



Vendor's Subcontractor List Wisconsin Contract Compliance Program

Vendor Name:	Bid, Contract and Purchase Order Numbers (as applicable) :
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INSTRUCTIONS: The vendor will subcontract part of this award: No Yes

1. If no, return this form with the Affirmative Action Plan and Vendor Data (DOA-3784), or the Exemption Statement (DOA-3024), as is appropriate, to the contracting state agency.
2. If yes, complete the information below for each subcontractor before returning.
3. Check "MBE" (Minority Business Enterprise) if the vendor believes that any subcontractor is a minority business. s. 560.036, Wis. Stats. defines a minority business as one which is at least 51% owned and operated by a member of a racial ethnic group.
4. The vendor is responsible for forwarding the following information for each subcontractor for a subcontract over \$25,000:
 - A. An Affirmative Action Plan for any subcontractor who has twenty-five (25) employees; or
 - B. An exemption statement from any subcontractor who has less than twenty-five (25) employees.
 (The contracting state agency has forms available for this purpose.)
5. The vendor is responsible for sending subcontractor affirmative action information to its contracting state agency within fifteen (15) working days of any subcontracting date.
6. The vendor should use additional sheets to list subcontractors, if necessary.

MBE ✓	Subcontractor Name/City/State	Date of Subcontract	Commodity/Service	\$ Amount

Prepared By (Please Print)	Date	Telephone Number ()
Title	Signature	

For contracting state agency use only:

Subcontractor(s): Approved	Approved except as noted
Signed	Date
	Agency