Department of Transportation State Highway Administration

	inistration: Contract No.:			
Feder Route	ral Aid Project:			
State				
		SUBCONTRACTOR - EE	O CERTIFICATION	
repre	I hereby certify that I am theepresentative of the firm of			_ whose address
provi Cond	sions, as required litions for Consu	d by paragraph "20-G" - "Incor	ed the "Non-Discrimination in poration of Provisions" of the C's subcontract agreement(s) and s):	General
(1)	Name of Subo	ocatus et eu	_	
	Name of Subc	contractor		
	Services		(Address)	
(2)			_	
	Name of Subo	contractor		
	Services		(Address)	
(3)				
	Name of Subo	contractor		
	Services		(Address)	
(4)	Name of Subo	contractor		
<i>(5</i>)	Services		(Address)	
(5)	Name of Subo	contractor		
	Services		(Address)	

(6) Name of Subcontractor (Address) Services (7) Name of Subcontractor (Address) Services (8) Name of Subcontractor Services (Address) (9) Name of Subcontractor (Address) Services (10)Name of Subcontractor (Address) Services **Consultant signature** Date Sworn to and subscribed to before me this ______ day of ______, 20 ____ Signature of Notary Public _____ My commission expires _____

Subcontractor – EEO Certification

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