

State Of New Jersey

Division Of Contract Compliance And
Equal Employment Opportunity In Public Contracts

MONTHLY PROJECT WORKFORCE REPORT - CONSTRUCTION

For instructions on completing the form, go to:

http://www.state.nj.us/treasury/contract_compliance/pdf/aa202ins.pdf

1. Name and address of Prime Contractor Points North (CPW Sample Reports) (NAME)		2. Contractor ID Number	3. F ID or SS Number 37-1371371	
371 Canal Park Dr (ADDRESS)		4. Reporting Period 11/1/2010 11/27/2010		5. Public Agency Awarding Contract Date of Award
Springfield IL 62701 (CITY) (STATE) (ZIP CODE)		6. Name and Location of Project Stable Work 2904 Springfield, IL County Grant		7. Project ID Number

			CLASSI- FICATION (SEE REVERSE)	11. NUMBER OF EMPLOYEES						12. TOTAL	13. WORK HOURS		14. % OF WORK HRS		15. CUM. WORK HRS			16. CUM. % OF W/H		
8. CONTRACTOR NAME (LIST PRIME CONTRACTOR WITH SUBS FOLLOWING)	9. PERCENT OF WORK COMPLETED	10. TRADE OR CRAFT		A.	B.	C.	D.	E.	F.	NO. OF MIN. EMP.	TOTAL WORK HOURS	A.	B.	A.	B.	TOTAL WORK HOURS	A.	B.	A.	B.
				TOTAL	BLACK	HISPANIC	AMERICAN INDIAN	ASIAN	FEMALES			MIN. W/H	FEMALE W/H	% OF MIN. W/H	% OF FEMALE W/H		MIN. HOURS	FEMALE HOURS	% OF MIN. W/H	% OF FEM. W/H
Points North (CPW Sample Reports)		Laborer	J	0	0	0	0	0	0	0				0.00 %	0.00 %				0.00 %	0.00 %
			AP	1	0	0	0	1	0	1	6	6		100.00 %	0.00 %	6	6		100.00 %	0.00 %
Points North (CPW Sample Reports)																				
		Operator	J	1	0	0	0	0	0	0	42			0.00 %	0.00 %	42			0.00 %	0.00 %
			AP	0	0	0	0	0	0	0				0.00 %	0.00 %				0.00 %	0.00 %
Points North (CPW Sample Reports)																				
		Electrician	J	0	0	0	0	0	0	0				0.00 %	0.00 %				0.00 %	0.00 %
			AP	0	0	0	0	0	0	0				0.00 %	0.00 %				0.00 %	0.00 %
			J																	
			AP																	
			J																	
			AP																	

17. COMPLETED BY (PRINT OR TYPE)

John Smith (NAME)		 (SIGNATURE)		Owner (TITLE)
517 111 1111 (AREA CODE) (TELEPHONE NUMBER)		6/13/2011 (EXT.) (DATE)		