Attachment A

Equal Opportunity Certification

Name and address of Federal "Cor	mpliance Agency," if known:
Labor, define the term Complian	he Office of Federal Contract Compliance Programs, U.S. Departmenter Agency as the agency designated by the Director, of CCP, to compake such other responsibilities assigned.")
Are you required to maintain a wri	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	quired you to correct deficiencies in your affirmative action plan or
() Yes () No	
Are you required to submit an ann	ual compliance report as described in 41 CFR 60-1.7 (a)?
() Yes () No If the answer to "5" is yes, enclose a copy of your latest compliance report. Data on Subcontractors. (Use supplementary sheets where required.)	
Data on Subcontractors. (Use suppose (Subcontractor's Name)	
(Subcontractor's Name)	
(Subcontractor's Name)	(1)* (2)** (3)***
(Subcontractor's Name) (Street) (City) (State)	(1)* (2)** (3)*** () Yes () Yes () Yes
(Subcontractor's Name) (Street)	(1)* (2)** (3)*** () Yes () Yes () Yes () No () No () No
(Subcontractor's Name) (Street) (City) (State)	(1)* (2)** (3)*** () Yes () Yes () Yes () No () No () No (1)* (2)** (3)***
(Subcontractor's Name) (Street) (City) (State) (Subcontractor's Name)	(1)* (2)** (3)*** () Yes () Yes () Yes () No () No () No (1)* (2)** (3)***