

STATE OF INDIANA MBE/WBE SUBCONTRACTOR COMMITMENT FORM

RFP#: 23-74923

TOTAL BID AMOUNT: Grand Total EGR Cost: \$211,300

| | | | |
|---|--|-------------------------------------|----------------------|
| <input type="checkbox"/> MBE Firm <input checked="" type="checkbox"/> WBE Firm | | | |
| Company Name: Suzanne Wheeler | Contact Person: Suzanne Wheeler | | |
| Address: 18245 Farm Lane, South Bend, IN 46637 | E-mail: suzwh1@netzero.com | | |
| Sub-Contract Amount: \$55,000 (\$3,000 per profile, \$750 per addendum and \$250 per consultation). | <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; padding: 2px;">Telephone Number: (574) 250-0528</td> <td style="width:50%; padding: 2px;">Fax Number: ()</td> </tr> </table> | Telephone Number: (574) 250-0528 | Fax Number: () |
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| Sub-Contract Percentage of Total Bid: 26% | Describe service/product to be provided and <u>how this is a Valuable Scope Contribution of the Contract.</u> WorkKeys Job Profiling and Workforce/Training Development Needs Assessment and Implementation | | |
| Provide approximate dates when Sub-Contractor will perform on this project: August 2024-July 2025 | | | |

| | | | |
|---|---|----------------------------|----------------------|
| <input type="checkbox"/> MBE Firm <input type="checkbox"/> WBE Firm | | | |
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| Address: | E-mail: | | |
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| Telephone Number: () | Fax Number: () | | |
| Sub-Contract Percentage of Total Bid: | Describe service/product to be provided and <u>how this is a Valuable Scope Contribution of the Contract:</u> | | |
| Provide approximate dates when Sub-Contractor will perform on this project: | | | |

Respondent Firm
Tecumseh Area Partnership, Inc.

Address
976 Mezzanine Dr., Suite C

City/State/Zip Code
Lafayette, IN 47905

Representative

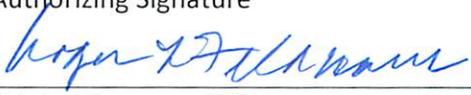
Roger L. Feldhaus

Date 7/13/2023

Telephone Number
765-807-0880

Fax Number
765-471-7830

Email Address
rfeldhaus@tap.lafayette.in.us

Authorizing Signature


Printed Name and Title
Roger L. Feldhaus, Chief Executive Officer

Please check if additional forms are attached.
Page _____ of _____

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



Suzanne Wheeler

18245 Farm Lane Drive
South Bend, IN
574-250-0528

Suzwh1@netzero.com

July 10, 2023

Mr. Chris Waymire
Director, WorkKeys Solutions Center

Dear Chris,

I am writing this letter to let you know that I am interested in continuing to perform WorkKeys Job Profiling for Tecumseh Area Partnership. I am an experienced ACT WorkKeys Job Profiler and have over 20 years' experience in profiling and have profiled in a wide variety of industries, including, but not limited to manufacturing, health care, customer service, apprenticeships, etc. I have profiled over 200 job positions as an ACT WorkKeys Job Profiler.

As a subcontractor for WorkKeys Job Profiling, I hereby certify that I will comply with all State statutes and will abide by all ACT policy and procedures in the completion of WorkKeys Job Profiling. I will continue to remain current in the ACT Licensing to allow the use of the ACT program. I will be performing WorkKeys Job Profiling Services upon the approval of the contract to the above listed vendor for the entire period of the contract (August 2024-July 2025). I will perform these Job Profiling Services for approximately \$55,000 which is approximately 26% of the total contract amount of \$211,300.

I, the undersigned, am certified as a Women's Owned Business Enterprise effective October 2015, and am registered with the State of Indiana ID EXT0000038188. As an Independent Contractor I am the authorized signature for all business in this matter.

Sincerely,

Suzanne Wheeler
ACT Authorized Job Profiler