

DETAIL REPORT
 MBE WAIVERS REQUESTED AND GRANTED
 Department/Agency: _____
 FY _____

No.	Award Date	Contract Title & Number	Overall	MBE	Subgoal Waivers		Overall Waivers		Total Waivers	
			Contract Value	Contract Goal	Requested	Granted	(Where no contract subgoals) Requested	Granted	Number Requested	Number Granted
1			%	%	%	%	%			
			\$	\$	\$	\$	\$	\$		
2			%	%	%	%	%			
			\$	\$	\$	\$	\$	\$		
3			%	%	%	%	%			
			\$	\$	\$	\$	\$	\$		
4			%	%	%	%	%			
			\$	\$	\$	\$	\$	\$		
5			%	%	%	%	%			
			\$	\$	\$	\$	\$	\$		
6			%	%	%	%	%			
			\$	\$	\$	\$	\$	\$		
								TOTAL		

Waivers of goals are considered a reduction of such goals.
 Show both percentage of contract value and dollars in appropriate spaces above.

Forward copies of completed form to:
 1) Board of Public Works
 2) Governor's Office of Minority Affairs