

## **CORE EMPLOYEE LIST**

Each CMHA Contractor must complete this list by identifying all of its employees then submit the completed form to <u>ACE@cmha.net</u>. The Contractor must also submit an ACE Worker Verification (Form DEI-7) for each employee identified below as an ACE or Targeted ACE Worker.

Worker				
Business Name:			Date:	
Street Address:				
City:	St	ate:	Zip:	
Phone:		Email:		
Project Name:				
Project Number: Project		Project Start I	t Start Date:	

	Name	ACE Worker	Targeted ACE Worker	Job Type
1				
2				
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