

Quarterly Report of Amounts Paid as MBE/WBE Participants

This form required from the Prime Contractor on all State funded projects quarterly and upon completion of the project.

^{Quarter} ⊠ Jan 1 - Mar 31 □ Apr 1 -	Jun 30	Fiscal Year
☐ Jul 1 - Sep 30 ☐ Oct 1 -		2011
	DCC 01	State Contract Number
(Quarter Start Date) (Completi	on Date)	8078
Contractor		Federal Employer I.D. Number
American Construction Company, Inc.		91-0562492
MBE/WBE Participant Name and Federal Employer ID Numb	Contra er Type	
	CONTRACT TY S = Subcontrac M = Manufactur J = Joint Ventur	or A = Agent er R = Regular Dealer
I certify that all MBE/WBE participants contracted by me on the noted contract are listed above and that they have been paid the amounts shown.		
Signature	Title	