



Airport Concessions Disadvantaged Business Enterprise (ACDBE)

QUARTERLY ACTIVITY REPORT

Reporting Period: 1st Quarter (10/1/2014 - 12/31/2014) 2nd Quarter (01/01/2015 - 03/31/2015)
 3rd Quarter (04/1/2015 - 06/30/2015) 4th Quarter (07/01/2015 - 09/30/2015)

Concessionaire: _____

Address _____

Contact Name _____

E-Mail _____

Car Rental or Non Car Rental _____ Concession Type _____

Concessionaire's Gross Receipts	Reporting Period (listed above)	Total Reported to Date (for Fiscal Year)
Total	\$	\$

ACDBE Name(s)	Gross Receipts for Reporting Period (listed above)	ACDBE Participation % for this Reporting Period	Total ACDBE Gross Receipts Amount reported to date	Total ACDBE Participation % to Date
1.	\$		\$	
2.	\$		\$	
3.	\$		\$	
Total	\$		\$	

Signature of authorized representative/Date

Phone

Print name of authorized representative