

**KIA STATE REVOLVING FUND
DBE UTILIZATION**

Contract No./Name: _____

Project Name: _____ Project No.: _____

Reporting Period: _____

Attach Invoices

MBE / WBE Contractor Name: _____

	<u>Minority Owned Business (MBE)</u>	<u>Woman's Owned Business (WBE)</u>
<u>Construction:</u>		
Total dollar amount of subcontract:	\$ _____	\$ _____
Total dollar amount for this reporting period:	\$ _____	\$ _____
<u>Materials/Supplies</u>		
Total dollar amount of subcontract:	\$ _____	\$ _____
Total dollar amount for this reporting period:	\$ _____	\$ _____
<u>Equipment:</u>		
Total dollar amount of subcontract:	\$ _____	\$ _____
Total dollar amount for this reporting period:	\$ _____	\$ _____
<u>Services:</u>		
Total dollar amount of subcontract:	\$ _____	\$ _____
Total dollar amount for this reporting period:	\$ _____	\$ _____

If no money was paid to MBE/WBE subcontractor, please check box on Exhibit B Form

Signed: _____

Title: _____

Phone: _____

E-mail: _____