OEBO SCHEDULE 1*

OLICITATION/PROJECT/BID NAME:	SOLICITAT	ION/PROJECT/BIE) NO.:	
OLICITATION OPENING/SUBMITTAL DATE:	COUNTY I	DEPARTMENT:		
Section A PLEASE LIST THE DOLLAR AMOUNT OR PERC	ENTAGE OF WORK TO BE COMPLETED BY	THE PRIME CON	TRACTOR/CONSULTANT* ON THE PROJECT:	
NAME OF PRIME RESPONDENT/BIDDER:		ADDRESS:		
CONTACT PERSON:	PHONE NO.:		E-MAIL:	
PRIME'S DOLLAR AMOUNT OR PERCENTAGE OF WORK: BE Prime's must include their percentage or dollar amount in the Total Pa		on-SBE SBE		
Section B PLEASE LIST THE DOLLAR AMOUNT OR PERC	ENTAGE OF WORK TO BE COMPLETED BY	/ ALL SUBCONTRA	CTORS/SUBCONSULTANTS ON THE PROJECT BEI	L OW :
Subcontractor/Sub consultant Name	(Check all Applicable Categories)		DOLLAR AMOUNT OR	
	<u>Non-SBE</u>	<u>SBE</u>	PERCENTAGE OF WORK	
1.				
2.				
3.				
4.				
5.				
(Please use additional sheets if necessary)			Total	
otal Bid/Offer Price \$		Total Certified SBE	Participation \$	
hereby certify that the above information is accurate to the best of my knowled	lge: Name & Authorized Signa	ture	Title	

- Note: 1. The amount listed on this form for a Subcontractor/sub consultant must be supported by price or percentage listed on the properly executed Schedule 2 or attached signed proposal.
 - 2. Only those firms certified by Palm Beach County at the time of solicitation due date are eligible to meet the established OEBO Affirmative Procurement Initiative (API). Please check the applicable box and list the dollar amount or percentage under the appropriate demographic category.
 - 3. Modification of this form is not permitted and will be rejected upon submittal.
 - 4. If a Mandatory API goal applies, failure to submit a properly executed Schedule 2 will result in a determination of non-responsiveness to the solicitation.