

ECONOMICALLY DISADVANTAGED BUSINESS PARTICIPATION SUMMARY SHEET

Minimum Percentage Goal Participation for this Contract is ____%

[illegible]

Name and Address of Disadvantaged Business Enterprise Company	Name of Contact Person	Scope of Work to be Performed	Dollar Amount of work to be performed	Percentage of Dollar Amount to Total Bid Price

THIS FORM MUST BE COMPLETED AND SUBMITTED WITHIN TIMEFRAME STIPULATED IN BID SPECIFICATIONS. FAILURE TO DO SO WILL RENDER THE BID NON-RESPONSIVE.

NOTE: Signature required even if judged **NOT APPLICABLE** by the **BIDDER**

Prime Representative Name: _____
Print Name

Prime Company's Name: _____

Prime Address: _____

Prime Signature: _____
Signature

Date: _____

E-mail: _____

Telephone Number: _____

Revised December 9, 2024