

EXHIBIT D: STATEMENT OF NONDISCRIMINATION COMPLIANCE

Prospective Contractor agrees that all persons employed by Prospective Contractor shall be treated equally by Prospective Contractor without regard to or because of race, color, religion, ancestry, national origin, handicap, gender, marital status, age, medical condition, or sexual orientation and in compliance with all anti-discrimination laws of the United States of America and the State of California. Prospective Contractor agrees that it shall include in its written contracts with any subcontractors a pledge by the subcontractor that the subcontractor will not engage in any unlawful discrimination. Prospective Contractor shall, if requested to do so by the County of Imperial, certify that Prospective Contractor has not discriminated against applicants, employees, or subcontractors because of their membership in a protected class during the performance of this Agreement. The County of Imperial hereby notifies Prospective Contractor that Government Code Section 12990 and California Administrative Code, Title II, Division 4, Chapter 5 apply to this Agreement and are incorporated herein by this reference with the same force and effect as if those laws were specifically set out herein and Prospective Contractor agrees to comply with said statute and regulation. "Prospective Contractor" hereby certifies, unless specifically exempted, compliance with Government Code Section 12990 and California Administrative Code, Title II, Division 4, Chapter 5, in matters relating to the development, implementation and maintenance of a nondiscrimination program.

I, _____, hereby swear that I am duly authorized to legally bind the Prospective Contractor to the above-described certification. I am fully aware that this certification executed on this _____ day of _____ in the year _____ in the _____ in the County of Imperial is made under the penalty of perjury under the laws of the State of California.

_____	_____
Name of Authorized Agent (please print)	Title
_____	_____
Signature of Authorized Agent	Date