

## FACILITIES & SAFETY BUSINESS OFFICE CERTIFIED SMALL, MINORITY & WOMEN OWNED BUSINESS PARTICIPATION

Contractor:	Certified Minority and S	<b>Certified Minority and Small Business Codes</b>		
Project Name/Number:	BLACK AMERICAN	(H)		
Payment Number:	HISPANIC AMERICAN	(I)		
Contact Person/Phone:	ASIAN AMERICAN	(J)		
Date:	NATIVE AMERICAN	(K)		
	WOMEN	(M)		
	SMALL NUSINESS	(SB)		

MBE Contractor/Subcontractor OR *Sub & Sub's Vendor (DOP)	This Sect Direct C Purchase Actions Total Ord	Owner e (DOP) s Only der Amt	MINORITY AND SMALL BUSINESS CODES	ORIGINAL CONTRACT VALUE	CONTRACT VALUE MUNIS DOP	AMOUNT APPROVED/REQUESTED TO DATE	AMOUNT REQUESTED THIS PAYMENT	TOTAL COMPLETED TO DATE	UNCOMPLETED BALANCE	CERTIFICATION AGENCY
2 <sup>nd</sup> Tier										