THABLOT THE NAME OF THE NAME O
Project Number 81000919 1583 Project Title Bolley Sewer: Outfall 055
Project Title Bellet Sewer: Outfale 055
KANSAS (I)
(Department Project) Department
Intrastructure Solutions UC (Bidder/Proposer)
STATE OF Kansas
) ss
COUNTY OF Johnson
I, Osco Cenklin, of lawful age and upon my oath state as follows:
1. This Affidavit is made for the purpose of complying with the provisions of th MBE/WBE submittal requirements on the above project and the MBE/WBE Program and is given on behalf of the Bidder/Proposer listed below. It sets out the Bidder/Proposer' plan to utilize MBE and/or WBE contractors on the project.
2. The project target goals are% MBE and% WBE.
3. Bidder/Proposer assures that it will utilize a minimum of the following percentages o MBE/WBE participation in the above project:
BIDDER/PROPOSER PARTICIPATION: 1 % MBE 1 % WBE
POST-BID/POST-RFP ESTIMATED BUDGET: \$ 134, 1200
4. The following are the M/WBE subcontractors whose utilization Bidder/Proposer warrant will meet or exceed the above-listed Bidder/Proposer Participation. Bidder/Propose warrants that it will utilize the M/WBE subcontractors to provide the goods/service described in the applicable Letter(s) of Intent to Subcontract, copies of which shall collectively be deemed incorporated herein). (All firms must currently be certified by Kansas City, Missouri)
Name of MWBE Firm BOSWell + Lee Tucking Address 414 V 80 - Street Kansas City KS Colle
Telephone No. 913- 208- 2839
I.R.S. No. 43-1853177
00450 CREO KC 08 Utilization Plan & Req. for Waiver 10.12.2022 1 of 4 Contract Central

n É	Address 30 Telephone No	WBE Firm Macs Fen 201 Speaker Rd 0. 913-287-4173 48-140477	Kansas	City K.	Lalell
Ī	Address Telephone No	WBE Firm Tenach (12 Scott Ave 1400. 913- 1211- 7706		تم لاست ا	14105
	Address_36 Telephone No	MBE Firm LMG Cens N. Roandly, Mans O. 816. 474-0333 20. 8835268	sas Cila K	s (allos	
额	Address 300 Telephone No	BE Firm Welch Ex 3 Cantuly 12 He 0. 816. 651. 7358 20. 478 3793		No Ly	701
f	Address	VBE Firm			
4. The following	owing is a break	down of the percentage of the pay to each listed M/WBF	he total contract a		
		MBE/WBE BREAKDOV	VN SHEET		
MBE FIRM Name of M Thenoch Boswell Macs F	BE Firm	Supplier/Broker/Contractor Sub contractor Judy Sub Contractor Subcontractor	Subcontract Amount* 39,800 30,435	Weighted Value** JOO LUO LUO	% of Total Contract _ 5 1 _ 2_
3					A

TOTAL MBE \$ / TOTAL	\$ 82,239	%		
WBE FIRMS: Name of WBE Firm	Supplier/Broker/Contractor	Subcontract Amount*	Weighted Value**	% of Total Contract
	Subcentractor		<u> 100</u>	- <u>9</u> - <u>2</u> -
TOTAL WBE \$ / TOTAL	WBE %:	\$ 80, 960	ນ	%

^{*&}quot;Subcontract Amount" refers to the dollar amount that Bidder/Proposer has agreed to pay each M/WBE subcontractor as of the date of contracting and is indicated here solely for the purpose of calculating the percentage that this sum represents in proportion to the total contract amount. Any contract amendments and/or change orders changing the total contract amount may alter the amount due an M/WBE under their subcontract for purposes of meeting or exceeding the Bidder/Proposer participation.

^{**&}quot;Weighted Value" means the portion of the subcontract amount that will be credited towards meeting the Bidder/Proposer participation. See CREO KC Forms and Instructions for allowable credit and special instructions for suppliers.

^{5.} Bidder/Proposer acknowledges that the monetary amount to be paid each listed M/WBE for their work, and which is approved herein, is an amount corresponding to the percentage of the total contract amount allocable to each listed M/WBE as calculated in the MBE/WBE Breakdown Sheet. Bidder/Proposer further acknowledges that this amount may be higher than the subcontract amount listed therein as change orders and/or amendments changing the total contract amount may correspondingly increase the amount of compensation due an M/WBE for purposes of meeting or exceeding the Bidder/Proposer participation

- 6. Bidder/Proposer acknowledges that it is responsible for considering the effect that any change orders and/or amendments changing the total contract amount may have on its ability to meet or exceed the Bidder/Proposer participation. Bidder/Proposer further acknowledges that it is responsible for submitting a Request for Modification or Substitution if it will be unable to meet or exceed the Bidder/Proposer participation set forth herein.
- 7. If Bidder/Proposer has not achieved both the M/WBE goal(s) set for this Project, Bidder/Proposer hereby requests a waiver of the MBE and/or WBE goal(s) that Bidder/Proposer has failed to achieve
- 8. Bidder/Proposer will present documentation of its good faith efforts, a narrative summary detailing its efforts and the reasons its efforts were unsuccessful when requested by the City.
- 9. I hereby certify that I am authorized to make this Affidavit on behalf of the Bidder/Proposer named below and who shall abide by the terms set forth herein:

Bidder/Proposer primary contact: as onlin
Address: 9801 Repres Blod
Lenexa KS Lelozia
Phone Number: 8110- 1006- 6280
Facsimile number:
E-mail Address: Scholing 1. Scholins 11c. Can
By:
Title-President
Date: 10-12-2023
(Attach corporate seal if applicable)
Subscribed and sworn to before me this 12 th day of Ochober, 2023.
My Commission Expires: 02-23. 2027 Waren Marie Warry Public
Trotaly I dollo
AARON MARIE MONEY Notary Public, State of Kansas

Appointment Expires

Check one:
Original LOI:

Project Name/Title Relief Sewer: Outfall 055

Project Location/Number 81000919/1583

PAI	RT I:	rime Contractor Infrastructure Solutions LLCagrees to enter into a contractual							
agree	agreement with M/W/DBE Subcontractor LMG Constructionwho will provide the following								
	goods/services in connection with the above-reference contract: [Insert a brief narrative describing goods/services to be								
	rovided. Broad Categorizations (e.g., "electrical," "plumbing," etc.) or the listing of NAICS Codes in which M/W/DBE								
Subco	ontracto	is certified are insufficient and may result in denial of this Letter of Intent to Subcontract.]							
-									
-									
for an	estima	ed amount of \$ 69,650.00 (or% of the total estimated contract value.)							
M/W	BE Ven	Subcontractor/manufacturer (counts as 100% of contract value towards goals) Supplier (counts as 60% of the total dollar amount paid or to be paid by a prime contractor for supplies or goods towards goals) Broker (counts as 10% of the total dollar amount paid or to be paid by a prime contractor for supplies or goods towards goals)							
City's agrees work	contractor for supplies or goods towards goals) M/W/DBE Subcontractor is, to the best of Prime Contractor's knowledge, currently certified with the City of Kansas City's Civil Rights & Equal Opportunity Department to perform in the capacities indicated herein. Prime Contractor grees to utilize M/W/DBE Subcontractor in the capacities indicated herein, and M/W/DBE Subcontractor agrees to vork on the above-referenced contract in the capacities indicated herein, contingent upon award of the contract to rime Contractor.								
as nee	eded for	his section is to be completed by the M/W/DBE subcontractor listed above. Please attach additional sheets more than one intended sub-tier contract. IMPORTANT: Falsification of this document will result in the remedies available under City Code.							
Select	t one:	The M/W/DBE Subcontractor listed above <u>IS NOT</u> subcontracting any portions of the above-stated scope of work(s). (Continue to Part 3.)							
		The M/W/DBE Subcontractor listed above <u>IS</u> subcontracting certain portions of the above stated scope of work(s) to:							
(1)	Comp	ny name:							
	Fulla	dress:							
	Tull a	Street number and name City, State and Zip Code							
	Prima	contact:							
	a) Th	Name Phone subcontractor is (select one): MBE WBE DBE N/A							
		i: If this subcontractor is an M/W/DBE certified with the City of Kansas City, Missouri, a separate Letter of Intent must be attached to this document.							
		ii. If this subcontractor is NOT a certified M/W/DBE certified with the City of Kansas City, Missouri, the firm must still be listed for reporting purposes but a Letter of Intent is not required.							
	b)	Scope of work to be performed:							
	c)	The dollar value of this agreement is:							

\sim 0.1
PRIME CONTRACTOR BUSINESS NAME: nfrastructur Solutions LLC
Jasen Conhlin
Signature: Prime Contractor Print Name
This Date Date
State of Mansas)
County of Johnson)
I, Aaron Mante Money, state that the above and foregoing is based on my best knowledge and belief.
Subscribed and sworn to before me, a notary public, on this 12 day of 10ch , 20 23
My Commission Expires: <u>Dr-23. 2027</u> <u>Clara Marie Many</u> Notary Public
AARON MARIE MONEY Notary Public, State of Kenses My Appointment Expires OZ-23-2027
MWDBE SUBCONTRACTOR BUSINESS NAME:LMG Construction
Lisa Garney
Signature: Subcontractor Print Name
President October 12, 2023
Title Date
State of MO)
County of Jackson)
I, Shaun Merrigan, state that the above and foregoing is based on my best knowledge and belief.
Subscribed and sworn to before me, a notary public, on this 12th day of Oct , 20 23
My Commission Expires: 08/22/2027 Shaum Memian Notary Public
STAMP:
SHAUN MERRIGAN Notary Public - Notary Seal STATE OF MISSOURI Jackson County My Commission Expires: Aug. 22, 2027 Commission # 23739095

Check one:
Original LOI:
Updated LOI:

Project Name/Title Relief Sewer: Outfall 055 Project Location/Number $\underline{81000919/1583}$

4.15	13.	E (I)		
PAR	RTH: P	rime Contractor	Infrastructure Solutions, LLC	agrees to enter into a contractual
agree	who will provide the following			
provid	ded. Bro	oad Categorizatio	ons (e.g., "electrical," "plumbing," etc	nsert a brief narrative describing goods/services to be c.) or the listing of NAICS Codes in which M/W/DBE of this Letter of Intent to Subcontract.]
for an	estimat	ed amount of \$_	(019	% of the total estimated contract value.)
M/WI	3E Vend	dor type:	Supplier (counts as 60% of the tot contractor for supplies or goods to	l dollar amount paid or to be paid by a prime
City's agrees work o	Civil Ri to utiliz	ights & Equal Op ze M/W/DBE Su bove-referenced	oportunity Department to perform in beontractor in the capacities indicate	wledge, currently certified with the City of Kansas the capacities indicated herein. Prime Contractor ed herein, and M/W/DBE Subcontractor agrees to herein, contingent upon award of the contract to
as need	ded for	more than one in		contractor listed above. Please attach additional sheets ANT: Falsification of this document will result in
Select	one:		BE Subcontractor listed above <u>IS N</u> ork(s). (Continue to Part 3.)	OT subcontracting any portions of the above-stated
		The M/W/D of work(s) to		ubcontracting certain portions of the above stated scope
(1)	Compa	iny name: Macs	Fence	
	Full ad	dress: 3067 Spe		Kansas City, KS 66111
		y contact: Tod Name	number and name A Barn hart Smell s (select one): VMBE WBE	City, State and Zip Code 913-287-6173 Phone DBE N/A
	a) IIII	i: If this subcor		□DBE □N/A ith the City of Kansas City, Missouri, a separate Letter
		ii. If this subco		BE certified with the City of Kansas City, Missouri, the a Letter of Intent is not required.
	b)	Scope of work	to be performed: Fencing	
	c)	The dollar valu	e of this agreement is: \$12,000	

PRIME CONTRACTOR BUSINESS NAME: 1 A:	frastructure Solutions LLC
G71	Jasin Coulin
Signature: Prime Contractor	Print Name
Prasident	10 12 2023
Thie	Date
State of Wansas	
County of Johnson	
I, Aaron Manu Money, state to and belief.	hat the above and foregoing is based on my best knowledge
Subscribed and sworn to before me, and	notary public, on this 2. 12.
day of 1901, 20 20	/ \
My Commission Expires: 023	2027 Clara Marke Money Notary Public
STAMP:	Notary Fubility
AARON MARIE MONEY Notary Public, State of Kansas	
My Appointment Expires 02-13-2027	
Charles led to	
	Marta Fanca Inc
MWDBE SUBCONTRACTOR BUSINESS NAME: _	Mac's Fence, Inc
Frances Bill	Frances Bell
Signature: Subcontractor Vice President	Print Name
Title	10/12/23
17	
State of Kansus	
County of wyandotte .)	
1, Amanda d. Sursel state to	hat the above and foregoing is based on my best knowledge
and belief.	
Subscribed and sworn to before me, a	notary public, on this 12.44
day of Oct, 2023	25 Amanda J. Susel
My Commission Expires: 1/27	Notary Public
STAMP:	·
Amanda L Sinsel	
Notary Public State of Kansas Notary Public State of Kansas Notary Appt Expires 7/27/25	
My Appt Expires	
Salaton Villa Control	



Project Name/Title Relief Sewer: Outfall 055

Project Location/Number	81000919/1583

Check one:	
Original LOI:	
Updated LOI:	

PAI	RT I	l Pri	me Con	tractor_	nfrastructure 5	Solutions, LLC		a	grees to enter	into a contractu	al
agree	ment	t with	M/W/D	BE Sul	contractor	Tenoch Constr	uction		who will pro	ovide the followi	ng
goods	s/serv	vices	in conne	ection w	ith the above	e-reference c	ontract: [Insert a	a brief narra	ative describi	ng goods/service	s to be
provi	ded. I	Broad	d Catego	orization	ıs (e.g., "elec	ctrical," "plur	nbing," etc.) or	the listing o	of NAICS Co	des in which M/	W/DBE
Subco	ubcontractor is certified are insufficient and may result in denial of this Letter of Intent to Subcontract.]										
						Conc	rete Fla	i-t-uver b	E		
for an	ı estir	matec	d amoun	t of \$	39,	800 (or% of th	he total esti	mated contra	ct value.)	
M/W	BE V	/endo	r type:	<u>~</u>	Supplier (c	counts as 60%	turer (counts as 6 of the total dol or goods toward	llar amount		towards goals) paid by a prime	
					Broker (co	ounts as 10%	of the total dolla or goods towards	ar amount p	oaid or to be p	oaid by a prime	
City's	Civi s to u on th	il Rig utilize ne abc	hts & Eo M/W/E ove-refe	qual Op DBE Sul	portunity De contractor i	epartment to p	perform in the calles indicated her	apacities in rein, and M	dicated hereis /W/DBE Sub	h the City of Kar n. Prime Contract contractor agrees of the contract to	ctor s to
as nee	eded f	for m	ore than	one int	ended sub-ti		MPORTANT:			e attach additiona cument will res	
Select	one:	v				ractor listed a		subcontracti	ing any portic	ons of the above-	stated
				M/W/D ork(s) to		ractor listed a	bove <u>IS</u> subcon	ntracting cer	rtain portions	of the above sta	ted scope
(1)	Cor	mpan	y name:	Tenoch	Construction						
	Ful	ll add:	ress: 91	2 Scott A	ve			Kansas Ci	ity, KS 66105		
			contact:	Street	umber and nar	nc		City, State a 913-671-770	ind Zip Code 06		
				Name): MBE	□WBE □D	Phone BE N	/A		
						M/W/DBE of this documents		e City of Ka	ansas City, M	lissouri, a separa	te Letter
							d M/W/DBE ce poses but a Lett			Kansas City, Miss ed.	souri, the
	b)		Scope o	of work	to be perform	ned: Concrete	e Flatwork				
	c)		The dol	lar valu	e of this agre	eement is: \$3	9,800				

0-11
PRIME CONTRACTOR BUSINESS NAME: 1 Afrastructur Solutions LLC
Signature: Prime Contractor Print Name
Signature: Prime Contractor Print Name 10 12 2023
Title Date
State of Vansas
County of Johnson
I. Aaron Manke Money. state that the above and foregoing is based on my best knowledge and belief.
Subscribed and sworn to before me, a notary public, on this 2 day of 0.23
My Commission Expires: DZ-23. 2027 Varan Marie Many
AARON MARIE MONEY Notary Public, State of Kenses My Appointment Expires CZ-23-2027 Tenoch Construction, Inc. 912 Scott Avenue Kansas City, KS 66105
MWDBE SUBCONTRACTOR BUSINESS NAME:
Signature: Subcontractor Segural VICL
Signature: Subcontractor Print Name
Title Date
State of Kansas
County of Wyandotte
I, Patricia Aprold, state that the above and foregoing is based on my best knowledge and belief.
Subscribed and sworn to before me, a notary public, on this 12 th day of 0.2. 2023
My Commission Expires: 11 101 15, 2020 Hary Public
STAMP:
Patricia Arnold Notary Public - State of Kansas My Appt. Expires



Project Name/Title Relief Sewer: Outfall 055

Project Location/Number 81000919/1583

Check one:	
Original LOI:	
Updated LOI:	

			Infrastructure Solutions, LLC	and the second	_agrees to enter into a contractual
goods provi	s/service ded. Bro	es in connection v oad Categorization		ct: [Insert a brief nag," etc.) or the listin	who will provide the following arrative describing goods/services to be g of NAICS Codes in which M/W/DBE of Intent to Subcontract.]
for an	estimat	red amount of \$_	(or	% of the total e	stimated contract value.)
M/W	BE Vend	dor type:	Supplier (counts as 60% of to contractor for supplies or go	he total dollar amou ods towards goals) e total dollar amoun	contract value towards goals) int paid or to be paid by a prime t paid or to be paid by a prime
City's agree: work	Civil R	ights & Equal O ze M/W/DBE Su bove-referenced	pportunity Department to perfoleocontractor in the capacities in	orm in the capacities adicated herein, and	tly certified with the City of Kansas indicated herein. Prime Contractor M/W/DBE Subcontractor agrees to ent upon award of the contract to
as nee	ded for	more than one in			ed above. Please attach additional sheets ation of this document will result in
Select	one:	The M/W/I scope of we	OBE Subcontractor listed above ork(s). (Continue to Part 3.)	e <u>IS NOT</u> subcontra	acting any portions of the above-stated
	[The M/W/I of work(s)		e <u>IS</u> subcontracting	certain portions of the above stated scop
(1)	Compa	any name: Bosw	ell and Lee Trucking		
	Full ac	idress: 414 N 80	th Street		Kansas City, KS 66112
	Primai	Street ry contact: Clarer	number and name nce Boswell	City, Sta	te and Zip Code 913-208-2839
		Name	is (select one): 🗹 MBE 🔲 V	Phone VBE DBE	N/A
			entractor is an M/W/DBE certiful be attached to this document.	ied with the City of	Kansas City, Missouri, a separate Letter
		firm must still	be listed for reporting purpose		ith the City of Kansas City, Missouri, the ent is not required.
	b)		to be performed: Trucking		
	c)	The dollar val	ue of this agreement is: \$30,43	5.00	

PRIME CONTRACTOR BUSINESS NAME: Infrastructure Solutions LLC
Jasen Conhlin
Print Ivaine
The Date
State of Mansas
County of Johnson
I, Aaron Monde Money, state that the above and foregoing is based on my best knowledge and belief.
Subscribed and sworn to before me, a notary public, on this 2 day of 0.23
My Commission Expires: DZ-23. 2027 Clara Marie Many
AARON MARIE MONEY Notary Public, State of Kansas My Appointment Expires OZ - 23 - 202 7
MWDBE SUBCONTRACTOR BUSINESS NAME: BOSWELLE TRUCKING INC
Clarence Esswell
Signature Subcontractor Print Name
Title Date Tol 12/23
State of Kansas
County of Wyardotte
I, Wany Waldrap, state that the above and foregoing is based on my best knowledge and belief.
Subscribed and sworn to before me, a notary public, on this 12th day of 21 20 23
My Commission Expires: 04-07-25 Ducy Undlug
STAMP:
Nancy Waldrup Notary Public State of Kansas
My Appt Expires <u>04-07305</u>

LETTER OF INTENT TO SUBCONTRACT

1	heck	one:
9	Origin	al LOI:
1	Jodat	ed LOI:

יור משוויי		Original LOI:
4 1111 1,	Updated LOI:	
EANNAN I III A	Project Location/Number 81000919/1583	
agreement with M/W/D goods/services in connec provided. Broad Catego		odes in which M/W/DBE
for an estimated amount	of \$% of the total estimated contra	act value.)
M/WBE Vendor type:	Subcontractor/manufacturer (counts as 100% of contract value Supplier (counts as 60% of the total dollar amount paid or to be contractor for supplies or goods towards goals) Broker (counts as 10% of the total dollar amount paid or to be contractor for supplies or goods towards goals)	e paid by a prime
City's Civil Rights & Ed	or is, to the best of Prime Contractor's knowledge, currently certified wing ual Opportunity Department to perform in the capacities indicated here BE Subcontractor in the capacities indicated herein, and M/W/DBE Subsequenced contract in the capacities indicated herein, contingent upon award	bcontractor agrees to

M/W/DBE Subcontra City's Civil Rights & agrees to utilize M/W work on the above-re Prime Contractor.

PART 2: This section is to be completed by the M/W/DBE subcontractor listed above. Please attach additional sheets as needed for more than one intended sub-tier contract. IMPORTANT: Falsification of this document will result in

denial and other remedies available under City Code. The M/W/DBE Subcontractor listed above IS NOT subcontracting any portions of the above-stated Select one: scope of work(s). (Continue to Part 3.) The M/W/DBE Subcontractor listed above IS subcontracting certain portions of the above stated scope of work(s) to: Company name: Welch Erosion Control (1)

Harrisonville, MO 64701 Full address: 3003 Cantrell Rd City, State and Zip Code Street number and name 816-876-1557 Danielle Welch Primary contact:

Phone Name a) This subcontractor is (select one): MBE WBE DBE □N/A

- i: If this subcontractor is an M/W/DBE certified with the City of Kansas City, Missouri, a separate Letter of Intent must be attached to this document.
- ii. If this subcontractor is NOT a certified M/W/DBE certified with the City of Kansas City, Missouri, the firm must still be listed for reporting purposes but a Letter of Intent is not required.
- Scope of work to be performed: Erosion Control b)
- The dollar value of this agreement is: \$11,310

PRIME CONTI	RACTOR BUSINESS NAME: Infrastructure Oblutions LLC
Jan	Jasen Conhlin
Signature: Prime	Contractor Print Name
Thile	Date
) (-	
State of Han	
County of \	
I, √Aa⊬ and bel	state that the above and foregoing is based on my best knowledge ief.
	Subscribed and sworn to before me, a notary public, on this 2
	My Commission Expires: DZ-23. 2027 Value Marke Many Notary Public
STAMP:	AARON MARIE MONEY Notary Public, State of Kanses My Appointment Expires OZ-23 - 2027
Signature: Subco	CONTRACTOR BUSINESS NAME: WUCH SILT FENCE & Frosion Control, UC Danie le Welch Print Name 10 12 23 Date
State of Mi	ssowi)
County of County of I, JC and be	SCICA DEWEL TREATY, state that the above and foregoing is based on my best knowledge lief.
	Subscribed and sworn to before me, a notary public, on this 1215 day of October, 20 23
	My Commission Expires: 11-18-2024 (XMUU) Michael Public
STAMP:	JESSICA DENISE EKSTER Notary Public, Notary Seal State of Missouri Cass County Commission # 20653447 My Commission Expires 11/18/2024

TIMETABLE FOR MBE/WBE UTILIZATION

(This form should be submitted to the City after contract award.)

I,	CONKLED	, actir	ng in my ca	pacity as 🌱	PESTS	TUS	
(No	ime)			$\overline{\mathcal{A}}$	Position	with Firm)	
of INTRASTRUCTU	PRE SULUTION	25 , wit	th the subn	nittal of thi	s Timet	able, certif	y that
(Name of F	ırm)						
the following times		BE utilization	in the fulfi	llment of th	is contra	act is corre	ct and
true to the best of r	ny knowledge.						
					~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~		
ALLOI	TED TIME FO			OF THIS	CONTI	RACT	
		(Check on	ie oniy)				
15 days		75 days		135 d	lavs		
30 days	· 	90 days		150 c	•		
45 days		105 days		165 d	-		
60 days	$\overline{\Box}$	120 days		180 d	•	\Box	
Other		(Specif	v)		-		
-		(F .	,				
Throughout		В	eginning 1/	3			
Middle 1/3		F	inal 1/3	-			
Middle 1/3Beginning 1/3	30 %	Middle 1/3	3A 0	1/2	Final 1/	3 40	%
Degining 1/3	/0	Wilddle 1/3	<u> </u>	⁷ 0	r IIIai 17	J	
PLEASE NOTE:	Any changes in	this timetable	e require ap	proval of the	he Civil	Rights &	Equal
Opportunity Depar	tment in advance	of the change	•				
If you have any qu	actions recording	the completi	on of this f	orm nlease	contact	the Civil I	Rights
& Equal Opportuni				orm, prease	Comaci	tile Civii i	cigiito
or Equal Opportuni	of Department at	(010) 515 10	Λ				
			11/	1			
		2	160	n			
				(Signatu	ıre)		
			9	LESIDZO	_		
		====		Position wit	h Firm)		
			(1	. Joinoii Wil			
			10/1	12/202	3		
		-		(Date	:)		