

**CONTRACTOR'S OR CONSULTANT'S MONTHLY REPORT**

PROJECT NAME: \_\_\_\_\_  
A.I.P. PROJECT NO. \_\_\_\_\_ STATE PROJECT NO. \_\_\_\_\_  
CONTRACTOR OR CONSULTANT: \_\_\_\_\_  
CONTRACT AMOUNT \$ \_\_\_\_\_  
ESTIMATE NO. \_\_\_\_\_ REPORT PERIOD FROM: \_\_\_\_\_ TO: \_\_\_\_\_

This report covers the previous estimate period and shall be submitted to the Project Engineer with the current month's pay estimate. Questions should be directed to the Airport Compliance Coordinator.

SUBCONTRACTOR(S) or SUBCONSULTANT(S)	ITEM NUMBER OR DESCRIPTION OF WORK PERFORMED	AMOUNT PAID THIS PERIOD	AMOUNT PAID TO DATE	DBE SIGNATURE
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	

AUTHORIZED SIGNATURE \_\_\_\_\_ DATE

TYPE OR PRINT NAME TITLE \_\_\_\_\_

PHONE NO. \_\_\_\_\_



The BRMA Project Manager or DBELO has reviewed this form.

Project Manager or DBELO's Signature \_\_\_\_\_ Date: \_\_\_\_\_