

TBE Participation Recommendation

CONTACT INFORMATION

Contract Administrator: Howard Felix Phone: 278-5133 Date: 6/7/12/2018

Email Address howard.felix@milwaukeecountywi.gov Dept: MCSO(\$25,000) Org No. 4052

PROJECT INFORMATION

Project Name: ATF MOU No.: None

Contract Scope/Project Description (attach scope/description of work or estimating sheet):

This contract represents a 5 year agreement with the ATF. Please see attached MOU.

Contracting Opportunities (List NAICS codes) 561611

TYPE OF PROJECT

Contract Value: Approximately \$25,000 revenue based on 2017 revenue. Contract Type: Purchase of Services

EXPLANATION

Request for a goal of 0% requires signature of department head. Check boxes below. Check all that applies.

- A. \$10,000 or less B. Rental or Lease C. Governmental Agency or Institution
- D. ¹Non-Profit (No subcontract) E. Purchasing or Renewal of software license
- F. ²Contract Extension/Amendment G. ³Specialized H. Only one individual assigned to the contract
- I. The nature (scope of work) of contract doesn't have subcontracting opportunities J. ⁴Grants
- K. No funding use by Milwaukee County L. Special License or Certificate required
- M. Other _____.

Department/Division Administrator Name Pat Carravetta

Signature _____ Date _____

CBDP USE ONLY

Concur with Recommendation _____, or provide the following goals: _____ %

This contract is exempt from a participation goal: ___ Yes ___ No

Approved: _____ Date: _____

Note: 1 Non-Profit is not subcontracting work. 2 Must have the original Participation agreement. 3. No known TBE firms available. 4 No subcontracting to a non-profit entity. 5 A non-Milwaukee County entity is funding the project.