

**EXHIBIT D
Form A**

**MBE/WBE PROCUREMENTS MADE DURING REPORTING PERIOD
EPA Financial Assistance Agreement Number: _____**

1. Procurement Made By		2. Business Enterprise		3. \$ Value of Procurement	4. Date of Award MM/DD/YY	5. Type of Product or Service (Enter Code)	6. Name/Address/Phone Number of MBE/WBE Contractor or Vendor
Contractor	Sub-Contractor	Minority	Women				

Type of product or service codes:

1 = Construction

2 = Supplies

3 = Services

4 = Equipment

A good faith effort has been made to obtain MBE/WBE vendors

_____ Signature

DATE: _____

_____ Print Name

_____ Contractor

Annual Reporting for: (Oct _____ - Sept _____)
Year Year