

**INDIANA ECONOMIC IMPACT - PROPOSALS AND CONTRACTS**

State Form 51778 (R4 / 1-06)

DEPARTMENT OF ADMINISTRATION

Approved by State Board of Accounts, 2006

This information is required by the Indiana Department of Administration for all contractors, vendors/suppliers to the State of Indiana (complete all 22 items).

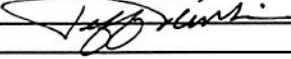
1	Legal Name of firm:	Whitley County Chevrolet, LLC
2	Address/City/State/Zip Code:	3100 E. Business Highway 30, Columbia City, IN 46725
3	Telephone #/Fax #/Website:	260-212-5563; website: gocitychevy.com
4	Federal Tax Identification Number:	27-3371372
5	State/Country of domicile/incorporation:	Domiciled in the State of Indiana, United States of America
6	Location of firm's headquarters or principal place of business:	3100 E. Business Highway 30, Columbia City, IN 46725
7	Name of parent company or holding company (if applicable):	N/A
8	State/Country of domicile/incorporation of company listed in #7:	N/A
9	Address of company listed in #7:	N/A
10	IN Department of Workforce Development (DWD) account number:	615066
11	IN Department of Revenue (DOR) account number:	139239820
12	Number of Indiana resident employees per most recently completed IRS Form W-2 distribution:	69
13	Total number of employees per most recently completed IRS Form W-2 distribution:	69
14	Total amount of payroll paid to Indiana resident employees per most recently completed IRS Form W-2 distribution:	2,143,260.78
15	Total amount of payroll paid to all employees per the most recently completed IRS Form W-2 distribution:	2,143,260.78
16	Total amount of this proposal, bid, or current contract:	\$ 154,734.00

**ACCOUNTING OF INDIANA RESIDENT EMPLOYEES**

17	Prime Contractor Company Name:	
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18	<b><u>Number of Full Time Equivalent (FTE) employees</u></b> that are Indiana residents specifically for this proposal or contract:	0.09
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19	<b><u>Subcontractor Company Name:</u></b>				
20	Address/Contact Person/Telephone Number/Tax ID Number:				
21	<b><u>Number of Full Time Equivalent (FTE) employees</u></b> that are Indiana residents specifically for this proposal or contract:	0.00	0.00	0.00	0.00

22	<b><u>Affirmation by authorized official:</u></b> I affirm under penalties of perjury that the foregoing representations are true to be the best of my knowledge and belief.				
	Signature: 				
	Name of auththorized official:				
	Title: Jeff Junkin				
	Date: 11-11-24				