FORM CP-2A
LOUISIANA DEPARTMENT OF TRANSPORTATION AND DEVELOPMENT
DBE FINAL REPORT

STATE PROJECT NO.	DBE GOAL AMOUNT: $	CONTRACTOR:
FEDERAL PROJECT NO.	CONTRACT AMOUNT: $	
PARISH(ES)	LETTING DATE:	

DOTD CERTIFIED DBE SUBCONTRACTOR OR SUPPLIER	ITEMS PERFORMED AND PAID	TOTAL DOLLAR AMOUNT PAID TO SUB OR SUPPLIER (60%)

This is to certify that $ _____ has been paid to Disadvantaged Business Enterprise Subcontractors/Suppliers listed above.

Authorized Signature
Typed or Printed Name
Title
Date

Parish or County _____ State of _____

Subscribed and sworn to, before me, this _____ day of _____ A.D. 20_____

Notary Public _____

My commission expires: _____