DISADVANTAGED BUSINESS ENTERPRISES (DBE) COMMITTAL SHEET

Information must be shown on this sheet as required by the supplemental specifications entitled “Disadvantaged Business Enterprises (DBE) Supplemental Specification” included in this proposal.

FAILURE TO PROVIDE ALL INFORMATION REQUIRED ON THIS FORM MAY RESULT IN THE AWARD BEING MADE TO THE NEXT LOWEST RESPONSIBLE AND RESPONSIVE BIDDER. FOR DESIGN BUILD PROJECTS, FAILURE TO PROVIDE ALL INFORMATION REQUIRED ON THIS FORM MAY RESULT IN SANCTION IN ACCORDANCE WITH PART B OF THE DBE SUPPLEMENTAL SPECIFICATIONS.

<table>
<thead>
<tr>
<th>1Name &amp; Address of DBE’s (Subcontractor or Supplier)</th>
<th>2Percent</th>
<th>3Description of Work and Approximate Quantity (show percent when appropriate)</th>
<th>4Dollar Value</th>
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<td></td>
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<td>Item</td>
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**BASED ON THE ABOVE, BIDDER’S TOTAL COMMITTAL FOR THIS CONTRACT:** ______________%

**THE CONTRACT DBE GOAL LISTED IN PART A OF THE SUPPLEMENTAL SPECIFICATION:** ______________%

1. The designation of Firm A and/or B is not considered acceptable. I hereby certify that this company has communicated with and received quotes from the DBE’s listed above and that they are willing to perform the work as listed above and that this company is committed to utilizing the above firm(s) on this contract.

2. Percent – show percent of total contract amount committed to each DBE listed.

3. All information requested must be included unless item is listed in proposal on a lump sum basis.

4. Unit Price – show unit price quoted by DBE.

5. Dollar Value – extended amount based on Quantity and Unit Price.

6. Applies to lump sum items only.

The form may be reproduced or additional sheets added in order to provide all requested information.

SWORN to before me this ____________ day of __________________________, 20__

________________________________________ (SEAL)

By: _____________________________________
Notary Public for ________________________
My commission expires: ____________________

Company

Title: ________________________________