

**FORM – C**

**SBE GOOD FAITH EFFORT DOCUMENTATION – ALL CERTIFIED SBE FIRMS NOTIFIED**

**Note:** Completion of this form is not required if established project goals are met or exceeded.

List all certified SBE firms notified. Indicate in detail when and how they were notified as well as the results of your efforts. Submit additional sheets, if necessary.

**Bidder/Contractor/Respondent Name:** \_\_\_\_\_

**Project Title:** \_\_\_\_\_

The following certified SBE firms were invited to submit a proposal.

<b>SBE Type of Goal</b>	<b>Certified Firm Name Address, Phone No. and Email</b>	<b>Certified Firm Contact Person</b>	<b>Methods of Contact</b>	<b>Prime Contact Date</b>	<b>Certified Firm Response</b>	<b>Results of Contact</b> <i>(Please indicate why suitable or not suitable for work)</i>
<input type="checkbox"/> SBE			Phone# Email Fax#	_____ _____		
<input type="checkbox"/> SBE			Phone# Email Fax#	_____ _____		
<input type="checkbox"/> SBE			Phone# Email Fax#	_____ _____		
<input type="checkbox"/> SBE			Phone# Email Fax#	_____ _____		
<input type="checkbox"/> SBE			Phone# Email Fax#	_____ _____		

**Print Name:** \_\_\_\_\_ **Email Address:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Authorized Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_