

## State of New Jersey

JON S. CORZINE Governor

Department of the Treasury Division of Minority and Woman Business Development DAVID ROUSSEAU 33 West State Street, 1st Floor P.O. Box 026 Trenton, New Jersey 08625-0026

State Treasurer

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## **Annual Verification Form**

(FOR MBE/WBE ONLY)

The Department of the Treasury, Division of Minority and Woman Business Development certified your company. Every year you must submit a completed annual verification form to indicate any changes in your company's ownership status and to confirm your company's address.

☐ Please check here if business ownership has not changed since your certification date.

If any information is incorrect, please provide corrections and attach the documentation. Certification Number: Company Name: \_\_\_\_\_ City: State: Zip: \_\_\_\_\_ County: \_\_\_\_\_ E-Mail: \_\_\_\_\_ Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Owner Name: (Owner, Partner or President only), do herewith attest that the ownership and \_\_\_\_\_, under Federal Identification Number \_\_\_\_\_\_ on which the original certification was granted, has not changed during the last twelve (12) months. Owner Signature Date Notary Date

## Return to:

Division of Minority and Women Business Development 33 West State Street, 1st Floor

P.O. Box 026

Trenton, NJ 08625-0026

Reminder: Failure to comply shall result in the Contracting and Certification Office placing the firm in an inactive status and/or decertifying the firm.