

Exhibit A: CONTRACTOR'S FINANCIAL INFORMATION SHEET

SECTION 1 – GENERAL INFORMATION						
1A. NAME			2. TYPE OF ORGANIZATION (CHECK ONE)			
			A. Sole Proprietorship	F. LLC		
1B. STREET ADDRESS			B. General Partnership	G. Joint Venture		
			C. Limited Partnership	H. Non-Profit/Education		
1C. CITY	1D. STATE	1E. ZIP/POSTAL	D. Corporation	I. Other: Specify		
			E. Subchapter S.			
3. TAXPAYER ID NUMBER :			4. PHONE NUMBER	5. FAX NUMBER		
6. DUNS NUMBER:			7. CELLPHONE NUMBER			
8. KIND OF PRODUCT OR SERVICE PROVIDED:			9. EMAIL ADDRESS			
10. KIND OF BUSINESS- Specify one block (plus "J" if applicable)						
	A. LARGE BUSINESS		E. EMERGING SMALL BUSINESS		I. INDIAN SDB	
	B. SMALL BUSINESS		F. VETERAN SMALL BUSINESS		J. HUB ZONE - Also	
	C. SMALL DISADVANTAGED BUSINESS		G. SERVICE DISABLED VETERAN OWNED SMALL BUSINESS		K. Other: Please Specify	
	D. WOMAN OWNED SMALL BUSINESS		H. INDIAN SMALL BUSINESS			
11. OWNERSHIP INFORMATION – PARTNERS – PRINCIPALS - OTHERS						
NAME			TITLE			
12.						
13.						
14.						
15.						
16. Questions. If "Yes" to any below, attach detailed information.					Yes	No
A. Have you/your affiliates ever filed for bankruptcy?						
B. Do you have any judgments, liens, pending suits?						
C. Do you have any contingent liabilities?						
D. Have you/your affiliates discontinued business operations with outstanding debts?						
SECTION II. GOVERNMENT FINANCIAL AID AND INDEBTEDNESS If "Yes", attach detailed information.					Yes	No
17. Are you delinquent on any Federal Debt (OMB Circular 129)						
18. Do you owe the Government for any contract or other claims?						
19. Are you currently receiving Government Financing? (Bonds, Loans, Advanced Payments, Progress Payments, Other)						
19a. Are you now in or pending Default on ANY Obligations (i.e. Banks, Financial Institutions, Suppliers, Other)? IF yes please attach detailed information.						