

STATE OF INDIANA MBE/WBE SUBCONTRACTOR COMMITMENT FORM

RFP#: 23-73695 FOR CLUSTER /

TOTAL BID AMOUNT: \$0

<input type="checkbox"/> MBE Firm <input type="checkbox"/> WBE Firm			
Company Name:	Contact Person:		
Address:	E-mail:		
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Telephone Number: ()</td> <td style="width: 50%;">Fax Number: ()</td> </tr> </table>	Telephone Number: ()	Fax Number: ()
Telephone Number: ()	Fax Number: ()		
Sub-Contract Amount:	Describe service/product to be provided and <u>how this is a Valuable Scope Contribution of the Contract:</u>		
Sub-Contract Percentage of Total Bid:			
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:		
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Sub-Contract Amount:	Describe service/product to be provided and <u>how this is a Valuable Scope Contribution of the Contract:</u>		
Sub-Contract Percentage of Total Bid:			
Provide approximate dates when Sub-Contractor will perform on this project:			

Blue River Services, Inc.

Respondent Firm

PO Box 547

Address

Corydon, IN 47112

City/State/Zip Code

Jennifer Owens

Representative

12/6/2022

Date

812-738-1987

Telephone Number

812-738-1867

Fax Number

jowens@brsinc.org

Email Address



Authorizing Signature

Daniel J. Lowe, CEO

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.