

CONSTRUCTION
BUREAU OF MINORITY & WOMEN BUSINESS OPPORTUNITIES
SUBCONTRACTOR'S QUARTERLY UTILIZATION REPORT
 (This form should be returned within 10 working days at the end of each quarter)

Subcontractor's Firm Name	Reporting Period QUARTER ENDING
Address	Contract Number
Telephone Number	
Contact Person	Date Received (BMWBO Office Use Only)

Prime contractors who have purchased your services and/or supplies in reference to this contract.

PRIME CONTRACTOR	ADDRESS	PHONE#	DATE INVOICED	AMOUNT INVOICED	DATE PAID	AMOUNT PAID	TOTAL AMOUNT PAID TO DATE
SIGNATURE OF PREPARER	TITLE						