

**REPORT OF CERTIFIED ACDBE FORM
(CONCESSIONAIRES/SUBCONCESSIONAIRES/
SUPPLIERS/MANAGEMENT CONTRACTORS - COUNTED TOWARD GOALS)**

Name of Airport _____

Airport Sponsor _____

City/State/Zip _____

Preparer _____

Telephone Number _____

Date _____

List below each ACDBE that participated in a concession during the preceding fiscal year and that are included in your submission of the Uniform Report of ACDBE Participation.

Name of ACDBE Firm _____

Address _____

City _____ **State** _____ **Zip** _____

Type of concession/subconcession/supplier, etc., business _____

Date Agreement (i.e., lease, sublease) Began _____ **Date Agreement (i.e. lease, sublease) Expires** _____

Options to Renew _____ **How Many** _____ **Length of time** _____

Dates that material amendments have been or will be made to agreement, if known _____

Estimated gross receipts for this reporting period: _____

The disadvantaged individual having the largest ownership interest is:

_____ **Black** _____ **Hispanic** _____ **Native American** _____ **Asian-Indian American**

_____ **Asian-Pacific American** _____ **Non-Minority Woman** _____ **Other Disadvantaged**

Name of ACDBE Firm _____

Address _____

City _____ **State** _____ **Zip** _____

Type of concession/subconcession/supplier, etc., business _____

Date Agreement (i.e., lease, sublease) Began _____ **Date Agreement (i.e. lease, sublease) Expires** _____

Options to Renew _____ **How Many** _____ **Length of time** _____

Dates that material amendments have been or will be made to agreement, if known _____

Estimated gross receipts for this reporting period: _____

The disadvantaged individual having the largest ownership interest is:

_____ **Black** _____ **Hispanic** _____ **Native American** _____ **Asian-Indian American**

_____ **Asian-Pacific American** _____ **Non-Minority Woman** _____ **Other Disadvantaged**

Name of ACDBE Firm _____

Address _____

City _____ State _____ Zip _____

Type of concession/subconcession/supplier, etc., business _____

Date Agreement (*i.e., lease, sublease*) Began _____ Date Agreement (*i.e., lease, sublease*) Expires _____

Options to Renew _____ How Many _____ Length of time _____

Dates that material amendments have been or will be made to agreement, if known _____

Estimated gross receipts for this reporting period: _____

The disadvantaged individual having the largest ownership interest is:

_____ Black _____ Hispanic _____ Native American _____ Asian-Indian American

_____ Asian-Pacific American _____ Non-Minority Woman _____ Other Disadvantaged

Name of ACDBE Firm _____

Address _____

City _____ State _____ Zip _____

Type of concession/subconcession/supplier, etc., business _____

Date Agreement (*i.e., lease, sublease*) Began _____ Date Agreement (*i.e., lease, sublease*) Expires _____

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Estimated gross receipts for this reporting period: _____

The disadvantaged individual having the largest ownership interest is:

_____ Black _____ Hispanic _____ Native American _____ Asian-Indian American

_____ Asian-Pacific American _____ Non-Minority Woman _____ Other Disadvantaged

(Use additional sheets as needed)