SCHEDULE C - ATTACHMENT C-2

MBE/WBE COMPLIANCE REPORT
LMDC NON-CONSTRUCTION CONTRACT

(to be filed quarterly)

PROJECT SPONSOR/DEVELOPER: Lower Manhattan Development Corp. LMDC AA OFFICER/REPRESENTATIVE: BEVERLY BOBB

ADDRESS: One Liberty Plaza, 20th Fl., New York, NY 10006 PROJECT NAME: _____

TELEPHONE: (212) 962-2300 FAX: (212) 962-2431 PROJECT START DATE: _____ PERCENT COMPLETE: _____

LMDC PROJECT MANAGER: _____ REPORTING PERIOD: _____ ACTUAL COMPLETION: _____

TOTAL NUMBER OF SUBCONTRACTORS: _____ *Attach M/WBE contract documentation, i.e. executed contracts, signed purchase orders or canceled checks.*

TOTAL DOLLAR AMOUNT OF SUBCONTRACTS: _____ *This report should be completed by an officer of the reporting company, and forwarded to the ESD AA Representative with the appropriate documentation.*

PRIME CONTRACTOR (Name, Address, Contact Person & Phone)	TYPE OF CONTRACT (Trade/Service)	CONTRACT AMOUNT	M/WBE SUBCONTRACT DATE	MBE/WBE SUBCONSULTANT (Name, Address, Contact Person & Phone)	SCOPE OF SERVICES	AMOUNT CONTRACTED TO MBE/WBE

CERTIFICATION:

I, _____ (Print Name), the _____ (Title), do certify that: (i) I have read this Compliance Report, and (ii) to the best of my knowledge, information and belief the information contained herein is complete and accurate.

SIGNATURE _____ DATE _____ COMPANY NAME _____

FORWARD REPORT BY MAIL AND FAX (212-962-2431) TO THE ATTENTIONS OF THE RESPONSIBLE LMDC PROJECT MANAGER AND LMDC AA OFFICER/REPRESENTATIVE (NAMES AND CONTACT INFORMATION IDENTIFIED ABOVE).

Revised October 2006