DEPARTMENT OF ADMINISTRATION EMERGING BUSINESS ENTERPRISE PROGRAM

Form D - EBE MONTHLY REPORT

(1) R	eport for th	le Month of (Final	: yes no	_)
(2) Prime Contractor/Firm_				
(4) Description of service pe	rformed and	d/or material supplied		
(5) Purchase Order /Contrac	t#	(6) Project Number		
(7) Start Date: (8		Prime Contractors Total \$:		
(9) Completion Date:	(10)	Prime Contractor YTD \$:		
(11) EBE % goal a	nd \$ goal			
List all EBE subcontractor firm the month. This form shall be s Certification Form (Form E).	igned and ret	n connection with the above contract, eith curned. If this represents the final repo	ner as service perfort, be sure to attach	ormed and/or supplier fo
NAME OF EBE FIRM((s)	SERVICE PERFORMED/ MATERIAL SUPPLIED	AMOUNT PAID FOR THE MONTH	TOTAL \$ PAID Y-T-D
TOTAL PAID TO EBE	Z(s)			
I/we hereby certify that I/we	have read th	he above and approved this information	on to be precise a	and confirmed.
(12) Report Prepared By:	(Name)			
(13) Authorized Signature:	(Name)	(Title)		
		(14) Date		

Note: This form should be submitted no later than the 20th of every month to DOA-Emerging Business Enterprise Program, Room 606, City Hall, 200 E. Wells, Room 606, Milwaukee, WI or fax to (414) 286-8749.

DIRECTIONS FOR EBE MONTHLY REPORT (FORM D)

- 1. List the month that the report is being submitted. **Note: If this is the final report, check yes and submit Form E Subcontractor Payment Certification Form.**
- 2. Prime contractor's or firm's registered company name.
- 3. List full registered business address to include city/state, zip code and telephone number.
- 4. Brief description service performed and/or material supplied on this contract.
- 5. List the official Purchase Order or Contract Number, as represented on the contract or purchase order.
- 6. List the project number as represented on the front page of the contract.
- 7. List the start date of the project.
- 8. List the total dollars awarded to the prime contractor.
- 9. List the completion date of the project.
- 10. Prime contractor's total dollar amount paid to each EBE firm(s), for the month being reported, for service performed and/or materials supplied.
- 11. List the EBE percentage goal on this project and the dollar amount.
- 12. List the name of the name, title and phone number of the individual who prepared the report.
- 13. Provide the authorized signature and title of the individual who approves the report.
- 14. List the date that the report is completed.

THIS REPORT IS DUE THE 20TH OF EVERY MONTH FOR THE PREVIOUS MONTH'S ACTIVITY.
FAILURE TO RETURN THIS FORM BY THE SPECIFIED TIME MAY CAUSE A DELAY IN PAYMENTS.

Ref: EBECentral/EBE Forms/Monthly Report -FormD.doc