DEPARTMENT OF ADMINISTRATIVE SERVICES  
FISCAL YEAR - 2015  
(2014-2015)  
SUPPLIER DIVERSITY PROGRAM  
SMALL/MINORITY BUSINESS ENTERPRISE QUARTERLY REPORT -  
FOR REPORTING CAPITAL IMPROVEMENT EXPENDITURES  
Fiscal Year Quarter: 1ST / 2ND / 3RD / 4TH  
Fiscal Year Period:  
ENTER THIS QTR-  
4TH QTR  

Agency Name: Materials Innovation and Recycling Authority  
Prepared by: Vicki Arnum  
Tel. #: 860-757-7738  

Agency Number:  
E-mail: varnum@crra.org  

<table>
<thead>
<tr>
<th>QTR TOTALS ($)</th>
<th>Contracts</th>
<th>YTD TOTALS ($)</th>
<th>Contracts</th>
</tr>
</thead>
<tbody>
<tr>
<td>2) Total Agency FY Capital Improvements Expenditures for Purchases from Small and Minority Contractors. Combined TOTALS OF SBE AND MBE EXPENDITURES</td>
<td>$ -</td>
<td>$ -</td>
<td></td>
</tr>
</tbody>
</table>

3) Total Agency FY Capital Improvements Expenditures for Purchases from Minority Business Enterprises (MBE) only.  

<table>
<thead>
<tr>
<th>PLEASE CATEGORIZE:</th>
</tr>
</thead>
<tbody>
<tr>
<td>A) Black (B)</td>
</tr>
<tr>
<td>B) Hispanic (H)</td>
</tr>
<tr>
<td>C) Iberian Peninsula (I)</td>
</tr>
<tr>
<td>D) Asian (A)</td>
</tr>
<tr>
<td>E) American Indian (N)</td>
</tr>
<tr>
<td>F) Disabled American Indian (DN)</td>
</tr>
<tr>
<td>G) Disabled Individual (D)</td>
</tr>
<tr>
<td>H) Woman (W)</td>
</tr>
<tr>
<td>I) Woman Black (BW)</td>
</tr>
<tr>
<td>J) Woman Hispanic (HW)</td>
</tr>
<tr>
<td>K) Woman Iberian Peninsula (IW)</td>
</tr>
<tr>
<td>L) Woman Asian (AW)</td>
</tr>
<tr>
<td>M) Woman American Indian (NW)</td>
</tr>
<tr>
<td>N) Woman Disabled (DW)</td>
</tr>
<tr>
<td>O) Disabled Black American (DB)</td>
</tr>
<tr>
<td>P) Disabled Hispanic American (DH)</td>
</tr>
<tr>
<td>Q) Disabled Iberian Peninsula Woman (DIW)</td>
</tr>
<tr>
<td>R) Disabled Asian American (DA)</td>
</tr>
<tr>
<td>S) Disabled Black American Woman (DBW)</td>
</tr>
<tr>
<td>T) Disabled American Indian Woman (DNW)</td>
</tr>
<tr>
<td>U) Disabled Asian American Woman (DAW)</td>
</tr>
<tr>
<td>V) Disabled Hispanic American Woman (DHW)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>MBE TOTALS (Lines A-V)</th>
</tr>
</thead>
<tbody>
<tr>
<td>$ -</td>
</tr>
<tr>
<td>Agency Name:</td>
</tr>
<tr>
<td>-------------</td>
</tr>
<tr>
<td>Report Prepared by:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CERTIFIED VENDORS ONLY</th>
<th>ACTUAL EXPENDITURES</th>
<th>SPECIFY:</th>
</tr>
</thead>
<tbody>
<tr>
<td>(A) Small Business Enterprise (SBE) OR Minority Business Enterprise (MBE) Vendor Name</td>
<td>(B) State Contract # OR P.O. #</td>
<td>(C) DAS Certified SBE/MBE Amount</td>
</tr>
<tr>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

| SBE/MBE TOTAL | $ | - |