

Chris Christie, Governor  
Kim Guadagno, Lieutenant Governor  
Jamie Fox, Board Chairman  
Veronique Hakim, Executive Director



One Penn Plaza East  
Newark, NJ 07105-2246  
973-491-7000

December 5, 2014

Mr. David Cace  
Eisner Amper LLP  
111 Wood Avenue, Suite 600  
Iselin, New Jersey 08830

**RE: NJ TRANSIT Contract No. 14-033B  
Integrity Oversight Monitoring Services**

**Subject: Work Authorization No. 1  
Superstorm Sandy Program-Wide Fraud Risk Assessment (Phase I)**

Dear Mr. Cace:

Enclosed for your use and files please find one (1) fully executed copy of Work Authorization No. 1 in the amount of \$96,320.00 to NJ TRANSIT Contract No. 14-033B Integrity Oversight Monitoring Services accompanied by NJ TRANSIT's Purchase Order No. B-51389-001 in the amount of \$96,320.00.

The total Work Authorization amount of \$96,320.00 shall not to be exceeded by Eisner Amper without written authorization from NJ TRANSIT's Procurement Department.

The Office of Business Development (OBD) issued 10% participation, DBE goal on the Integrity Oversight Monitoring Program which applies to any Work Authorization issued against the program.

Based on the Cost Proposal submitted for Work Authorization No. 1, Eisner Amper has identified 49.34% DBE participation by utilizing DBE subconsultant, Talson Solutions.

Please be advised of the following:

As per the post award deliverables for the contract, Eisner Amper is expected to provide the following to OBD:

- Monthly DBE Payment Report & Payment Certification—Form E (due by the 7th of each month) which begins the 7th of the month immediately following the award of the Work Authorization.
- Copies of executed subcontract agreements for the DBE firms listed on their team.

Chris Christie, Governor  
Kim Guadagno, Lieutenant Governor  
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**NJ TRANSIT**  
One Penn Plaza East  
Newark, NJ 07105-2246  
973-491-7000

January 5, 2015

Mr. David Cace  
Eisner Amper LLP  
111 Wood Avenue, Suite 600  
Iselin, New Jersey 08830

**RE: NJ TRANSIT Contract No. 14-033B  
Integrity Oversight Monitoring Services  
Work Authorization No. 1  
Superstorm Sandy Program-Wide Fraud Risk Assessment (Phase I)**

**Subject: Notice to Proceed**

Dear Mr. Cace:

NJ TRANSIT hereby issues a Notice to Proceed for Work Authorization No. 1 - Superstorm Sandy Program-Wide Fraud Risk Assessment (Phase I). Please be advised that the effective date of this Notice to Proceed is **Monday, January 5, 2015**. Eisner Amper LLP per this notice shall begin work.

If you have any questions, please feel free to contact us via phone, fax or e-mail.

Sincerely,



Taishida S. Chapman  
Principal Contract Specialist  
Procurement Department  
Phone No. 973-491-8476  
Fax No. 973-232-4829  
E-Mail: [tchapman@njtransit.com](mailto:tchapman@njtransit.com)

cc: D. Blazina  
E. Daleo  
W. Hersh  
A. Marvi  
J. Rush-Gilbert  
K. Sundstrom  
R. Koval (NJ Dept. of Treasury)  
D. Ridolfino (NJ Dept. of Treasury)

Mr. David Cace  
NJ TRANSIT Contract No. 14-033B  
Work Authorization No. 1  
December 5, 2014  
Page 2 of 2

Eisner Amper is also responsible to ensure that its DBE subconsultant(s) submits the following to the OBD in a timely manner in accordance with the post award deliverables of the contract:

- Monthly DBE Payment Report – Form E2 (due by the 7th of each month) which is to begin the 7th of the month immediately following the award of the Work Authorization.

Be advised that Senior Business Development Specialist Jacquelin Rush-Gilbert has been assigned this contract. All DBE documentation is to be forwarded to her accordingly at:

NJ TRANSIT Corporation  
One Penn Plaza East  
Newark, NJ 07105-2246  
Attn: Jacquelin Rush-Gilbert  
Office of Business Development – 6th Floor

If you have any questions, please feel free to contact me via phone, fax or e-mail.

Sincerely,



Taishida S. Chapman  
Principal Contract Specialist  
Procurement Department  
Phone No. 973-491-8476  
Fax No. 973-232-4829  
E-Mail: [tchapman@njtransit.com](mailto:tchapman@njtransit.com)

Enclosures

cc: D. Blazina  
E. Daleo  
W. Hersh  
A. Marvi  
J. Rush-Gilbert  
K. Sundstrom  
R. Koval (NJ Dept. of Treasury)  
D. Ridolfino (NJ Dept. of Treasury)

**NJ TRANSIT Contract No. 14-033B  
Integrity Oversight Monitoring Services  
Work Authorization No. 1  
Superstorm Sandy Program-Wide Fraud Risk Assessment (Phase I)**

**Executed Work Authorization No. 1**

**NEW JERSEY TRANSIT  
CHANGE ORDER FORM**

**NEW JERSEY TRANSIT CORPORATION  
HEADQUARTERS**

Work Authorization No: 1 Revision No.: 0 Effective Date: 12/4/2014  
Contract No: 14-033B Purchase Order No: B-51389-001

Contractor: **Eisner Amper, LLP**  
**111 Wood Avenue South, suite 600, Iselin, New Jersey 08830**  
**Attention: Mr. David Cace**

**NJ TRANSIT hereby incorporates Work Authorization No. 1 entitled "Superstorm Sandy Program-Wide Fraud Risk Assessment (Phase I)" into NJ TRANSIT's Contract No. 14-033B as follows:**

**Section 1: Scope of Work**

Work Authorization No. 1 is issued to Eisner Amper, LLP to provide Integrity Oversight Monitoring Services for the Superstorm Sandy Program-Wide Fraud Risk Assessment (Phase I) in accordance with NJ TRANSIT Contract No. 14-033B Exhibit A, Project Services, and the attached Scope of Work, Attachment A to this Work Authorization.

**Section 2: Cost Information**

Eisner Amper's total costs and fees for Work Authorization No. 1 shall be in accordance with the schedule of rates set forth in NJ TRANSIT Contract No. 14-033B Exhibit B, Cost Information, and the Attachment B, Cost Proposal dated October 1, 2014 to this Work Authorization No. 1. The total cost for Work Authorization No. 1 is an amount not to exceed \$96,320.00.

All invoices billed shall include actual hours and contract rates for personnel working under this Work Authorization.

**Section 3: Schedule**

The Scope of Work to be performed under Work Authorization No. 1 shall be completed within thirty (30) calendar days of the issuance of the Notice to Proceed.

**Section 4: Disadvantaged Business Enterprise Requirements**

Eisner Amper's Disadvantaged Business Enterprise Utilization Plan for Work Authorization No. 1 shall be in accordance with the Disadvantaged Business Enterprise Requirements for Race-Conscious Federal Procurement Activities of Contract No. 14-033B. Eisner Amper has identified a 49.34% DBE participation for this Work Authorization No. 1 as detailed in Exhibit C attached hereto.

**Total Value of Work Authorization No. 1 ..... \$96,320.00**

**NEW JERSEY TRANSIT  
CHANGE ORDER FORM**

**NEW JERSEY TRANSIT CORPORATION  
HEADQUARTERS**

Work Authorization No: 1 Revision No.: 0 Effective Date: 12/14/2014

Contract No: 14-033B Purchase Order No: B-51389-001

Contractor: **Eisner Amper, LLP**  
111 Wood Avenue South, suite 600, Iselin, New Jersey 08830  
Attention: Mr. David Cace

**WORK AUTHORIZATION NO. 1 SUMMARY**

Initial Work Authorization Amount: ..... \$0.00  
 Modifications to Date:..... \$0.00  
 Value of this Work Authorization Modification:..... \$96,320.00  
 Present Total Amount of this Work Authorization: ..... \$96,320.00


**SUMMARY OF WORK AUTHORIZATIONS ISSUED TO DATE**

|  |                     |
|--|---------------------|
| Work Authorization No. 1 - Superstorm Sandy Program-Wide Fraud Risk Assessment | \$ 96,320.00        |
| <b>Total of All Work Authorizations Issued to Date:</b>                        | <b>\$ 96,320.00</b> |

**NJ TRANSIT CONTRACT NO. 14-033B CONTRACT SUMMARY**

Original Contract Amount: ..... \$0.00  
 Total of All Work Authorizations Issued to Date: ..... \$0.00  
 Amount of this Modification:..... \$96,320.00  
 Present Total Contract Amount: ..... \$96,320.00

**CONTRACTOR**  
  
 \_\_\_\_\_  
 President or Duly Authorized Designee

**NJ TRANSIT**  
  
 \_\_\_\_\_  
 Contracting Officer or Duly Authorized Designee

**NJ TRANSIT Contract No. 14-033B  
Integrity Oversight Monitoring Services  
Work Authorization No. 1  
Superstorm Sandy Program-Wide Fraud Risk Assessment (Phase I)**

**Attachment A – Scope of Work**

**NJ TRANSIT Contact No. 14-033**  
**Integrity Oversight Monitoring Services**  
**Request for Proposal for Superstorm Sandy Recovery Project Program-Wide**  
**Fraud Risk Assessment – Phase I**

**I. SCOPE OF WORK:**

Provide a fraud risk assessment for the Superstorm Sandy Recovery Project Program-Wide Fraud Risk Assessment – Phase I including, but not be limited to, the identification of:

- a) Potential fraud, waste, abuse and/or potential criminal activity risks/scenarios/schemes including prioritization and probability and potential impact.
  - i. Included should be a review of all applicable procedures and processes for susceptibility to fraud, waste, abuse and/or potential criminal activity.
- b) Specific methodology and detailed work programs/audit programs/other procedures that will be employed by the IOM firm to mitigate, minimize and/or identify fraud, waste, abuse and/or potential criminal activity for each risk/scenario/scheme identified for NJ TRANSIT.
- c) Detailed plan for key fraud, waste, abuse and/or potential criminal activity risks. This plan must include but not be limited to:
  - i. Prioritized fraud, waste, abuse and/or potential criminal activity risk/scenario/schemes.
  - ii. Detailed strategy for the life of the project for how each risk will be addressed.
  - iii. Deliverables for each risk.
  - iv. Level of effort (hours) needed for each risk by personnel category.
  - v. Other relevant data.
- d) Training (If Applicable)

The IOM firm will provide fraud, waste and abuse awareness or other training as may be required by NJ TRANSIT.
- e) Provide the strategy and deliverables that the IOM firm will utilize to assess contractor(s) compliance with DBE requirements as specified in Section VI below.
- f) Specific deliverables for each work program/audit program/other procedures.
- g) All deliverables must be in sufficient detail to allow:
  - i. NJ TRANSIT to verify and evaluate the conclusions, recommendations, plans, documentation, etc. provided.



- ii. NJ TRANSIT to assess, in its sole judgment, the quality and acceptance of deliverables provided.
- iii. The IOM firm, NJ TRANSIT or a third party to execute the plan.
- h) The IOM firm will provide monitoring services for the contracted services for construction, design and project management.

**Activities to be conducted by the IOM firm personnel, may include, but not be limited to the following:**

1. Attending site meetings as to ongoing construction work where warranted.
2. Attending agency meetings as needed, e.g., job/progress, pre-bid, pre-construction, and any other necessary meetings.
3. Attending scopes reviews and meetings with prospective contractors and vendors in order to ensure procurements are conducted in accordance with NJ TRANSIT Rules and Regulations and that a level playing field is maintained.
4. Reviewing information and activities in relation to project contract/program.
5. Auditing to ensure procurement compliance.
6. Addressing work quality, safety, environmental and historic preservation issues.
7. Taking actions to detect, investigate, prevent and remediate, waste, fraud, and abuse.
8. Making unannounced periodic headcounts of construction site workers in order to deter no-show jobs.
9. Other activities that may be defined or required.

## **II. DELIVERABLES**

The IOM must ensure compliance with the following:

### **A. Work Authorization Deliverables**

At a minimum, the following deliverables will be provided to the NJ TRANSIT Internal Audit Project Manager based on the approved plan. Deliverables to support work will include but not be limited to the following:

1. Fraud Risk Mitigation Strategy and Detailed Work Plan
2. Work papers, reports and other required documentation in the format and content required by NJ TRANSIT to support all work.
3. Presenting reports, findings and other results of audits, reviews, investigations and other assigned tasks, and incorporating comments provided by NJ TRANSIT as appropriate and resubmitting the reports as final.

4. Audits as required under the Work Authorization.
5. Other deliverables that may be defined or required.

**B. Required Reports and Documents**

1. Findings of potential fraud, malfeasance, or criminal activity

Upon a finding of a likely criminal violation or lesser degree of any malfeasance, inefficiency, waste, fraud, abuse or mismanagement of funds, report findings to the Office of the State Comptroller and the Attorney General/OSC Taskforce with a copy to NJ TRANSIT Auditor General immediately consistent with the requirements of N.J.S.A. 52:15D-2.

2. Weekly Status Reports

A weekly status report will be required each Monday by noon following the prior week's work in the NJ TRANSIT prescribed format (to be provided upon engagement). The report will include at a minimum, but not be limited to: the week's accomplishments by deliverable and/or task; status of deliverables; work-in-progress; next steps; listings and status of documents/data requested; significant risks identified; items or issues identified; total weekly and cumulative hours by task, deliverable, and person; projected hours to complete each task/deliverable; and any other information NJ TRANSIT may require.

3. Monthly Status Reports

Provide NJ TRANSIT with updates on activities conducted on, or for, each task to include the type of activity, analysis, results, recommendations, resolutions, and/or preventative measures; and follow up on any previous outstanding issues.

4. Quarterly Report

On the first business day of each calendar quarter, the IOM firm shall provide to the State Treasurer, for distribution to the Legislature and the Governor, a report detailing the IOM firm's provision of services during the three-month period second preceding the due date of the report and any previously unreported provision of services, which shall include, but not be limited to, detailed findings concerning the IOM firm's provision of services and recommendations for corrective or remedial action relative to findings of malfeasance and inefficiency. The report shall not include any information which may compromise a potential criminal investigation or prosecution or any proprietary information. The report shall include a privilege log which shall detail each denial of sensitive information that the IOM firm exercises in preparing the report for transmission to the Legislature and the Governor.

5. FTA Quarterly Report

Two weeks after the quarter ends, the IOM firm is required to provide all information as identified by NJTIAD to meet the FTA quarterly reporting requirements.

6. Time Logs

Copies (and upon request, originals) of time logs shall be maintained by the IOM and shall include information on the allocation of hours worked by the IOM and staff to the respective federally-funded programs and all other data required in order to ensure compliance with all federal requirements.

**NJ TRANSIT Contract No. 14-033B  
Integrity Oversight Monitoring Services  
Work Authorization No. 1  
Superstorm Sandy Program-Wide Fraud Risk Assessment (Phase I)**

**Attachment B – Cost Information**

NJ TRANSIT Contract No. 14-033  
 Integrity Oversight Monitoring Services  
 Attachment 5 - Cost Proposal Format REVISED

Firm Name: EisnerAmper

| Staffing Category               | Task                     | Workstream I  |                     | Total Hours Per Staff Category | Total \$ Per Staff Category |
|---------------------------------|--------------------------|---------------|---------------------|--------------------------------|-----------------------------|
|                                 | Hourly Billing Rate (\$) | Hours         | Amount (\$)         |                                |                             |
| <b>EISNERAMPER</b>              |                          |               |                     |                                |                             |
| Partner/Principal/Director      | \$ 330.00                | 8.00          | \$ 2,640.00         | 8.00                           | \$ 2,640.00                 |
| Program Manager/Project Manager | 290.00                   | 110.00        | 31,900.00           | 110.00                         | 31,900.00                   |
| Supervisor/Senior/Consultant    | 225.00                   | 44.00         | 9,900.00            | 44.00                          | 9,900.00                    |
| Administrative Support          | 70.00                    | 15.00         | 1,050.00            | 15.00                          | 1,050.00                    |
| <b>SUBTOTAL - EISNERAMPER</b>   |                          | <b>177.00</b> | <b>45,490.00</b>    | <b>177.00</b>                  | <b>45,490.00</b>            |
| <b>TALSON</b>                   |                          |               |                     |                                |                             |
| Partner/Principal/Director      | \$ 330.00                | 18.00         | \$ 5,940.00         | 18.00                          | \$ 5,940.00                 |
| Program Manager/Project Manager | 290.00                   | 72.00         | 20,880.00           | 72.00                          | 20,880.00                   |
| Supervisor/Senior/Consultant    | 225.00                   | 50.00         | 11,250.00           | 50.00                          | 11,250.00                   |
| Consultant/Associate/Staff      | 160.00                   | 50.00         | 8,000.00            | 50.00                          | 8,000.00                    |
| Administrative Support          | 70.00                    | 10.00         | 700.00              | 10.00                          | 700.00                      |
| <b>SUBTOTAL - TALSON</b>        |                          | <b>200.00</b> | <b>46,770.00</b>    | <b>200.00</b>                  | <b>46,770.00</b>            |
| <b>CHADBOURNE</b>               |                          |               |                     |                                |                             |
| Subject Matter Expert           | \$ 320.00                | 8.00          | \$ 2,560.00         | 8.00                           | \$ 2,560.00                 |
| <b>SUBTOTAL - CHADBOURNE</b>    |                          | <b>8.00</b>   | <b>2,560.00</b>     | <b>8.00</b>                    | <b>2,560.00</b>             |
| <b>TOTALS</b>                   |                          | <b>385.00</b> | <b>\$ 94,820.00</b> | <b>385.00</b>                  | <b>\$ 94,820.00</b>         |

|              |              |
|--------------|--------------|
| Total Direct | \$ 94,820.00 |
|--------------|--------------|

|                           |           |
|---------------------------|-----------|
| Travel Cost - EisnerAmper | \$ 600.00 |
| Travel Cost - Talson      | \$ 750.00 |
| Travel Cost - Chadbourne  | \$ 150.00 |

|                    |                     |
|--------------------|---------------------|
| <b>GRAND TOTAL</b> | <b>\$ 96,320.00</b> |
|--------------------|---------------------|

**NJ TRANSIT Contract No. 14-033  
 Integrity Oversight Monitoring Services  
 Attachment 5 - Cost Proposal Format REVISED**

**Firm Name: EisnerAmper**

| Staffing Category               | Task                     | Workstream I |                     | Total Hours Per Staff Category | Total \$ Per Staff Category |
|---------------------------------|--------------------------|--------------|---------------------|--------------------------------|-----------------------------|
|                                 | Hourly Billing Rate (\$) | Hours        | Amount (\$)         |                                |                             |
| Partner/Principal/Director      | \$ 330.00                | 26           | \$ 8,580.00         | 26                             | \$ 8,580.00                 |
| Program Manager/Project Manager | 290.00                   | 182          | 52,780.00           | 182                            | 52,780.00                   |
| Subject Matter Expert           | 320.00                   | 8            | 2,560.00            | 8                              | 2,560.00                    |
| Supervisor/Senior/Consultant    | 225.00                   | 94           | 21,150.00           | 94                             | 21,150.00                   |
| Consultant/Associate/Staff      | 160.00                   | 50           | 8,000.00            | 50                             | 8,000.00                    |
| Administrative Support          | \$ 70.00                 | 25           | 1,750.00            | 25                             | 1,750.00                    |
| <b>TOTALS</b>                   |                          | <b>385</b>   | <b>\$ 94,820.00</b> | <b>385</b>                     | <b>\$ 94,820.00</b>         |

|                          |                     |
|--------------------------|---------------------|
| <b>Total Direct Cost</b> | <b>\$ 94,820.00</b> |
|--------------------------|---------------------|

|                          |                    |
|--------------------------|--------------------|
| <b>Total Travel Cost</b> | <b>\$ 1,500.00</b> |
|--------------------------|--------------------|

|                    |                     |
|--------------------|---------------------|
| <b>GRAND TOTAL</b> | <b>\$ 96,320.00</b> |
|--------------------|---------------------|

NJ TRANSIT Contract No. 14-033  
 Integrity Oversight Monitoring Services  
 REVISED Cost Proposal Detail

Firm Name: EisnerAmper

| Member           | Company    | Title                           | Rate      | Workstream I |              |        |              |        |              |        |              | Total  |              |
|------------------|------------|---------------------------------|-----------|--------------|--------------|--------|--------------|--------|--------------|--------|--------------|--------|--------------|
|                  |            |                                 |           | Task 1       |              | Task 2 |              | Task 3 |              | Task 4 |              | Hours  | \$           |
|                  |            |                                 |           | Hours        | \$           | Hours  | \$           | Hours  | \$           | Hours  | \$           | Hours  | \$           |
| David Cace       | EA         | Partner/Principal/Director      | \$ 330.00 | 2.00         | \$ 660.00    | 4.00   | \$ 1,320.00  | 0.00   | \$ -         | 2.00   | \$ 660.00    | 8.00   | \$ 2,640.00  |
| Tim Van Noy      | EA         | Program Manager/Project Manager | \$ 290.00 | 8.00         | 2,320.00     | 30.00  | 8,700.00     | 20.00  | 5,800.00     | 12.00  | 3,480.00     | 70.00  | 20,300.00    |
| Elliott Lee      | EA         | Program Manager/Project Manager | \$ 290.00 | 4.00         | 1,160.00     | 20.00  | 5,800.00     | 8.00   | 2,320.00     | 8.00   | 2,320.00     | 40.00  | 11,600.00    |
| Jeff Buchakjian  | EA         | Supervisor/Senior/Consultant    | \$ 225.00 | 2.00         | 450.00       | 8.00   | 1,800.00     | 8.00   | 1,800.00     | 4.00   | 900.00       | 22.00  | 4,950.00     |
| Nancy Brady      | EA         | Supervisor/Senior/Consultant    | \$ 225.00 | 2.00         | 450.00       | 8.00   | 1,800.00     | 8.00   | 1,800.00     | 4.00   | 900.00       | 22.00  | 4,950.00     |
| Marisol Gonzalez | EA         | Administrative Support          | \$ 70.00  | 0.00         | -            | 5.00   | 350.00       | 5.00   | 350.00       | 5.00   | 350.00       | 15.00  | 1,050.00     |
| Robert Bright    | Talson     | Partner/Principal/Director      | \$ 330.00 | 2.00         | 660.00       | 8.00   | 2,640.00     | 4.00   | 1,320.00     | 4.00   | 1,320.00     | 18.00  | 5,940.00     |
| Martin Izaak     | Talson     | Program Manager/Project Manager | \$ 290.00 | 10.00        | 2,900.00     | 30.00  | 8,700.00     | 20.00  | 5,800.00     | 12.00  | 3,480.00     | 72.00  | 20,880.00    |
| Branden Grove    | Talson     | Supervisor/Senior/Consultant    | \$ 225.00 | 8.00         | 1,800.00     | 16.00  | 3,600.00     | 16.00  | 3,600.00     | 10.00  | 2,250.00     | 50.00  | 11,250.00    |
| Chamee Foston    | Talson     | Consultant/Associate/Staff      | \$ 160.00 | 8.00         | 1,280.00     | 16.00  | 2,560.00     | 16.00  | 2,560.00     | 10.00  | 1,600.00     | 50.00  | 8,000.00     |
| Administrative   | Talson     | Administrative Support          | \$ 70.00  | 0.00         | -            | 3.00   | 210.00       | 3.00   | 210.00       | 4.00   | 280.00       | 10.00  | 700.00       |
| Keith Rosen      | Chadbourne | Subject Matter Expert           | \$ 320.00 | 0.00         | -            | 0.00   | -            | 0.00   | -            | 8.00   | 2,560.00     | 8.00   | 2,560.00     |
|                  |            |                                 |           | 46.00        | \$ 11,680.00 | 148.00 | \$ 37,480.00 | 108.00 | \$ 25,560.00 | 83.00  | \$ 20,100.00 | 385.00 | \$ 94,820.00 |

**NJ TRANSIT Contract No. 14-033B  
Integrity Oversight Monitoring Services  
Work Authorization No. 1  
Superstorm Sandy Program-Wide Fraud Risk Assessment (Phase I)**

**Attachment C – DBE Forms**



MANDATORY FORM FOR BIDDER/PROPOSER/PRIME: COMPLETE ENTIRELY

FORM A (Fed)

First Tier DBE UTILIZATION - FORM A

Project Name: Superstorm Sandy Recovery Program - Wide Fraud Risk Assessment - Phase I

NJT Contract No: 14-033

Assigned DBE Goal %: 10 NJT Procurement Specialist: Taishida Chapman

Contract Value (\$): \$96,320

First Tier DBE must perform at least 51% of its subcontract value if subcontracting to a Second -Tier DBE or Non-DBE. Do not count Non-DBE portion toward the goal.

| Name, Address and Telephone # of DBE Subcontractor/Subconsultant  | Provide Detailed Scope of Work to be Performed (Identify all suppliers)  | Dollar Value of Subcontract/Sub-consultant Work (\$) Awarded | Percentage of Subcontract Work (%) |
|---|--|--|------------------------------------|
| Tolson Solutions, LLC<br>306 Market Street, 4th floor<br>Philadelphia, PA 19106   | Tolson Solutions, LLC will provide construction audit services including construction contract audits, federal grant compliance, and fraud risk assessments. | \$47,520   | 49.3 %                             |
|   |  |  | %                                  |
|   |  |  | %                                  |
|   |  |  | %                                  |
|   |  |  | %                                  |
| For DBE suppliers, show original subcontract value multiplied by 60% (\$2,000*60%=\$1200). For DBE portion of work, subtract Non-DBE portion of work from original subcontract value. |  |  | %                                  |
| TOTALS  |  | \$ 47,520  | 49.3 %                             |

The undersigned will enter into a formal agreement with the DBE(s) listed in this schedule conditioned upon execution of a contract with NJ TRANSIT for the above referenced project. The undersigned understands that removal/replacement of the DBE(s) listed is **NOT PERMISSIBLE** for any reason (pre or post award) without submitting a written request to the Office of Business Development and receiving **WRITTEN APPROVAL** from the Office of Business Development. Failure to obtain written approval shall result in the breach of contract and subject to corrective action to be determined by NJ TRANSIT.

Company Name: EisnerAmper LLP

Authorized Signature: David A. Cace

Company Address: 111 Wood Avenue South, Suite 600, Iselin, NJ 08830

Print Name: David A. Cace

Federal Tax ID #: [REDACTED]

Title: Partner

Company Tel #: 212.891.4024

Prime Contractor's DBE Liaison Officer: David A. Cace

Date Signed: 10/14/14

To Add Subs Use Additional Forms

BIDDER SOLICITATION & CONTRACTOR INFORMATION - FORM A1

NJT Contract No: 14-033

Project Title: Superstorm Sandy Recovery Program - Wide Fraud Risk Assessment - Phase I

Prime Contractor: EisnerAmper LLP

Telephone #: 212.891.4024

Date: October 1, 2014

Complete the information below for Bidder/Proposer/Prime(s) working on the project. Use Page 2 for all subcontractors/subconsultants participating on or solicited for this project.

|   | Bidder/Proposer/Prime            | Bidder/Proposer/Prime | Bidder/Proposer/Prime |
|---|----------------------------------|-----------------------|-----------------------|
| Company's Full Name   | EisnerAmper LLP                  |                       |                       |
| Address   | 111 Wood Avenue South, Suite 600 |                       |                       |
| City  | Iselin, NJ                       |                       |                       |
| Zip   | 08830                            |                       |                       |
| County  | Middlesex                        |                       |                       |
| Phone   | 212.891.4024                     |                       |                       |
| Fax   |                                  |                       |                       |
| E-mail  | david.cace@eisneramper.com       |                       |                       |
| Owner   | Partnership                      |                       |                       |
| Date Established  | 1963                             |                       |                       |
| Date Certified  | N/A                              |                       |                       |
| Ethnicity   | Comprised of various ethnicities |                       |                       |
| Gender  | Male and Female                  |                       |                       |
| Certification Status: DBE or Non-DBE  | Non-DBE                          |                       |                       |
| Federal Tax ID # / SSN #  |                                  |                       |                       |
| Annual Gross Receipts:<br>A - Less than \$500k<br>B - \$500K to \$1M<br>C - \$1M to \$2M<br>D - \$2M to \$5M<br>E - \$5M and over<br>Indicate the letter that applies | E                                |                       |                       |
| Primary NAICS Code  | 541211                           |                       |                       |

BIDDER SOLICITATION & CONTRACTOR INFORMATION - FORM A1

NJT Contract No: 14-033

Project Title: Superstorm Sandy Recovery Program - Wide Fraud Risk Assessment - Phase I

Prime Contractor: EisnerAmper LLP

Telephone #: 212.891.4024

Date: October 1, 2014

Complete the information below for "all" subcontractors/subconsultants solicited for or participating on this project.

|   | Subcontractor/Subconsultant | Subcontractor/Subconsultant      | Subcontractor/Subconsultant |
|---|-----------------------------|----------------------------------|-----------------------------|
| Company's Full Name   | Talson Solutions, LLC       | Chadbourne & Parke LLP           |                             |
| Address   | 306 Market Street, 4th Fl   | 1200 New Hampshire Avenue, NW    |                             |
| City  | Philadelphia, PA            | Washington, DC                   |                             |
| Zip   | 19106                       | 20036                            |                             |
| County  | Philadelphia                | Washington                       |                             |
| Phone   | 215.592.9634                | 202.974.5687                     |                             |
| Fax   |                             |                                  |                             |
| E-mail  | rbright@talsonsolutions.com | krosen@chadbourne.com            |                             |
| Owner   | Robert S. Bright            | Partnership                      |                             |
| Date Established  | May 18, 2001                | 1902                             |                             |
| Date Certified  | May 1, 2014                 | N/A                              |                             |
| Ethnicity   | African American            | Comprised of various ethnicities |                             |
| Gender  | Male                        | Male and Female                  |                             |
| Certification Status: DBE or Non-DBE  | DBE                         | Non-DBE                          |                             |
| Federal Tax ID # / SSN #  |                             |                                  |                             |
| Annual Gross Receipts:<br>A - Less than \$500k<br>B - \$500k to \$1M<br>C - \$1M to \$2M<br>D - \$2M to \$5M<br>E - \$5M and over<br>Indicate the letter that applies | D                           | E                                |                             |
| Primary NAICS Code  | 541611                      | 541110                           |                             |

NON-DBE SUBCONTRACTOR UTILIZATION - FORM A2

Directions: To be completed by any Bidder/Proposer/Prime for "all" subs including suppliers participating on this contract.

NJ Transit Contract No: 14-033

Date: October 14, 2014 Prime Contract Value: \$46,090

Bidder/Proposer Prime Name: EisnerAmper LLP

Project Title: Superstorm Sandy Recovery Program - Wide Fraud Risk Assessment - Phase I

| Name, Address and Telephone # of all Subcontractor/Subconsultants                               | EIN #      | Provide Detailed Scope of Work to be Performed   | Dollar Amount of Subcontractor/Sub-consultant Work (\$) Awarded | Percentage of Subcontract or Work (%) |
|---|------------|--|---|---------------------------------------|
| Chadbourne & Parke LLP<br>1200 New Hampshire Avenue, NW<br>Washington, DC 20036<br>202.974.5687 | [REDACTED] | Chadbourne & Parke LLP will provide legal compliance and legal investigative services. | \$ 2,710  | 2.8 %                                 |
|   |            |  | \$  | %                                     |
|   |            |  | \$  | %                                     |
|   |            |  | \$  | %                                     |
|   |            |  | \$  | %                                     |
| Must provide a detailed scope of work; one word descriptions are not acceptable.                |            |  | \$  | %                                     |
| <b>TOTALS</b>   |            |  | \$ 2,710  | 2.8 %                                 |

To Add Subs Use Additional Forms

INTENT TO PERFORM AS A 1st TIER DBE - FORM B

The Bidder/Proposer/Prime is prohibited from completing any portion of this form and directing the DBE to sign a blank form.

DIRECTIONS: DBE(s) listed on the Form A must complete all information on this form.

EisnerAmper  
Name of Bidder/Proposer/Prime:

Talson Solutions, LLC  
Name of DBE Firm:

Project/Contract Name: Integrity Oversight Monitoring Services  
Request For Proposal: Superstorm Sandy Recovery Program-Wide  
Fraud Risk Assessment - Phase I

IFB/RFP Contract Number: 14-033

Does the undersigned DBE (Answer Accordingly):

Intend to perform subcontract work in connection with the above-mentioned project as a Joint Venture? Circle one. (Yes or No) No

Intend to subcontract any portion of its scope of work to a DBE(s)?  
If yes, DBE Sub-Primes must complete and submit Form AA.

Circle one. (Yes or No) No  
At what percent? \_\_\_\_\_ %

Intend to subcontract any portion of its scope of work to a Non-DBE(s)?  
If yes, must complete and submit Form AA2.

Circle one. (Yes or No) No  
At what percent? \_\_\_\_\_ %

The undersigned will perform the following described work on the above-referenced project: (Provide a detailed description of the type of work you will perform on your subcontract. Attach a copy of quote approved and signed by Bidder (optional)).

Talson Solutions, LLC will provide construction audit and risk assessment activities for integrity oversight monitoring services.

Dollar Value of DBE Subcontract: \$47,520

Total Quantity/Units (if applicable): \_\_\_\_\_ Per Unit Cost (if applicable): \$ \_\_\_\_\_

The undersigned based the above scope of work and subcontract value on detailed project specs received from the Bidder contractor named above. Circle one. (Yes or No) Yes

The Prime Contractor projected the following commencement and completion date for such work as follows:

DBE Contract Start Date: 10/1/14 DBE Contract Completion Date 11/1/14

The undersigned DBE will enter into a formal agreement for the above work with the Prime Contractor conditioned upon execution of a contract with NJ TRANSIT. As a DBE subcontractor, I will cooperate with the certification, compliance and monitoring process set forth by NJ TRANSIT. I attest that I will perform at least 51% of my subcontract with my own workforce for the referenced project.

Jeffrey W. Simpson  
Signature of 1st Tier DBE

10/14/14  
Date

Vice President of Operations  
Title

Jeffrey W. Simpson  
Print Name

215-592-9634  
Telephone #:

failure to adhere to these instructions or the falsification of any information on this form shall result in breach of contract and subject to the appropriate penalties to be determined by NJ TRANSIT.

New Jersey Unified Certification Program

# NJ UCP

**NJ TRANSIT**  
The Way To Go.



New Jersey  
Department of Transportation

**THE PORT AUTHORITY OF NY & NJ**

## CERTIFIED DISADVANTAGED BUSINESS ENTERPRISE

### TALSON SOLUTIONS, LLC

This certificate acknowledges that the above named firm is certified as a Disadvantaged Business Enterprise as defined in Title 49, Part 26 of the US Code of Federal Regulations. This certificate will remain in effect for three years from the certification date and must be updated annually. NJ TRANSIT must be notified within 30 days of any changes in the business that may affect ownership and control.

Your firm will be listed in the NJ UCP directory under the following NAICS Code(s).

|                   |  |   |   |   |   |
|-------------------|--|---|---|---|---|
| <b>NAICS CODE</b> | <b>541219</b><br>Other Accounting Services | <b>541618</b><br>Other Management Consulting Services | <b>541990</b><br>All Other Professional, Scientific, and Technical Services | <b>541611</b><br>Administrative Management and General Management Consulting Services | <b>541690</b><br>Other Scientific and Technical Consulting Services |
|-------------------|--|---|---|---|---|

NJ TRANSIT certified your firm as a DBE on behalf of all NJ UCP partners.

Signed: *L.A. Hernandez*  
L.A. Hernandez, Manager, Certification & Outreach  
Office of Civil Rights

Signed: *Lauren Williams*  
Lauren Williams, S.B.D.S.  
Office of Civil Rights

ISSUE DATE: May 1, 2014

ANNIVERSARY DATE: May 1st

**NJ TRANSIT Contract No. 14-033B  
Integrity Oversight Monitoring Services  
Work Authorization No. 1  
Superstorm Sandy Program-Wide Fraud Risk Assessment (Phase I)**

**Purchase Order**



ONE PENN PLAZA EAST  
NEWARK, NJ 07105-2246

**HOW TO CONTACT ACCOUNTS PAYABLE**  
VOICE: 973-491-8399 FAX: 973-491-4621  
E-MAIL: APHELP@NJTRANSIT.COM

**PURCHASE ORDER INSTRUCTIONS**

- ALL PACKAGES MUST BE ACCOMPANIED BY A PACKING SLIP.
- REFERENCE PURCHASE ORDER NUMBER AND NJT CATALOG NUMBER ON ALL INVOICES, PACKING SLIPS AND BILLS OF LADING.
- VENDOR MUST SUPPLY ORIGINAL INVOICE AND ANY FREIGHT BILLS IN EXCESS OF \$100 TO:  
**NJ TRANSIT ACCOUNTS PAYABLE**  
P.O. BOX 5519  
NEWARK, NJ 07105-5519
- VENDOR MUST ALSO SUPPLY COPY OF INVOICE TO CONSIGNEE.
- VENDOR: IF PRICE ON PO DOES NOT MATCH, DO NOT SHIP MATERIAL, CONTACT BUYER.

|  |            |        |
|--|------------|--------|
| PURCHASE ORDER & RELEASE NO            |            | REV NO |
| B-51389-001                            |            | 0      |
| VENDOR NO                              | ISSUE DATE |        |
| 70104725                               | 11/04/14   |        |
| DATE CHANGED                           | PAGE NO    |        |
|  | 1          |        |
| <b>PURCHASING FAX:</b><br>973-491-7547 |            |        |

**VENDOR:** EISNER AMPER LLP  
111 WOOD AVENUE SOUTH, SUITE 600  
ISELIN, NJ 08830

**SHIP TO:** NJ TRANSIT HEADQUARTERS  
\*DELIVER 9-11 AM OR 2-4 PM ONL  
ONE PENN PLAZA EAST  
NEWARK, NJ 07105

**BUYER:** Taishida Chapman 973-491-8476 CPRCTSC@NJTRANSIT.COM

NJ TRANSIT IS EXEMPT FROM NJ SALES & USE TAXES PURSUANT TO SECT 9(A)(1), OF NJSA 54:32B-1 ET SEQ.  
FEDERAL T.I.N.: 22-228-1352  
TAX EXEMPT #'S 21-6000928 (NJ) 22-75-0050K (FEDERAL)

|          |               |           |          |          |
|----------|---------------|-----------|----------|----------|
| TERMS    | FREIGHT TERMS | FOB       | SHIP VIA | BUYER NO |
| NET 30 D | PREPAID       | DELIVERED | BEST WAY | 081      |

NJ TRANSIT ETHICS CODE: NJ TRANSIT IS AN INSTRUMENTALITY OF THE STATE OF NEW JERSEY AND ITS EMPLOYEES AND OFFICERS AND MEMBERS OF THE NJ TRANSIT BOARD OF DIRECTORS ARE PUBLIC SERVANTS AND ARE GOVERNED BY CIVIL AND CRIMINAL LAWS THAT CONTROL HOW NJ TRANSIT AND ITS PERSONNEL CONDUCT BUSINESS WITH VENDORS, CONTRACTORS AND CONSULTANTS. THESE PROVISIONS INCLUDE THE CONFLICTS OF INTEREST LAW, NJSA 52:13D-12; THE GIFTS TO PUBLIC SERVANTS LAW, NJSA 2C:27-6; AND THE COMPENSATION FOR PAST OFFICIAL BEHAVIOR LAW, NJSA 2C:27-4. THESE PROVISIONS CONTAIN UNEQUIVOCAL AND STRINGENT RESTRICTIONS RELATING TO GIFTS AND GRATUITIES BY ANY NJ TRANSIT EMPLOYEE OR ANY PERSON, COMPANY OR ENTITY DOING BUSINESS WITH OR WANTING TO DO BUSINESS WITH NJ TRANSIT. THE TERM "GIFT" INCLUDES ALL THINGS AND OBJECTS, TANGIBLE OR INTANGIBLE INCLUDING SERVICES, GRATUITIES, MEALS, ENTERTAINMENT, EVENT TICKETS, MEMBERSHIP CLUB ACCESS, TRAVEL COSTS AND LODGING. ALSO, NJ TRANSIT'S CODE OF ETHICS AND CODE OF CONTRACTORS AND CONSULTANTS FROM OFFERING ANY GIFTS TO ANY NJ TRANSIT EMPLOYEE. DO NOT, UNDER ANY CIRCUMSTANCES, TEMPT OR PUT AN NJ TRANSIT EMPLOYEE IN THE AWKWARD POSITION OF HAVING TO REFUSE A GIFT OR RETURN A GIFT NO MATTER HOW WELL INTENTIONED OR INNOCUOUS THE GIFT MAY BE.

| LINE ITEM | QUANTITY  | UNIT OF MEASURE | NJT CATALOG NUMBER | DESCRIPTION  | UNIT PRICE | AMOUNT      |
|-----------|-----------|-----------------|--------------------|--|------------|-------------|
| 1         | 96,320.00 | EA              | 95                 | <p>CONTRACT/BID NO: 14-033B</p> <p>NJ TRANSIT CONTRACT NO. 14-033B<br/>INTEGRITY OVERSIGHT MONITORING SERVICES<br/>PROJECT MANAGER: WARREN HERSH<br/>THIS AGREEMENT IS A COST REIMBURSABLE CONTRACT BASED UPON THE CUMULATIVE VALUE OF THE WORK AUTHORIZATIONS ISSUED BY NJ TRANSIT FOR A THREE (3) YEAR CONTRACT TERM.<br/>*REFER TO CONTRACT NO. 14-033B FOR THE COMPLETE TERMS OF THIS AGREEMENT.*<br/>*****</p> <p>MR# NONE PROM DATE: 11/04/14<br/>GL#0030 99950303 PBN0242</p> <p>NJ TRANSIT CONTRACT NO. 14-033B<br/>INTEGRITY OVERSIGHT MONITORING SERVICES<br/>WORK AUTHORIZATION NO. 1</p> | 1.0000     | 96,320.0000 |

CONTINUE

WHEN BOX IS CHECKED, THE TERMS AND CONDITIONS OF THE ATTACHED CONTRACT REPLACE THOSE SHOWN ON THE REVERSE SIDE OF THIS PURCHASE ORDER.

*see page 2*  
VENDOR COPY AUTHORIZED NJ TRANSIT SIGNATURE/DATE





ONE PENN PLAZA EAST  
NEWARK, NJ 07105-2246

**HOW TO CONTACT ACCOUNTS PAYABLE**  
VOICE: 973-491-8399 FAX: 973-491-4621  
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- VENDOR MUST SUPPLY ORIGINAL INVOICE AND ANY FREIGHT BILLS IN EXCESS OF \$100 TO:  
**NJ TRANSIT ACCOUNTS PAYABLE**  
P.O. BOX 5519  
NEWARK, NJ 07105-5519
- VENDOR MUST ALSO SUPPLY COPY OF INVOICE TO CONSIGNEE.
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|                             |            |        |
|-----------------------------|------------|--------|
| PURCHASE ORDER & RELEASE NO |            | REV NO |
| B-51389-001                 |            | 0      |
| VENDOR NO                   | ISSUE DATE |        |
| 70104725                    | 11/04/14   |        |
| DATE CHANGED                | PAGE NO    |        |
|                             | 2          |        |
| <b>PURCHASING FAX:</b>      |            |        |
| 973-491-7547                |            |        |

**VENDOR:** EISNER AMPER LLP  
111 WOOD AVENUE SOUTH, SUITE 600  
ISELIN, NJ 08830

**SHIP TO:** NJ TRANSIT HEADQUARTERS  
\*DELIVER 9-11 AM OR 2-4 PM ONL  
ONE PENN PLAZA EAST  
NEWARK, NJ 07105

**BUYER:** Taishida Chapman 973-491-8476 CPRCTSC@NJTRANSIT.COM

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FEDERAL T.I.N.: 22-228-1352  
TAX EXEMPT #'S 21-60000928 (NJ)  
22-75-0050K (FEDERAL)

|                          |                                 |                         |                             |                        |
|--------------------------|---------------------------------|-------------------------|-----------------------------|------------------------|
| TERMS<br><b>NET 30 D</b> | FREIGHT TERMS<br><b>PREPAID</b> | FOB<br><b>DELIVERED</b> | SHIP VIA<br><b>BEST WAY</b> | BUYER NO<br><b>081</b> |
|--------------------------|---------------------------------|-------------------------|-----------------------------|------------------------|

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| LINE ITEM        | QUANTITY | UNIT OF MEASURE | NJT CATALOG NUMBER | DESCRIPTION  | UNIT PRICE | AMOUNT             |
|------------------|----------|-----------------|--------------------|--|------------|--------------------|
|                  |          |                 |                    | <p>SUPER STORM SANDY PROGRAM-WIDE FRAUD RISK ASSESSMENTS (PHASE I)<br/>THE TOTAL EXPENDITURE AMOUNT FOR THIS LINE SHALL NOT EXCEED \$96,230.00<br/>REFER TO CONTRACT NO. 14-033B AND WORK AUTHORIZATION NO. 1 FOR THE COMPLETE TERMS OF THIS AGREEMENT.<br/>THIS LINE SATISFIES E-REQ. NO. ERO87409.<br/>*****</p> |            |                    |
| <b>** TOTAL:</b> |          |                 |                    |  |            | <b>\$96,320.00</b> |

WHEN BOX IS CHECKED, THE TERMS AND CONDITIONS OF THE ATTACHED CONTRACT REPLACE THOSE SHOWN ON THE REVERSE SIDE OF THIS PURCHASE ORDER.

VENDOR COPY

AUTHORIZED NJ TRANSIT SIGNATURE/DATE  
*Paul G. Kelly* 12/4/2014

**NJ TRANSIT Contract No. 14-033B  
Integrity Oversight Monitoring Services  
Work Authorization No. 1  
Superstorm Sandy Program-Wide Fraud Risk Assessment (Phase I)**

**DBE Monthly Payment Report  
DBE Form E and DBE Form E-2**

**PRIME CONTRACTOR Monthly DBE Payment Report - Form E**

Name of Project: \_\_\_\_\_

NJT Contract #: \_\_\_\_\_

Prime Original Contract Value: \_\_\_\_\_

Report for the Month of: \_\_\_\_\_

Change Orders (Overall Inc/Dec.): \_\_\_\_\_

Notice to Proceed Date: \_\_\_\_\_

Total Contract Amount to Date: \_\_\_\_\_

NJT Project Mgr Name: \_\_\_\_\_

Total Payments Received from NJT Date: \_\_\_\_\_

Assigned DBE Goal %: \_\_\_\_\_

| Name of DBE Subcontractor | Work Task Performed | Original Contract Amount \$ | Change Order Amount \$ (+/-) | Amount of Invoice Received this Month (\$) | Date of Invoice Received in this Month | Payment(s) Made to DBE in this Month in \$\$ (Itemize) | Date(s) Payment Made This Month | Total DBE Payments made to Date in (\$) | % Overall Work Finished | Final Pmt (Y/N) |
|---------------------------|---------------------|-----------------------------|------------------------------|--|--|--|---------------------------------|---|-------------------------|-----------------|
|                           |                     |                             |                              |  |  |  |                                 |   |                         |                 |
|                           |                     |                             |                              |  |  |  |                                 |   |                         |                 |
|                           |                     |                             |                              |  |  |  |                                 |   |                         |                 |
|                           |                     |                             |                              |  |  |  |                                 |   |                         |                 |
|                           |                     |                             |                              |  |  |  |                                 |   |                         |                 |
| <b>Total(s) →</b>         |                     | \$                          | \$                           | \$   | <b>Total(s)</b>                        | \$   | <b>Total(s)</b>                 | \$                                      |                         |                 |

Itemize payments/invoices and dates if paid/received more than one payment/invoice between the 1<sup>st</sup> and 31<sup>st</sup> of THIS Month.

**Prime Contractor Information:**

Prime Firm Name: \_\_\_\_\_

Project Director Name: \_\_\_\_\_

Address: \_\_\_\_\_

Project Director Signature: \_\_\_\_\_

Telephone #: \_\_\_\_\_ Date: \_\_\_\_\_

Federal TIN #: \_\_\_\_\_

**Prime's Past Due Invoice Information:** List any invoice more than 40 days past due from the date submitted to NJT at the time you complete this form.

| Invoice # | Invoice Date | Invoice Amount (\$) | Number of Days Past Due | Comments: |
|-----------|--------------|---------------------|-------------------------|-----------|
|           |              |                     |                         |           |

This form is not to be altered in any way.

For assistance completing this form, call 973-491-7539, 8058, 8768, 8575, 8069, 8941 Fed Form E rev Sept 2010

**Form E - Prime Contractor's DBE Payment Certification**

1. Have all DBE subcontractors with executed subcontracts been paid amounts due from previous progress payments?

- If yes, skip the next section and go to number 3.
- If no, please complete fields in box below: (Use additional paper, if needed)

| DBE SubContractor Name | Amount Withheld From Invoice (\$) | Total of Invoice Amount (\$) | Invoice Number | Invoice Date | Specific Reason for Withholding |
|------------------------|-----------------------------------|------------------------------|----------------|--------------|---------------------------------|
|                        |                                   |                              |                |              |                                 |

2. Have you notified the DBE subcontractor(s) that you are withholding payment and the reason(s) why?

- If yes, provide a copy of written notification to the DBE subcontractor with this form, indicating the date of notification.
- If no, lack of prior written notification to the DBE(s) that you are withholding payment violates the prompt payment clause guidelines. Please contact the DBE immediately, and provide a copy of written notification to the subcontractor with this form.

3. By signing this form, I certify that all of the above represent true and accurate information.

Note: CFO or equivalent Sr. Manager must complete and sign off on this form.

\_\_\_\_\_  
PROJECT DIRECTOR NAME (PRINT)                      PROJECT DIRECTOR (SIGNATURE)                      / /  
DATE

Additional Reasons/Comments for Withholding Payment:

\_\_\_\_\_

DO NOT WRITE BELOW. DEPARTMENTAL USE ONLY.

- Approved
- Denied

THIS FORM IS DUE ON THE 7TH OF EACH MONTH Please forward to:  
Office of Civil Rights and Diversity Programs  
Business Development  
NJ TRANSIT  
One Penn Plaza East, 6<sup>th</sup> Fl  
Newark, New Jersey 07105-2246

This form is not to be altered in any way.

For assistance completing this form, call 973-491-7539, 8058, 8768, 8575, 8069, 8941

Fed Form E rev Sept 2010

DBE SUBCONTRACTOR Monthly Payment Report - Form E2

Name of DBE Firm: \_\_\_\_\_  
 DBE's FEIN#: \_\_\_\_\_  
 DBE Address: \_\_\_\_\_  
 DBE Telephone #: \_\_\_\_\_

Report for the Month of: \_\_\_\_\_  
 Contract Number: \_\_\_\_\_  
 Contract Name: \_\_\_\_\_  
 DBE Contract Start Date: \_\_\_\_\_

Prime Contractor's Information:

Name of Prime: \_\_\_\_\_ Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_

DBE PAYMENT INFO: *Itemize payments/invoices and dates if received/submitted more than one payment/invoice between the 1<sup>st</sup> and 31<sup>st</sup> of THIS Month.*

| Work Task Performed | Original Subcontract Amount \$ | Change Order Amount (+/-) | Invoice #(s) Submitted in this month | Dollar Amount of Each Invoice Submitted in this Month | Date of Invoice(s) Submitted this Month | Total Payments Received by DBE In this Month * (\$) | Date Payment(s) Received in this Month | Total Payments Received by DBE To Date (\$) | Total % Work To Date | Final Payment? Y or N |
|---------------------|--------------------------------|---------------------------|--------------------------------------|---|---|---|--|---|----------------------|-----------------------|
|                     |                                |                           |                                      |   |   |   |  |   |                      |                       |
|                     |                                |                           |                                      |   |   |   |  |   |                      |                       |
| <b>TOTALS →</b>     | \$                             | \$                        | <b>TOTALS →</b>                      | \$  | <b>TOTALS →</b>                         | \$  | <b>TOTALS →</b>                        | \$  |                      |                       |

Is retainage held on your subcontract? Yes or No (circle one) If yes, how much? \$ \_\_\_\_\_. Did your final payment include retainage? Yes or No (circle one)

Past Due Invoice(s) Information: List any invoice more than 40 days past due from date submitted to prime at the time you complete this form.

| Invoice # | Invoice Date | Invoice Amount (\$) | Number of Days Past Due | Comments: use additional paper if necessary |
|-----------|--------------|---------------------|-------------------------|---|
|           |              |                     |                         |   |

Note: CFO or equivalent Sr. Manager must complete and sign off on this form.

Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

THIS FORM IS DUE ON THE 7<sup>TH</sup> OF EACH MONTH IMMEDIATELY FOLLOWING DBE's SUBCONTRACT START DATE, EVEN IF PAYMENT NOT RECEIVED.

Please mail this form to:

NJ TRANSIT, Office of Business Development, One Penn Plaza East, 6<sup>th</sup> Fl, Newark, New Jersey 07105-2246

Do not alter this form in any way.

If you need assistance completing this form please call 973-491-7539, 8058, 8768, 8069, or 8941.