		1. SP / SAP		3. Contractor Name & Address:		4.	4.		
Minnesota Department of Transportation				CPS St Proj	Your Company	/ Name	[X]	Prime Contractor	
Office of EEO Contract Management				•	2378 Dane Hil		{ i	Subcontractor	
<u> </u>					West Charleston, CA 05872		5. Dollar Am	ount of Contract:	
EEO - 13			CPS Job-Add'l Info					550500	
			2. Reporting Period:					6. Percent of Completion:	
			12/01/2003 - 12/31/2003		Job Name for Customer One			15	
7. Employment Data		c) New Hire	d)	e) Gender	f) Trade/Foreman	g) Level	h) Hours Worked		
	a) Name: Last, First, MI	b) Social Security #	(Yes or No)	Ethnicity	(M or F)	Supervisor/Mgr	(A, J, or T)	This Period	
1.	Supervisor, Sam L	010-22-3345	Yes	White	M	Supervisors	J	12	
2.	Trucker, Tammi T	077-05-6698	Yes	American Indian	F	Truck Drivers	J	12	
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29.			8. Contract G	ools.		10. Prepared by: (Signature)	11 Poviove	l ed by: (Signature)	
					% Obtained		i i . Keviewe	a by. (Signature)	
			15	ais Minority	76 Obtained	Nancy Smyth CQA			
			50	Skilled		(Title) (Date)	(Title)	(Date)	
			5	Unskilled		9/22/2006	(11110)	(Date)	
			20	Women		Phone: 802-895-4929	Phone:		
						<u> </u>		11 1101101	