## **EXHIBIT C**

## **List of Prime Contractor and Subcontractors/Suppliers**

Project Title: Bus Advertising Services, Request for Proposal #2024-MA-01

Bi	dder's/Proposer's Name:			Phone/FAX:			
	ldress:						
Ov	wner or Contact Person:						
			n:*A				
	List the following information for	r all subcont	tractors/su	ppliers that pro	vided a bid, quote or propos	al to the Bidder/P	roposer.
	Company Name/Address/Phone/FAX	DBE/ Non	_	*Annual	Description of Work/ Type	Dollar Amount of	`
	Owner's Name or Contact Person	DBE	Firm	Gross Receipts	of Materials/Supplies	Work/Supplies	Accepted (Y/N)
1							
2							
3							
4							
5							

*Optional														
	The undersigned will enter into a formal agreement with the subcontractor(s) and/or supplier(s) whose bid/quote was accepted conditioned upon execution of a contract with County Connection. I certify that the information included on this form is complete and correct.													
(S:	ignature of Owner or Authorized Represen	tative and T	Title)			(Date)								