

RESOLUTION NO. _____

A RESOLUTION AUTHORIZING AN INCREASE IN PURCHASE ORDER NUMBER 524975 TO CHIPREWARDS, INC. TO PAY THE REMAINING 2014 INVOICES FOR THE ANNUAL COST OF SERVICES, IN THE AMOUNT OF SIXTY THOUSAND DOLLARS (\$60,000.00), FOR A TOTAL AMOUNT OF TWO HUNDRED FIVE THOUSAND DOLLARS (\$205,000.00).

BE IT RESOLVED BY THE CITY COUNCIL OF THE CITY OF CHATTANOOGA, TENNESSEE, That it is hereby authorizing an increase in Purchase Order Number 524975 to ChipRewards, Inc. to pay the remaining 2014 invoices for the annual cost of services, in the amount of \$60,000.00, for a total amount of \$205,000.00.

ADOPTED: _____, 2014

/mem

City of Chattanooga



Resolution Request Form

(This form is only required for resolutions requiring expenditure of City funds)

Date Prepared: 11/14/2014

Preparer: Madeline Green

Department: Human Resources

Brief Description of Purpose for Resolution:

Resolution Number (if approved by Council): 26306

A resolution to increase Purchase Order # 524975 to ChipRewards, Inc. to the amount of \$205,000.00 to pay the remaining 2014 invoices. The original estimated request of \$145,000.00 was not sufficient to cover the annual cost of the services. This contract will be ending on December 31, 2014.

insurance will be offered to City employees to be paid solry by the employee.

Name of Vendor/Contractor/Grant, etc. Chip Rewards, Inc.
Total project cost \$ 205,000.00
Total City of Chattanooga Portion \$ 205,000.00
City Amount Funded \$ 140,000.00
New City Funding Required \$ 60,000.00
City's Match Percentage % _____

New Contract/Project? (Yes or No) no
Funds Budgeted? (YES or NO) no
Provide Fund 6523
Provide Cost Center E10306, 704312
Proposed Funding Source if not budgeted 6523
Grant Period (if applicable) _____

List all other funding sources and amount for each contributor.

Amount(s)
\$ _____
\$ _____
\$ _____

Grantor(s)

Agency Grant Number _____

CFDA Number if known _____

Other comments: (Include contingency amount, contractor, and other information useful in preparing resolution)

Approved by: _____

Reviewed by: FINANCE OFFICE

DESIGNATED OFFICIAL/ADMINISTRATOR

Please submit completed form to @budget, accounting, City Attorney, City Finance Officer and Deputy Administrator Finance