

# **Pennsylvania Convention Center Authority**

|                         |        | OR COMPLIANCE REPO<br>ted project labor and ma       |                         |  |              |
|-------------------------|--------|--|-------------------------|--|--------------|
| CONTRACT/PROJECT NAME   |        | Prime Contractor                                     |                         | Time Period Reporting to                   |              |
|                         |        |  |                         |  |              |
| Company Name            |        | Business Classification (see Page 2 for definitions) |                         | Description of Work/Service/Goods Provided |              |
| Address                 |        | Certified Classification (select ALL applicable)     | Non-Certified           | Amount Originally Contracted               | \$           |
| Contact Person          |        |  | Male/Female Owned:      | Amount Paid This Period                    | \$           |
| Telephone # Fax #       |        |  | Ethnicity of Ownership: | Amount of Previous Payments                | \$           |
| E-mail                  | 1 d. 7 |  | LGBTQ Owned:            | Total Paid to Date                         | \$           |
| E-111d11                |        |  |                         | Remaining Balance Due                      | \$           |
| Company Name            |        | Business Classification (see Page 2 for definitions) |                         | Description of Work/Service/Goo            | ods Provided |
| Address                 |        | Certified Classification (select ALL applicable)     | Non-Certified           | Amount Originally Contracted               | \$           |
| Contact Person          |        |  | Male/Female Owned:      | Amount Paid This Period                    | \$           |
| Telephone # Fax #       |        |  | Ethnicity of Ownership: | Amount of Previous Payments                | \$           |
| E-mail                  |        | LGBTQ Owned:   | LGBTQ Owned:            | Total Paid to Date                         | \$           |
|                         |        |  |                         | Remaining Balance Due                      | \$           |
| Company Name            |        |  |                         | Description of Work/Service/Goods Provided |              |
| Address  Contact Person |        | Certified Classification (select ALL applicable)     | Non-Certified           | Amount Originally Contracted               | \$           |
|                         |        | Male/Female Owr                                      | Male/Female Owned:      | Amount Paid This Period                    | \$           |
| Telephone # Fax #       |        |  | Ethnicity of Ownership: | Amount of Previous Payments                | \$           |
| •                       | I GA # |  | LGBTQ Owned:            | Total Paid to Date                         | \$           |
| E-mail                  |        |  | Remaining Balance Due   | \$   |              |
| Company Name            |        | Business Classification (see Page 2 for definitions) |                         | Description of Work/Service/Goods Provided |              |
| Address                 |        | Certified Classification (select ALL applicable)     | Non-Certified           | Amount Originally Contracted               | \$           |
| Contact Person          |        |  | Male/Female Owned:      | Amount Paid This Period                    | \$           |
| Telephone # Fax #       |        |  | Ethnicity of Ownership: | Amount of Previous Payments                | \$           |
| E-mail                  |        |  | LGBTQ Owned:            | Total Paid to Date                         | \$           |
| L-111411                |        |  |                         | Remaining Balance Due                      | \$           |

Use additional pages if necessary.

<sup>\*\*</sup> All MBE, WBE and/or DBE owned business enterprises must be certified by MBEC, a state certifying agency or such other recognized certifying agency.



# Instructions for Completing Contractor Compliance Reporting Form

#### **CONTRACTOR INFORMATION SECTION:**

- Contract/Project Name: Name of the project.
- Prime Contractor: Name of the primary contractor.
- Time Period Reporting: The time period covered by the invoice.

### **SUBCONTRACTOR INFORMATION:**

- Company Information: Please list <u>ALL</u> Subcontractors, Vendors and Suppliers that were included on the original RFP/Bid and/or did work on the project during the specified time period.
- Business Classification
  - Certified Classification If the company is a certified enterprise, please select the appropriate classification(s). Hold "Ctrl" and click to select more than one.
    - Minority Business Enterprise (MBE) Means a small for-profit business concern that
      is at least fifty-one percent (51%) beneficially owned by and controlled by one or
      more individuals who are minority.
    - Women Business Enterprise (WBE) Means a small for-profit business concern that is at
      - least fifty-one percent (51 %) beneficially owned by and controlled by one or more women.
    - Disadvantaged Business Enterprise (DBE) Means a for-profit small business concerns where socially and economically disadvantaged individuals own at least a fifty-one (51%) interest and also control management and daily business operations.
    - Small Disadvantaged Business (SDB) Means a small business that is at least fiftyone percent (51%) owned by one or more individuals who are both socially and economically disadvantaged.
    - LGBT Business Enterprise (LGBTBE) Means a small business that is at least fifty-one percent (51%) owned, managed, operated, and controlled by LGBT individuals.
  - Non-Certified All businesses that are not certified as a Minority, Women or other
    Disadvantaged Business. This includes all minority-owned businesses who are not certified
    as well as businesses that are owned by individuals who do not identify as diverse.
    Ownership means having at least 51% of control of the business. Please select from the
    corresponding drop-down menus whether the company is male or female owned, the
    ethnicity of the ownership and whether they are LGBTQ owned.

## **PAYMENT INFORMATION:**

- Description of Work/Service/Goods Provided: List the type of work, service or goods provided
- Amount Originally Contracted: List the specific amount that was originally contracted. *This section will remain the same for each form that is submitted listing this company.*
- Amount Paid this Period: List the amount that was submitted for payment this period on the submitted invoice.
- Amount of Previous Payments: All previous payments made to the company.
- Total Paid to Date: This section will tabulate automatically.
- Remaining Balance Due: This section will tabulate automatically.