AFFIDAVIT - AFFIRMATIVE ACTION STATUS REPORT

Notice: This report is required to be submitted at 25%, 50%, 75% and 100% completion of construction.							
Contract Title:							
Contract Number:							
Prime Contractor's Name:							
Prime's Contact Name: Prime's Contact Phone#: () In connection with the above-captioned contract:		•					
				For each MBE or WBE subcontracted describe the work or goods or serving performed during the reporting periods.	ces provided in relat		
				MBE or WBE Subcontractor	MBE/WBE	AMOUNT OF CONTRACT	AMOUNT PAID TO DATE
DESCRIPTION OF WORK/SERVICES AND/OR GOODS PROVIDED. BE SPECIFIC.							
MBE or WBE Subcontractor	MBE/WBE	AMOUNT OF CONTRACT	AMOUNT PAID TO DATE				
DESCRIPTION OF WORK/SERVICES AND/OR GOODS PROVIDED. BE SPECIFIC.							
MBE or WBE Subcontractor	MBE/WBE	AMOUNT OF CONTRACT	AMOUNT PAID TO DATE				
DESCRIPTION OF WORK/SERVICES AND/OR GOODS PROVIDED. BE SPECIFIC.							

MBE or WBE Subcontractor	MBE/WBE	AMOUNT OF	AMOUNT PAID TO DATE
1		CONTRACT	
DESCRIPTION OF WORK/SERVICES AND/OR			
GOODS PROVIDED.			
BE SPECIFIC.			
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MBE or WBE Subcontractor	MBE/WBE	AMOUNT OF CONTRACT	AMOUNT PAID TO DATE
DESCRIPTION OF			
WORK/SERVICES AND/OR			
GOODS PROVIDED. BE SPECIFIC.			
WILL BE ON FILE FOR INSPECTION Name of Affiant:			
Title:			
Signature:	(Signature of A	Affiant)	
Date:			
State of			
County (City) of			
This instrument was SUBSCRIBED a	and SWORN TO bef	Fore me on	(date)
Signature of Notary Public			