

SCHEDULE A

Statement of Prime Submitter Regarding Its MBE/WBE Utilization Plan

TO BE COMPLETED BY SUBMITTER ONLY

Submitter: Electronic Interchange Company

Project: Application Development Services

Is the submitter a certified MBE/WBE?

MBE: ☒ Yes ☐ No WBE: ☐ Yes ☒ No

If yes, attach all current Letters of Certification.

NOTE:

CERTIFICATION OF THE SUBMITTER AS AN **MBE** SATISFIES ONLY THE **MBE** GOAL; THE **WBE** GOAL MUST STILL BE MET.

CERTIFICATION OF THE SUBMITTER AS A **WBE** SATISFIES ONLY THE **WBE** GOAL; THE **MBE** GOAL MUST STILL BE MET.

CERTIFICATION OF THE SUBMITTER AS BOTH **MBE** AND **WBE** MAY SATISFY **ONE GOAL** ONLY.

The submitter intends to perform work in connection with this project as a:

GENDER:

- ☒ Male
☐ Female

RACE/ETHNICITY:

- ☒ Black/African American
☐ Hispanic American
☐ Asian American
☐ White American
☐ Other _____

TYPE OF FIRM:

- ☐ Partnership
☐ Sole Proprietorship
☒ Corporation
☐ Joint Venturer
☐ Other _____

All MBE/WBE firms included in the following plan must be certified as such by a public or private organization such as the City of Chicago, Chicago Minority Supplier Development Council (CMSDC), Women Business Development Center (WBDC), and the Small Business Administration.

I. Participation of MBE/WBE Firms

In determining the manner of MBE/WBE participation in the performance of this contract, the submitter shall consider involvement with MBE/WBE firms as joint venture partners, subcontractors, and suppliers of goods and services, either directly or indirectly.

- A. If submitter is a joint venturer and one or more joint venture partners are certified MBEs or WBEs, attach copies of Letters of Certification and a copy of the Joint Venture Agreement clearly describing the role of the MBE/WBE firm(s) and its ownership interest in the joint venture.
- B. Proposing MBE/WBE subcontractors/suppliers/consultants to perform work or supply goods or services not directly related to the performance of this contract is considered to be indirect participation.

MBE/WBE Subcontractors/Suppliers/Consultants:

1. Name of MBE/WBE: Electronic Knowledge Interchange Company

Address: 33 W. Monroe, Suite 1050 Chicago IL 60603

Contact Person: Jose Cruz Phone: 312 762-0129

E-mail: Finance@eki-consulting.com Fax: 312-230-2011

MBW/WBE Participation: Dollars \$ TBD Percent: 95%

Will this subcontractor be used for direct or indirect participation? (circle one)

Schedule B and all current certification letters attached? ☒ Yes ☐ No

2. Name of MBE/WBE: Leader Creations Inc.
Address: 2067 Techny Rd Northbrook, IL 60062
Contact Person: Anna Laeder Phone: 847-337-2288
E-mail: annalaeder@leadercreations.com Fax: _____
MBW/WBE Participation: Dollars \$ TBD Percent: 5%
Will this subcontractor be used for direct or indirect participation? (circle one)
Schedule B and all current certification letters attached? ☒ Yes ☐ No
3. Name of MBE/WBE: N/A
Address: _____
Contact Person: _____ Phone: _____
E-mail: _____ Fax: _____
MBW/WBE Participation: Dollars \$ Percent: _____
Will this subcontractor be used for direct or indirect participation? (circle one)
Schedule B and all current certification letters attached? ☐ Yes ☐ No
4. Name of MBE/WBE: N/A
Address: _____
Contact Person: _____ Phone: _____
E-mail: _____ Fax: _____
MBW/WBE Participation: Dollars \$ Percent: _____
Will this subcontractor be used for direct or indirect participation? (circle one)
Schedule B and all current certification letters attached? ☐ Yes ☐ No
5. Name of MBE/WBE: N/A
Address: _____
Contact Person: _____ Phone: _____
E-mail: _____ Fax: _____
MBW/WBE Participation: Dollars \$ Percent: _____
Will this subcontractor be used for direct or indirect participation? (circle one)
Schedule B and all current certification letters attached? ☐ Yes ☐ No

6. Name of MBE/WBE: N/A
Address: _____
Contact Person: _____ Phone: _____
E-mail: _____ Fax: _____
MBW/WBE Participation: Dollars \$ _____ Percent: _____
Will this subcontractor be used for direct or indirect participation? (circle one)
Schedule B and all current certification letters attached? ☐ Yes ☐ No

7. Name of MBE/WBE: N/A
Address: _____
Contact Person: _____ Phone: _____
E-mail: _____ Fax: _____
MBW/WBE Participation: Dollars \$ _____ Percent: _____
Will this subcontractor be used for direct or indirect participation? (circle one)
Schedule B and all current certification letters attached? ☐ Yes ☐ No

8. Name of MBE/WBE: N/A
Address: _____
Contact Person: _____ Phone: _____
E-mail: _____ Fax: _____
MBW/WBE Participation: Dollars \$ _____ Percent: _____
Will this subcontractor be used for direct or indirect participation? (circle one)
Schedule B and all current certification letters attached? ☐ Yes ☐ No

9. Name of MBE/WBE: N/A
Address: _____
Contact Person: _____ Phone: _____
E-mail: _____ Fax: _____
MBW/WBE Participation: Dollars \$ _____ Percent: _____
Will this subcontractor be used for direct or indirect participation? (circle one)
Schedule B and all current certification letters attached? ☐ Yes ☐ No

Attach additional sheets as needed.

II. Summary of MBE/WBE

A. MBE Participation:

<u>MBE Firm Name</u>	Dollar Amount of Participation	Percent Amount of Participation	Direct (check <input checked="" type="checkbox"/> one)	Indirect (check <input type="checkbox"/> one)
<u>Electronic Knowledge Interchange Company</u>	<u>\$ TBD</u>	<u>95</u> %	<u>X</u>	<u></u>
<u></u>	<u>\$</u>	<u></u> %	<u></u>	<u></u>
<u></u>	<u>\$</u>	<u></u> %	<u></u>	<u></u>
<u></u>	<u>\$</u>	<u></u> %	<u></u>	<u></u>
<u></u>	<u>\$</u>	<u></u> %	<u></u>	<u></u>
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<u></u>	<u>\$</u>	<u></u> %	<u></u>	<u></u>
<u></u>	<u>\$</u>	<u></u> %	<u></u>	<u></u>
<u></u>	<u>\$</u>	<u></u> %	<u></u>	<u></u>
Total MBE Participation:	<u>\$ TBD</u>	<u>95</u> %		

<u>WBE Firm Name</u>	Dollar Amount of Participation	Percent Amount of Participation	Direct (check <input checked="" type="checkbox"/> one)	Indirect (check <input type="checkbox"/> one)
<u>Leader Creations Inc</u>	<u>\$ TBD</u>	<u>5</u> %	<u></u>	<u>X</u>
<u></u>	<u>\$</u>	<u></u> %	<u></u>	<u></u>
<u></u>	<u>\$</u>	<u></u> %	<u></u>	<u></u>
<u></u>	<u>\$</u>	<u></u> %	<u></u>	<u></u>
<u></u>	<u>\$</u>	<u></u> %	<u></u>	<u></u>
<u></u>	<u>\$</u>	<u></u> %	<u></u>	<u></u>
<u></u>	<u>\$</u>	<u></u> %	<u></u>	<u></u>
<u></u>	<u>\$</u>	<u></u> %	<u></u>	<u></u>
<u></u>	<u>\$</u>	<u></u> %	<u></u>	<u></u>
<u></u>	<u>\$</u>	<u></u> %	<u></u>	<u></u>
Total WBE Participation:	<u>\$ TBD</u>	<u>5</u> %		


The submitter designates the following person as its MBE/WBE Liaison Officer:

Jose Cruz – Finance Manager (312) 762-0129
(Name and Title) *(Phone Number)*

Finance @eki-consulting.com
(E-mail address)

The Contractor certifies to the best of its knowledge and belief that it, its principals and any subcontractors used in the performance of this contract, meet the Park District requirements and have not violated any City or Sister Agency policy, codes, state, federal, or local laws, rules or regulations and have not been subject to any debarment, suspension or other disciplinary action by any government agency. Additionally, if at any time the contractor becomes aware of such information, it must immediately disclose it to the Park District.

Submitter: Electronic Knowledge Interchange Company
(Print or Type Name of Business)

Signature:  Date: 09/18/23
(Written Signature of Authorized Officer/Representative)

Name/Title: Robert Blackwell – Chairman
(Print or Type Name and Title of Person Signing Statement)

NOTE

**If submitter is an MBE/WBE joint venture with a non-MBE/WBE firm,
use the following signature page instead:**

End of Schedule A

SCHEDULE B

Statement of Intent from MBE/WBE to Perform as Subcontractor, Supplier and/or Consultant
MBE/WBE PRIME CONTRACTOR MUST SUBMIT A SCHEDULE B, IF SELF-PERFORMING ANY WORK, TO RECEIVE MBE/WBE CREDIT

Project: Application Development Services

From: Electronic Knowledge Interchange Company
(Name of MBE/WBE Firm)

MBE: ☒ Yes ☐ No
WBE: ☐ Yes ☒ No

To: Electronic Knowledge Interchange Company and the Chicago Park District:
(Name of Prime Contractor-Submitter)

The undersigned intends to perform work in connection with the above projects as a:

GENDER:

☒ Male
☐ Female

RACE/ETHNICITY:

☒ Black/African American
☐ Hispanic American
☐ Asian American
☐ White American
☐ Other _____

TYPE OF FIRM:

☐ Partnership
☐ Sole Proprietorship
☒ Corporation
☐ Joint Venturer
☐ Other _____

The MBE/WBE status of the undersigned is confirmed by the attached current Letters of Certification from public or private entities such as the City of Chicago, the Chicago Minority Supplier Development Council (CMSDC), the Women's Business Development Center (WBDC), and the Small Business Administration.

Attach all current certification letters behind Schedule B.

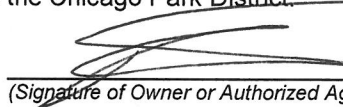
The undersigned is prepared to provide the following services or supply the following goods in connection with the above project/contract:

Managed Services – SharePoint

The above described performance is offered for the following price and described terms of payment:
\$134/hr 40 hours a week for the duration of the contract. Payment terms as per contract.

If more space is needed to fully describe the MBE/WBE firm's proposed scope of work and/or payment schedule, attach additional sheets.

The undersigned will enter into a written agreement for the above work with you as prime contractor, conditioned upon your execution of a contract with the Chicago Park District, and will do so within (3) three working days of receipt of a signed contract from the Chicago Park District.

Signature: 
(Signature of Owner or Authorized Agent of MBE/WBE)

Date: 9/19/2023

Name/Title: Robert Blackwell - Chairman
(Print or Type Name and Title)

Address: 33 West Monroe; Suite 1050 Chicago IL 60603

Telephone: 312-342-7922

Fax: _____

End of Schedule B

SCHEDULE B

Statement of Intent from MBE/WBE to Perform as Subcontractor, Supplier and/or Consultant
MBE/WBE PRIME CONTRACTOR MUST SUBMIT A SCHEDULE B, IF SELF-PERFORMING ANY WORK, TO RECEIVE MBE/WBE CREDIT

Project: Application Development Services

From: Laeder Creations Inc.

(Name of MBE/WBE Firm)

MBE: ☐ Yes ☒ No

WBE: ☒ Yes ☐ No

To: Electronic Knowledge Interchange Company

(Name of Prime Contractor-Submitter)

and the Chicago Park District:

The undersigned intends to perform work in connection with the above projects as a:

GENDER:

☐ Male

☒ Female

RACE/ETHNICITY:

☐ Black/African American

☐ Hispanic American

☐ Asian American

☒ White American

☐ Other _____

TYPE OF FIRM:

☐ Partnership

☐ Sole Proprietorship

☒ Corporation

☐ Joint Venturer

☐ Other _____

The MBE/WBE status of the undersigned is confirmed by the attached current Letters of Certification from public or private entities such as the City of Chicago, the Chicago Minority Supplier Development Council (CMSDC), the Women's Business Development Center (WBDC), and the Small Business Administration.

Attach all current certification letters behind Schedule B.

The undersigned is prepared to provide the following services or supply the following goods in connection with the above project/contract:

UI Design Assistance

The above described performance is offered for the following price and described terms of payment:

Laeder Creations will be paid 5% of contract value.

If more space is needed to fully describe the MBE/WBE firm's proposed scope of work and/or payment schedule, attach additional sheets.

The undersigned will enter into a written agreement for the above work with you as prime contractor, conditioned upon your execution of a contract with the Chicago Park District, and will do so within (3) three working days of receipt of a signed contract from the Chicago Park District.

Signature: _____

(Signature of Owner or Authorized Agent of MBE/WBE)

Date: _____

09/19/2023

Name/Title: Anna Laeder - President

(Print or Type Name and Title)

Address: 2067 Techny Rd. Northbrook IL 60062

Telephone: 847-337-2288

Fax: _____

End of Schedule B