SCHEDULE C MBE/WBE/SBE/EBE/DVBE/OBE UTILIZATION PROFILE

**Project Title Contract No.**

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| --- | --- |
| **Consultant** | **Address** |
| **Contact Person** | **Phone/Fax** |

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| --- | --- | --- |
| **CONTRACT AMOUNT**  **(INCLUDING AMENDMENTS)** | **THIS INVOICE AMOUNT** | **INVOICED TO DATE AMOUNT**  **(INCLUDE THIS INVOICE)** |
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| **MBE/WBE/SBE/EBE/DVBE/OBE SUBCONSULTANTS (LIST ALL SUBS)** | | | | | |
| **NAME OF SUBCONTRACTOR** | **MBE/WBE/ SBE/EBE/ DVBE/OBE** | **ORIGINAL SUBCONTRACT AMOUNT** | **THIS INVOICE (AMOUNT NOW DUE)** | **INVOICED TO DATE (INCLUDE THIS INVOICE)** | **SCHEDULED PARTICIPATION TO DATE** |
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| **CURRENT PERCENTAGE OF MBE/WBE/SBE/EBE/DVBE/OBE PARTICIPATION TO DATE** | | | **Signature of Person Completing this Form:**  **Printed Name of Person Completing this Form:**  **Title: Date:** |
|  | **DOLLARS** | **PERCENT** |
| **TOTAL MBE PARTICIPATION** | **$** | **%** |
| **TOTAL WBE PARTICIPATION** | **$** | **%** |
| **TOTAL SBE PARTICIPATION** | **$** | **%** |
| **TOTAL EBE PARTICIPATION** | **$** | **%** |
| **TOTAL DVBE PARTICIPATION** | **$** | **%** |
| **TOTAL OBE PARTICIPATION** | **$** | **%** |

**MUST BE SUBMITTED WITH EACH INVOICE**

Rev. 12/30/12 (Public Works RFQ - BAVN)

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