ATTACHMENT C

SUBCONTRACTOR UTILIZATION FORM

Subcontractor Name and Contact Person	Address	Phone Number	Year Subcontractor Was Established	DB Status Yes or No	General Description of the Subcontracted Contract Services	Subcontract Total Dollar Amount	Any Changes Since Last Submittal
							☐ NEW ☐ REVISED
							☐ NEW ☐ REVISED
							☐ NEW ☐ REVISED
							☐ NEW ☐ REVISED
							☐ NEW ☐ REVISED
							☐ NEW ☐ REVISED
							☐ NEW ☐ REVISED

							☐ NEW ☐ REVISED
							☐ NEW ☐ REVISED
							☐ NEW ☐ REVISED
							☐ NEW ☐ REVISED

For each lower tier "covered transaction" (2 C.F.R. Part 180) for the Contract Services which equals or exceeds $25,000.00, the Contractor hereby represents and certifies to Authority that the Contractor has independently verified that each person with which it has entered into such a transaction is not disbarred or disqualified from entering the transaction and has also verified the debarment status of each such person by utilizing the current list of suspended and debarred contractors at "https://www.sam.gov".

_____

Signature and Title of Authorized Official

_____

Print Name

_____

Date