NYS Office of General Services

Serving New York

MWBE UTILIZATION PLAN

Contract No.: IFB# 1874

INSTRUCTIONS: This form must be submitted with any bid, proposal, response to request for qualifications or proposed negotiated contract or within a reasonable time thereafter, but prior to contract award as required in the IFB, RFP or RFQ. This Utilization Plan must contain a detailed description of the supplies and/or services to be provided by each certified Minority and Women-owned Business Enterprise (MWBE) under the contract. Attach additional sheets if necessary.

Contractor's Name, Address and Telephone No.	Contract Description Location (Region)	MWBE Goals in Contract
DBS Industries D/B/A Diversified Business Systems 144 Hilldale Ave. P.O. Box 110 Haverhill, MA 01831 978-373-4748 Federal Identification No. 04-2490382	Printing of NYS Voter Registration forms	MBE 10 % WBE 10 %

Clifford & Clifford 600 E Crescent Ave Upper Saddle River, NJ 07458 978-318-6990	45-4209778	Yes ☐ MBE	☐	Clifford & Clifford is the merchant that we will be buying the raw stock to print this job on. They are certified by NY/NJ Port Authority and have MBE certification pending	Stock on this order will be approx $18790.00 or approx 50% of the value of the job. Stock would be ordered upon receipt of eacj Purchase Order.

IF UNABLE TO FULLY MEET THE MBE AND WBE GOALS SET FORTH IN THE CONTRACT, CONTRACTOR MUST SUBMIT A REQUEST FOR WAIVER (Form MWBE 101/BDC 333)

Submission of this form constitutes the contractor's acknowledgement and agreement to comply with the M/WBE requirements set forth under NYS Executive Law, Article 15-A and 5 NYCRR Part 142. Failure to submit complete and accurate information may result in a finding of noncompliance or rejection of the bid/proposal and/or suspension or termination of the contract.

Prepared By (Signature) [signature] | Email Address: nmcges@dbsforms.com

Name and Title of Preparer (Print or Type) Jeffrey G. Linehan, President	Telephone No. 978-373-4748	Date 5/28/14

FOR M/WBE USE ONLY

Reviewed By [signature]				Date 6/11/14
Utilization Plan Approved ☒ Yes ☐ No				Date 6/13/14
Contract No.	Project No. (If applicable) IFB 1874	Contract Award Date	Estimated Completion Date	Contract Amount Obligated
Notice of Deficiency Issued ☐ Yes ☐ No	Date	Description of Work		
Notice of Acceptance Issued ☒ Yes ☐ No	Date 6/13/14			

MWBE - 00 (5/12)