

New York State Division of Criminal Justice Services
LOCAL ASSISTANCE MWBE SUBCONTRACTOR/SUPPLIER UTILIZATION PROPOSAL FORM

IMPORTANT: A LOCAL ASSISTANCE MWBE SUBCONTRACTOR/SUPPLIER UTILIZATION PROPOSAL FORM (DCJS-3301) MUST BE SUBMITTED WITH BID OR PROPOSAL. IN ADDITION TO THE INITIAL SUBMITTAL OF THIS FORM, IT MUST BE SUBMITTED FOR EACH SUBSEQUENT CONTRACT/RENEWAL PERIOD AND WITH ANY REQUESTS FOR BUDGET MODIFICATION, PROVIDING DETAIL OF NEW OR REASSESSED GOALS.

Grantee (Contractor) Information:

1. Name: **NEW YORK PROSECUTORS TRAINING INC** Address: **107 COLUMBIA STREET ALBANY, NY 12210**

Contact Person/Title: **WILLIAM J. CALLAHAN** Telephone Number: **518-432-1100 EXT 206**

2. Contract Number: **T464228** Project Number: **MV13-1031** 3. DUNS Number: **947307104**

4. Project/RFP Title: **MOTOR VEHICLE THEFT AND INSURANCE FRAUD** 5. Project Location (Municipality/County/Region): **ALBANY/ALBANY/CAPITAL DISTRICT**

6. Contract Amount: **\$31,900** 7. Grantee Discretionary NP5 Amount: **\$-0-** 8. Contract Award Period: **1/1/14 - 12/31/14**

9. Description of Goods/Services/Supplies Provided:

10. MWBE Subcontractor/Supplier Name and Address	11. NYS MWBE Certified Number	12. Description of Services & Supplies	13. MBE Goal Amount	14. WBE Goal Amount	15. Date of Subcontract	19. MWBE Status and Certification
						<input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> NYS Certified <input type="checkbox"/> Certification Pending
						<input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> NYS Certified <input type="checkbox"/> Certification Pending
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						<input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> NYS Certified <input type="checkbox"/> Certification Pending
16. Discretionary NPS Amount:		17. Total MWBE Goals:				
			18. Total MWBE Percentages:			

NOTE: If NYS MWBE Certification is pending, a copy of the notice of application receipt issued by the NYS Empire State Development Corporation must accompany this form.

20. Contractor Certification: **WILLIAM J CALLAHAN** My firm proposes to use the MWBEs listed above.

21. I certify that to the best of my knowledge, the information provided herein is complete and accurate. Date: **1/22/2014**

MWBE Firms: NYS Certified Certification Pending Unknown

Reviewer Comments:

OPDF Contract Manager: *William J Callahan* Review Date: **1/22/14**