

STATE OF INDIANA MBE/WBE SUBCONTRACTOR COMMITMENT FORM

BID#: ASA 23-74580

Does not Apply / Not using Subcontractors

TOTAL BID AMOUNT:

<input type="checkbox"/> MBE Firm	<input type="checkbox"/> WBE Firm		
Company Name:		Contact Person:	
Address:		E-mail:	
Sub-Contract Amount:		Telephone Number: ()	Fax Number: ()
Sub-Contract Percentage of Total Bid:		Describe service/product to be provided and how this is a Valuable Scope Contribution of the Contract. Include the applicable certified UNSPSC that applies to this commitment.	
Provide approximate dates when Sub-Contractor will perform on this project:			

<input type="checkbox"/> MBE Firm	<input type="checkbox"/> WBE Firm		
Company Name:		Contact Person:	
Address:		E-mail:	
Sub-Contract Amount:		Telephone Number: ()	Fax Number: ()
Sub-Contract Percentage of Total Bid:		Describe service/product to be provided and how this is a Valuable Scope Contribution of the Contract. Include the applicable certified UNSPSC that applies to this commitment.	
Provide approximate dates when Sub-Contractor will perform on this project:			

Respondent Firm
 400 Gardners Station Rd
 Address
 Gardners, PA 17324
 City/State/Zip Code

Representative
 3/24/23
 Date

717 677-6181 ext 341
 Telephone Number

Fax Number
 Kathryn.Haller@zeiglerfeed.com
 Email Address

Kathryn Haller
 Authorizing Signature
 Kathryn Haller
 Printed Name and Title

☐ Please check if additional forms are attached.

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FORM MUST BE COMPLETED IN ITS ENTIRETY WITH COMPLETED LETTERS OF COMMITMENT.