32 EAST FRONT STREET P.O. BOX 991 TRENTON, NJ 08625-0991 609-943-5955

GOOD FAITH DOCUMENTATION FORM AA 204

Contract #:		School:				
To:						
To: Union BA/Agency Authorized Representative		_	Contractor Authorized Representative			
tated in the pre-bid actors/subcontractors ast Discrimination (N	are required	to meet affirmativ	e action we	orkforce cor	npliance obl	
		requires {tot				rantica) wor
Labor Organization in	n the trade/sk	<u> </u>				rentice; wor
To Comply with County Goals	omply with Trade/Skill	Anticipated Date for Compliance	Total # Women (W)	Total # Minorities (M)	Total # Apprentices (A)	Total # of (W) (M) (A) Personnel
Female Minority			(w)	(IVI)	(A)	reisonnei
e complete Part B (L						
		me and Fax Number			e/Fax Number	
	or's Authorized	Representative				
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NJSDA FORM AA204 Revised: 12/4/2013