

Indiana Department of Transportation DBE TRUCKING REPORT

The DBE primary trucker must complete and submit this report each time it receives payment from a Prime to: INDOT Economic Opportunity Division, Attention: Donna Poole 100 N. Senate Ave., Room 750, Indianapolis 46204, or email dpoole@indot.in.gov, or fax 317-233-0891.

INDOT Contract Number _____ District _____

Name of DBE Primary Trucker _____

Name of Prime Contractor _____

Total Contract Commitment to DBE Primary Trucker \$ _____

Date trucking services began on this job _____

Are trucking services completed on this job? ___ Yes ___ No Completion Date: _____

This report represents trucking services provided and/or brokered by the DBE Primary Trucker for the period beginning _____, and ending _____, under the above-referenced INDOT contract.

1. Amount of payment to **DBE Primary Trucker from Prime** \$ _____
2. Amount of payment made **by DBE Primary Trucker** to all **supplemental DBE** truckers \$ _____
3. Amount of payment made by DBE Primary Trucker to all **supplemental non-DBE** truckers \$ _____

I AFFIRM, UNDER PENALTIES OF PERJURY, that the above information is true and correct to the best of my knowledge, information and belief.

DBE Primary Trucker Name (print)

By: _____
(Signature of Representative)

(Date)

(Title)