

EXHIBIT 4
DEBARMENT HISTORY AND LIST OF TERMINATED CONTRACTS

Respondent's Name: _____

1. DEBARMENT HISTORY (Check one)	YES	NO
Respondent is currently debarred by a public entity	<input type="checkbox"/>	<input type="checkbox"/>
If yes, please provide the name of the public entity:		
2. LIST OF TERMINATED CONTRACTS (Check one)	YES	NO
Respondent has contracts that have been terminated in the past three years.	<input type="checkbox"/>	<input type="checkbox"/>

If yes, please list all contracts that have been terminated within the last three years with reason(s) for termination.

Service:	
Name of Entity:	
Address:	
Contact:	
Telephone:	
Email:	
Termination Date:	
Name/Contract No:	
Reason(s) for Termination:	

Service:	
Name of Entity:	
Address:	
Contact:	
Telephone:	
Email:	
Termination Date:	
Name/Contract No:	
Reason(s) for Termination:	

Service:	
Name of Entity:	
Address:	
Contact:	
Telephone:	
Email:	
Termination Date:	
Name/Contract No:	
Reason(s) for Termination:	