

STATE OF CALIFORNIA - DEPARTMENT OF TRANSPORTATION SMALL BUSINESS ENTERPRISE - COMMITMENT OCR-SBE 01 (REV 01/2024)

PAGE 1 OF 4

CONTRACT NUMBER BID AMOUI 08-1N2404 \$1,195,1			)		BID OPENIN 04-10-20		
BIDDER NAM	ME.				0.1020		
Truesdell	Corporation of California,	Inc.					
SMALL BUSI	NESS BIDDER CERTIFICATION N	IUMBER			<b>⊠</b> N	ot applicable	
CONTRACT	ONTRACT SEE PARTICIPATION GOAL REQUIREMENT 5 TOTAL NUMBER OF ALL SUBCONTRACTS				4		
SBE PARTIC	BE PARTICIPATION GOAL REQUIREMENT COMMITMENT 5.23% TOTAL AMOUNT OF ALL SUBCONTRACTS				ITRACTS	\$313,409.58	
	SBE PARTICIPAT	TION GOAL RE	QUIRI	EMENT COMMIT	MENTS		3.32.310.2.1110
Bid Item Number		Item of Work <sup>1,2</sup>			Percentage of Bid Amount	Amount <sup>3</sup> (\$)	
	BIDITEM DESCRIPTION Construction Area Signs SMALL BUSINESS NAME					100%	\$16,000.00
3	Fryman Manangement, Inc. DESCRIPTION OF WORK, SERV					P. Salar	
	BIDITEM DESCRIPTION		-				
	Traffic Control System					100%	\$19,500.00
	SMALL BUSINESS NAME				SECTION .		
4	Fryman Manangement, Inc.  DESCRIPTION OF WORK, SERVICES, OR MATERIALS						
	BID ITEM DESCRIPTION					100%	\$27,000.00
	Stationary Impact Attenuator Vehicle SMALL BUSINESS NAME					10070	Ψ21,000.00
5	Fryman Manangement, Inc.						
	DESCRIPTION OF WORK, SER	VICES, OR MATER	RIALS				
	BID ITEM DESCRIPTION						
	SMALL BUSINESS NAME						
	DESCRIPTION OF WORK, SERVICES, OR MATERIALS						
	1						

**ADA Notice** 

For individuals with sensory disabilities, this document is available in alternate formats. For information call (916) 654-6410 or TDD (916) 654-3880 or write Records and Forms Management, 1120 N Street, MS-89, Sacramento, CA 95814

<sup>&</sup>lt;sup>2</sup>If 100% of an item is not to be performed or furnished by the small business, describe the portion of the item to be performed or furnished.

<sup>3</sup>Attach written confirmation and quotes from each small business shown stating that it will be participating in the contract to perform the specific work shown for the specific amount agreed to.

## STATE OF CALIFORNIA - DEPARTMENT OF TRANSPORTATION SMALL BUSINESS ENTERPRISE - COMMITMENT

OCR-SBE 01 (REV 01/2024)

**ADA Notice** 

CONTRACT NUMBER	I BID AMOUNT		BID OPENING DATE		
08-1N2404	\$1,195,195.00		04-10-2024		
BIDDER NAME	\$1,195,195.00		04-10-2024		
Truesdell Corporation of California,	Inc.				
SMALL E	BUSINESS ENTER	PRISE INFORMAT	ION		
SMALL BUSINESS NAME		SMALL BUSINESS CERTIFICATION NUMBER			
Fryman Management, Inc.		1799946			
SMALL BUSINESS ADDRESS		SMALL BUSINES REPRESENTATIVE NAME Jason Bubion			
18 Goodyear #105		SMALL BUSINESS PHONE NUMBER			
Irvine, CA 92618		(626) 464-4222			
		SMALL BUSINESS EMAIL ADDRESS jason@frymanmgmt.com			
SMALL BUSINESS NAME		SMALL BUSINESS CEI			
SMALL BUSINESS ADDRESS		SMALL BUSINESS REPRESENTITAIVE NAME			
		SMALL BUSINESS PHO	ONE NUMBER		
		SMALL BUSINESS EM	AIL ADDRESS		
SMALL BUSINESS NAME		SMALL BUSINESS CEI	RTIFICATION NUMBER		
SMALL BUSINESS ADDRESS		SMALL BUSINESS RE	PRESENTIATIVE NAME		
		SMALL BUSINESS PHO	ONE NUMBER		
		SMALL BUSINESS EMAIL ADDRESS			
BIDDER'S SBE PARTICIP	ATION GOAL REC	QUIREMENT CERT	TFICATION		
As an authorized representative of the the small businesses shown on this for be performed in fulfillment of the contra accordance with the requirements in G I certify under penalty of perjury that	m to meet the contra act requirements will overnment Code sec	act's SBE participation be Commercially Use stion 14837, subdivision	goal requirement. The work to full Function (CUF) compliant in		
BIDDER'S AUTHORIZED BEEKESENTATIVE	SIGNATURE	BIDDER'S AUTHORIZED	REPRESENTATIVE PRINTED NAME		
Tels Slo		PATRICE LAMBON			
DATE		CONTACT PERSON NAME			
4-11-24		Patrick Lambson			
EMAIL ADDRESS CONTACT PERSON		PHONE NUMBER CONT. 602-437-1711	ACT PERSON		
estimating@truesdellcorp.com					
Attachments: Small Business Enterpris					
☐ Small Business Enterprise - Confirm		2) form from each sma	all business		
shown. Quote from each small bus	siness shown.				

For individuals with sensory disabilities, this document is available in alternate formats. For information call (916) 654-6410 or TDD (916) 654-3880 or write Records and Forms Management, 1120 N Street, MS-89, Sacramento. CA 95814

## SMALL BUSINESS ENTERPRISE - CONFIRMATION

OCR-SBE 02 (REV01/2024)

	AES O I/ZOZA/				E Care		
08-1N240					04-11-2024	2024	
NAME OF SMALL BUSINESS CERT						ICATION NUMBER	
Fryman M	lanagement, Inc	0.		179994	6		
	MALL BUSINESS RE	ESPRESENTATIVE					
Jason Bu			I NAME OF	DIDDED BEDDESENZ	71.4		
Truesdell	Corporation of	California, Inc.		BIDDER REPRESENTA	ATIVE		
	SN	MALL BUSINESS ENTI	ERPRISE CONF	IRMATION			
Bid Item		It	tem of Work <sup>1</sup>			Amount (\$)	
Number	BID ITEM DESCRI	PTION				Name and Address of the Owner, where the Owner, which is th	
	Contruction A					\$16,000.00	
3	DESCRIPTION OF	WORK, SERVICES, OR MAT	TERIALS TO BE PRO	OVIDED			
	BID ITEM DESCRI					040 500 00	
4	Traffic Contro	l System				\$19,500.00	
	DESCRIPTION OF	WORK, SERVICES, OR MAT	TERIALS TO BE PRO	OVIDED			
	BID ITEM DESCR	IDTION					
	Stationary Im	pact Attenuator Vehicle				\$27,000.00	
5	DESCRIPTION OF	WORK, SERVICES, OR MA	TERIALS TO BE PRO	OVIDED			
						200 500 00	
					TOTAL \$	\$62,500.00	
11f 100% of a	n item is not to be po	erformed or furnished by the S	SBE, describe the porti	on of the item to be perfo	rmed or furnished.		
	S	MALL BUSINESS EN	NTERPRISE CE	RTIFICATION			
regarding the bidder or pri The work to accordance	e contract shown at me contractor to pe be performed in full with the requiremen	e of a certified small business bove. If the bidder is awarder from the type and dollar am fillment of the contract requir this in Government Code sect ry that the foregoing is true	nd the contract, my be mount of work shown rements will be Com- tion 14837, subdivisi	on the Small Business to mercially Useful Function	contractual agreer Enterprise - Comm	itment form.	
SIGNATURE O	E SMALL BUSINES	AUTHORIZED REPRESENT		NAME OF SMALL BUSIN		DREPRESENTATIVE	
6	lesol	de		asan Bubli	DATE !	1	
TITLEGESI	1 rolect	UTHORIZED REPRESENTAT	TIVE		4/1	11/24	

ADA Notice

For individuals with sensory disabilities, this document is available in alternate formats. For information call (916) 654-6410 or TDD (916) 654-3880 or write Records and Forms Management, 1120 N Street, MS-89, Sacramento, CA 95814



## After printing this label:

1. Use the 'Print' button on this page to print your label to your laser or inkjet printer.

2. Fold the printed page along the horizontal line.

3. Place label in shipping pouch and affix it to your shipment so that the barcode portion of the label can be read and scanned.

Warning: Use only the printed original label for shipping. Using a photocopy of this label for shipping purposes is fraudulent and could result in additional billing charges, along with the cancellation of your FedEx account number.

Use of this system constitutes your agreement to the service conditions in the current FedEx Service Guide, available on fedex.com.FedEx will not be responsible for any claim in excess of \$100 per package, whether the result of loss, damage, delay, non-delivery,misdelivery,or misinformation, unless you declare a higher value, pay an additional charge, document your actual loss and file a timely claim.Limitations found in the current FedEx Service Guide apply. Your right to recover from FedEx for any loss, including intrinsic value of the package, loss of sales, income interest, profit, attorney's fees, costs, and other forms of damage whether direct, incidental,consequential, or special is limited to the greater of \$100 or the authorized declared value. Recovery cannot exceed actual documented loss.Maximum for items of extraordinary value is \$1,000, e.g. jewelry, precious metals, negotiable instruments and other items listed in our ServiceGuide. Written claims must be filed within strict time limits, see current FedEx Service Guide.