

### SCHEDULE A

#### Statement of Prime Bidder Regarding Its MBE/WBE Utilization Plan

TO BE COMPLETED BY BIDDER ONLY

Bidder: Brackeen Box, Inc. Project: Supply & Delivery of Mulch

Is the bidder a certified MBE/WBE? MBE:  Yes  No WBE:  Yes  No

If yes, attach all current Letters of Certification.

#### NOTE:

Certification of the bidder as an MBE satisfies only the MBE goal; the WBE goal must still be met. Certification of the bidder as a WBE satisfies only the WBE goal; the MBE goal must still be met. Certification of the bidder as both MBE and WBE may satisfy one goal only.

The bidder 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 entity such as the City of Chicago, Cook County-Illinois, the Illinois Department of Central Management Services (CMS), the Metropolitan Water Reclamation District, the Small Business Administration (SBA), the Chicago Minority Business Development Council (CMBDC), and the Women's Business Development Center (WBDC).

#### I. Participation of MBE/WBE Firms

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

- A. If bidder 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: Petromex  
Address: 14702 S Hamlin Ave., Midlothian, IL 60445  
Contact Person: Felipe Estrada Phone: 708-489-1733  
E-mail: Quimex@Quimex Inc. Com Fax: 708-597-8655  
MBE/WBE Participation: Dollars \$ 32,477.00 Percent: 25.0 %  
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: West Fuels, Inc.  
 Address: 82 S La Grange Rd., Suite 201, La Grange, IL 60525  
 Contact Person: Deborah Stange Phone: 708-588-1900  
 E-mail: CustomerService@WestFuels.com Fax: 708-588-8289  
 MBE/WBE Participation: Dollars \$ 6,495.50 Percent: 5.0 %  
 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: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_  
 E-mail: \_\_\_\_\_ Fax: \_\_\_\_\_  
 MBE/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: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_  
 E-mail: \_\_\_\_\_ Fax: \_\_\_\_\_  
 MBE/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: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_  
 E-mail: \_\_\_\_\_ Fax: \_\_\_\_\_  
 MBE/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: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_  
 E-mail: \_\_\_\_\_ Fax: \_\_\_\_\_  
 MBE/WBE Participation: Dollars \$ \_\_\_\_\_ Percent: \_\_\_\_\_ %  
 Will this subcontractor be used as direct or ~~indirect~~ participation? (circle one)  
 Schedule B and all current certification letters attached?  Yes  No

7. Name of MBE/WBE: \_\_\_\_\_  
Address: \_\_\_\_\_  
Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_  
E-mail: \_\_\_\_\_ Fax: \_\_\_\_\_  
MBE/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: \_\_\_\_\_  
Address: \_\_\_\_\_  
Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_  
E-mail: \_\_\_\_\_ Fax: \_\_\_\_\_  
MBE/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: \_\_\_\_\_  
Address: \_\_\_\_\_  
Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_  
E-mail: \_\_\_\_\_ Fax: \_\_\_\_\_  
MBE/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

10. Name of MBE/WBE: \_\_\_\_\_  
Address: \_\_\_\_\_  
Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_  
E-mail: \_\_\_\_\_ Fax: \_\_\_\_\_  
MBE/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 Plan:

A. MBE Participation:

MBE Firm Name	Dollar Amount of Participation	Percent Amount of Participation
\$ <u>Petromex</u>	\$ <u>32,477.50</u>	<u>25.0</u> %
\$ _____	\$ _____	_____ %
\$ _____	\$ _____	_____ %
\$ _____	\$ _____	_____ %
\$ _____	\$ _____	_____ %
\$ _____	\$ _____	_____ %
\$ _____	\$ _____	_____ %
\$ _____	\$ _____	_____ %
Total MBE Participation:	\$ _____	_____ %

B. WBE Participation:

WBE Firm Name	Dollar Amount of Participation	Percent Amount of Participation
\$ <u>West Fuels</u>	\$ <u>6,495.50</u>	<u>5.0</u> %
\$ _____	\$ _____	_____ %
\$ _____	\$ _____	_____ %
\$ _____	\$ _____	_____ %
\$ _____	\$ _____	_____ %
\$ _____	\$ _____	_____ %
\$ _____	\$ _____	_____ %
\$ _____	\$ _____	_____ %
Total WBE Participation:	\$ _____	_____ %

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

James Bracken, Secretary-Treasurer 708 331-4200  
(Name and Title) (Phone Number)

Bracken 708 @ 6Mail.Com  
(E-mail address)

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To the best of my knowledge, information and belief, the facts and representations contained in this Schedule are true, and no material facts have been omitted.

Any material misrepresentation will be grounds for terminating any contract that may be awarded and for initiating action under federal or state laws concerning false statements.

Bidder:

Bracken Box, Inc.  
*(Print or Type Name of Business)*

Signature:

 Date: 11-16-15  
*(Written Signature of Authorized Officer/Representative)*

Name/Title:

Kelly Bracken, President  
*(Print or Type Name and Title of Person Signing Statement)*

**NOTE**

If the bidder is an MBE/WBE joint venture with a non-MBE/WBE firm use the Signature Page that follows instead.

**End of Schedule A**

### SCHEDULE B

Statement of Intent from MBE/WBE to Perform as Subcontractor, Supplier, and/or Consultant  
DO NOT FILL OUT OR SIGN THIS FORM IF YOU ARE THE PRIME SUBMITTER

Project: Chicago Park District - Supply and Delivery of Mulch

From: Petromex  
(Name of MBE/WBE Firm)

MBE:  Yes  No  
WBE:  Yes  No

To: Bracken Box, Inc. 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, Cook County-Illinois, the Illinois Department of Central Management Services (CMS), the Metropolitan Water Reclamation District, the Small Business Administration (SBA), the Chicago Minority Business Development Council (CMBDC), and the Women's Business Development Center (WBDC).

**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:

Fuel

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

Prevailing Market Price  
Net 30 Days  
MBE Participation - \$ 32,477.50 - 25.0%

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

### SCHEDULE B

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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: *Felipe J. Estrada* Date: 11-16-15  
(Signature of Owner or Authorized Agent of MBE/WBE)

Name/Title: Felipe J. Estrada President  
(Print or Type Name and Title)

Address: 14702 S. HAMMILL MIDLOTHIAN, IL. 60448

Telephone: 708-489-1733 Fax: 1-708-597-8459

End of Schedule B

**Certification: View****Help & Tools** 

Certification List

**Vendor Information**

Business Name	Petromex, Inc.
VendorID	20061254
Primary Owner's Name	Felipe Estrada
Company Type	Corporation
Ethnic Group	Hispanic/Latino
Gender	Male

**Certification Information**

Certifying Agency	City of Chicago
Certification Type	MBE - Minority Business Enterprise
Effective Date	7/29/2011
Renewal/Anniversary Date	2/1/2016

**Contact Information**

Main Company Email	quimex@quimexinc.com
Main Phone	708-489-1733
Main Fax	708-597-8655
Internet Web Page	www.petromex.net

**Addresses**

Physical Address	14702 S. Hamlin Ave. Midlothian, IL 60445
Mailing Address	14702 S. Hamlin Ave. Midlothian, IL 60445

**Business Capabilities**

Business certified for	Wholesale and Distribution of Petroleum Products, Diesel Fuel, Gasoline and Special Fuels	
Full Description of Capabilities/Products	Wholesale and Distribution of Petroleum Products, Diesel Fuel, Gasoline and Special Fuels	
Commodity Codes	NIGP 40509	Fuel Oil, Diesel (Use 405-02 for Biodiesel)
	NIGP 40587	Recycled Petroleum Products
	NIGP 40590	Synthetic Petroleum Products
	NIGP 40595	Petroleum Products, Scrap or Waste
	NIGP 55830	Locomotives, Diesel
	NIGP 92845	Fueling Services, Mobile (Vehicle)
	NIGP 99874	Oils and Other Petroleum Products, Waste, Sale of Surplus and Obsolete Items

**Owner Ethnicity and Gender**

Ethnic Group	Hispanic/Latino
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### SCHEDULE B

Statement of Intent from MBE/WBE to Perform as Subcontractor, Supplier, and/or Consultant  
DO NOT FILL OUT OR SIGN THIS FORM IF YOU ARE THE PRIME SUBMITTER

Project: Chicago Park District - Supply and Delivery of Mulch

From: West Fuels, Inc MBE:  Yes  No  
(Name of MBE/WBE Firm) WBE:  Yes  No

To: Bracken Box, Inc and the Chicago Park District:  
(Name of Prime Contractor-Submitter)

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

- |  |  |   |
|--|--|---|
| <b>GENDER:</b>                             | <b>RACE/ETHNICITY:</b>                             | <b>TYPE OF FIRM:</b>                            |
| <input type="checkbox"/> Male              | <input type="checkbox"/> Black/African American    | <input type="checkbox"/> Partnership            |
| <input checked="" type="checkbox"/> Female | <input type="checkbox"/> Hispanic American         | <input type="checkbox"/> Sole Proprietorship    |
|  | <input type="checkbox"/> Asian American            | <input checked="" type="checkbox"/> Corporation |
|  | <input checked="" type="checkbox"/> White American | <input type="checkbox"/> Joint Venturer         |
|  | <input type="checkbox"/> Other _____               | <input type="checkbox"/> 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, Cook County-Illinois, the Illinois Department of Central Management Services (CMS), the Metropolitan Water Reclamation District, the Small Business Administration (SBA), the Chicago Minority Business Development Council (CMBDC), and the Women's Business Development Center (WBDC).

**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:

Fuel

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

Prevailing Market Price  
Net 30 Days  
WBE Participation - \$6,495.50 - 5.0%

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

### SCHEDULE B

---

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: Deborah Stange Date: 11/16/15  
(Signature of Owner or Authorized Agent of MBE/WBE)

Name/Title: Deborah Stange President  
(Print or Type Name and Title)

Address: 25. La Grange IL 60525

Telephone: 708-588-1900 Fax: 708-588-8289

End of Schedule B

**Certification: View**Help & Tools 

Certification List

**Vendor Information**

Business Name	West Fuels, Inc.
VendorID	20060319
Primary Owner's Name	Ms. Deborah Stange
Company Type	Corporation
Ethnic Group	Caucasian
Gender	Female

**Certification Information**

Certifying Agency	City of Chicago
Certification Type	WBE - Women Business Enterprise
Effective Date	1/25/2016
Renewal/Anniversary Date	2/1/2017

**Contact Information**

Main Company Email	customerservice@westfuels.com
Main Phone	708-588-1900
Main Fax	708-588-8289
Internet Web Page	http://www.westfuels.com

**Addresses**

Physical Address	82 S. La Grange Road Suite #201 La Grange, IL 60525
Mailing Address	72 S. La Grange Road; Suite #7 La Grange, IL 60525

**Business Capabilities**

Business certified for	NAICS 424720 Petroleum and petroleum products merchant wholesalers (except bulk stations, terminals) NAICS 484220 Specialized Freight (except Used Goods) Trucking, Local
Full Description of Capabilities/Products	NAICS 424720 Petroleum and petroleum products merchant wholesalers (except bulk stations, terminals) NAICS 484220 Specialized Freight (except Used Goods) Trucking, Local
Commodity Codes	NAICS 424720 Petroleum and petroleum products merchant wholesalers (except bulk stations, terminals) ( <a href="#">More</a> ) NAICS 484220 Specialized Freight (except Used Goods) Trucking, Local ( <a href="#">More</a> )

**Owner Ethnicity and Gender**

Ethnic Group	Caucasian
Gender	Female