ATTACHMENT E
SCHEDULE OF VENDORS

Subcontractor Name_____
The following is a list of all known entities to date providing materials and/or services to the above named Subcontractor necessary to complete work for the following Metric project:

Metric Project #_____ **Project Name**_____

The undersigned represents that the following material, supplies, and subcontractor services are all known entities for the duration of the project. If at any time there are any additional liabilities incurred after the execution of this agreement, the Subcontractor will be responsible for notifying Metric Corporation accordingly.

Vendor/Subcontractor Name and Address	Contact Person	Telephone	Materials/Services Provided

(Use additional sheets if necessary)

Signed by: _____ **Date:** _____
Print Name: _____ **Title:** _____