

**Section I.**

**Agency Information**

Agency:	Racing Commission
Director/Executive First Name:	William
Director/Executive Last Name:	Crawford
Director/Executive Title:	Executive Director
Address:	77 S. High Street
City:	Columbus
ZIP:	43215

**Designation of Responsibility (Agency MBE/EDGE EEO Officer)**

First Name:	Sherry
Last Name:	White
Title:	Fiscal Officer
Address:	77 S. High Street
City:	Columbus
ZIP:	43215
Telephone:	614-466-2759
Email:	<a href="mailto:swhite@rc.state.oh.us">swhite@rc.state.oh.us</a>

**Designation of Responsibility (Agency Procurement Officer)**

First Name:	Sherry
Last Name:	White
Title:	Fiscal Officer
Address:	77 S. High Street
City:	Columbus
ZIP:	43215
Telephone:	614-466-2759
Email:	<a href="mailto:swhite@rc.state.oh.us">swhite@rc.state.oh.us</a>

**Designation of Responsibility (Chief Fiscal Officer)**

First Name:	Sherry
Last Name:	White
Title:	Fiscal Officer
Address:	77 S. High Street
City:	Columbus
ZIP:	43215

**Section II.**

**DAS PROJECTED CONTRACTS FY2016 ONLY | Agency to have DAS administer or award - ONLY New and/or Renewal**

Do not include: purchases to be made from state contracts (e.g., STS, MMA, GDC, LDC, MSA, MCSA, etc.); required sources such as CRP, OPI; or sole-source purchases for which your agency will seek a Controlling Board waiver for "No Competitive Opportunity."

**Contract Information**

Commodity/Service	Account Code	Contract Description (Do not use the Account Code Description. Please provide details of the type of purchase.)	Projected Total Contract Value	Agency Requests DAS to Set-Aside (Yes/No)
(Example) Diabetic Study	510057	Statewide study to determine causes of advanced diabetes.	\$125,000	Yes

**Section III.**

**AGENCY PROJECTED CONTRACTS FY2016 ONLY | Agency to award under its own authority - ONLY New and/or Renewal**

Include contracts that the agency will award using its direct procurement authority, including those for which the agency will seek a Release and Permit from DAS in order to be able to award independently. Do not include: purchases to be made from state contracts (e.g., STS, MMA, GDC, LDC, MSA, MCSA, etc.); required sources such as CRP, OPI; or sole-source purchases for which your agency will seek a Controlling Board waiver for "No Competitive Opportunity."

**Contract Information**

Commodity/Service (Contract name, if known)	Account Code	Contract Description (Do not use the Account Code Description. Please provide details of the type of purchase.)	2nd-Tier Language included in Contract (Yes/No)	Plan to Request Release and Permit from DAS (Yes/No)	Projected Solicitation Post Date	New/ Renewal	Projected Total Contract Value	Projected Set-Aside Total Contract Value	Quarter Projected Contract to be Awarded			
									Quarter 1 (July- September)	Quarter 2 (October - December)	Quarter 3 (January - March)	Quarter 4 (April - June)
(Example) Personal Services Contract (Orient Prison)	510057	Research Project - Mental Health Disorder	Yes	Yes	11/15/2015	New	\$47,500	\$47,500	N/A	N/A	X	N/A
Personal Services Contract-Parker	510050	State Steward	No	No		Renewal	\$80,000	\$80,000	NA	NA	NA	NA

Personal Services Contract-Mahmood	510051	State Veterinarian	No	No		Renewal	\$80,000	\$80,000	NA	NA	NA	NA
Personal Services-Lyman	510052	Hearing Officer	No	No		Renewal	\$10,000	\$10,000	NA	NA	NA	NA

Total Contracts Projected - FY2016	\$170,000
Total Contracts Projects as Set-Aside - FY2016	\$170,000
Total Agency Set-Aside Contract Percentage Projected for FY2016	100.00%

**Section IV.**  
**AGENCY ELIGIBLE PURCHASES FY2016 ONLY | All purchases for FY2016 in the quarter which the voucher is planned - INCLUDE open encumbrances from Fiscal Year 2015**

Include disbursements for the purchasing represented in Section II (DAS Projected Contracts) and Section III (Agency Projected Contracts) plus all purchases to be made from existing DAS contracts (e.g., STS, MMA, GDC, LDC, MSA, MCSA, etc.), non-contract expenditures and debit purchases in the quarter the agency intends to voucher the payments. Include disbursements to be made by vouchers that reference FY2015 encumbrances. Do not include: purchases to be made from required sources such as CRP, OPI; purchases that reference non-MBE-eligible account codes; or sole-source purchases for which your agency will seek a Controlling Board waiver for "No Competitive Opportunity."

**PURCHASE INFORMATION**

Purchase by Quarter (Dollar Values)

Purchase Type (Agency Direct Purchase or DAS Term Contract)	Account Code	Description (Do not use the Account Code Description. Please provide details of the type of purchase.)	2nd-Tier Language included in Contract (Yes/No)	Total Purchases	1 <sup>st</sup> Qtr.			2 <sup>nd</sup> Qtr.			3 <sup>rd</sup> Qtr.			4 <sup>th</sup> Qtr.			Fiscal Year To Date			Total Expenditures
					Set-Aside	2nd Tier Set-Aside	Open	Set-Aside	2nd Tier Set-Aside	Open										
(Example) Agency Direct Spend	539151	Other Security Equipment	No	\$12	\$1	\$1	\$1	\$1	\$1	\$1	\$1	\$1	\$1	\$1	\$1	\$4	\$4	\$4	\$12	
DAS Term Contract	521050	Office Supplies	No	\$1,000	\$250	\$250	\$250	\$250	\$250	\$250	\$250	\$250	\$250	\$250	\$250	\$1,000	\$0	\$0	\$1,000	
															\$0	\$0	\$0	\$0		
															\$0	\$0	\$0	\$0		
Quarterly Totals					\$250	\$250	\$250	\$250	\$250	\$250	\$250	\$250	\$250	\$250	\$250	\$1,000	\$0	\$0	\$1,000	
FY 2016 ANNUAL PURCHASES				\$1,000																

**Section V.**

Total Projected Purchase	\$1,000
Total Projected MBE Set-Aside Purchases	\$2,000
Total MBE Set- Aside Purchase Percentage	200.00%
Total Percentage of Contracts Set-Aside by Agency (From Section III)	100.00%

**Section VII.**  
**CERTIFICATION OF AGENCY DIRECTOR APPROVAL/REVISION**

By checking this box,  I, the preparer of this document, hereby certify that this Minority Business Enterprise Projection Plan for Fiscal Year 2016 has been reviewed and approved by the Agency Director and Agency Procurement Officer.

Preparer's Name: Sherry White  
Date Submitted: 3/6/2015