



**City of Phoenix**

**Airport Concession Disadvantaged Business Enterprise (ACDBE) Program**

**Form – EOD-2 / SMALL BUSINESS OUTREACH EFFORTS**

**(Due with Response at Time of Submittal and every year on the anniversary of the contract)**

Successful Respondent's Name:	Contract Title/Number:
-------------------------------	------------------------

**Successful Respondent must conduct outreach efforts and submit documentation of those outreach efforts as described in Airport Concession Disadvantaged Business Enterprise (DBE) Program Race- and Gender-Neutral Contract Clause (Contract Clause). Detailed instructions for this form are included in the Contract Clause. Supporting documentation is required for Columns D and F. Successful Respondent should make additional copies of this form as needed.**

(A) Business Name and Contact Information	(B) Business Type	(C) Opportunity for Small Business Participation	(D) Solicitation Method	(E) Was this firm selected as a participant?	(F) Communication of final selection outcome
Name: Address: City, State, Zip: <span style="float:right;">Number of Employees:</span> Phone Number: <span style="float:right;">E-Mail or Fax:</span> Range of Annual Gross Receipts: <span style="float:right;">Number of Years in Business:</span>	<input type="checkbox"/> ACDBE <input type="checkbox"/> DBE <input type="checkbox"/> SBC - Small Business Concern <input type="checkbox"/> SBE - City of Phoenix Certified <input type="checkbox"/> Unknown	<input type="checkbox"/> JV Partner__% <input type="checkbox"/> Supplier-Goods Cost of Goods Sold \$ _____ <hr/> Description of Goods <input type="checkbox"/> Supplier-Services Expenses \$ _____ <hr/> Description of Services	<input type="checkbox"/> Newspapers or Websites <input type="checkbox"/> Trade and/or Professional Listing <input type="checkbox"/> Business Outreach Events <input type="checkbox"/> E-mail blast <input type="checkbox"/> Other	<input type="checkbox"/> Firm was selected <input type="checkbox"/> Firm was NOT selected  Please provide an explanation, if this firm was not selected	<b>Firms must be notified of final selection outcome prior to submittal of this form.</b> When was firm notified? <hr/> How was the selection outcome communicated to this firm?
Name: Address: City, State, Zip: <span style="float:right;">Number of Employees:</span> Phone Number: <span style="float:right;">E-Mail or Fax:</span> Range of Annual Gross Receipts: <span style="float:right;">Number of Years in Business:</span>	<input type="checkbox"/> ACDBE <input type="checkbox"/> DBE <input type="checkbox"/> SBC - Small Business Concern <input type="checkbox"/> SBE - City of Phoenix Certified <input type="checkbox"/> Unknown	<input type="checkbox"/> JV Partner__% <input type="checkbox"/> Supplier-Goods Cost of Goods Sold \$ _____ <hr/> Description of Goods <input type="checkbox"/> Supplier-Services Expenses \$ _____ <hr/> Description of Services	<input type="checkbox"/> Newspapers or Websites <input type="checkbox"/> Trade and/or Professional Listing <input type="checkbox"/> Business Outreach Events <input type="checkbox"/> E-mail blast <input type="checkbox"/> Other	<input type="checkbox"/> Firm was selected <input type="checkbox"/> Firm was NOT selected  Please provide an explanation, if this firm was not selected	<b>Firms must be notified of final selection outcome prior to submittal of this form.</b> When was firm notified? <hr/> How was the selection outcome communicated to this firm?