

GFE PROGRAM: FORM 2 CONTACT & BIDS RECEIVED LOG

Bidder Name: _____ Solicitation Number: _____

Project Name: _____ Contact Person: _____

COBID CERTIFIED SUBCONTRACTOR BUSINESS NAME	CONTACT NAME & DATE OF CONTACT	DIVISIONS OF WORK	DATE SOLICITATION WAS SENT	BID ACTIVITY (YES / NO)			REJECTED BIDS	
		PROVIDE DESCRIPTION*		WILL BID	BID REC'D	BID USED	BID AMOUNT	REASON NOT USED (If "Other," please explain)
								<input type="checkbox"/> Price <input type="checkbox"/> Scope <input type="checkbox"/> Other
								<input type="checkbox"/> Price <input type="checkbox"/> Scope <input type="checkbox"/> Other
								<input type="checkbox"/> Price <input type="checkbox"/> Scope <input type="checkbox"/> Other
								<input type="checkbox"/> Price <input type="checkbox"/> Scope <input type="checkbox"/> Other
								<input type="checkbox"/> Price <input type="checkbox"/> Scope <input type="checkbox"/> Other
								<input type="checkbox"/> Price <input type="checkbox"/> Scope <input type="checkbox"/> Other

* When possible, subcontractors contacted for the same or similar DOW should be grouped together.