

BEN SHOULDERS JEFF HATFEILD CHERYL MUSGRAVE

AGENDA REQUEST

Name of Requestor:
Department:
Contact person:
Contact email/ phone:
Date of Request:
Document to be considered by Commissioners (please be as detailed as possible):
COMPLETE THE FOLLOWING IF SUBMITTING A CONTRACT
New Contract Renewal Contract
Contract Term:
Amount of contract:
Fund or line item this contract is to be paid from:
Complete the following for renewals Are the terms and conditions the same? Yes No
If no, what has changed?
When does the current contract expire?