



OFFICE OF SUPPLIER DIVERSITY  
CITY OF NEW ORLEANS  
DBE Compliance Form-3  
MONTHLY DBE UTILIZATION REPORT

Return to Office of Supplier Diversity  
Via email: [rspencer@nola.gov](mailto:rspencer@nola.gov)  
OR  
1340 Poydras Street, 10<sup>th</sup> Floor

CONTRACTOR:	Certified DBE: <input type="checkbox"/> YES <input type="checkbox"/> NO	Contract Start Date:
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DESCRIPTION:	Estimated Completion Date:
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This report is for the month of: (CHECK ONE):	<input type="checkbox"/> JAN <input type="checkbox"/> FEB <input type="checkbox"/> MARCH	<input type="checkbox"/> APR <input type="checkbox"/> MAY <input type="checkbox"/> JUNE	<input type="checkbox"/> JULY <input type="checkbox"/> AUG <input type="checkbox"/> SEPT	<input type="checkbox"/> OCT <input type="checkbox"/> NOV <input type="checkbox"/> DEC	<input type="checkbox"/> FINAL _____
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Original Contract Amount	Total Amount of Contract Changes (change orders or amendments)	Final Contract Amount (include contract changes)	Payments to Date from City of New Orleans	OFFICE USE ONLY (Verification)
\$	\$	\$	\$	

**Instructions:** List all DBEs utilized on the contract, whether or not the firms were originally listed for DBE goal credit. List actual amount paid to each DBE firm. If the established Percentage is not being met, please include a narrative description of the progress being made in DBE participation. Please refer to Good Faith Effort (GFE) Policy for guidance. Request a copy of the GFE policy via [supplierdiversity@nola.gov](mailto:supplierdiversity@nola.gov) (Attach additional pages if necessary)

DBE SUBCONTRACTOR	DBE DESCRIPTION OF WORK	DBE SUBCONTRACT AMOUNT	DBE PAYMENTS THIS REPORT	PAYMENTS TO DATE	OFFICE USE ONLY (Verification)
		\$	\$	\$	
		\$	\$	\$	
		\$	\$	\$	
		\$	\$	\$	
TOTALS		\$	\$	\$	

I HEREBY CERTIFY THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT. SUPPORTING DOCUMENTATION IS ON FILE AND IS AVAILABLE FOR INSPECTION BY CITY OF NEW ORLEANS OFFICE OF SUPPLIER DIVERSITY PERSONNEL AT ANY TIME.

PRINT NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_, \_\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
(Contractor) (Title) (Date)