NEW JERSEY ECONOMIC DEVELOPMENT AUTHORITY

Internal Process Management
Gateway One, 9th Floor, Room 900
Newark, NJ 07102

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MONTHLY PROJECT WORKFORCE REPORT - CONSTRUCTION (NJEDA AA Form 2)

Complete and submit form at: https://aaonline.njeda.com									3. Contra	ctor FEIN #	(Federal E	mployer Ider	ntification N	umber)												
1. Name & Address of General Contractor 2. NJEDA Contractor ID Number							4. Reporting Month (mm/dd/yyyy)																			
(NAME)									5. Company receiving EDA Financial Assistance or Real Estate Project Name 6. Date Gen. Contract was awarded										rarded							
(STREET ADDRESS)									7. Name and Address of Project							unty	9. NJEDA	EDA Project No. (5 digits)								
(CITY) (STATE) (ZIP CODE)																										
10. CONTRACTOR NAME (LIST GENERAL CONTRACTOR WITH SUBS FOLLOWING)	11. PERCENT OF WORK COMPLETED	12. TRADE OR CRAFT	13. CLASS		14. NUMBER OF EMPLOYEES				15. TOTAL 16. WORK HRS. 17. % OF WORK HOURS					18. CUM	18. CUMULATIVE WORK HRS.			% OF W/H		Weekly Certified Payroll Reports for						
				14 A.	14 B.	14. C	14 D.	RICAN AGIAN MIC	14 F.	15. NO. OF	16. TOTAL WORK HOURS	16 A.	16 B.	17 A.	17 B.	18. TOTAL WORK HOURS	18 A. MIN HOURS	18 B. WOMEN HOURS	19 A. % OF MIN W/H	19 B. % OF WOM W/H						
				T0TAL	BLACK	HISPANIC	AMERICAN INDIAN		WOMEN			MIN W/H	WOMEN W/H	% OF MIN W/H	% OF WOM W/H							week 1	week 2	week 3	week 4	week 5
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			J																				•			
			AP																							
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I CERTIFIY THAT THE INFORMATION ON THIS FORM IS TRUE AND CORRECT

SIGNATURE DATE