EO-402DB (3-25)



MONTHLY DIVERSE BUSINESS R SUBCONTRACTING STATUS REPORT

Report No:	Final 🗖
Reporting Month:	Reporting Year:

Contract Number:				Original Contract Amount:					
Purchase Order Number:			Current Contract Amount:						
Prime Contractor:				DB Commitment Amount:					
DB Firm(s) Name	Date of Executed Subcontract	Dollar Amount of Executed Subcontract	Dollar Amount Paid This Month	Check Number	Second Tier Non-DB Subcontractor Yes or No	Name of Second Tier Non-DB Subcontractor		Dollar Amount Paid to Second Tier Non-DB Subcontractor	Dollar Amount Paid to DB to Date
I certify that contracts have been executed with the above firms, amounts listed are accurate and payments were made in accordance with contractual obligations. Cancelled checks and/or supporting information will be on file for inspection or audit.								ONLY	
Company Official's Signature		Title					Reviewed by		
Print Name		Telephone Number		Date			Date Received		

Instructions for Completion of EO-402DB, Monthly Diverse Business Subcontracting Status Report

General Information

Report No: Indicate the Report Number. Report numbers are sequential starting with "1". **Final:** This box should only be checked if this is the final monthly report for the contract.

Reporting Month: Indicate the month the reporting period covers. **Reporting Year:** Indicate the year the reporting period covers.

Contract Information

- 1. For each active contract (which contains 100% state funds) you must complete the following:
 - a. **CONTRACT NUMBER:** Indicate the contract number assigned by the Department.
 - b. **PURCHASE ORDER NUMBER:** List the purchase order number assigned by the Department.
 - c. **PRIME CONTRACTOR:** Indicate the firm name of the vendor awarded the contract (prime).
 - d. ORIGINAL CONTRACT AMOUNT: Provide the total dollar amount of the prime contract at time of award.
 - e. **CURRENT CONTRACT AMOUNT:** Provide the current total dollar amount of the prime contract. This should take into account work or change orders issued since the original contract was awarded.
 - f. **DB Commitment Amount:** Provide the dollar amount committed to the DB.
- 2. The remainder of the report should reflect the utilization of all DB firms during the reporting period. Even if no DBs were utilized during the reporting month, you must still submit a report indicating no activity and any progress made from previous reporting periods.
 - a. DB FIRM NAME: Indicate the name of the DB firm being used on the contract.
 - b. DATE OF EXECUTED SUBCONTRACT: State the date a subcontract was executed between the prime contractor and the DB firm.
 - c. DOLLAR AMOUNT OF EXECUTED SUBCONTRACT: Provide the dollar amount of the executed subcontract between the prime contract and the DB firm.
 - d. **DOLLAR AMOUNT PAID THIS MONTH:** Provide the dollar amount paid during the reporting month (put \$0.00 if no payment was made) to the DB firm in support of the prime contract.
 - e. **CHECK NUMBER:** Provide the check number(s) for payments made to a DB firm during the reporting month in support of the prime contract.
 - f. Will any portion of this DB Commitment Amount be subcontracted to a second tier non-DB subcontractor? Please fill in yes or no
 - g. **SECOND TIER NON-DB SUBCONTRACTOR:** Provide the name of the second tier non-DB subcontractor if applicable.
 - h. **DOLLAR AMOUNT PAID To SECOND TIER NON-DB SUBCONTRACTOR:** Provide the dollar amount paid to the second-tier non-DB subcontractor. **Note:** The Department is only able to count the value of the subcontracted work if the subcontracted is completed by a DB. The services that DB subcontracts to a non-DB firm will not be counted by the Department. Example: Subcontractor A is a DB subcontractor and receives \$100. Subcontractor A subcontracts \$50 of work to a subcontractor who is not a DB. Therefore, only \$50 would be counted as payment to DB Subcontractor A.
 - i. DOLLAR AMOUNT PAID TO DATE: Provide the total dollar amount paid to date to DB firms in support of the prime contract.
- 3. Once the report is complete the individual responsible should complete the following:
 - a. **COMPANY OFFICIAL'S SIGNATURE:** The completed report should be completed, printed and signed by an official of the prime contractor certifying that the information on subcontracts and amounts paid to DB firms are accurate and in accordance with contractual obligations.
 - b. **TITLE:** Provide the title of the company official that is certifying that the information on subcontracts and amounts paid to DB firms are accurate and in accordance with contractual obligations.
 - c. **PRINT NAME:** Print the name of the company official.
 - d. **TELEPHONE NUMBER:** Provide a telephone number where the company official can be reached should guestions arise regarding the completed report.
 - e. DATE: State the date the report was completed and signed by the company official.

The form should be completed and emailed to the program resource account, <u>pd-non-ecms-db@pa.gov</u>. Should you have any questions or concerns in completing this report, you may contact the Bureau of Equal Opportunity for guidance. The Bureau can be reached via the email resource account, <u>pd-non-ecms-db@pa.gov</u> or via telephone at 717-787-5891.