Attachment A

Equal Opportunity Certification

() Yes () No	
Name and address of Federal '	'Compliance Agency," if known:
Labor, define the term Comp	of the Office of Federal Contract Compliance Programs, U.S. Department of the Agency as the agency designated by the Director, of CCP, to condertake such other responsibilities assigned.")
And you manying to make in a	written affirmative action plan according to 41 CFR 60-2 and 60-1 (a)(4)
• •	i written arminative action plan according to 41 CFR 60-2 and 60-1 (a)(4)
() Yes () No	
Has the "Compliance Agency employment policies and pract	" required you to correct deficiencies in your affirmative action plan or tices?
() Yes () No	
• •	annual compliance report as described in 41 CFR 60-17 (a)?
() Yes () No If the answer to "5" is yes, enc Data on Subcontractors. (Use	annual compliance report as described in 41 CFR 60-17 (a)? lose a copy of your latest compliance report. supplementary sheets where required.) (1)* (2)** (3)***
() Yes () No If the answer to "5" is yes, enc	lose a copy of your latest compliance report. supplementary sheets where required.) (1)* (2)** (3)***
() Yes () No If the answer to "5" is yes, enc Data on Subcontractors. (Use	lose a copy of your latest compliance report. supplementary sheets where required.)
() Yes () No If the answer to "5" is yes, enc Data on Subcontractors. (Use (Subcontractor's Name)	lose a copy of your latest compliance report. supplementary sheets where required.) (1)* (2)** (3)***
() Yes () No If the answer to "5" is yes, enc Data on Subcontractors. (Use (Subcontractor's Name)	lose a copy of your latest compliance report. supplementary sheets where required.) (1)* (2)** (3)*** () Yes () Yes () Yes
() Yes () No If the answer to "5" is yes, enc Data on Subcontractors. (Use (Subcontractor's Name)	lose a copy of your latest compliance report. supplementary sheets where required.) (1)* (2)** (3)*** () Yes () Yes () Yes () No () No () No
() Yes () No If the answer to "5" is yes, enc Data on Subcontractors. (Use (Subcontractor's Name) (Street) (City) (State)	lose a copy of your latest compliance report. supplementary sheets where required.) (1)* (2)** (3)*** () Yes () Yes () Yes () No () No () No
() Yes () No If the answer to "5" is yes, enc Data on Subcontractors. (Use (Subcontractor's Name) (Street) (City) (State)	lose a copy of your latest compliance report. supplementary sheets where required.) (1)* (2)** (3)*** () Yes () Yes () Yes () No () No () No (1)* (2)** (3)***