

E-CERTIFICATION NAVIGATION FOR APPLICANT MBE/WBE/IVOSB VENDORS

Division of Supplier Diversity



Sign In



Welcome to the Supplier Portal



Thank you for your interest in doing business with us!

Register Bidders



Bidding Opportunities



08 Opportunities

Events Calendar



0 Calendar Events

Announcements



0 Announcements

FAQs | Contact Us



Get helpful info here.

Public Contracts Search



Buy Indiana Search



Certified M/W/IVOSB Search



Report An Issue



Please visit <https://www.in.gov/idoa/procurement/supplier-resource-center/requirements-to-do-business-with-the-state/bidder-profile-registration/>



Welcome



Identifying Information



Addresses



Contacts



Submit

Exit | Previous Next

Welcome - Step 1 of 5

Please enter the information required in each step to complete your registration. Use the navigation buttons "Next" and "Previous" to move between steps. Once completed, proceed to Step 5 where you may submit your request for registration. You will receive an email notification confirming your submittal.

Exit | Previous Next

* Required field

Welcome

Identifying Information

Addresses

Contacts

Submit

Exit

Previous

Next

Identifying Information - Step 2 of 5

Let's start by gathering some very basic information.

For more details about the requirements in each section, select the question mark next to the section title.

*Indicates a required field.

Unique ID & Company Profile ?

* Tax Identification Number

* Entity Name

Add Attachment

Additional Name

http://URL

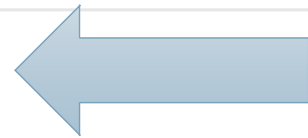
Open URL

Profile Questions ?

* Buy Indiana Program

Are you interested in learning if this business qualifies for "Buy Indiana status" per Indiana Code 5-22-15-20.5?

* Minority/Women/Veteran Businesses
If eligible, a business may be certified by the Indiana Department of Administration as a Minority Business Enterprise.



Indiana Department of Administration - Division of Supplier Diversity



gmisworkflow@iot.in.gov

To [redacted]

[Reply](#) [Reply All](#) [Forward](#) [...](#)

Mon 10/26/2020 11:57 AM

Greetings!

You requested additional information about the State of Indiana certification programs for Minority Business Enterprises, Women's Business Enterprises, and/or Indiana Veteran-Owned Small Business Enterprises. The Indiana Department of Administration, Division of Supplier Diversity, is the state agency responsible for determining eligibility for those programs. For non-Indiana companies, please check this link if Indiana accepts applications from your state: <https://www.in.gov/idoa/mwbe/2492.htm>.

A business may be eligible for certification if it is at least 51% owned by and controlled by a minority, a woman, or a veteran. There are other factors taken into consideration, such as the experience of the business owner. It is possible for a business to hold all three certifications at once, if it meets all the eligibility requirements. Once certified, a company can be counted toward the participation/utilization of MBE, WBE or IVOSB on state-funded contracts.

Why become certified?

Through certification, the Division positions these certified businesses so that they may benefit from subcontracting opportunities on state contracts. In addition, certified Minority, Women and Veteran business enterprises:

MBE/WBE:

- Certification opens doors once closed to MBE/WBEs.
- Certified MBE/WBEs qualify for subcontracting opportunities on state contracts.
- Certified MBE/WBEs qualify as an MBE/WBE for purchasing by casinos and state universities, as well as other public and private organizations.
- Certified MBE/WBEs receive notification of state business opportunities.

IVOSB:

- Ability to be counted for participation as an IVOSB on state contracts.
- There is a 3% set-aside for IVOSBs.
- Certified IVOSBs receive notification of state business opportunities.

Please go to <https://www.in.gov/idoa/mwbe/index.htm> for more information, or to apply.

Sincerely,

The Indiana Dept. of Administration

Your Recent Bidder Registration



XXStateofIndiana@idoa.in.gov

To



We could not verify the identity of the sender. [Click here to learn more.](#)

Congratulations! Your registration as a bidder with the Indiana Department of Administration is complete.

Company Name:

Bidder ID: 00000


Separate notifications containing logon information will be sent to all approved contacts created for this Bidder ID.

[Redacted] - New User Account Creation



XXStateofIndiana@idoa.in.gov

To [Redacted]

 We could not verify the identity of the sender. [Click here to learn more.](#)

A user profile tied to your State of Indiana bidder registration has been successfully created.

User ID: [Redacted]

Password: [Redacted]

Bidder Name: [Redacted]

Bidder ID: 00000 [Redacted]

Using the User ID and password above, follow the link below to log into the Supplier Portal to view or update your registration information.

[State of Indiana Supplier Portal](#)



If you encounter problems, please follow the instructions at [How To Submit An Issue](#) to report an issue and request assistance.

Thank you,
Indiana Department of Administration
Procurement Division

Sign In



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Bidding Opportunities



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Buy Indiana Search



Certified M/W/I/VOSB Search



Report An Issue



Sign In



Welcome to the Supplier Portal



Register Bidders



Bidding Opportunities



09 Opportunities

Events

Password

Password

Enable Screen Reader Mode

Sign In

[Forgot Password?](#)

FAQs | Contact Us



Get helpful info here.

Public Contracts Search



Buy In

Buy Indiana



Report An Issue



ORACLE

PEOPLESOFT

Your password has expired.

[Click here to change your password.](#)

Change Password

User ID JSMITH1

Description James Smith

*Current Password

*New Password

*Confirm Password

Change Password

Bidding Opportunities




0 Events

Documents Waiting Signatures



0 Documents

Manage Profile




Update your Registration and Profile

Supplier Diversity Application



Pay Audit



Division of Supplier Diversity
e-Certification Application

[Application FAQs](#)

Save

Next

Check For Errors

Bidder Registration Number

Force Nation

Federal Identification Number

APPLICATION HAS BEEN STARTED

Which program are you interested in? Please click the checkbox for each program you would like to be considered for certification by the Indiana Division of Supplier Diversity.

- Indiana Veteran Owned Small Business Enterprise (IVOSB)
- Minority-owned Business Enterprise (MBE)
- Women-owned Business Enterprise (WBE)

[Before You Begin \(Checklist\)](#)

[About Applying for Certification](#)

[M/WBE Legal Requirements](#)

[IVOSB Legal Requirements](#)

The following question(s) must be satisfied prior to starting the application.

Which State is your company headquartered?

The following states **do allow** Indiana-based businesses to apply for certification; therefore, firms based in these states **may be considered** for certification through the State of Indiana's Department of Supplier Diversity. Please select your state using the magnifying glass below.

Is your Business Not-For Profit?

- Yes No

General Information

Division of Supplier Diversity
e-Certification Application

Save

Bidder Registration Number 0000052953 ACME Restorations
Federal Identification Number 555669876

APPLICATION HAS BEEN STARTED

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- Indiana Veteran Owned Small Business Enterprise (IVOSB)
- Minority-owned Business Enterprise (MBE)
- Women-owned Business Enterprise (WBE)

DSD Citizenship Required ×

Selected program requires proof of U.S. Citizenship.

Minority-owned Business Enterprise (MBE)

Are you a U.S. Citizen?

Yes No

General Information

Division of Supplier Diversity
e-Certification Application

Bidder Registration Number 0000052953 ACME Restorations
Federal Identification Number 555669876

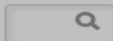
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Look Up

Search by: State begins with

[Advanced Lookup](#)

Search Results

View 100 1-19 of 19

State	Description
AL	Alabama
DE	Delaware
IL	Illinois
IN	Indiana
KS	Kansas
KY	Kentucky
MA	Massachusetts
MO	Missouri
NJ	New Jersey
NY	New York
OH	Ohio
OK	Oklahoma
OR	Oregon
RI	Rhode Island
SC	South Carolina
TN	Tennessee
VA	Virginia
WA	Washington
WI	Wisconsin

General Information

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Before You Begin (Check)
About Applying for Certification
M/WBE Legal Requirements
IVOSB Legal Requirements

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IN Indiana

Is your Business Not-For-Profit?

Yes

DSD Not-For Profit Terms



IC 4-13-16.5-1(g)

"Qualified minority or women's nonprofit corporation" means a corporation that:

1. is exempt from federal income taxation under Section 501(c)(3) of the Internal Revenue Code;
2. is headquartered in Indiana;
3. has been in continuous existence for at least five (5) years;
4. has a board of directors that has been in compliance with all other requirements of this chapter for at least five (5) years;
5. is chartered for the benefit of the minority community or women; and
6. provides a service that will not impede competition among minority business enterprises or women's business enterprises at the time a nonprofit applies for certification as a minority business enterprise or a women's business enterprise.

Accept Not-For Profit Terms

Yes No



General Information

Division of Supplier Diversity
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Bidder Registration Number 0000052953 ACME Restorations
Federal Identification Number 555669876

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Accept Not-For Profit Terms

Yes No

By answering No to the Not-For Profit Terms, you will be disqualified from continuing the application. You will be returned to the main Supplier Portal page and will not be allowed to start the application over. Click one of the buttons below to take your requested action.

Click Here to Disqualify and Close Application

Click Here to Return to the Application



General Information

Division of Supplier Diversity
e-Certification Application

Bidder Registration Number 0000052953 ACME Restorations
Federal Identification Number 555669876

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Division of Supplier Diversity
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Save

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IN Indiana

Is your Business Not-For Profit?

Yes No

Terms Accepted - Yes

How were you referred to us?

- IMSDC
- City of Indianapolis
- WBEC-GL
- INDOT
- MWBE Event
- Other

Division of Supplier Diversity
e-Certification Application

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Check For Errors

Bidder Registration Number

Force Nation

Federal Identification Number

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Is your Business Not-For Profit?

- Yes
- No

Division of Supplier Diversity
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Bidder Registration Number
Federal Identification Number

Force Nation

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Is your Business Not-For Profit?

Yes No

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Bidder Registration Number
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Is your Business Not-For Profit?

- Yes No

Type of Firm

LLC Limited Liability Corporation

	Attachment Description
1	Original and amended articles of organization with filing certificate and
2	Original and amended operating agreement.
3	Bank signature card or LLC bank resolution.
4	Membership certificates of all members if more than one member.
5	Provide Board, Stockholders, or Business meeting minutes from the last meeting minutes, provide a notarized statement with explanation why
6	Prior year corporation taxes – to include (form 1120 and K1s), and all more than one member
7	Prior year personal taxes with schedule C if filling as a one member (

Look Up ✕

Search by: Company Type ▼ begins with ▼

Search
Cancel
Advanced Lookup

Search Results

View 100 |<< < 1-5 of 5 > >>|

Company Type	Description	Short Description
Corporation	Corporation	Corporatio
LLC	Limited Liability Corporation	LLC
Partnership	Partnership	Partnershi
S-Corp	S & C Corporation	(blank)
Sole Prop	Sole Proprietorship	Sole Propr

Total number of the firm's annual full-time work force?

Date business was established

General Information

- Ownership
- Management
- Personnel
- Resources and Suppliers
- Financial Information
- Authorized Signatories
- UNSPSC
- Application Signature

Division of Supplier Diversity
e-Certification Application

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Bidder Registration Number
 Federal Identification Number

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APPLICATION HAS BEEN STARTED

Which program are you interested in? Please click the checkbox for each program you would like to be considered for certification by the Indiana Division of Supplier Diversity.

Attachment Description	Attachment Required	Attachments
1 Original and amended articles of organization with filing certificate and state seal.	Yes	Add/View Attachments (1)
2 Original and amended operating agreement.	Yes	Add/View Attachments (1)
3 Bank signature card or LLC bank resolution.	Yes	Add/View Attachments (1)
4 Membership certificates of all members if more than one member.	Yes	Add/View Attachments (1)
5 Provide Board, Stockholders, or Business meeting minutes from the last 3 years. If you do not have meeting minutes, provide a notarized statement with explanation why there are no meeting minutes.	Yes	Add/View Attachments (1)
6 Prior year corporation taxes – to include (form 1120 and K1s), and all owners personal taxes if filing as more than one member	Yes	Add/View Attachments (1)
7 Prior year personal taxes with schedule C if filing as a one member (sole Proprietor)	Yes	Add/View Attachments (1)

Total number of the firm's annual full-time work force?

Date business was established

General Information

Ownership

Management

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Division of Supplier Diversity
e-Certification Application

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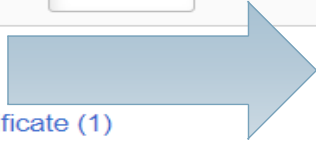
Identify all individuals and list their cash, equipment and/or real estate investments in the firm.

Owners

1 of 3 | View All

Company Name

[Add/View Resume, Driver's License, Birth Certificate \(1\)](#)



[Add Delete](#)

First Name

Middle

Last Name

Phone Number

Extension

Business Address

City

State

Zip Code

Gender

Ethnic Group

[Add/View Supporting Documents \(1\)](#)

Time Owned

Months/Years

Percentage Owned

Example 60.00 = 60%

Initial investment to acquire ownership interest in firm:

Type	Dollar Value
Dollars	<input type="text" value="\$1,000.00"/> Add/View Attachments (1)
Real Estate	<input type="text"/>

General Information

Ownership

Management

Personnel

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Bidder Registration Number

Federal Identification Number



It's A New Day

Important Message

Identify all individuals and list their cash, equipment and/or real estate investments in the firm.

Owners

1 of 1 | View All

Company Name

It's A New Day

Add/View Resume, Driver's License, Birth Certificate (1)

First Name

Middle

Last Name

Phone Number

Extension

Grady

Lane

Business Address

City

State

Zip Code

200 E. Washington Street

Marion

IN

46234

Gender

Ethnic Group

Male

Asian Indian

Add/View Supporting Documents (1)

Initial investment to acquire ownership interest in firm:

Time Owned

Months/Years

Percentage Owned

10

Years

100.00
Example 60.00 = 60%



Type

Dollar Value

Dollars

\$1,000.00

Add/View Attachments (1)

Real Estate

Equipment

\$1,000.00

Add/View Attachments (1)

Are you drawing a salary?

General Information

Ownership

Management

Personnel

Resources and Suppliers

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It's A New Day

Important Message

Identify all individuals and list their cash, equipment and/or real estate investments in the firm.

Owners

1 of 1 | View All

Company Name

It's A New Day

Add/View Resume, Driver's License, Birth Certificate (1)

First Name

Middle

Last Name

Phone Number

Extension

Grady

Lane

Business Address

City

State

Zip Code

200 E. Washington Street

Marion

IN

46234

Gender

Ethnic Group

Add/View Supporting Documents (1)

Male

Asian Indian

Time Owned

Months/Years

Percentage Owned

10

Years

100.00
Example 60.00 = 60%



Initial investment to acquire ownership interest in firm:

Type	Dollar Value	
Dollars	\$1,000.00	Add/View Attachments (1)
Real Estate		
Equipment	\$1,000.00	Add/View Attachments (1)

Are you drawing a salary?



- General Information
- Ownership
- Management**
- Personnel
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Check For Errors

Bidder Registration Number

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Identify officers and Board of Directors (work experience resumes of each person must be attached). [If previously entered as owner, please check the box already identified as owner.](#)



	Officer or Board of Director	Check here if already identified as owner	First Name	Middle Name	Last Name	Title	Ethnic Group	Gender	Check here if annual salary is drawn	Annual Salary	Date Appointed	Attach Resume
1	Officer	<input checked="" type="checkbox"/>	Chance		Tone	Operations Supv					01/12/2012	
2	Management	<input checked="" type="checkbox"/>	Liz		Cane	President					01/12/2014	
3	Board of Director	<input checked="" type="checkbox"/>	John		Doe	CEO					01/12/2010	
4	Management	<input type="checkbox"/>	Ashley		Black	COO	Caucasian	Female	<input checked="" type="checkbox"/>	\$13,000,000		Add/View Resume (1)



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Indicate management personnel who control the firm in the areas of Financial Decisions (responsibility for check signing, acquisition of lines of credit, surety bonding, supplies, etc.), Estimating, Hiring/firing of Management Personnel, Field/Production Operations Supervisor, Field Supervisors, Contract signature authority (contract execution, bid submission), Office Management, Marketing/Sales, Purchasing of major equipment. If the job function is performed by a previously identified owner, please click the owner checkbox to auto-populate the owner, or select from list of owners previously entered.

Personnel Information

Contract Signature Authority

Contract Signature Authority (contract execution, bid submission)

1 of 1 View All

Check here if already identified as owner

[Add Another Person](#)

[Delete This Person](#)

First Name

Middle Name

Last Name

[Attach Personnel Resume](#)

Title

Gender

Ethnic Group

General Information

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Check For Errors

Bidder Registration Number

West Station

Federal Identification Number

If applicable, identify persons or firms who provide the Attorney or Principal Supplier services

Attorneys



1 of 1



View All

[Add Delete](#)

Name of Firm

First Name

Middle

Last Name

Phone Number

Extension

Address

City

State



Zip Code

Supplier Diversity Application

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Bidder Registration Number

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Important Message

If applicable, identify persons or firms who provide the Attorney or Principal Supplier services

Materials or Equipment Supplied



1-3 of 3



	Select Type of Material or Equipment	Add Attachments		
1	Office Equipment	Add/View Material/Equipment Documents (1)	Add	Delete
2	Office Space Owned or Leased	Add/View Material/Equipment Documents (1)	Add	Delete
3	Vehicles	Add/View Material/Equipment Documents (1)	Add	Delete

Materials or Equipment Supplied

	Select Type of Material or Equipment	Add Attachments		
1	<input type="text"/>	Attach Material/Equipment Documents	Add	Delete

Materials or Equipment Supplied

	Select Type of Material or Equipment	Add Attachments		
1	<input type="text"/>	Attach Material/Equipment Documents	Add	Delete

- Office Equipment
- Office Space Owned or Leased
- Vehicles

Company Name

First Name

Address

Materials or Equ

DSD Material or Equip Attach

Material or Equipment Supplied

	Select Type of Material or Equipment	Add Attachments		
1	<input type="text"/>	Attach Material/Equipment Documents	Add	Delete



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Provide the following banking information

Name of Bank

Chase

Name of Officer

First Name

Nicole

Middle Name

Last Name

Last

Address

200 West

City

Indianapolis

State

AL



Zip Code

46234

Phone Number

123/234-3456

Ext

Does Your Company Have Bonding Capacity?

Yes

No

General Information

Ownership

Management

Personnel

Resources and Suppliers

Financial Information

Authorized Signatories

UNSPSC



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If applicable, specify the gross receipts of the firm for the last three (3) years.

Year Ending



Total Receipts

Year Ending



Total Receipts

Year Ending



Total Receipts

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All partners must sign contracts **unless** a power of attorney is supplied modifying this. In the case of a corporation, only those signatures listed will be accepted. For a not-for-profit organization, the highest-ranking officer's signature is needed. The following persons are duly authorized to execute contracts and related documents on behalf of business.

Identify All Who Have Signature Authority



1-2 of 2

	First Name	Middle Name	Last Name	Title		
1	<input type="text" value="John"/>	<input type="text"/>	<input type="text" value="Doe"/>	<input type="text" value="CEO"/>	Add	Delete
2	<input type="text" value="Liz"/>	<input type="text"/>	<input type="text" value="Day"/>	<input type="text" value="President"/>	Add	Delete

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[UNSPSC.org Search](#)**Select From Available UNSPSC Codes**

	UNSPSC Code	Description		
1	10101505 <input type="text"/>	Rats	Add	Delete
2	10101506 <input type="text"/>	Horses	Add	Delete
3	10101501 <input type="text"/>	Cats	Add	Delete

Enter Other UNSPSC Codes from UNSPSC.org

	UNSPSC Code	Description		
1	<input type="text"/>	<input type="text"/>	Add	Delete

Describe service you offer that you cannot find a code for

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Yes
 No

Type of Business

1-1 of 1

Business Type	Description		
1 PSV	Professional Services	Add	Delete

Are you a Supplier or Distributor?

Yes
 No

If you are a supplier/distributor, please address the following:

How large of an inventory do you maintain?

Do you own the inventory?

Yes
 No

Look Up Business Type

Search by: **Contract/Service Type** begins with

[Advanced Lookup](#)

Search Results

View 100 | 1-4 of 4

Contract/Service Type	Description
CST	Construction
GSV	Goods/Services
OTH	Other
PSV	Professional Services

Division of Supplier Diversity
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Bidder Registration Number 0000052959 West Station
Federal Identification Number 786954032

Select From Available UNSPSC Codes

UNSPSC Code	Description
1 <input type="text"/>	Add

Describe service you offer that you cannot find a code for

Is your business required to register

Look Up UNSPSC Code

Search by: Category begins with

Search Cancel [Advanced Lookup](#)

Search Results

Only the first 300 results can be displayed.

View 100 1-300 of 300

Category	Description
10000000	Live Plant and Animal Material and Accessories and Supplies
10100000	Live animals
10101500	Livestock
10101501	Cats
10101502	Dogs
10101504	Mink
10101505	Rats
10101506	Horses
10101507	Sheep
10101508	Goats
10101509	Asses

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Bidder Registration Number 0000052959 West Station
 Federal Identification Number 786954032

[UNSPSC.org Search](#)

Select From Available UNSPSC Codes

|<< <
1-1 of 1 ▾
>> >
| View All

	UNSPSC Code	Description		
1	10101501 <input type="button" value="Q"/>	Cats	Add	Delete

Enter Other UNSPSC Codes from UNSPSC.org

|<< <
1-1 of 1 ▾
>> >
| View All

	UNSPSC Code	Description		
1	<input type="text"/>	<input type="text"/>	Add	Delete

Describe service you offer that you cannot find a code for

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Bidder Registration Number 0000052959

West Station

Federal Identification Number 786954032

[UNSPSC.org Search](#)



Select From Available UNSPSC Codes

Enter Other UNSPSC Codes from UNSPSC.org

1-1 of 1 ▾ ▶▶ View All				
UNSPSC Code	Description			
1	<input type="text"/>	Add	Delete	

1-1 of 1 ▾ ▶▶ View All				
UNSPSC Code	Description			
1	<input type="text"/>	Add	Delete	

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Federal Identification Number 786954032

[UNSPSC.org Search](#)

Select From Available UNSPSC Codes

Enter Other UNSPSC Codes from UNSPSC.org

1-1 of 1 | View All

UNSPSC Code	Description		
1 <input type="text"/>		Add	Delete

1-1 of 1 | View All

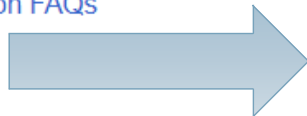
UNSPSC Code	Description		
1 <input type="text"/>	<input type="text"/>	Add	Delete

Describe service you offer that you cannot find a code for

EXAMPLE: I am looking for a code for professional business consulting|

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Bidder Registration Number
Federal Identification Number

Force Nation

Signature (name) of highest qualifying member

First Name <input type="text" value="Liz"/>	Middle Name <input type="text"/>	Last Name <input type="text" value="Day"/>
Signed Date <input type="text" value="01/12/2021"/>		

By checking this box, you agree:

The undersigned swears or affirms that the foregoing statements are true and correct and include all material information necessary to identify and explain the operations of (company name) as well as the ownership thereof. Any misrepresentation will be grounds for terminating any contract which may be awarded and for initiating action under federal or state laws concerning false statements.

APPLICATION HAS BEEN STARTED

DSD App Errors

The following errors have been found. Each error or missing information must be corrected prior to submitting the application.

	Section	Question	Problem
1	Ownership	Attachment - Resume, Driver's License, Birth Certificate (Record 3)	Missing Attachment - Resume, Driver's License, Birth Certificate
2	Management	Officer/Board of Directors (Record 4)	Date Appointed must be entered
3	Personnel	Contract Signature Authority (Record 1)	First Name must be entered
4	Personnel	Contract Signature Authority (Record 1)	Last Name must be entered
5	Personnel	Contract Signature Authority (Record 1)	Missing Attachment - Resume must be attached
6	Personnel	Estimates (Record 1)	First Name must be entered
7	Personnel	Estimates (Record 1)	Last Name must be entered
8	Personnel	Estimates (Record 1)	Missing Attachment - Resume must be attached
9	Personnel	Field/Production Operations Supervisor (Record 1)	First Name must be entered
10	Personnel	Field/Production Operations Supervisor (Record 1)	Last Name must be entered
11	Personnel	Field/Production Operations Supervisor (Record 1)	Missing Attachment - Resume must be attached

Supplier Secure Home Page

[Ownership](#) | [Management](#) | [Personnel](#)

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e-Certification Application

Bidder Registration Number 0000052958
Federal Identification Number 555044406

Signature (name) of highest qualifying member

First Name Liz
Middle Name

Signed Date 01/12/2021

By checking this box, you agree:

The undersigned swears or affirms that this application includes all material information necessary to complete the application (including but not limited to the name) as well as the ownership thereof. I understand that submitting any contract which may be a violation of the laws concerning false statements.

General Information

Ownership

Management

Personnel

Resources and Suppliers

Financial Information

Aut

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Identify all individuals and list their cash, equipment and/or real estate investments in the firm.

Owners

3

Company Name

Force Nation

[Attach Resume, Driver's License, Birth Certificate](#)

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Check For Errors

Bidder Registration Number Force Nation

Federal Identification Number

Identify officers and Board of Directors (work experience resumes of each person must be attached). [If previously entered as owner, please check the box already identified as owner.](#)



	Officer or Board of Director	Check here if already identified as owner	First Name	Middle Name	Last Name	Title	Ethnic Group	Gender	Check here if annual salary is drawn	Annual Salary	Date Appointed
1	Officer	<input checked="" type="checkbox"/>	Chance		Tone	Operations Supv					01/12/2012
2	Management	<input checked="" type="checkbox"/>	Liz		Cane	President					01/12/2014
3	Board of Director	<input checked="" type="checkbox"/>	John		Doe	CEO					01/12/2010
4	Management	<input type="checkbox"/>	Ashley		Black	COO	Caucasian	Female	<input checked="" type="checkbox"/>	\$13,000.000	01/12/2010



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Force Nation

Signature (name) of highest qualifying member

First Name Liz	Middle Name <input type="text"/>	Last Name Day
Signed Date 01/12/2021 <input type="text"/>		

By checking this box, you agree:



The undersigned swears or affirms that the foregoing statements are true and correct and include all material information necessary to identify and explain the operations of (company name) as well as the ownership thereof. Any misrepresentation will be grounds for terminating any contract which may be awarded and for initiating action under federal or state laws concerning false statements.

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Check For Errors

Submit

Bidder Registration Number

Force Nation

Federal Identification Number

Signature (name) of highest qualifying member

First Name

Liz

Middle Name

Signed Date

01/12/2021

Application has been successfully submitted

Application has been successfully submitted and a notification has been sent to the State of Indiana Division of Supplier Diversity.

OK

By checking this box, you agree:

The undersigned swears or affirms that the foregoing statements are true and correct and include all material information necessary to identify and explain the operations of (company name) as well as the ownership thereof. Any misrepresentation will be grounds for terminating any contract which may be awarded and for initiating action under federal or state laws concerning false statements.

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Check For Errors

Submit

Bidder Registration Number

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APPLICATION HAS BEEN SUBMITTED, AWAITING VERIFICATION



Which program are you interested in? Please click the checkbox for each program you would like to be considered for certification by the Indiana Division of Supplier Diversity.

- Indiana Veteran Owned Small Business Enterprise (IVOSB)
- Minority-owned Business Enterprise (MBE)
- Women-owned Business Enterprise (WBE)

- Before You Begin (Checklist)
- About Applying for Certification
- M/WBE Legal Requirements
- IVOSB Legal Requirements

Contact Us

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Indianapolis, IN 46204

Phone: 317-232-3061

Fax: 317-233-6921

mwbe@idoa.in.gov

