## Washington State Department of Transportation

## **Quarterly Report of Amounts Credited as DBE Particpation**

			Gui			
Check appropriate reporting period an dente		State Contract Number				
1st Quarter - January (Oct Dec.)	4th Quarter - October (July - Sept.)					
2nd Quarter - April (Jan Mar.)	Final			Federal Employer I.D. Number		
3rd Quarter - July (April - June)	Reporting Year					
Contractor				1		
DRE Dortigingent		Contract		to of		
DBE Participant Name and Federal Employer I.D. Number		Contract Type		ate of yment	*Dollar Credit Amo	unt
Contract Type:	ct Type: S = Subcontactor		ent			
	M = Manufacturer	R = Regular Dealer				
	J = Joint Venture	V = Se	rvice P	rovider		
I, the undersigned, do hereby certify that in connection with all work on the project for which this statement is submitted, each DBE						
participant contracted by me has been paid on the dates shown. *Further, I certify that the amounts shown under "Dollar Credit						
Amount" are in accordance with the " <b>DBE Eligibility</b> " portion of the DBE Special Provision.						
Signature Title						

This form is due on the 20th of the month following the end of the respective Quarter (January, April, July, October).