SUBCONTRACTOR DEBARMENT CERTIFICATION

NOTE: PRIMARY CONTRACTOR IS RESPONSIBLE FOR THIS FORM BEING SUBMITTED RIOR TO AWARD. SUBCONTRACTOR(S) WITH SUBCONTRACTS OVER \$25,000.00 MUST ALSO COMPLETE AND SIGN THE FOLLOWING:

STATE OF	-
COUNTY OF	
The Undersigned represents that s/he	is ("Undersigned Subcontractor") (Print Name)
The	of
(Print "President" or Other Proper	Title) of (Print name of Subcontractor Entity)
("Subcontractor" or "Undersigned Suhimself/herself and Subcontractor Enti	ocontractor") and is authorized to attest on behalf of y by stating as follows:
undersigned Subcontractor ce	ary contractor for subcontracts over \$25,000.00, the tified to the best of its knowledge and belief that the n D above are truthful and accurate.
2. If Undersigned Subcontractor a there may be an actual or app	cquires information after executing this certification that arent violation of any of the above, Subcontractor shall to the attention of Metra's Procurement Officer.
3. The provisions of Section 1 abo	ve are applicable.
(Print) Name of Subcontractor Entity	
By:Signature of Person Making Affida	Date:
Signature of Person Making Affida	vit (Undersigned listed above)
(Print) Title of Person Making Affidavit	
NOTARIZE HERE	
Subscribed and sworn to before me	
This day of 20	-•
Notary Public	