

MONTHLY REPORT OF DBE PARTICIPATION

This report must be filed by the Contractor with the submission of each invoice or request for payment under this contract.

Project Title: _____ Contractor Name: _____
 Project Number: _____ Contract Number: _____
 Period Covered By This Report: _____ Contract Amount (including amendments): \$ _____
 Total Invoice Amount: A. Current: \$ _____ (Invoice/Progress Payment # _____)
 B. To Date: \$ _____ C. DBE Goal for this Contract: _____

DBE Subcontractor, Supplier, or Manufacturer	Type of Service or Materials Provided	Subcontract Amount	Payment (Prior Months)	Payment (Current)	Payment (To Date)
Name: Address: Telephone No.:					
Name: Address: Telephone No.:					
Name: Address: Telephone No.:					
Name: Address: Telephone No.:					

D. TOTAL Payment to Date: \$ _____

E. DBE Participation to Date (D/B): _____

Note: Payments to DBE supplier or dealer that is not a manufacturer must be adjusted.