



Littler Mendelson, P.C.
333 Bush Street, 34th Floor
San Francisco, CA 94104

SUPPLIER PROFILE

1. **MINORITY-OWNED BUSINESS**—A business that is at least 51% owned by one or more minority group member(s), or a public-owned business, whereas at least 51% of the stock and daily business management, operations and control is performed by one or more of such group member(s).

IS YOUR BUSINESS MINORITY OWNED? Yes No If yes, please indicate ethnic origin:

African American

Hispanic American

Native American

Asian/Pacific American

Asian/Indian American

Other

2. **LESBIAN, GAY, BISEXUAL, and/or TRANSGENDER BUSINESS**—A business that is at least 51% owned, operated, managed and controlled by an LGBT person or persons.

ARE YOU A LESBIAN, GAY, BISEXUAL and/or TRANSGENDER BUSINESS? Yes No

3. **WOMEN-OWNED BUSINESS**—A business that is at least 51% owned by one or more women, or as a public-owned business, at least 51% of the stock and daily business management, operations and control is performed by one or more women.

ARE YOU A WOMEN-OWNED BUSINESS? Yes No

4. **MINORITY-OWNED BUSINESS CERTIFICATION**—Is your business presently certified as a minority-owned or women-owned business with the National Minority Business Council (NMBC), the Small Business Administration, or an affiliated Council of the National Minority Supplier Development Council (NMSCD), or any other government agency?

Yes No Name of Certifying Agency: _____

(Please attach a copy of the certificate)

5. **LESBIAN, GAY, BISEXUAL, and/or TRANSGENDER BUSINESS CERTIFICATION**—Is your business presently certified as a LGBT owned business with the National Gay and Lesbian Chamber of Commerce (NGLCC), or any other government agency?

Yes No Name of Certifying Agency: _____

(Please attach a copy of the certificate)

6. **WHAT IS YOUR BUSINESS GEOGRAPHIC COVERAGE AREA?** National Local Both

7. PRODUCT & SERVICE—Please indicate below the product or service your company provides (please be brief, but specific.

I certify the information contained in this form is correct:

Name: _____ Signature: _____
(print or type)

Company Name: _____ Title: _____ Date: _____

Address: _____ Fed. ID#: _____

Phone: _____ D & B #: _____

Fax: _____

Contact Person: _____ Title: _____

Phone: _____

Website: _____

Financial and Trade References:

1. _____
Name Address Phone #

2. _____
Name Address Phone #

3. _____
Name Address Phone #