

2016 Fair Checks

(include with completed check request form, vendor form and W-9)

Fair Gate Money	\$ 4,000.00	<u>020-000-112.00</u>
Fair Open Class Premiums	\$ 2,200.00	<u>020-080-519.01</u>
Fair Petty Cash VIP	\$ 2,000.00	<u>020-000-112.00</u>
Fair ATM	\$ 40,000.00 (2 cks -\$20,000 each)	<u>020-000-113.00</u>

Entertainment Consultants, LLC

	\$116,806.25	<u>020-080-692.02</u>
J.D. McLing	\$ 2,250.00	<u>020-080-692.15</u>
Howell Rodeo	\$ 28,000.00	<u>020-080-692.15</u>
Yoakum Sound	\$ 10,500.00	<u>020-080-692.02</u>
Roger Young	\$ 6,000.00	<u>020-080-692.02</u>
Terry Robinson – Dr. Solar	\$ 3,200.00	<u>020-080-692.02</u>
Mark Siegel	\$ 800.00	<u>020-080-692.02</u>

YC 4-H Judges	\$ 2,833.33	<u>020-080-692.03</u>
YC 4-H Premiums	\$ 2,500.00	<u>020-080-519.01</u>
YC 4-H Awards	\$ 833.33	<u>020-080-519.01</u>

The above 3 okay for one check

Total \$6,166.66

FFA Judges	\$ 833.33	<u>020-080-692.03</u>
FFA Awards	\$ 833.33	<u>020-080-519.01</u>

The above 2 okay for one check

Total \$1,666.66

Dear Commissioners:

The Yamhill County Fair and Event Center respectfully requests the above checks to be printed this week for our Fair that opens on August 3rd through August 6th, 2016.

Sincerely

Allan Westhoff, Manager

Accepted by Yamhill County
Board of Commissioners on

7.14.16 by Board Order

16-290



RODEO ANNOUNCER

8107 Booth Road
Kamath Falls, OR 97603
(541) 892-1707

Bid/Contract

This Bid/Contract is made between J.D. McLing and YAMHILL COUNTY FAIR and RODEO hereinafter referred to as Contractor/Committee) for the services of J.D. McLing, Announcer, on the dates of AUGUST 3, 4, and 5, 2016 which consists of 3 performance/s, 0 day performance/s started at N/A and 3 evening performance/s starting at 6:00 pm and, 1 slack performance/s.

J.D. McLing, Announcer, will be paid by Contractor/Committee \$750⁰⁰ per performance for a total of \$2,250⁰⁰. J.D. McLing, Announcer, will be paid after the final performance unless otherwise arranged.

- Y / N Sound System supplied by Announcer @ \$INCLUDED* per performance.
- Y / N Hotel room supplied by Contractor/Committee.

Agreed: Jerry D. McLing Dated: MAY 29, 2016
Signatures of Authorized Representatives upon acceptance of Bid/Contract

SIGNATURE _____

DATE _____

SIGNATURE _____

DATE _____

Remarks: *THE ABOVE CONTRACTED AMOUNT INCLUDES THE SOUND SYSTEM, ANNOUNCER, AND DAWN TO PLAY MUSIC. ALSO (IF NEEDED) THE SOUND SYSTEM FOR THE DESTRUCTION TERRY ON SATURDAY EVENING, AUGUST 6, 2016.

[Signature]

6/29/16

Yamhill County Rodeo

Invoice (Yamhill County Fairgrounds)

Howell Rodeo Co. Inc.
25170 Sturtevant Dr
Veneta, Oregon 97487

Services:

Aug 4+5, 2016

2 Day NPRA Rodeo	\$13800.00
Added money	<u>6600.00</u>
	\$20,400.00

Aug 3, 2016

1 Day Bull riding	\$5450.00
added money	<u>2150.00</u>
	\$7600.00

Total due \$28,000.00

Nelia Howell dba
Howell Rodeo Co. Inc.

m 9/23

YOAKUM SOUND & LIGHT

This contract entered into October 19, 2015 between YOAKUM SOUND & LIGHT 4346 Riverside Dr. S. Salem, OR 97306 The party of the first part here after called THE SUPPLIER and YAMHILL COUNTY FAIR 2070 Lafayette Ave. McMinnville, OR 97128. The party of the second part here after called THE BUYER. THE SUPPLIER AND THE BUYER is entering into a three year contract for the YAMHILL COUNTY FAIR's of 2016, 2017, & 2018. The dates of August 3-August 6, 2016, The years 2017 & 2018 TBD. The YAMHILL COUNTY FAIR's of 2016, 2017 & 2018 costs are to be determined and mutually agreed upon between the SUPPLIER AND THE BUYER. SUPPLIER AND BUYER further agree that within 90 days of the last day of the fair each year, both parties reserve the right to cancel this contract. If within the 90 days as stated above, neither party comes forth to cancel, this contract remains valid and on going.

SUPPLIER agrees to provide, and BUYER agrees to pay for as more fully described below, our SOUND, STAGE & LIGHTING for performances as herein described for 2016. Year 2017 & 2018 TBD.

1. The performances will begin at aprox 10 am. On Aug 3, 2016 for a period of 4 days.
2. LOCATION: Yamhill County Fairgrounds
EVENT: Yamhill County Fair
CITY: McMinnville, OR
3. It is agreed that SUPPLIER will have access to the staging area beginning at 9AM. On July 31, 2016 and lasting until 24 hours after the last performance.
4. BUYER does hereby agree to provide at his sole expense:
 - A) Optional Lighting Director if needed
 - B) Stage hands for load in and out of band gear each day
 - C) BUYER agrees to provide 100-amp & 200-amp 3-phase power, grounded with in 30 ft of the stage.
 - D) Any Additional Equipment Other than SUPPLIERS to fill a Rider.
 - E) 4 persons for the set up and strike of SUPPLIERS equipment. Said persons are to be at the direction of the representative of the SUPPLIER. These persons shall be competent and able to unload, carry, set up and remove SUPPLIERS equipment and be available at 10A.M. Aug 1, 2016 and also **immediately following the performance.**
5. Buyer agrees to provide protection of SUPPLIERS equipment from loss or damage including but not limited to, inclement weather, theft, vandalism, unauthorized tampering or use, and damage by the audience or stage crew or performers.
6. BUYER agrees to inform SUPPLIER 14 days before the date of the first performance of the TECHNICAL REQUIREMENTS of the performers, and any technical information about the staging and concert area.
7. BUYER does hereby agree to pay SUPPLIER the sum of \$10,450.00 TEN THOUSAND, FOUR HUNDRED, FIFTY DOLLARS AND 00/100 ANY ADDITIONAL COSTS WILL BE DETERMIND AND MUTUALY AGREED UPON BY BOTH PARTIES.

8. BUYER does hereby further agree to pay all taxes, inspection fees, license fees, and other fees that may be assessed because of the service and/or equipment agreed under the terms of this contract, including all union fees.
9. The SUPPLIER and the BUYER expressly agree that the laws of the state of OREGON shall govern any dispute arising out of the interpretation or implementation of this agreement. All litigation shall be commenced in MARION COUNTY, OR, which shall have exclusive venue to hear and decide such disputes.
10. If prior to the first performance, the SUPPLIER is not paid the balance of the contract price in full by cash or certified funds, the SUPPLIER, may at his option retain all previous payments as partial liquidated damages, refuse to perform, and commence legal proceedings to recover the full amount of this Contract along with interest at 1 1/2% per month (18%APR).
11. The BUYER does hereby further agree that if it is not possible to use any of the equipment or services herein set forth that it will pay the full amount herein specified to the SUPPLIER agent.
12. The BUYER does hereby further agree to save the SUPPLIER, harmless from any claim whatsoever for damage to persons and/or property arising from the operation of the equipment and/or the acts of the agents of the BUYER.
13. The BUYER does hereby further agree that in the event that the SUPPLIER cannot furnish the equipment or services herein specified for reasons beyond his control, such as breakdowns, strikes, Acts of God, or other casualty, that cannot be overcome by due diligence, the SUPPLIER shall not be liable for any damages as a result thereof.
14. It is mutually agreed by all parties that no verbal agreements are a part of this contract, and further agreed that the agreed price is to be paid prior to the performance.

15. OTHER PROVISIONS:

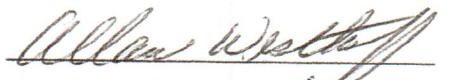
In witness whereof, the parties have hereunto set their hands to duplicate copies hereof the day and year first above written.

Please sign both copies and return them to YOAKUM SOUND & LIGHT; we will then return a copy to you.

FOR YOAKUM SOUND & LIGHT

FOR BUYER

DATE: _____


DATE: 9/22/2015

PERSONAL SERVICES CONTRACT

This CONTRACT is between the Yamhill County Fair & Rodeo, McMinnville, Oregon, hereinafter called "BUYER" and Entertainment Consultants, LLC, an Oregon company, hereinafter called "CONTRACTOR".

STATEMENT OF WORK

CONTRACTOR agrees to serve as the professional Entertainment Producer for the main stage on the grounds of the Yamhill County Fair & Rodeo.

- 1. Duties of the CONTRACTOR shall include, but not limited to:
 - a. Negotiation of Artist's contracts and riders
 - b. Review and amend Artist's contracts and riders
 - c. Coordinate with stage, sound, and lighting providers
 - d. Coordinate backstage catering services
 - e. Serve as Stage Manager
 - f. Coordinate all backstage activities
 - g. Comply with BUYER directives

2. The following entertainment will be contracted as follows:

Wednesday, August 3	Old Dominion	\$16,000 + \$500* + \$1,397
Thursday, August 4	Phil Vassar	\$27,500 + \$2,454.25
Friday, August 5	Craig Morgan	\$40,000
Saturday, August 6	Skid Row	\$15,000 + \$240* + \$1,865

* Includes Ground Transportation Buyout (Old Dominion) and Meal Buyout (Skid Row).

CONSIDERATION

CONTRACTOR will receive a booking fee of ten percent (10%), or \$9,850. In addition, CONTRACTOR will receive \$500 for each performance day for a total of \$2,000 and \$6,456.25 for Backline, Ground Transportation, and Meal Buyouts. Total fees for this contract are \$116,806.25.

SUBCONTRACTS

CONTRACTOR shall not enter into any subcontracts for any work he scheduled under this contract without obtaining prior written approval from the BUYER.

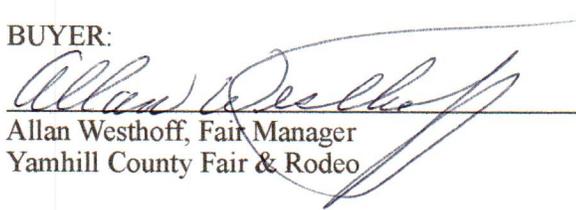
CONTRACT STATUS

CONTRACTOR will not be eligible for any benefits from these contract payments of Federal Social Security, unemployment insurance, workers' compensation, or retirement system (i.e., list PERS, etc.), except as an independent contractor.

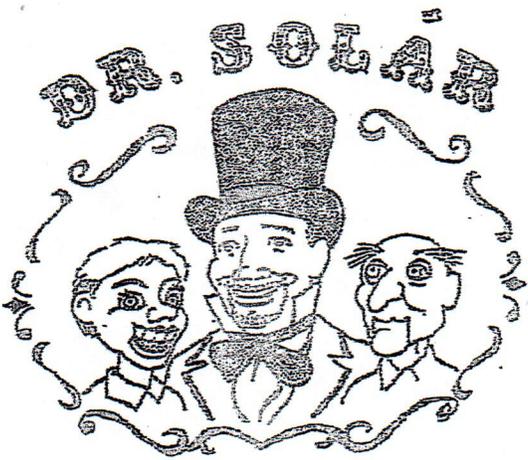
IN WITNESS WHEREOF, the parties hereto have made, executed, and delivered this agreement this day and year.

CONTRACTOR 

 Bruce W. Bolton
 Entertainment Consultants, LLC
 P.O. Box 3816
 Salem, Oregon, 97302

BUYER:


 Allan Westhoff, Fair Manager
 Yamhill County Fair & Rodeo



*Terry Robinson
 PO Box 4462
 Citrus Heights, Ca. 95611
 (916) 524-1176

*DBA; Dr. Solar's Magical Medicine Show

Performance DATE/S: August 3-6th 2016

TIME/S: as posted on hour or 1/2 hour

PLACE: Grounds

of Performances/ day: 3

Length of performances: 1/2 hour

PERFORMANCE CONTRACT

CLIENT: Allan Westhoff URL: www.yamhill.or.us/fair

ORGANIZATION: Yamhill County Fair

ADDRESS of EVENT: 2070 NE Lafayette Ave. OR 97128

MAILING ADDRESS: above

PHONE: 503 434-7524 CELL CONTACT: fair@co.yamhill.or.us

Performance includes MAGIC, COMEDY, & VENTRILOQUISM. Audience participation will be encouraged. The show is geared towards wholesome family entertainment. My wagon is 6' X 16' X 12' high. Weight is 4500 lbs. Clearance from low signs or branches is mandatory. The grounds are to be as level as possible for my wagon and audience. A solar powered theater does require sun, it must have a sunny location at least 6-8 hours per day or if located in the shade, electricity to recharge drained batteries be nearby. There is no way to avoid mold inside, therefore if it rains more than a drizzle, or inclement weather exists, the show will be canceled until the weather clears. Walk-around entertainment can and will be provided, under cover, as that will be the most likely place people will be hanging out themselves. On heavy overcast days when booked for more than one day, backup power is to be provided as mentioned. I will put a hyper link on my website to your event and I request a hyperlink to mine on your website as well. This gives people the ability to actually see what they can expect besides, mere "magician" on the program; Dr. Solar is more than a magician. My desire is to entertain as many as possible so I ask that my showtime schedule be included in any print material along with any other acts. There will be at least a half hour break between shows for reset, preferably an hour so I have time to interact.

ADDITIONAL SERVICES: 3 shows on stage per day w/ multiple hours of grounds acts w/ oddities, museum + or goose puppets, four plus hours of strolling well into night with oddities

Fees 300 per day

Fee \$	<u>300 per day</u>	
DEPOSIT \$	<u>N/A</u>	<u>DUE</u>
BALANCE \$	<u>3200.00</u>	<u>DUE on completion</u>
FOOD & LODGING;	<u>N/A</u>	

CANCELATION POLICY; A thirty day notice to cancel is required unless due to a natural disaster occurrence, rain and snow are not natural disasters. The deposit is non-refundable under any circumstance. Cancellation less than thirty days will demand payment of 50% of said contract. Medical necessity voids any contract and deposits will be returned.

ACCEPTANCE

Accepted and authorized by: Allan Westhoff Date: 3/14/2016

Terry Robinson; Terry Robinson Date: 3-7-16

To pay the above mentioned fees in accordance with the terms thereof.

Add/Change Vendor Request

ADD: CHANGE:

Company Name: Mark Siegel

Current Vendor code: _____ Address #: _____

Attention: _____

Address: 20950 W Rock Creek Rd. unit 22-B

City: Sheridan

State: OR Zip: 97378

Phone: 503.583.4123 Fax: _____

E-Mail: _____

Tax ID / SS# : 558-72-9925 INC: no (Yes or No)

Service: entertainment

(select from list below)

advertising	misc fees	purchasing card
abacus trainin	food	refunds
auto repairs	family support	registration
auto supplies	garnishments	rental payments
award-fair premium	health care providor	repairs
bail money	inter-fund loan	retailer
benchwork	insurance	road repair/maint
Bidder	investigation	respite care
building supply	jail supplies	professional services
child care HHS	lab equipment	special needs request
client assistance	lease payments	sheriff supplies
computer	license	summer school
conferences	lodging	subscriptions
construction	memberships	supplies
contract services	misc.	tax distributions
computer supplies	manufacturer	telephone
distributor	medical services	tools
dues	non-emp reimburse	towing
emergency loans	office equipment	tax payments
educational materials	petty cash	training
entertainment	pharmaceutical	travel
equipment	postage for meter	training supplies
equip. rental	printing services	volunteer recognition
election worker	property tax refund	witness fees
foster care	publications	wholesaler

Request for Taxpayer Identification Number and Certification

**Give Form to the
 requester. Do not
 send to the IRS.**

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.
MARK IRA SIEGEL

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification; check only one of the following seven boxes:
 Individual/sole proprietor or single-member LLC
 Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____
 Other (see instructions) ▶ _____
 C Corporation
 S Corporation
 Partnership
 Trust/estate

Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner.

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):
 Exempt payee code (if any) _____
 Exemption from FATCA reporting code (if any) _____
(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.)
20950 SW ROCK CREEK RD UNIT 22 B

6 City, state, and ZIP code
SHRIMAN, OR 97378

7 List account number(s) here (optional)

Requester's name and address (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number
558 - 72 - 9925

or

Employer identification number

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here Signature of U.S. person ▶ Mark Ira Siegel Date ▶ 7/5/2016

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding?* on page 2.

By signing the filled-out form, you:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
- Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

July 5, 2016

Mr. Al Westhoff
Yamhill County Fair
2070 NE Lafayette Ave
McMinnville, OR 97128

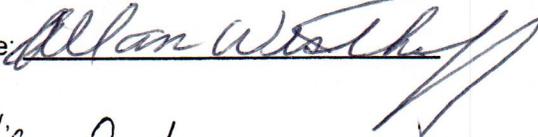
Dear Al,

As requested here is my performance confirmation letter for my upcoming walk-around magic performances on August 3, 4, 5 & 6 at the Yamhill County Fair.

As requested, I will perform for 2 hours each day (except for short breaks) entertaining Fair guests with my strolling magic. We have tentatively set the time from 3 to 5 PM each day, but you may have me start later in the afternoon one or more of the days.

As agreed, the charge for my entertainment services is \$100 per hour, \$200 for each day, for a total of \$800 for the four days of the fair.

If you would sign and return a copy of this agreement, we will be all set.

Signature: 

Sincerely,



Mark Siegel (Mark The Magician)
20950 SW Rock Creek Rd. Unit B
Sheridan, OR 97378

Yamhill Towing
 1350 S.E. Davis St.
 McMinnville OR 97128
 (503) 434-9119

McMinnville Towing
Tows R Us
 1350 S.E. Davis St.
 McMinnville OR 97128
 (503) 434-1515



Mailing Address
 PO Box 701
 Yamhill, OR 97148

Invoice #

21491

P.O. #	Cash	Charge	Check	Date	7-8-16	
Charge To:	Yamhill County Fair					
Address						
City	State	Zip				
Make/Model	Year	State	Lic. #			
VIN #						
Owner						
Address						
City	State	Zip				
Comments						
					Driver	
Type:	Stuck	Tow	Wreck	Service	Tow Away	Other
Towed From	Towed To					
Towing:	# Miles	\$ per Mile	6,000.00			
En Route:	# Miles	\$ per Mile				
Retow						
Hook-Up						
Storage:	# Days	\$ per Day				
Recovery						
Dolly or Flatbed	DESTRUCTION					
Gate Fee	DENBY					
Dispatch Fee	AUG 6 016					
After Hours	PAY OUT					
Extra Truck	Extra Person					
Cleanup	543-60-1052					
Keys:	Yes	No	55#			
					Subtotal	
Not responsible for loss or damage to vehicle or contents thereof in case of fire, theft, or any other cause beyond our control.					Total	6,000.00

AUTHORIZED BY **X** [Signature] Date _____
 VEHICLE REMOVAL AUTHORIZED BY **X** _____ Date _____

