



HOUSING AUTHORITY OF NEW ORLEANS

Section 3 Labor/Man-Hour Report

To be submitted before 5:00 p.m. on the fifth business day of the month

Contractor: _____ Contract No.: _____

Contract Start Date: _____ Contract Completion Date: _____

Report for month of: _____ 20_____

Identify all Section 3 residents who have performed work in connection with this project to date. All Section 3 employees must appear on the Certified Payroll Form. List all employees who work on this project.

Name Address, City/State Last 4 of Social Security#	Referral Source	Section 3 Category Preference	Number of Labor/Manhours Worked This Period	Hire Date	Termination Date	Total Number Labor/Man- hours

For the period of this report, indicate:

Total Number of Manhours Worked by all Employees: _____

Total Number of Manhours Worked by Section 3 Employees: _____

Total Percentage of Manhours Worked by Section 3 Employees: _____

Name: _____

Title: _____

Date: _____

Signature