Form EED-3704B: Subcontract Certification

Contractor Name:		
Vendor Number:	County:	
Contract Type:		
Contract Maximum Reimbursable	Amount (MRA):	
Subcontracted MRA Percentage:		
Subcontractor #1 Legal Name	:	
Does this subcontractor also contract Education Division (EED)?	with the California Department of Edu	cation (CDE) Early
	Yes N	No
Has your agency received written appassigned EED, Program Quality Imple	proval of the subcontract with this subcementation (PQI) office consultant?	ontractor from your
	Yes N	No
If no, please contact your assigned El	ED. PQI office consultant to propose a	new subcontract. Re

If no, please contact your assigned EED, PQI office consultant to propose a new subcontract. Refer to California Code of Regulations, Title 5 (5 CCR) Section 17800 for subcontractor approval requirements.

If yes, please list the name(s) of the site(s) in which subcontracted services will occur, including site address, service county, and the percentage of the contract MRA that will be subcontracted.

Site No.	Site Name	Site Address	Service County	Percentage of MRA Subcontracted
1				
2				
3				
4				

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Subcontractor #2 Legal Name:

Subco	miliacioi #2 Legai	Hairie.				
Does this subcontractor also contract with the California Department of Education (CDE) Early Education Division (EED)? Yes No						
Has your agency received written approval of the subcontract with this subcontractor from your assigned EED, Program Quality Implementation (PQI) office consultant? Yes No						
If no, please contact your assigned EED, PQI office consultant to propose a new subcontract. Refer to California Code of Regulations, Title 5 (5 CCR) Section 17800 for subcontractor approval requirements.						
If yes, please list the name(s) of the site(s) in which subcontracted services will occur, including site address, service county, and the percentage of the contract MRA that will be subcontracted.						
Site No.	Site Name	Site Address	Service County	Percentage of MRA Subcontracted		
1						
2						
3						
4						
CERTIFICATION: By signing this certification, I, the authorized contractor representative, hereby certify, that all applicable state and federal rules and regulations with respect to the subcontracting of contract funds will be observed, that the information contained in this form is correct and complete to the best of my knowledge, and that all records related to subcontracting will be retained as required by applicable law.						
	Signature		Date			