SMALL, WOMEN AND MINORITY BUSINESS ENTERPRISES TO BE UTILIZED

Contract #	
Contract Title:	
Name of Bidder:	
Firm:	
Address:	
	☐ WBE
Phone:	
Description of Work Element or Supplies:	Other
	Subcontractor
	Supplier Manufacturer
Amount to be contracted \$	
<u>_</u>	
Firm:	
Address:	 ☐ WBE
Phone:	Other
Description of Work Element or Supplies:	☐ Subcontractor
	Supplier
Amount to be contracted \$	☐ Manufacturer
Firm:	
Address:	
	Joint Venture%
Phone:	Other
Description of Work Element or Supplies:	☐ Subcontractor
	☐ Supplier
Amount to be contracted \$	Manufacturer
USE ADDITIONAL SHEET	S IF NECESSARY
Signature of Authorized Official	Date
Name and Title of Authorized Official	_