

LOCAL ASSISTANCE MWBE SUBCONTRACTOR/SUPPLIER UTILIZATION PROPOSAL FORM

New York State Division of Criminal Justice Services

IMPORTANT: A LOCAL ASSISTANCE MWBE SUBCONTRACTOR/SUPPLIER UTILIZATION PROPOSAL FORM MUST BE SUBMITTED WITH BID OR PROPOSAL. IN ADDITION TO THE INITIAL SUBMITTAL OF THIS FORM, IT MUST BE SUBMITTED FOR EACH SUBSEQUENT CONTRACT/RENEWAL PERIOD AND WITH ANY REQUESTS FOR BUDGET MODIFICATION, PROVIDING DETAIL OF NEW OR REASSESSED GOALS.

Grantee (Contractor) Information:

1. Name: Erie County District Attorney's Office Address: 25 Delaware Avenue, 7th Floor, Buffalo, NY 14202

Contact Person/Title: Amy Hughes, Deputy for Administration Telephone Number: 716-858-2461

2. Contract Number: OI13-1035-000 Project Number: OI13484244

4. Project/RFP Title: Operation IMPACT

5. Project Location (Municipality/County/Region): Erie County

6. Contract Amount: \$558,400 7. Grantee Discretionary NPS Amount: 0

8. Contract Award Period: 7/1/13 - 6/30/14

9. Description of Goods/Services/Supplies Provided: N/A

10. MWBE Subcontractor/Supplier Name and Address	11. NYS MWBE Certified Number	12. Description of Services & Supplies	13. MBE Goal Amount	14. WBE Goal Amount	15. Date of Subcontract	19. MWBE Status and Certification		VERIFIED BY DCJS
						<input type="checkbox"/> MBE	<input type="checkbox"/> WBE	<input type="checkbox"/>
						<input type="checkbox"/> NYS Certified	<input type="checkbox"/> Certification Pending	<input type="checkbox"/>
						<input type="checkbox"/> MBE	<input type="checkbox"/> WBE	<input type="checkbox"/>
						<input type="checkbox"/> NYS Certified	<input type="checkbox"/> Certification Pending	<input type="checkbox"/>
						<input type="checkbox"/> MBE	<input type="checkbox"/> WBE	<input type="checkbox"/>
						<input type="checkbox"/> NYS Certified	<input type="checkbox"/> Certification Pending	<input type="checkbox"/>
						<input type="checkbox"/> MBE	<input type="checkbox"/> WBE	<input type="checkbox"/>
						<input type="checkbox"/> NYS Certified	<input type="checkbox"/> Certification Pending	<input type="checkbox"/>
16. Discretionary NPS Amount:		17. Total MWBE Goals:		18. Total MWBE Percentages:				

NOTE: If NYS MWBE Certification is pending, a copy of the notice of application receipt issued by the NYS Empire State Development Corporation must accompany this form.

20. Contractor Signature/Agreement:

Printed Name: Amy Hughes

[Signature]

My firm proposes to use the MWBEs listed above.

Date: 9/5/13

MWBE Firms:

NYS Certified Certification Pending Unknown

Reviewer Comments:

FOR DCJS USE ONLY

OPDF Contract Manager:

[Signature]

Review Date:

10/9/13