City, State, Zip Code: Chico, CA. 95928

Phone: \_\_\_\_\_

Taxpayer ID/SSN: \_\_\_\_\_

This agreement will be in effect From: 9/1/16To: 10/28/16Site Code: 010Location(s) of Services: Bidwell Junior High Pool

2. Scope of Work to be performed and Goal (Strategic Plan, Site Plan, Other) to be achieved as a result of Independent Contractor Services (attach separate sheet if necessary):

a. Scope of Work: Jennifer will be working on strength and conditioning with the swimmers to increase overall endurance.

b. Goal (if applicable): To improve and increase swimmers strength and endurance.

3. ASB Account(s) Affected

a. Swimming

ASB Account #

650

Percentage

100.00%

b. \_\_\_\_\_

0.00%

c. \_\_\_\_\_

0.00%

4. Payment to Independent Contractor for services actually rendered and supported by Independent Contractor initiated invoices, the District will pay the Independent Contractor not to exceed the payment criteria as follows:

\$ 1,000.00 Hourly Rate X 1.00 # Hours = \$ 1,000.00 Total for Services

(For Flat Rate fees, please place the flat rate under "hourly rate" and use "1" for number of hours.)

Additional Expenses (if applicable, in the event of changes to service or other expense types)

Item: \_\_\_\_\_

\$ \_\_\_\_\_

Item: \_\_\_\_\_

\$ \_\_\_\_\_

\$ 0.00 Total of Additional Expenses\$ 1,000.00 Grand Total (Services + Additional Expenses)

5. Completed BS10A "Certificate of Independent Consultant Agreement" guideline is: ☐ On File ☒ Attached

6. Completed W9 "Request for Taxpayer Identification Number/Certification" form is: ☐ On File ☒ Attached

BP 3600 states all Consultants/Independent Contractor contracts shall be brought to the Board for Approval.

Board Approval Date: \_\_\_\_\_

Board authorizing signature: \_\_\_\_\_



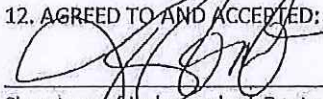
**INDEPENDENT CONTRACTOR TERMS AND CONDITIONS**

Independent Contractor Name: **Jennifer Stuart**

ICA#

1. The Independent Contractor will perform said services independently, not as an employee of the District; therefore, the District is not liable for worker's compensation or unemployment benefits in connection with this Independent Contractor Agreement. Independent Contractor shall assume full responsibility for payment of all Federal, State and Local taxes or contributions, including Unemployment Insurance, Social Security, and Income Taxes with respect to Independent Contractor's employees.
2. Independent Contractor shall furnish, at his/her own expense, all labor, materials, equipment and other items necessary to carry out the terms of this Agreement, unless agreed upon under Additional Expenses on page I of this Agreement.
3. In the performance of the work herein contemplated, the Independent Contractor with the authority to control and direct the performance of the details of the work, the District being interested in the results obtained.
4. If applicable, the Independent Contractor will certify in writing, using Administration Form #3515.6, that criminal background checks have been completed as per Board Policy #3515.6 prior to commencement of services. This requirement also applies to any subcontractors or employees utilized by the Independent Contractor.
5. Independent Contractor agrees to defend, indemnify and hold harmless the District, its Board of Trustees, employees and agents from any and all liability or loss arising in any way out of Independent Contractor's negligence in the performance of this Agreement, including, but not limited to, any claim due to injury and/or damage sustained by Independent Contractor, and/or the Independent Contractor's employee or agents.
6. Independent Contractor will provide to Assistant Superintendent, Business Services, upon request, a Certificate of Insurance showing a minimum \$1,000,000 combined single limits of general liability and automobile coverage as required by the District.
7. Neither party shall assign nor delegate any part of this Agreement without the written consent of the other party.
8. The work completed herein must meet the approval of the District and shall be subject to the District's general right of inspection to secure the satisfactory completion thereof. Independent Contractor agrees to comply with all Federal, State, Municipal and District laws, rules and regulations that are now, or may in the future become applicable to Independent Contractor, Independent Contractor's business, equipment and personnel engaged in operations covered by this Agreement or occurring out of the performance of such operations.
9. The Independent Contractor will be paid by vendor check as an Independent Contractor.
10. Independent Contractor shall provide an original invoice to the Originating Administrator. Independent Contractor shall be paid within 30 days of receipt of invoice and authorization of payment forwarded to the CUSD Accounts Payable department along with the original invoice.
11. Either party may terminate this agreement, with or without cause, upon 30 days' written notice to the other. Vendor shall be paid for work actually performed as of the date of receipt of such notice.

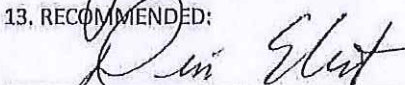
12. AGREED TO AND ACCEPTED:

  
Signature of Independent Contractor

Jennifer Stuart  
Printed Name

8/15/16  
Date

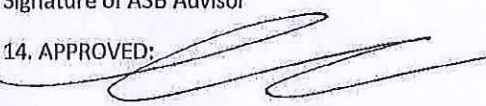
13. RECOMMENDED:

  
Signature of ASB Advisor

Denise Ehrhart  
Printed Name

8/15/16  
Date

14. APPROVED:

  
Signature of Site Administrator

Mark Bueh  
Printed Name

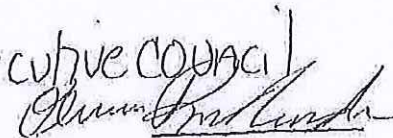
8/24/16  
Date

15. APPROVED:

\_\_\_\_\_  
Signature of District Administrator,  
Business Services

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

ASB EXECUTIVE COUNCIL  


16. ASB Approved Purchase Order #

99076

  
Signature of ASB Accounting Technician

  
Originating Administrator Signature (Blue Ink)

8/24/16  
Date



CA# \_\_\_\_\_



**Administrative Offices**  
1163 E. Seventh Street  
Chico, CA 95928-5999

530/891-3000  
fax 891-3220  
www.ChicoUSD.org

### ASB Independent Contractor Agreement

Completed By: Chlp Carton Phone: (530) 521-1081

1. This Agreement is made by and between Chico Unified School District ASB and:

Name: NCVOA-Chico  
Email Address: howell\_terese@yahoo.com  
Street Address/POB: 415 Silver Lake Drive  
City, State, Zip Code: Chico, CA 95973  
Phone:                       
Taxpayer ID/SSN:                     

This agreement will be in effect From: 8/1/16 To: 6/30/17  
Location of Services: Chico High

2. Scope of Work to be performed and Goal (Strategic Plan, Site Plan, Other) to be achieved as a result of Independent Contractor Services:

a. Scope of Work: Provide Officials for Volleyball games involving Chico High as the host school **11**

b. Goal (if applicable): Provide Students of CHS with fair and safe athletic contests as required by CIF guidelines.

3. ASB account name(s) paying for services:	ASB account #:	Amount:
a. <u>CHS Boys Volleyball</u>	<u>670</u>	\$ <u>\$2,000.00</u>
b. <u>                                    </u>	<u>                    </u>	\$ <u>                    </u>
c. <u>                                    </u>	<u>                    </u>	\$ <u>                    </u>

4. Payment to Independent Contractor for services actually rendered and supported by Independent Contractor Initiated invoices, the District will pay the Independent Contractor not to exceed the payment criteria as follows:

\$ \$2,000.00 Hourly Rate X 1.00 # Hours = \$ \$2,000.00 Total for Services

(For Flat Rate fees, please place the flat rate under "hourly rate" and use "1" for number of hours.)

Additional Expenses (if applicable, in the event of changes to service or other expense types)

Item:	\$ <u>                    </u>
Item:	\$ <u>                    </u>
	\$ <u>0.00</u> Total of Additional Expenses
	\$ <u>\$2,000.00</u> Grand Total (Services + Additional Expenses)

5. Completed BS10A "Certificate of Independent Consultant Agreement" guideline is: ☒ On File ☐ Attached
6. Completed W9 "Request for Taxpayer ID Number/Certification" form is: ☒ On File ☐ Attached

BP 3600 states all Consultants/Independent Contractor contracts shall be brought to the Board for Approval.  
Board Approval Date: \_\_\_\_\_ Board authorizing signature: \_\_\_\_\_

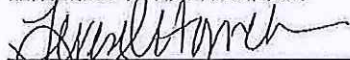
**INDEPENDENT CONTRACTOR TERMS AND CONDITIONS**

Independent Contractor Name: NCVOA-Chico

CA#

1. The Independent Contractor will perform said services independently, not as an employee of the District; therefore, the District is not liable for worker's compensation or unemployment benefits in connection with this Independent Contractor Agreement. Independent Contractor shall assume full responsibility for payment of all Federal, State and Local taxes or contributions, including Unemployment Insurance, Social Security, and Income Taxes with respect to Independent Contractor's employees.
2. Independent Contractor shall furnish, at his/her own expense, all labor, materials, equipment and other items necessary to carry out the terms of this Agreement, unless agreed upon under Additional Expenses on page 1 of this Agreement.
3. In the performance of the work herein contemplated, the Independent Contractor with the authority to control and direct the performance of the details of the work, the District being interested in the results obtained.
4. If applicable, the Independent Contractor will certify in writing, using Administration Form #3515.6., that criminal background checks have been completed as per Board Policy #3515.6 prior to commencement of services. This requirement also applies to any subcontractors or employees utilized by the Independent Contractor.
5. Independent Contractor agrees to defend, indemnify and hold harmless the District, its Board of Trustees, employees and agents from any and all liability or loss arising in any way out of Independent Contractor's negligence in the performance of this Agreement, including, but not limited to, any claim due to injury and/or damage sustained by Independent Contractor, and/or the Independent Contractor's employee or agents.
6. Independent Contractor will provide to Assistant Superintendent, Business Services, upon request, a Certificate of Insurance showing a minimum \$1,000,000 combined single limits of general liability and automobile coverage as required by the District.
7. Neither party shall assign nor delegate any part of this Agreement without the written consent of the other party.
8. The work completed herein must meet the approval of the District and shall be subject to the District's general right of inspection to secure the satisfactory completion thereof. Independent Contractor agrees to comply with all Federal, State, Municipal and District laws, rules and regulations that are now, or may in the future become applicable to Independent Contractor, Independent Contractor's business, equipment and personnel engaged in operations covered by this Agreement or occurring out of the performance of such operations.
9. The Independent Contractor will be paid by vendor check as an Independent Contractor.
10. Independent Contractor shall provide an original invoice to the Originating Administrator. Independent Contractor shall be paid within 30 days of receipt of invoice and authorization of payment forwarded to the CUSD Accounts Payable department along with the original invoice.
11. Either party may terminate this agreement, with or without cause, upon 30 days' written notice to the other. Vendor shall be paid for work actually performed as of the date of receipt of such notice.

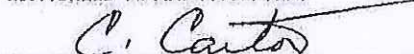
**12. AGREED TO AND ACCEPTED:**

  
Signature of Independent Contractor

Terese Howell  
Printed Name

7/5/14  
Date


**13. AGREED TO AND ACCEPTED:**

  
Signature of ASB Advisor

Chip Carton  
Printed Name

6/23/16  
Date

**14. APPROVED:**

  
Signature of Site Administrator

Mark H. Burk  
Printed Name

6/17/16  
Date

**15. APPROVED:**

\_\_\_\_\_  
Signature of District Administrator,  
Business Services

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

ASB APPROVED PO # \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF ASB OFFICER

\_\_\_\_\_  
PRINTED NAME AND TITLE

\_\_\_\_\_  
DATE



CHICO UNIFIED SCHOOL DISTRICT  
1163 E. 7<sup>th</sup> Street, Chico, CA 95928  
(530) 891-3000  
**CONSULTANT AGREEMENT**

**For Services Provided to ASB**

1. A completed BS10a. "Guidelines for Employing Independent Contract Consultants" certificate is:

On File   X   Attached       

2. A completed W9 "Request for Taxpayer Identification Number and Certification" form is:

On File   X   Attached       

*This Agreement to furnish certain consulting services is made by and between Chico Unified School District ASB and:*

Name: NSCOA (Wrestling)

Address: 4340 Tuliyani Dr.

City, State, Zip

Chico, CA 95973

Phone:

Taxpay:

From: August 2016

To: May 2017

*This agreement will be in effect (Current Fiscal Year)*

*Location(s) of Services: Pleasant Valley High School*

3. Scope of Work to be performed: (attach separate sheet if necessary)  
Game officials for the 2016-17 wrestling season

4. Goal (Strategic Plan, Site Plan, Other) to be achieved as a result of Consultant services:

5. ASB account name to be Charged: (corresponding to accounts below)

- 1) ASB Wrestling #680
- 2) Athletic Wrestling #138
- 3)
- 4)

6. Account(s) to be Charged:

	Account #	Amount
1) Wrestling	680	\$1,000.00
2) Wrestling	138	\$ 500.00
3)		

7. Payment to Consultant: (for the above services, ASB will pay Consultant as follows)

\$	200.00	Per Unit, times	7	# Units =	\$	1,500.00	Total for Services
Unit:	Per Hour	Per Day	X	Per Activity)			

8. Additional Expenses: (i.e. mileage, hotel, air fare, etc)

\$  
\$  
\$

Total for

\$

Addit'l Expense

\$ 1,500.00

**Grand Total**  
(not to exceed)

9. Amounts of \$5,001.00 or more require Board Approval: (date to Board)

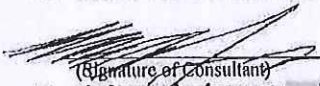
(to be completed by Business Services)



CA# \_\_\_\_\_

**CONSULTANT TERMS AND CONDITIONS**(Applicable, unless determined to be Contract Employee – See BS10a)

- a. The Consultant will perform said services independently, not as an employee of the District; therefore, the District is not liable for worker's compensation or unemployment benefits in connection with this Consultant Agreement. Consultant shall assume full responsibility for payment of all Federal, State and Local taxes or contributions, including Unemployment Insurance, Social Security, and Income Taxes with respect to Consultant's employees. (Not applicable to Contract Employee)
- b. Consultant shall furnish, at his/her own expense, all labor, materials, equipment and other items necessary to carry out the terms of this Agreement, unless agreed upon under Additional Expenses on page 1 of this Agreement.
- c. In the performance of the work herein contemplated, Consultant is an independent contractor, with the authority to control and direct the performance of the details of the work, the District being interested in the results obtained.
- d. If applicable, the Consultant will certify in writing, using Administration Form #3515.6.1, that criminal background checks have been completed as per Board Policy #3515.6 prior to commencement of services. This requirement also applies to any subcontractors or employees utilized by the Consultant.
- e. Consultant agrees to defend, indemnify and hold harmless the District, its Board of Trustees, employees and agents from any and all liability or loss arising in any way out of Consultant's negligence in the performance of this Agreement, including, but not limited to, any claim due to injury and/or damage sustained by Consultant, and/or the Consultant's employee or agents.
- f. Consultant will provide to Assistant Superintendent, Business Services, upon request, a Certificate of Insurance showing a minimum \$1,000,000 combined single limits of general liability and automobile coverage as required by the District. (Not applicable to Contract Employee)
- g. Neither party shall assign nor delegate any part of this Agreement without the written consent of the other party.
- h. The work completed herein must meet the approval of the District and shall be subject to the District's general right of inspection to secure the satisfactory completion thereof. Consultant agrees to comply with all Federal, State, Municipal and District laws, rules and regulations that are now, or may in the future become, applicable to Consultant, Consultant's business, equipment and personnel engaged in operations covered by this Agreement or occurring out of the performance of such operations.

11. **AGREED TO AND ACCEPTED:** (If determined to be a Contract Employee, a payroll check will be issued with applicable taxes withheld.)
  
 (Signature of Consultant)

Mark Hernandez  
 (Print Name)

8/11/16  
 (Date)
12. **RECOMMENDED**
  
 (Signature of Originating Faculty Advisor)

(Print Name)

(Date)

Admin &amp; Business Services

ASB Requisition/PO # 17089 issued by ASB \*\*

\*\*ASB Requisition/PO# required before C.A. submitted to District for approval.

**APPROVED:**
Haley Barnhart  
 (Signature of ASB Officer)

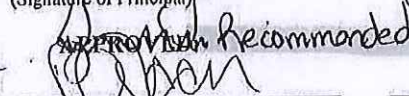
Haley Barnhart ASB Secretary  
 (Print Name and Title)

5/17/16  
 (Date)

  
 (Signature of Principal)

John Shepherd Principal  
 (Print Name and Title)

5/18/16  
 (Date)

  
 (Signature of Originating Faculty Admin)

Pam Jackson  
 (Print Name and Title)

5/18/16  
 (Date)

 (Signature of Administrator - Business Services)  
 Originating Faculty Admin

(Print Name and Title)

(Date)

13. **Authorization for Payment:****Consultant****Contract Employee**(a). **CHECK REQUIRED** (Invoice to accompany payment request):
☐ Partial Payment thru: \_\_\_\_\_  
 (Date)

☐ Full or Final Payment

(b).

\$

(Amount)

(Originating Administrator Signature – Use Blue Ink)

(Date)



CA# \_\_\_\_\_



**Administrative Offices**  
 1163 E. Seventh Street  
 Chico, CA 95928-5999

530/891-3000  
 fax 891-3220  
 www.ChicoUSD.org

### Independent Contractor Agreement

Completed By: Christina Winde for David McKay

Phone: \_\_\_\_\_

**1. This Agreement is made by and between Chico Unified School District and:**

Name: Sandra WaterhouseEmail Address: sandra333@attlink.netStreet Address/POB: 14004 Hannum CourtCity, State, Zip Code: Walnut Grove, CA 95090Phone: (916) 477-7322

Taxpayer ID/SSN: \_\_\_\_\_

This agreement will be in effect From: 7/1/16To: 11/30/16

Site Code: \_\_\_\_\_

Location(s) of Services: Various Locations

**2. Scope of Work to be performed and Goal (Strategic Plan, Site Plan, Other) to be achieved as a result of Independent Contractor Services (attach separate sheet if necessary):**

- a. Scope of Work: Provide guidance and technical assistance to the YouthBuild program. Ensure that the scope of work, including benchmarks and evaluation deliverables are completed. Provides guidance on the MIS reporting system per grant requirements

- b. Goal (if applicable): To met the specific requirements of the YouthBuild grant

**3. Funding/Program/Grant Affected (corresponding to accounts listed in item 4):**

- a. YouthBuild Grant (billing amount will be based on a monthly amount)

b. \_\_\_\_\_

c. \_\_\_\_\_

4.	Percent (%)	Fund	Resource	Project/Year	Goal	Function	Object	Site	Manager
1	100.00%	01	5828	0	1110	1000	5800	030	6700
2	0.00%						5800		
3	0.00%						5800		

**5. Payment to Independent Contractor for services actually rendered and supported by Independent Contractor initiated invoices, the District will pay the Independent Contractor not to exceed the payment criteria as follows:**

\$ \$ 1,669.50 Hourly Rate X 5.00 # Hours = \$ \$ 8,347.50 Total for Services

(For Flat Rate fees, please place the flat rate under "hourly rate" and use "1" for number of hours.)

**Additional Expenses (If applicable, in the event of changes to service or other expense types)**

Item: \_\_\_\_\_

\$ \_\_\_\_\_

Item: \_\_\_\_\_

\$ \_\_\_\_\_

\$ \$ 0.00 Total of Additional Expenses

\$ \$ 8,347.50 Grand Total (Services + Additional Expenses)

6. Completed BS10A "Certificate of Independent Consultant Agreement" guideline is: ☒ On File ☐ Attached

7. Completed W9 "Request for Taxpayer Identification Number/Certification" form is: ☒ On File ☐ Attached

BP 3600 states all Consultants/Independent Contractor contracts shall be brought to the Board for Approval.

Board Approval Date: \_\_\_\_\_

Board authorizing signature: \_\_\_\_\_



**INDEPENDENT CONTRACTOR TERMS AND CONDITIONS**

Independent Contractor Name: Sandra Waterhouse

CA#

1. The Independent Contractor will perform said services independently, not as an employee of the District; therefore, the District is not liable for worker's compensation or unemployment benefits in connection with this Independent Contractor Agreement. Independent Contractor shall assume full responsibility for payment of all Federal, State and Local taxes or contributions, including Unemployment Insurance, Social Security, and Income Taxes with respect to Independent Contractor's employees.
2. Independent Contractor shall furnish, at his/her own expense, all labor, materials, equipment and other items necessary to carry out the terms of this Agreement, unless agreed upon under Additional Expenses on page 1 of this Agreement.
3. In the performance of the work herein contemplated, the Independent Contractor with the authority to control and direct the performance of the details of the work, the District being interested in the results obtained.
4. If applicable, the Independent Contractor will certify in writing, using Administration Form #3515.6, that criminal background checks have been completed as per Board Policy #3515.6 prior to commencement of services. This requirement also applies to any subcontractors or employees utilized by the Independent Contractor.
5. Independent Contractor agrees to defend, indemnify and hold harmless the District, its Board of Trustees, employees and agents from any and all liability or loss arising in any way out of Independent Contractor's negligence in the performance of this Agreement, including, but not limited to, any claim due to injury and/or damage sustained by Independent Contractor, and/or the Independent Contractor's employee or agents.
6. Independent Contractor will provide to Assistant Superintendent, Business Services, upon request, a Certificate of Insurance showing a minimum \$1,000,000 combined single limits of general liability and automobile coverage as required by the District.
7. Neither party shall assign nor delegate any part of this Agreement without the written consent of the other party.
8. The work completed herein must meet the approval of the District and shall be subject to the District's general right of inspection to secure the satisfactory completion thereof. Independent Contractor agrees to comply with all Federal, State, Municipal and District laws, rules and regulations that are now, or may in the future become applicable to Independent Contractor, Independent Contractor's business, equipment and personnel engaged in operations covered by this Agreement or occurring out of the performance of such operations.
9. The Independent Contractor will be paid by vendor check as an Independent Contractor.
10. Independent Contractor shall provide an original invoice to the Originating Administrator. Independent Contractor shall be paid within 30 days of receipt of invoice and authorization of payment forwarded to the CUSD Accounts Payable department along with the original invoice.
11. Either party may terminate this agreement, with or without cause, upon 30 days' written notice to the other. Vendor shall be paid for work actually performed as of the date of receipt of such notice.

**12. AGREED TO AND ACCEPTED:**

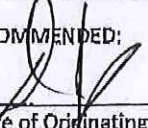
  
Signature of Independent Contractor

Sandra Waterhouse

Printed Name

8/9/11  
Date

**13. RECOMMENDED:**

  
Signature of Originating Administrator

David McKay, Director

Printed Name

8/30/11  
Date

**14. APPROVED:**

\_\_\_\_\_  
Signature of District Administrator OR  
Director of Categorical Programs

Joanne Parsley, Asst. Superintendent

Printed Name

\_\_\_\_\_  
Date

**15. APPROVED:**

\_\_\_\_\_  
Signature of District Administrator,  
Business Services

Kevin Bultema, Asst. Superintendent

Printed Name

\_\_\_\_\_  
Date

**16. AUTHORIZATION FOR PAYMENT**

**CHECK REQUIRED**

(Invoice to accompany payment request):

- ☐ Partial Payment through: \_\_\_\_\_  
☐ Full or Final Payment

DISPOSITION OF CHECK by Accounts Payable:  
(check released upon completion of services)

- ☐ Send to Site Administrator (date): \_\_\_\_\_  
☐ Mail to Independent Contractor

\$ \_\_\_\_\_  
Amount

\_\_\_\_\_  
Originating Administrator Signature (Blue Ink)

\_\_\_\_\_  
Date



CA# \_\_\_\_\_



**Administrative Offices**  
1163 E. Seventh Street  
Chico, CA 95928-5999

530/891-3000  
fax 891-3220  
www.ChicoUSD.org

### Independent Contractor Agreement

Completed By: John Shepherd

Phone: 091-3050

This Agreement is made by and between Chico Unified School District and:

Name: Shaun Hwa

Email Address: shaun@sporangiaperformance.com

Street Address/POB: 13 Grace Drive

City, State, Zip Code: Marlton, NJ 08053

Phone: \_\_\_\_\_

Taxpayer ID/SSN: \_\_\_\_\_

This agreement will be in effect From: 6/18/16

To: 6/18/16

Site Code: 020

Location(s) of Services: Pleasant Valley High School

2. Scope of Work to be performed and Goal (Strategic Plan, Site Plan, Other) to be achieved as a result of Independent Contractor Services (attach separate sheet if necessary):

a. Scope of Work: Athlete Committed Training

b. Goal (if applicable): \_\_\_\_\_

3. Funding/Program/Grant Affected (corresponding to accounts listed in Item 4):

a. Title 2

b. \_\_\_\_\_

c. \_\_\_\_\_

4.	Percent (%)	Fund	Resource	Project/Year	Goal	Function	Object	Site	Manager
1	100.00%	01	4035	0	1110	2100	5800	020	2020
2	0.00%						5800		
3	0.00%						5800		

5. Payment to Independent Contractor for services actually rendered and supported by Independent Contractor initiated invoices, the District will pay the Independent Contractor not to exceed the payment criteria as follows:

\$ \$ 1,500.00 Hourly Rate X 1.00 # Hours = \$ \$ 1,500.00 Total for Services

(For Flat Rate fees, please place the flat rate under "hourly rate" and use "1" for number of hours.)

Additional Expenses (If applicable, in the event of changes to service or other expense types)

Item: \_\_\_\_\_ \$ \_\_\_\_\_

Item: \_\_\_\_\_ \$ \_\_\_\_\_

\$ \$ 0.00 Total of Additional Expenses

\$ \$ 1,500.00 Grand Total (Services + Additional Expenses)

6. Completed BS10A "Certificate of Independent Consultant Agreement" guideline is: ☒ On File ☐ Attached

7. Completed W9 "Request for Taxpayer Identification Number/Certification" form is: ☒ On File ☐ Attached

BP 3600 states all Consultants/Independent Contractor contracts shall be brought to the Board for Approval.  
Board Approval Date: \_\_\_\_\_ Board authorizing signature: \_\_\_\_\_



Chico Unified School District \* 1163 East Seventh Street \* Chico, CA 95928  
T: (530) 891-3000 \* F: (530) 891-3220

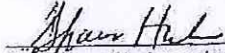
# INDEPENDENT CONTRACTOR TERMS AND CONDITIONS

Independent Contractor Name: Shaun Huls

CAH

1. The Independent Contractor will perform said services independently, not as an employee of the District; therefore, the District is not liable for worker's compensation or unemployment benefits in connection with this Independent Contractor Agreement. Independent Contractor shall assume full responsibility for payment of all Federal, State and Local taxes or contributions, including Unemployment Insurance, Social Security, and Income Taxes with respect to Independent Contractor's employees.
2. Independent Contractor shall furnish, at his/her own expense, all labor, materials, equipment and other items necessary to carry out the terms of this Agreement, unless agreed upon under Additional Expenses on page 1 of this Agreement.
3. In the performance of the work herein contemplated, the Independent Contractor with the authority to control and direct the performance of the details of the work, the District being interested in the results obtained.
4. If applicable, the Independent Contractor will certify in writing, using Administration Form #3515.6, that criminal background checks have been completed as per Board Policy #3515.6 prior to commencement of services. This requirement also applies to any subcontractors or employees utilized by the Independent Contractor.
5. Independent Contractor agrees to defend, indemnify and hold harmless the District, its Board of Trustees, employees and agents from any and all liability or loss arising in any way out of Independent Contractor's negligence in the performance of this Agreement, including, but not limited to, any claim due to injury and/or damage sustained by Independent Contractor, and/or the Independent Contractor's employee or agents.
6. Independent Contractor will provide to Assistant Superintendent, Business Services, upon request, a Certificate of Insurance showing a minimum \$1,000,000 combined single limits of general liability and automobile coverage as required by the District.
7. Neither party shall assign nor delegate any part of this Agreement without the written consent of the other party.
8. The work completed herein must meet the approval of the District and shall be subject to the District's general right of inspection to secure the satisfactory completion thereof. Independent Contractor agrees to comply with all Federal, State, Municipal and District laws, rules and regulations that are now, or may in the future become applicable to Independent Contractor, Independent Contractor's business, equipment and personnel engaged in operations covered by this Agreement or occurring out of the performance of such operations.
9. The Independent Contractor will be paid by vendor check as an Independent Contractor.
10. Independent Contractor shall provide an original Invoice to the Originating Administrator. Independent Contractor shall be paid within 30 days of receipt of Invoice and authorization of payment forwarded to the CUSD Accounts Payable department along with the original Invoice.
11. Either party may terminate this agreement, with or without cause, upon 30 days' written notice to the other. Vendor shall be paid for work actually performed as of the date of receipt of such notice.

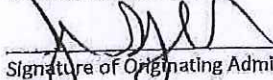
## 12. AGREED TO AND ACCEPTED:

  
Signature of Independent Contractor

Shaun Huls  
Printed Name

7/15/16  
Date


## 13. RECOMMENDED:

  
Signature of Originating Administrator

John Shepherd  
Printed Name

7/15/16  
Date


## 14. APPROVED:

  
Signature of District Administrator OR  
Director of Categorical Programs

Printed Name

Date

## 15. APPROVED:

  
Signature of District Administrator,  
Business Services

Printed Name

Date

## 16. AUTHORIZATION FOR PAYMENT CHECK REQUIRED

(Invoice to accompany payment request):

- ☐ Partial Payment through: \_\_\_\_\_  
☐ Full or Final Payment

DISPOSITION OF CHECK by Accounts Payable:  
(check released upon completion of services)

- ☐ Send to Site Administrator (date): \_\_\_\_\_  
☐ Mail to Independent Contractor

\$ \_\_\_\_\_  
Amount

Originating Administrator Signature (Blue Ink)

Date

ICA# \_\_\_\_\_



Administrative Offices  
1163 E. Seventh Street  
Chico, CA 95928-5999

530/891-3000  
fax 891-3220  
www.ChicoUSD.org

### ASB Independent Contractor Agreement

Completed By: Misty McEntee-ChooPhone: (530) 891-3080 X122

1. This Agreement is made by and between **Chico Unified School District** Bidwell Junior High School and:

Name: Becky Pakulski #icanhelp  
Email Address: beckypakulski@gmail.com  
Street Address/POB: PO Box 1843  
City, State, Zip Code: Discovery Bay, CA 94505  
Phone: [Redacted]  
Taxpayer ID/SSN: [Redacted]

This agreement will be in effect From: 8/22/16  
Site Code: 050-2050

To: 8/26/16  
Location(s) of Services: Bidwell Junior High School

2. Scope of Work to be performed and Goal (Strategic Plan, Site Plan, Other) to be achieved as a result of Independent Contractor Services (attach separate sheet if necessary):

a. Scope of Work: #icanhelp Assembly Program: 2 Student Assemblies, 1 Faculty Session

b. Goal (if applicable): To educate students, parents and faculty on social media and internet usage

3. ASB Account(s) Affected	ASB Account #	Percentage
a. <u>ASB-General</u>	<u>320</u>	<u>100.00%</u>
b. _____	_____	<u>0.00%</u>
c. _____	_____	<u>0.00%</u>

4. Payment to Independent Contractor for services actually rendered and supported by Independent Contractor initiated invoices, the District will pay the Independent Contractor not to exceed the payment criteria as follows:

\$ 1,500.00 Hourly Rate X 1.00 # Hours = \$ 1,500.00 Total for Services

(For Flat Rate fees, please place the flat rate under "hourly rate" and use "1" for number of hours.)

Additional Expenses (if applicable, in the event of changes to service or other expense types)

Item: \_\_\_\_\_ \$ \_\_\_\_\_  
Item: \_\_\_\_\_ \$ \_\_\_\_\_  
\$ 0.00 Total of Additional Expenses  
\$ 1,500.00 Grand Total (Services + Additional Expenses)

5. Completed BS10A "Certificate of Independent Consultant Agreement" guideline is: ☒ On File ☐ Attached

6. Completed W9 "Request for Taxpayer Identification Number/Certification" form is: ☒ On File ☐ Attached

BP 3600 states all Consultants/Independent Contractor contracts shall be brought to the Board for Approval.  
Board Approval Date: \_\_\_\_\_ Board authorizing signature: \_\_\_\_\_



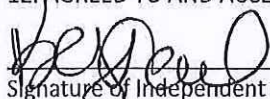
**INDEPENDENT CONTRACTOR TERMS AND CONDITIONS**

Independent Contractor Name: **Becky Pakulski: #icanhelp**

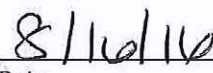
ICA#

1. The Independent Contractor will perform said services independently, not as an employee of the District; therefore, the District is not liable for worker's compensation or unemployment benefits in connection with this Independent Contractor Agreement. Independent Contractor shall assume full responsibility for payment of all Federal, State and Local taxes or contributions, including Unemployment Insurance, Social Security, and Income Taxes with respect to Independent Contractor's employees.
2. Independent Contractor shall furnish, at his/her own expense, all labor, materials, equipment and other items necessary to carry out the terms of this Agreement, unless agreed upon under Additional Expenses on page 1 of this Agreement.
3. In the performance of the work herein contemplated, the Independent Contractor with the authority to control and direct the performance of the details of the work, the District being interested in the results obtained.
4. If applicable, the Independent Contractor will certify in writing, using Administration Form #3515.6, that criminal background checks have been completed as per Board Policy #3515.6 prior to commencement of services. This requirement also applies to any subcontractors or employees utilized by the Independent Contractor.
5. Independent Contractor agrees to defend, indemnify and hold harmless the District, its Board of Trustees, employees and agents from any and all liability or loss arising in any way out of Independent Contractor's negligence in the performance of this Agreement, including, but not limited to, any claim due to injury and/or damage sustained by Independent Contractor, and/or the Independent Contractor's employee or agents.
6. Independent Contractor will provide to Assistant Superintendent, Business Services, upon request, a Certificate of Insurance showing a minimum \$1,000,000 combined single limits of general liability and automobile coverage as required by the District.
7. Neither party shall assign nor delegate any part of this Agreement without the written consent of the other party.
8. The work completed herein must meet the approval of the District and shall be subject to the District's general right of inspection to secure the satisfactory completion thereof. Independent Contractor agrees to comply with all Federal, State, Municipal and District laws, rules and regulations that are now, or may in the future become applicable to Independent Contractor, Independent Contractor's business, equipment and personnel engaged in operations covered by this Agreement or occurring out of the performance of such operations.
9. The Independent Contractor will be paid by vendor check as an Independent Contractor.
10. Independent Contractor shall provide an original invoice to the Originating Administrator. Independent Contractor shall be paid within 30 days of receipt of invoice and authorization of payment forwarded to the CUSD Accounts Payable department along with the original invoice.
11. Either party may terminate this agreement, with or without cause, upon 30 days' written notice to the other. Vendor shall be paid for work actually performed as of the date of receipt of such notice.

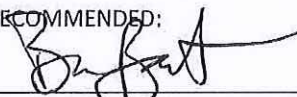
**12. AGREED TO AND ACCEPTED:**


  
Signature of Independent Contractor

  
Printed Name

  
Date

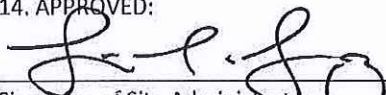
**13. RECOMMENDED:**

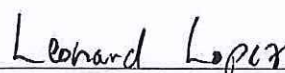
  
Signature of ASB Advisor

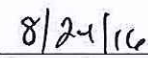
  
Printed Name

Date

**14. APPROVED:**

  
Signature of Site Administrator

  
Printed Name

  
Date


**15. APPROVED:**

Signature of District Administrator,  
Business Services

Printed Name

Date

16. ASB Approved Purchase Order # **14549**

  
Signature of ASB Accounting Technician

Originating Administrator Signature (Blue Ink)

  
Date



CA# \_\_\_\_\_



**Administrative Offices**  
 1163 E. Seventh Street  
 Chico, CA 95928-5999

530/891-3000  
 fax 891-3220  
 www.ChicoUSD.org

### Independent Contractor Agreement

Completed By: Heather DeaverPhone: 891-3000

1. This Agreement is made by and between Chico Unified School District and:

Name: Elizabeth Helbel  
 Email Address: plszkin4@gmail.com  
 Street Address/POB: 7634 Midway Pines Drive  
 City, State, Zip Code: Shingletown, CA 96088  
 Phone:                       
 Taxpayer ID/SSN:                     

This agreement will be in effect From: 8/15/16To: 8/15/16Site Code: 560Location(s) of Services: Bidwell Swimming Pool

2. Scope of Work to be performed and Goal (Strategic Plan, Site Plan, Other) to be achieved as a result of Independent Contractor Services (attach separate sheet if necessary):

a. Scope of Work: Lifeguard/First Aid training for PE teachers and swim coaches.

b. Goal (if applicable): \_\_\_\_\_

3. Funding/Program/Grant Affected (corresponding to accounts listed in item 4):

a. \_\_\_\_\_  
 b. \_\_\_\_\_  
 c. \_\_\_\_\_

4.	Percent (%)	Fund	Resource	Project/Year	Goal	Function	Object	Site	Manager
1	10,000.00%	01	0009	0	0000	<del>7400</del> 7400	5800	670	5600
2	0.00%		<del>0009</del>			<del>7400</del>	5800		
3	0.00%						5800		

5. Payment to Independent Contractor for services actually rendered and supported by Independent Contractor initiated invoices, the District will pay the Independent Contractor not to exceed the payment criteria as follows:

\$ \$ 450.00 Hourly Rate X 1.00 # Hours = \$ \$ 450.00 Total for Services

(For Flat Rate fees, please place the flat rate under "hourly rate" and use "1" for number of hours.)

Additional Expenses (if applicable, in the event of changes to service or other expense types)

Item: \_\_\_\_\_ \$ \_\_\_\_\_

Item: \_\_\_\_\_ \$ \_\_\_\_\_

\$ \$ 0.00 Total of Additional Expenses

\$ \$ 450.00 Grand Total (Services + Additional Expenses)

6. Completed BS10A "Certificate of Independent Consultant Agreement" guideline is: ☒ On File ☐ Attached

7. Completed W9 "Request for Taxpayer Identification Number/Certification" form is: ☒ On File ☐ Attached

BP 3600 states all Consultants/Independent Contractor contracts shall be brought to the Board for Approval.

Board Approval Date: \_\_\_\_\_

Board authorizing signature: \_\_\_\_\_



**INDEPENDENT CONTRACTOR TERMS AND CONDITIONS**

Independent Contractor Name: Elizabeth Heibel

CA#

1. The Independent Contractor will perform said services independently, not as an employee of the District; therefore, the District is not liable for worker's compensation or unemployment benefits in connection with this Independent Contractor Agreement. Independent Contractor shall assume full responsibility for payment of all Federal, State and Local taxes or contributions, including Unemployment Insurance, Social Security, and Income Taxes with respect to Independent Contractor's employees.
2. Independent Contractor shall furnish, at his/her own expense, all labor, materials, equipment and other items necessary to carry out the terms of this Agreement, unless agreed upon under Additional Expenses on page 1 of this Agreement.
3. In the performance of the work herein contemplated, the Independent Contractor with the authority to control and direct the performance of the details of the work, the District being interested in the results obtained.
4. If applicable, the Independent Contractor will certify in writing, using Administration Form #3515.6, that criminal background checks have been completed as per Board Policy #3515.6 prior to commencement of services. This requirement also applies to any subcontractors or employees utilized by the Independent Contractor.
5. Independent Contractor agrees to defend, indemnify and hold harmless the District, its Board of Trustees, employees and agents from any and all liability or loss arising in any way out of Independent Contractor's negligence in the performance of this Agreement, including, but not limited to, any claim due to injury and/or damage sustained by Independent Contractor, and/or the Independent Contractor's employee or agents.
6. Independent Contractor will provide to Assistant Superintendent, Business Services, upon request, a Certificate of Insurance showing a minimum \$1,000,000 combined single limits of general liability and automobile coverage as required by the District.
7. Neither party shall assign nor delegate any part of this Agreement without the written consent of the other party.
8. The work completed herein must meet the approval of the District and shall be subject to the District's general right of inspection to secure the satisfactory completion thereof. Independent Contractor agrees to comply with all Federal, State, Municipal and District laws, rules and regulations that are now, or may in the future become applicable to Independent Contractor, Independent Contractor's business, equipment and personnel engaged in operations covered by this Agreement or occurring out of the performance of such operations.
9. The Independent Contractor will be paid by vendor check as an Independent Contractor.
10. Independent Contractor shall provide an original invoice to the Originating Administrator. Independent Contractor shall be paid within 30 days of receipt of invoice and authorization of payment forwarded to the CUSD Accounts Payable department along with the original invoice.
11. Either party may terminate this agreement, with or without cause, upon 30 days' written notice to the other. Vendor shall be paid for work actually performed as of the date of receipt of such notice.

**12. AGREED TO AND ACCEPTED:**

**E. A. Heibel** Digitally signed by E. A. Heibel  
Date: 2016.08.30 21:17:16 -07'00'

Elizabeth Heibel

Signature of Independent Contractor

Printed Name

Date

**13. RECOMMENDED:**

  
Signature of Originating Administrator

**Jim HANLON**  
Printed Name

**8/31/16**  
Date

**14. APPROVED:**

Signature of District Administrator OR  
Director of Categorical Programs

Printed Name

Date

**15. APPROVED:**

**Kevin Bultema**

**Asst. Superintendent, Business**

Signature of District Administrator,  
Business Services

Printed Name

Date

**16. AUTHORIZATION FOR PAYMENT**

**CHECK REQUIRED**

(Invoice to accompany payment request):

- ☐ Partial Payment through: \_\_\_\_\_  
☒ Full or Final Payment

**DISPOSITION OF CHECK by Accounts Payable:**

(check released upon completion of services)

- ☐ Send to Site Administrator (date): \_\_\_\_\_  
☒ Mail to Independent Contractor

\$ \_\_\_\_\_  
Amount

Originating Administrator Signature (Blue Ink)

Date





530/891-3000  
fax 891-3220  
[www.ChicoUSD.org](http://www.ChicoUSD.org)

BP 3600 states all Consultants/Independent Contractor contracts shall be brought to the Board for Approval.  
Board Approval Date: \_\_\_\_\_ Board authorizing signature: \_\_\_\_\_




**INDEPENDENT CONTRACTOR TERMS AND CONDITIONS**

Independent Contractor Name: Brent Holland/Blue Lab Media

CA#

1. The Independent Contractor will perform said services independently, not as an employee of the District; therefore, the District is not liable for worker's compensation or unemployment benefits in connection with this Independent Contractor Agreement. Independent Contractor shall assume full responsibility for payment of all Federal, State and Local taxes or contributions, including Unemployment Insurance, Social Security, and Income Taxes with respect to Independent Contractor's employees.
2. Independent Contractor shall furnish, at his/her own expense, all labor, materials, equipment and other items necessary to carry out the terms of this Agreement, unless agreed upon under Additional Expenses on page 1 of this Agreement.
3. In the performance of the work herein contemplated, the Independent Contractor with the authority to control and direct the performance of the details of the work, the District being interested in the results obtained.
4. If applicable, the Independent Contractor will certify in writing, using Administration Form #3515.6, that criminal background checks have been completed as per Board Policy #3515.6 prior to commencement of services. This requirement also applies to any subcontractors or employees utilized by the Independent Contractor.
5. Independent Contractor agrees to defend, indemnify and hold harmless the District, its Board of Trustees, employees and agents from any and all liability or loss arising in any way out of Independent Contractor's negligence in the performance of this Agreement, including, but not limited to, any claim due to injury and/or damage sustained by Independent Contractor, and/or the Independent Contractor's employee or agents.
6. Independent Contractor will provide to Assistant Superintendent, Business Services, upon request, a Certificate of Insurance showing a minimum \$1,000,000 combined single limits of general liability and automobile coverage as required by the District.
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**12. AGREED TO AND ACCEPTED:**

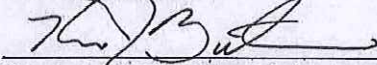
  
Signature of Independent Contractor

**Brent Holland**

Printed Name

9-1-16  
Date

**13. RECOMMENDED:**

  
Signature of Originating Administrator

**Kevin Bultema**

**Asst. Superintendent, Business**

Printed Name

9-1-16  
Date

**14. APPROVED:**

\_\_\_\_\_  
Signature of District Administrator OR  
Director of Categorical Programs

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

**15. APPROVED:**

\_\_\_\_\_  
Signature of District Administrator,  
Business Services

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

**16. AUTHORIZATION FOR PAYMENT**

**CHECK REQUIRED**

(Invoice to accompany payment request):

- ☐ Partial Payment through: \_\_\_\_\_  
☐ Full or Final Payment

**DISPOSITION OF CHECK by Accounts Payable:**

(check released upon completion of services)

- ☐ Send to Site Administrator (date): \_\_\_\_\_  
☐ Mail to Independent Contractor

\$ \_\_\_\_\_  
Amount

\_\_\_\_\_  
Originating Administrator Signature (Blue Ink)

\_\_\_\_\_  
Date