



**\*\*THIS IS TO BE TUNRED IN EACH MONTH WITH EVERY PAY APPLICATION. EVEN IF YOU ARE NOT A MBE / HUB COMPANY, YOU MAY HAVE 2ND TIER SUBCONTRACTORS WORKING UNDER YOU THAT ARE. PLEASE MAKE SURE YOU ASK AND INCLUDE THEM FOR THIS FORM.**

**MBE DOCUMENTATION FOR CONTRACT PAYMENTS**

**Subcontractor/Supplier:** COMPANY NAME ON SUBCONTRACT

**Address & Phone:** ADDRESS & PHONE FOR COMPANY NAME ON SUBCONTRACT

**Project Name:** \_\_\_\_\_

**Pay Application #:** \_\_\_\_\_ **Period:** MONTH OF INVOICE

The following is a list of payments made to Minority Business Enterprises on this project for the above-mentioned period.

MBE FIRM NAME	FIRM REGISTERED WITH N.C.	* INDICATE TYPE OF MBE	AMOUNT PAID THIS MONTH	TOTAL PAYMENTS TO DATE	TOTAL AMOUNT COMMITTED
ABC DEMO	Y / N	H	\$500	\$500	\$500
	Y / N	SAMPLE COPY - FOR INFORMATIONAL PURPOSE ONLY			
	Y / N				
	Y / N				
	Y / N				
	Y / N				

\*Minority categories: Black, African American (B), Hispanic (H), Asian American (A), American Indian (I), Female (F), Social and Economically Disadvantage (D)

Date: \_\_\_\_\_

Approved/Certified By: \_\_\_\_\_

Name

Title

Signature

**SUBMIT WITH EACH PAY REQUEST & FINAL PAYMENT**