

## CERTIFICATE OF REPORTING

The undersigned hereby certifies that he/she has filed an Equal Employment Data Reporting Form with one of the Board of Regents State of Iowa Institutions in the past Twelve (12) months.

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Company Name

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Address

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City

State

Zip Code

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Signature of Official Completing this Report

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Date

NOTE: This should be signed by the same legally authorized representative who signs the bid.

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