Attachment A

Equal Opportunity Certification

() Yes () No	
Name and address of Federal "Con	mpliance Agency," if known:
Labor, define the term Complian	the Office of Federal Contract Compliance Programs, U.S. Department Agency as the agency designated by the Director, of CCP, to contake such other responsibilities assigned.")
Are you required to reciptoin a year	itten affirmative action plan according to 41 CFR 60-2 and 60-1 (a)(4)
() Yes () No	
Has the "Compliance Agency" re employment policies and practices	equired you to correct deficiencies in your affirmative action plan or s?
() Yes () No	
Are you required to submit on one	
	ual compliance report as described in 41 CFR 60-1.7 (a)?
() Yes () No If the answer to "5" is yes, enclose Data on Subcontractors. (Use sup	ual compliance report as described in 41 CFR 60-1.7 (a)? e a copy of your latest compliance report. plementary sheets where required.) (1)* (2)** (3)***
() Yes () No If the answer to "5" is yes, enclose Data on Subcontractors. (Use sup (Subcontractor's Name)	e a copy of your latest compliance report. plementary sheets where required.) (1)* (2)** (3)***
() Yes () No If the answer to "5" is yes, enclose Data on Subcontractors. (Use sup (Subcontractor's Name)	e a copy of your latest compliance report. plementary sheets where required.)
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() Yes () No If the answer to "5" is yes, enclose Data on Subcontractors. (Use sup (Subcontractor's Name) (Street) (City) (State)	e a copy of your latest compliance report. plementary sheets where required.) (1)* (2)** (3)*** () Yes () Yes () Yes
() Yes () No If the answer to "5" is yes, enclose Data on Subcontractors. (Use sup (Subcontractor's Name)	e a copy of your latest compliance report. plementary sheets where required.) (1)* (2)** (3)*** () Yes () Yes () Yes () No () No () No (1)* (2)** (3)***
() Yes () No If the answer to "5" is yes, enclose Data on Subcontractors. (Use sup (Subcontractor's Name) (Street) (City) (State)	e a copy of your latest compliance report. plementary sheets where required.) (1)* (2)** (3)*** () Yes () Yes () Yes () No () No () No
() Yes () No If the answer to "5" is yes, enclose Data on Subcontractors. (Use sup (Subcontractor's Name) (Street) (City) (State)	e a copy of your latest compliance report. plementary sheets where required.) (1)* (2)** (3)*** () Yes () Yes () Yes () No () No () No (1)* (2)** (3)***