

**SUMMARY SUBCONTRACT REPORT**  
*(See instructions on reverse)*

OMB No.: 9000-0007  
Expires: 09/30/2003

Public reporting burden for this collection of information is estimated to average 15.9 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the FAR Secretariat (MVP), Acquisition Policy Division, GSA, Washington, DC 20405.

<b>1. CORPORATION, COMPANY OR SUBDIVISION COVERED</b>		<b>3. DATE SUBMITTED</b>	
COMPANY NAME		<b>4. REPORTING PERIOD:</b> YEAR <input type="checkbox"/> OCT 1 - MAR 31	
<b>b. STREET ADDRESS</b>			
<b>c. CITY</b>	<b>d. STATE</b>	<input type="checkbox"/> REGULAR <input type="checkbox"/> FINAL <input type="checkbox"/> REVISED	
<b>2. CONTRACTOR IDENTIFICATION NUMBER</b>			

<b>6. ADMINISTERING ACTIVITY (Please check applicable box)</b>			
ARMY	DEFENSE CONTRACT MANAGEMENT AGENCY	DOE	
NAVY	NASA	OTHER FEDERAL AGENCY (Specify)	
AIR FORCE	GSA		

<b>7. REPORT SUBMITTED AS (Check one)</b>		<b>8. TYPE OF PLAN</b>	
PRIME CONTRACTOR	INDIVIDUAL	IF PLAN IS A COMMERCIAL PLAN, SPECIFY THE PERCENTAGE OF THE DOLLARS ON THIS REPORT ATTRIBUTABLE TO THIS AGENCY.	
SUBCONTRACTOR	COMMERCIAL PRODUCTS		
BOTH			

<b>9. CONTRACTOR'S MAJOR PRODUCTS OR SERVICE LINES</b>	
<b>a.</b>	<b>b.</b>

**CUMULATIVE FISCAL YEAR SUBCONTRACT AWARDS**  
*(Report cumulative figures for reporting period in Block 4)*

TYPE	WHOLE DOLLARS	PERCENT (To nearest tenth of a %)
<b>10a. SMALL BUSINESS CONCERNS (Include SDB, WOSB, HBCU/MI, HUBZone SB, and VOSB (including Service-Disabled VOSB)) (Dollar Amount and Percent of 10c.)</b>		
<b>10b. LARGE BUSINESS CONCERNS (Dollar Amount and Percent of 10c.)</b>		
<b>10c. TOTAL (Sum of 10a and 10b.)</b>		100.0%
<b>11. SMALL DISADVANTAGED BUSINESS (SDB) CONCERNS (Include HBCU/MI) (Dollar Amount and Percent of 10c.)</b>		
<b>12. WOMEN-OWNED SMALL BUSINESS (WOSB) CONCERNS (Dollar Amount and Percent of 10c.)</b>		
<b>13. HISTORICALLY BLACK COLLEGES AND UNIVERSITIES (HBCU) AND MINORITY INSTITUTIONS (MI) (If applicable) (Dollar Amount and Percent of 10c.)</b>		
<b>14. HUBZONE SMALL BUSINESS (HUBZone SB) CONCERNS (Dollar Amount and Percent of 10c.)</b>		
<b>15. VETERAN-OWNED SMALL BUSINESS (VOSB) CONCERNS (Including Service-Disabled VOSB Concerns) (Dollar Amount and Percent of 10c.)</b>		
<b>16. SERVICE-DISABLED VETERAN-OWNED SMALL BUSINESS CONCERNS (Dollar Amount and Percent of 10c.)</b>		

**7. REMARKS**

<b>18. CONTRACTOR'S OFFICIAL WHO ADMINISTERS SUBCONTRACTING PROGRAM</b>		
<b>a. NAME</b>	<b>ia. TITLE</b>	<b>c. TELEPHONE NUMBER</b>
		AREA CODE    NUMBER

<b>19. CHIEF EXECUTIVE OFFICER</b>	
<b>a. NAME</b>	<b>c. SIGNATURE</b>
<b>d. TITLE</b>	<b>d. DATE</b>