



19 East 34th Street
 New York, NY 10016
 (800) 223-6602
 www.cpg.org

Church Pension Group

PROSPECTIVE SUPPLIER PROFILE DATA SHEET

1. Name of firm:

Mailing address of firm:

Federal Tax ID No: _____

Telephone number: () _____ Fax number: () _____

Contact person/title: _____

Website and e-mail address: _____

2. Nature of business: (Specify major services/products)

3. Years firm has been in business: _____

4. Type of ownership: (check one)

Corporation Partnership Limited Liability Company (LLC)
 Joint Venture Sole Proprietorship Other _____

5. Describe your organization's minority, gender, and other protected category statistics (including, but not limited to, your company's minority-owned status) for the current fiscal year.

| *Ethnicity | Sex | % |
|--------------|-----|------|
| | | |
| | | |
| | | |
| | | |
| | | |
| Total | | 100% |

* B = African-American A = Asian-American C = Caucasian H = Hispanic-American
N = Native American Other (please specify)

6. Describe whether your organization is certified as a minority or women-owned business and the name of the certifying agency. If so, attach a copy of the current certificate.

7. Describe the diversity initiatives and practices followed by your organization as they impact employment and the engagement of vendors and suppliers by your organization.

8. Has your firm ever done any work for the Church Pension Group, either alone or as a subcontractor?

9. What type of business opportunity would your firm like to pursue with the Church Pension Group and generally what dollar volume would seek from this opportunity?

Under \$10,000 _____ \$20,000 - \$50,000 _____ \$100,000 and above _____
\$10,000 - \$20,000 _____ \$50,000 - \$100,000 _____ Other \$ _____

10. Please list the names, addresses and telephone numbers of three (3) business references with which you have transacted business during the past twelve (12) months:

| <u>Company Name</u> | <u>Contact</u> | <u>Address</u> | <u>Telephone</u> |
|---------------------|----------------|----------------|------------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

Signature _____

Date _____

Please respond completely to each item, sign, date and return this form to:
Assistant Vice President, Diversity and Development
19 East 34th Street, New York, NY 10016
Phone – (212) 592-6239 Fax
(212)-592-9425 Email –
jlewis@cpg.org

Submission of this form is for informational purposes only. It is not a guarantee of business and does not ensure "Approved" Vendor status. You will be contacted at Church Pension Group's discretion. Submissions providing products/services not currently sought will be maintained for future consideration.