

CHABOT-LAS POSITAS COMMUNITY COLLEGE DISTRICT

Post-Board Contract Processing Instructions

Board Meeting Date: _____

Subject/Vendor: _____

Site: Chabot College Las Positas College EDCE District

Certificate of Insurance Needed

Special Instructions:

Copies for the site go to:

Name(s):

Email(s):

Phone(s):

Vendor Info: Name, Address, Email and Phone