



# PERALTA COMMUNITY COLLEGE DISTRICT INDEPENDENT CONTRACTOR & ORIGINAL CONTRACT ADDENDUM FORM #

**Contractor/Consultant Information:**

Name of Contractor:	_____
Business License No.:	_____
Tax ID Number:	_____
Vendor Number:	_____

**Contract Information: Please attach a cover memo attention to the Chancellor**

ICC # _____	(Please attach a copy of the original ICC and previous addendums)
Purchase Order # _____	
Contract Start Date: _____	End: _____
New Contract End Date: _____	
Original/Previous Contract Amount: _____	
Request to Increase/Decrease the Contract By: _____	
Total Contract Amount: _____	
Board Approval Date(s): _____	(if applicable)

**Accounting Codes:** (additional lines are provided for split funding only)

LOC	FUND	COST CTR	OBJECT	PR	ACTIVITY & SUFF	SPPJ	LN	PREVIOUS AMOUNT	ADDENDUM +/-	TOTAL
									<b>GRAND TOTAL</b>	

_____	_____
Funds Verified by Business Manager	Date:

**Approval Routing:**

College President/ Vice Chancellor	Date:
Vice Chancellor, Financial Services	Date:
Chancellor	Date: