

Austin Independent School District HUB Program Compliance Checklist

Solicitation Number & Name <u>: 21C ^ W i ñ Z/d/ > Z W /Z D ^ d t</u>
Name of Prime:
Contact Name & Phone Number:
% Œ HUB Certificate <u>DOES NO</u> affirm <u>ACTIV</u> Eertification
* Verify ACTIV Eertification for subcontractor at either links to count as participation:
State of Texas HUBttps://mycpa.cpa.state.tx.us/tpasscmblsearch/tpasscmblsearch.do or
City of Austin MBE/WBE https://www.austintexas.gov/financeonline/vendor_connection/search/vendors/certvendor_cfm
Were the stated solicitation goal
<u> </u>
If NO,please complete thisCompliance Checkist
If ALLgoals/subgoals were not met/exceed,extLquestions must be completed and Good Faith
Effort (GFE) documentatio <u>ldUST</u> be submitted with the HUR For(hUBATT) no later than 24 hours following bid opening date.
*ONLYHUB documents can be emailed temperature and the emai

HUBATTIA