PROPOSER'S LIST

| FOR NAME OF PRIME CONTRACTR OR/CONTRACTOR | |
|--|---|
| - HOR N A ME OF PRIME (ONLY A L POP/LONIE A L TOP | • |
| | |

The Contractor shall provide information on ALL prospective subcontractor(s)/supplier(s) who were contacted or submitted bids/quotations in support of this solicitation. **Attach additional copies of the form as necessary**.

| NAME OF SUBCONTRACTOR/SUPPLIER(S) | SCOPE OF WORK TO BE PERFORMED | CERTIFIED DBE FIRM? (Check all that apply) | PERVIOUS YEAR'S ANNUAL GROSS RECEIPTS | UTILIZING ON THIS CONTRACT? (Please circle answer) |
|--------------------------------------|----------------------------------|--|---------------------------------------|--|
| NAME: ADDRESS: | SCOPE OF WORK: | YES: | Less than \$500K | YES or NO |
| | | | \$500K-\$2 mil | |
| PHONE: | | NO: | \$2 mil - \$5 mil | |
| FAX: | | 7 | more than \$5 mil. | |
| CONTACT PERSON: | AGE OF FIRM: | | | |
| NAME: ADDRESS: | SCOPE OF WORK: | YES: | Less than \$500K | YES or NO |
| NAME . | | No. | \$500K-\$2 mil | |
| PHONE: FAX: | | NO: | \$2 mil - \$5 mil | _ |
| | | | more than \$5 mil. | |
| CONTACT PERSON: NAME: ADDRESS: | AGE OF FIRM: SCOPE OF WORK: | YES: | Less than \$500K | YES or NO |
| | | | \$500K-\$2 mil | |
| PHONE: | | NO: | \$2 mil - \$5 mil | |
| FAX: | | | more than \$5 mil. | |
| CONTACT PERSON: | AGE OF FIRM: | | | |
| NAME: ADDRESS: | SCOPE OF WORK: | YES: | Less than \$500K | YES or NO |
| | | | \$500K-\$2 mil | |
| PHONE: | | NO: | \$2 mil - \$5 mil | |
| FAX: | | 1 | more than \$5 mil. | 1 |
| CONTACT PERSON: | AGE OF FIRM: | | | |

| Name/Title of person completing this form: | |
|--|-------|
| | |
| Signature: | Date: |