

**U.S. DEPARTMENT OF TRANSPORTATION
FEDERAL HIGHWAY ADMINISTRATION
WESTERN FEDERAL LANDS HIGHWAY DIVISION**

WFLHD Form No. 130
6/06

ATTN: Prime Contractor - This form shall be completed for EACH subcontract.

Report No. _____

Contract No: _____ **Date** _____

Project Name & No: _____

Prime Contractor Name: _____

Subcontractor Statistics

Name: _____

Address: _____

Subcontracted Work: _____

Total amount sublet to the above contractor \$ _____

Amount previously contracted (All subcontracts) \$ _____

Total amount sublet to date: \$ _____

Original Contract Amount \$ _____

Total Percent subcontracted _____ %

Check applicable description(s) of subcontractor:

- | | |
|---|--|
| <input type="checkbox"/> Small Business | <input type="checkbox"/> Small Disadvantaged Business |
| <input type="checkbox"/> Women-owned Business | <input type="checkbox"/> HUBZone Small Business |
| <input type="checkbox"/> Veteran-owned Small Business | <input type="checkbox"/> Service-disabled Veteran-owned Small Business |
| | <input type="checkbox"/> None of the Above |

As an authorized signatory for the prime contractor, I acknowledge and certify that all of the required contract clauses (including labor clauses) have been incorporated into and made a part of this subcontract. The amounts and percentages shown above are true and accurately stated.

Signature: _____ **Date:** _____

Name & Title: _____