

EXHIBIT 6

CONTRACTOR'S MWBE UTILIZATION COMPLIANCE REPORT
ACTIVITY SUMMARY WITH
MINORITY - WOMEN-OWNED BUSINESS ENTERPRISES

ALBANY CONVENTION CENTER AUTHORITY
384-386 Broadway
Albany, NY 12207

CONTRACTOR IDENTIFICATION

Firm _____ Fed ID No. _____
Address _____
City, State, Zip _____

PROJECT INFORMATION

Project _____ Contract Amount \$ _____
Contract Number _____
Work Description _____ MBE Goal Status: Over _____ Under _____
Contractor Goals: MBE \$ _____ WBE \$ _____ WBE Goal Status: Over _____ Under _____

MINORITY - AND WOMEN-OWNED BUSINESS BID AND CONTRACT ACTIVITY SUMMARY

If additional Summary space is required use page 2.2, Continuation Sheet. Continuation Sheet Used?
No Yes

Firm Name _____ Value of Proposal/Bid Reviewed or Award \$ _____
Addr _____ Date of Award, Pending or Eliminated Action _____
Addr _____ Contract Status: Awarded _____ Pending _____ Eliminated _____
Work Description _____ Type of Firm MBE _____ WBE _____

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Work Description _____ Type of Firm MBE _____ WBE _____

Type Name of Principal or Officer

Type Title of Principal or Officer

Signature of Principal or Officer

Date

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 MINORITY - WOMEN-OWNED BUSINESS ENTERPRISES
 (CONTINUATION SHEET)

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