Project Name _____ **Bid Opening Date** _____

MWESB SUBCONTRACTOR/SUPPLIER SOLICITATION AND UTILIZATION

All bidders, including DBE prime bidders, if submitting firm information in response to the MWESB Aspirational Target should submit this form to ODOT Office of Civil Rights, DBE Program, 355 Capitol Street NE, Room 504, Salem, OR 97301-3871 or FAX the form to the Office of Civil Rights at 503-986-6382 within 10 calendar days after the bid opening date. This information will be used to construct a MWESB Plan. The bidder acknowledges and certifies that this form accurately represents receipt of and consent from the listed firms as to the consideration for performance on this project. Bidder certifies that it had direct contact with the named firms regarding participation of this project.

Bidder Signature	Date	Title

Name of Contractor (Company Name)	Phone No. (include area code)	Fax No. (include area code)

Name of Firm	Phone Number	MWESB Y- N	Utilized/Not Utilized

Additional sheets may be used by copying this form.