## STATEMENT AND ACKNOWLEDGMENT

OMB No.: 9000-0014 Expires: 6/30/2014

Public reporting burden for this collection of information is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the FAR Secretariat, (VIR), Regulatory and Federal Assistance Division, GSA, Washington, DC 20405; and to the Office of Management and Budget, Paperwork Reduction Project (9000-0014), Washington, DC 20503.

	PART I - STATEMEN	IT OF PRIME CONTRACTO	DR
1. PRIME CONTRACT NO.	2. DATE SUBCONTRACT AWARDED	3. SUBCONTRACT NUMBER	
4. PRIME CONTRACTOR		5. SUBCONTRACTOR	
a. NAME		a. NAME	
b. STREET ADDRESS		b. STREET ADDRESS	
c. CITY	d. STATE e. ZIP CODE	c. CITY	d. STATE e. ZIP CODE
6. The prime contract does Overtime Compensation."	, does not contain the claus	e entitled "Contract Work H	ours and Safety Standards Act
7. The prime contractor states the	hat under the contract shown in If	em 1, a subcontract was aw	varded on the date shown in Item 2 to the

7. The prime contractor states that under the contract shown in Item 1, a subcontract was awarded on the date shown in Item 2 to the subcontractor identified in item 5 by the following firm:

a. NAME OF AWARDING FIRM

**b. DESCRIPTION OF WORK BY SUBCONTRACTOR** 

8. PROJECT	9. LOCATION	9. LOCATION	
10a. NAME OF PERSON SIGNING	11. BY (Signature)	12. DATE SIGNED	
10b. TITLE OF PERSON SIGNING			
F	PART II - ACKNOWLEDGMENT OF SUBCONTRACTO	OR	
13. The subcontractor acknowledges that	t the following clauses of the contract shown in Item 1 a	re included in this subcontract:	
Contract Work Hours and Safety Standards Act - Overtime Compensation - (If included in pr Payrolls and Basic Records Withholding of Funds Disputes Concerning Labor Stan Compliance with Davis-Bacon ar	rime contract see Block 6) Apprentices and Compliance with Subcontracts (La Contract Termina dards	Trainees Copeland Act Requirements Ibor Standards) ation - Debarment	
	14. NAME(S) OF ANY INTERMEDIATE SUBCONTRACTORS, IF ANY		
A	С		
В	D		
15a. NAME OF PERSON SIGNING	16. BY (Signature)	17. DATE SIGNED	
15b. TITLE OF PERSON SIGNING			
AUTHORIZED FOR LOCAL REPRODUCTION PREVIOUS EDITION IS NOT USABLE		STANDARD FORM 1413 (REV. 7/20	

Prescribed by GSA/FAR (48 CFR) 53.222(e)