

SUBCONTRACTOR ACTIVITY REPORT

PROJECT NAME:

ORGANIZATION:

PROPERTY ADDRESS:

NAME OF GEN. CONT.

Please provide the name(s) of ALL SUBCONTRACTORS including Minority and Women Business Enterprises (M/WBE) from whom you have hired for this project and the additional information requested below:

	SUBCONTRACTOR	MINORITY/WOMAN OWNED?	CONTACT PERSON	ADDRESS		
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
14						
18						
19						
20						

TOTAL