

**RECOVERY ACT - INFORMATION REQUIRED FROM OTHER DOE INTEGRATED CONTRACTORS
FOR SPECIAL REPORTING (Aug 2010)**

THE INFORMATION PROVIDED BELOW IS FOR:

REFERENCE NUMBER: _____ MPO NUMBER: _____

1. DUNS NUMBER: _____.

2. CONTRACTOR'S NAME: _____

3. CONTRACTOR'S PHYSICAL ADDRESS. (P. O. Box or c/o may not be used. Show as it appears in CCR.)

Street Address: _____

City: _____

State/Region: _____

Country: _____

Zip Code (nine digits required if in the United States): _____ - _____

Postal Code (required if foreign): _____

Congressional district (required if in the United States): _____

4. PRIMARY PERFORMANCE LOCATION OF THE WORK. (P. O. Box or c/o may not be used.)

Street Address: _____

City: _____

State/Region: _____

Country: _____

Zip Code (nine digits required if in the United States): _____ - _____

Postal Code (required if foreign): _____

Congressional district (required if in the United States): _____

5. ESTIMATE OF JOB CREATION AND JOB RETENTION. (Complete this item if the MPO value is \$25,000 or more.) (This representation is an estimate of jobs that performance will create and retain. Actual jobs created and retained shall be reported pursuant to the Reporting Requirements provision of the clause titled "Recovery Act – Special Provisions Related to Work Funded Under American Recovery and Reinvestment Act of 2009 – DOE Inter-Contractor Purchase." For definition of jobs created and jobs retained, see FAR 52.204-11.)

Estimate of jobs that performance of the work will create or retain, by calendar year quarter during the proposed period of performance, is:

CALENDAR YEAR QUARTER ENDING	JOBS CREATED (Include Seller and all lower-tier subcontractors)		JOBS RETAINED (Include Seller and all lower-tier subcontractors)		
	Month/day/year	Job Title/Category	Number of FTEs	Job Title/Category	Number of FTEs