## OFFICE OF BUSINESS DIVERSITY AND CIVIL RIGHTS

## MBE/WBE PARTICIPATION PLAN AND AFFIRMATION STATEMENT

PA 3760A /3-16

Instructions: Submit one MBE/WBE PARTICIPATION PLAN AND AFFIRMATION STATEMENT form for each MBE/WBE firm used on this Contract. To avoid undue repetition, the following terms, as used in this Agreement, shall be construed as follows: Bidder/Proposer/Respondent - can used interchangeably and mean any Contractor, Consultant, Supplier, or Vendor who submits a response to this solicitation.

BID NUMBER AND TITLE:			
BIDDER: Name of Firm:			
Address:			
Email Address:			
MBE/WBE: Name of Firm:			
Address:		Telephone:	
Description of work to be performed by MBE/WBE:			
Calculation (supply only):			
The Bidder is committed to utilizing the above-named MBE/WBE for the or% of the total contract amount of \$ The anticipated			
	start date is	and the anticipated completion date is	
AFFIRM	MATION of MBE/V	WBE	
The above-named MBE/WBE affirms that it will perform the portion of the	ne Contract for the e	stimated dollar value as stated above.	
By: Signature of Principal or Officer of MBE/WBE – Print Name and	d Title	Date:	
	ned in it is true. I full osers in connection v	(company name), certify that I have read the PA 3760AMBE/WI ly understand that any false statement within this submittal may prevent with future agreements. In addition, any false statement within this subm	it the compan
Signature of Bidder	Title	Date	
Please Note: Only 60% of the expenditure to a MBE/WBE material supplier will estimated MBE/WBE dollar value of work. Plan cannot be accepted without calculated the control of the expenditure to a MBE/WBE material supplier will estimated MBE/WBE dollar value of work.		e MBE/WBE goal. Please show calculation above. Example: \$100,000 x 60% =	=\$60,000

Officer of Bidder must have ACKNOWLEDGEMENT BY NOTARY PUBLIC completed on the reverseside.

## ACKNOWLEDGEMENT BY NOTARY PUBLIC

## PA 3760A MBE/WBE PARTICIPATION PLAN AND AFFIRMATION STATEMENT (reverse)

STATE OF	_)			
COUNTY OF	S.S.: _)			
, of	, personally know	before me, the above undersigne n to me or proved to me on the basis of nd acknowledged to me that he/she execu	of satisfactory evidence to be the indivi-	
Name of Notary (print)				
(Affix Notary Stamp Here)				
My Commission Expires	– (Notary Signature)	(Date)		