



This report submission covers (*please enter either the fiscal year or calendar year*):

Fiscal Year: _____

Calendar Year: _____

The institution's total budget for the period (*expending both public and private monies, including any fee-supported entities*): _____

Complete the below for the entire budget of the institution (*expending both public and private monies, including any fee-supported entities*) (*the entire budget for the institution is the denominator to calculate the % of total columns*).

List the total spend across all commodity codes with M/W/VBE Vendors:

Goal Spend with M/W/VBE Vendors
(total dollars): _____

Goal Percentage Spend with M/W/VBE Vendors
(% of total): _____

Actual Spend with M/W/VBE Vendors (total
dollars): _____

Actual Spend with M/W/VBEs
(percent of total): _____

Complete the below for the commodity code or description of goods/services for the 5 categories in which your institution had the highest aggregate spend with M/W/VBE Vendors.

List the total spend across all 5 categories with M/W/VBE Vendors:

Category 1:

NIGP / NAICS / Description: _____

Goal Spend with M/W/VBE Vendors
(total dollars): _____

Goal Percentage Spend with M/W/VBE Vendors
(% of total): _____

Actual Spend with M/W/VBE Vendors
(total dollars): _____

Actual Percentage Spend with M/W/VBE Vendors
(% of total): _____

Category 2:

NIGP / NAICS / Description: _____

Goal Spend with M/W/VBE Vendors
(total dollars): _____

Goal Percentage Spend with M/W/VBE Vendors
(% of total): _____

Contact us at

Commission On Equity and Inclusion: 312 814-1054 Business Enterprise Program: 312 814-4190

