



Annual Minority Business Enterprise (MBE)

Procurement Report

FY2017 Summary Statement

| | |
|------------------------------|--|
| Reporting Department/Agency: | |
| Fiscal Year: | |

| Category | Amount | | | | |
|--|--|--|---|--|--|
| 1. Total dollars awarded to MBEs (Total from Form 1 Spreadsheet) | | | | | |
| 2. Total dollars paid to MBEs (Total from Form 3 Database, sum of 2a and 2b below) | | | | | |
| <table border="1"> <tr> <td>a. Total Actual Subcontractor Payments by MBE Classification</td> <td></td> </tr> <tr> <td>b. Total Prime Contractor Actual Payments by Classification (excluding non-minority primes)</td> <td></td> </tr> </table> | a. Total Actual Subcontractor Payments by MBE Classification | | b. Total Prime Contractor Actual Payments by Classification (excluding non-minority primes) | | |
| a. Total Actual Subcontractor Payments by MBE Classification | | | | | |
| b. Total Prime Contractor Actual Payments by Classification (excluding non-minority primes) | | | | | |
| 3. Total dollars awarded (Total from Form 1 Spreadsheet) | | | | | |
| 4. MBE awards as a percentage of contracts awards (from Form 1 Spreadsheet) | | | | | |
| Secretary/Agency Head Name: | | | | | |

This summary is not complete until the three respective signatures on Page 2 have been obtained.

This is a Fill-In Form. Use your Tab Key to move to each input field and enter the information as required.

Annual Minority Business Enterprise (MBE) Procurement Report

FY2017 Summary Statement - Page 2

Reporting Department Agency:

Fiscal Year:

Agency Representative who Prepared Report:

I hereby attest that I reviewed the FY MBE Reports and any attachments and the information therein is true and correct to the best of my knowledge, information and belief.

PRINT NAME: _____ TITLE: _____

SIGNATURE AND DATE: _____

Reviewed and Approved by Agency Chief Financial Officer:

I hereby attest that the vendor payment information included in the current FY MBE Reports is true and correct to the best of my knowledge, information and belief.

PRINT NAME: _____ TITLE: _____

SIGNATURE AND DATE: _____

Reviewed and Approved by Agency Head or Designee:

I hereby attest that I reviewed the FY MBE Reports and any attachments and the information therein is true and correct to the best of my knowledge, information and belief.

PRINT NAME: _____ TITLE: _____

SIGNATURE AND DATE: _____