Exhibit H

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Exh		

Diversity Subcontractor Spend Report

Reporting Period: [MONTH], 20___

Date Submitted: [MONTH AND DAY], 20__

Contract Number:

Company Name: Report Prepared by: Phone Number: Email Address:

	Goods & Materials	Services
PacifiCorp Service Area	Monthly Diversity Spend*	Monthly Diversity Spend*
California		
Oregon		
Washington		
Utah		
Idaho		
Wyoming		

*Diversity Spend is that portion of the previous month's total spend provided by a diversity subcontractor. Note: Leases, Real Estate, and Utilities should not be included in spend figures.

EXHIBIT H

Diversity Subcontractor Spend Report / Detail

Invoice #									Invoice Diversity Sper	nd
Name of Subcontractor	Diversity Classification(s) (See Below)	Contact Person	Contact Information	Tax ID	Certifications (i.e., WBENC, California Clearinghouse, etc.)	Description of Goods/Services	Location where services are performed or goods delivered (CA, OR, WA, UT, ID, WY)	Goods & Materials Diversity Spend	Services Diversity Spend	Total Diversity Spend
			·							·

Diversity Classification	SAP Diversity Code		
Female, Asian/Pacific Islander	FA		
Female, Black	FB		
Female, Hispanic	FH		
Female, Am.Indian/Alaskan	FI		
Female, White	FW		
Female, White, Disabled Vet	FWD		
Female, White, LGBT	FWL		
Male, Asian/Pac Islander	MA		
Male, Black	MB		
Male, Hispanic	MH		
Male, Am.Indian/Alaskan	MI		
Male, White, Disabled Veteran	MWD		
Male, White, LGBT	MWL		