

STATE OF INDIANA MBE/WBE SUBCONTRACTOR COMMITMENT FORM

RFP#: 22-69833

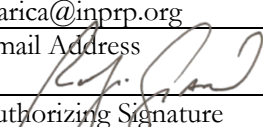
DUE DATE: May 5, 2022

TOTAL BID AMOUNT: \$1,296,000.00 as entered in the Attachment D, Cost Proposal Template, cell c12.

<input type="checkbox"/> MBE Firm <input checked="" type="checkbox"/> WBE Firm	
Company Name: Print Works, Inc.	Contact Person: Nancy Helton
Address: 655 E. Tracy Rd. Whiteland, IN 46184	E-mail: printworks@printworksindy.com
Sub-Contract Amount: \$2000/year or \$4000 for term of contract (2years)	Telephone Number: (317) 535-1250 Fax Number: (317) 535-0347
Sub-Contract Percentage of Total Bid: Use two decimal places. 0.31%	Describe service/product to be provided and <u>how this is a Valuable Scope Contribution of the Contract:</u> With over 25 years of experience in the industry, we are proud to offer a variety of printing services, including, but not limited to, booklets, brochures, carbonless forms, catalogs, labels, newsletters, medical forms, posters, programs, and stationery.
Provide approximate dates when Sub-Contractor will perform on this project: From the inception of the contract and for duration of the term of the contract (2 years) Services will be provided on an ongoing basis and invoiced and paid every month.	

<input checked="" type="checkbox"/> X MBE Firm <input type="checkbox"/> WBE Firm	
Company Name: Thomas & Reed, LLC	Contact Person: Willie Brown
Address: 148 E Market Street Suite 300 Indianapolis, IN 46204	E-mail: wbrown@trllc-cpa.com
Sub-Contract Amount: \$4200/year or \$8400 for term of contract (2years)	Telephone Number: (317) 955-6933 Fax Number: (317) 995-6943
Sub-Contract Percentage of Total Bid: Use two decimal places. 0.65%	Describe service/product to be provided and <u>how this is a Valuable Scope Contribution of the Contract:</u> T&R will provide annual Reviewed Financial Statements on the operations of IPRP (ISNAP), beginning with calendar year 2021 and through the term of this RFP.
Provide approximate dates when Sub-Contractor will perform on this project: From the inception of the contract and for duration of the term of the contract (2 years) Services will be provided on an ongoing basis and invoiced and paid every month.	

Parkdale Aftercare, LLC
 Respondent Firm
 850 Indian Boundary Road
 Address
 Chesterton, Indiana 46304
 City/State/Zip Code
 Rodrigo Garcia
 Representative
 4/22/2022
 Date

219-743-2477
 Telephone Number
 219-286-6953
 Fax Number
 rgarica@inprp.org
 Email Address

 Authorizing Signature
 Rodrigo Garcia, CEO
 Printed Name and Title

☐ Please check if additional forms are attached. ☒ (Attached is Letter From Subcontractor)