NOTICE Effective April 25, 2003

The City of Milwaukee adopted an ordinance relative to the purchase, rental, laundering and dry cleaning of items of apparel to ensure that articles of apparel and footwear are not manufactured in sweatshops.

No contracts for the purchasing, renting, laundering and dry cleaning of items of apparel shall be entered into by contracting departments unless the lowest responsible bidders first submit to the purchasing director affidavits of compliance for Procurement of items of apparel from responsible manufacturer's provision.

REFERENCE MILWAUKEE CODE OF ORDINANCES 310-17

CITY OF MILWAUKEE - DEPARTMENT OF ADMINISTRATION PROCUREMENT SERVICES DIVISION

CITY OF MILWAUKEE - DEPARTMENT OF ADMINISTRATION – BUSINESS OPERATIONS DIVISION – PROCUREMENT SERVICES SECTION AFFIDAVIT OF COMPLIANCE - PROCUREMENT OF ITEMS OF APPAREL FROM RESPONSIBLE MANUFACTURERS PROVISION

Bid/RFP #	Retail Supplier:	Date:
Ordinances 310-17 sub. 2-d. Coperiod of the contract for the fulf	ontractors shall procure and submit sworn re illment of contracts covered under this section	lities identified on this form are responsible manufacturers as defined in the Milwaukee Code of ports or affidavits from every subcontractor employed by the contractor during the specified time on. In the event that any information provided by the contractor or subcontractor changes during to be submitted to the purchasing director sworn reports or affidavits relating to the updated

COMPANIES & FACILITIES

A. Below, provide the name and address of the <u>companies and facilities</u> and the items of apparel that have been or will be manufactured, distributed, laundered or dry cleaned under this contract and provide the base hourly wage and the percent of wage level paid as health benefits for persons working at the facilities in which the items of apparel have been or will be manufactured or distributed, laundered, or dry cleaned (attach additional sheet, if necessary):

Name of Manufacturer/ Contractor/Subcontractor	Facility Role Code*	Address	City	State or Country	Zip	Base Hourly Wage	% of Wage Level Paid as Health Benefits

^{*}Facility Role Codes: M=Manufacturer, D=Distributor, L= Launderer, D=Dry Cleaner

OWNERS

B. Below, provide the names and address of all <u>owners</u> of the facilities in which the items of apparel have been or will be manufactured, distributed, laundered or dry cleaned under this contract and provide the base hourly wage and the percent of wage level paid as health benefits for persons working at the facilities in which the items of apparel have been or will be manufactured or distributed, laundered, or dry cleaned. (Attach additional sheet, if necessary):

Name of Manufacturer/ Contractor/Subcontractor (List Owner Name & Facility)	Facility Role Code*	Address	City	State or Country	Zip	Base Hourly Wage	% of Wage Level Paid as Health Benefits

^{*}Facility Role Codes: M=Manufacturer, D=Distributor, L= Launderer, D=Dry Cleaner

THE SUCCESSFUL BIDDER MUST COMPLY WITH THE HOURLY NON-POVERTY WAGE TABLE WHICH CAN BE FOUND ON THE PROCUREMENT SERVICES WEB SITE AT: http://www.city.milwaukee.gov/display/router.asp?docid=327

PLEASE MAKE SURE YOU ARE USING THE MOSE CURRENT WAGE TABLE AT THE TIME THIS AFFIDAVIT IS COMPLETED. IF THIS AFFIDAVIT DOES NOT COMPLY WITH THE ABOVE REQUIREMENTS FOR WAGES AND BENEFITS PAID, THE BID MAY BE REJECTED.

In compliance with the requirements of the City of Milwaukee, I have completed this Affidavit of Compliance form in good faith and have made no willingly false or misleading statements. Further, I have disclosed the names and plant locations of all my manufacturers and their subcontractors purchasing, renting, laundering and dry cleaning of items of apparel that I sell to the City of Milwaukee. I have also included affidavits of compliance from each subcontractor employed by the contractor during the specified time period of the contract for the fulfillment of contracts covered under this section indicating their compliance with the Code of Ordinances Section 310-17.

Further, I understand that any false statement on these forms could result in:

- · Withholding of payments.
- Termination, suspension or cancellation of the contract in whole or in part.
- After a due process hearing, denial of the right of the contractor to bid on future city contracts, by himself or herself, partner or agent, or by any corporation of which he or she is a member, for a period of one year after the first violation is found and for a period of 3 years after a second violation is found.

I/We hereby state that we will comply Section 310-17 of the City of Milwaukee Code of Ordinances as stated above:

AUTHORIZED SIGNATURE:		<u> </u>
PRINTED NAME:		<u></u>
COMPANY NAME:		<u> </u>
	this day of, 20, (he/she)who ein contained for and on behalf of said company. IN WITNESS WHEREOF, I have hereunto	
(SEAL)	NOTARY PUBLIC SIGNATURE:	
	PRINTED NAME:	
	My commission expires:	