



SBE SUBCONTRACTOR FINAL PAYMENT CERTIFICATION

This form is to be completed and signed by the Prime Contractor and SBE subcontractor firms that were utilized in connection with the contract/ project listed below, either for service performed and/or as a supplier.

Project Name: _____

Prime Contractor's Bid or RFP#: _____ Purchase Order / Contract #: _____

Prime Contractor Name: _____

Subcontractor Name: _____

Total Payment Paid to Subcontractor: \$ _____

I. PRIME CONTRACTOR ACKNOWLEDGMENT

I hereby certify that our firm has paid the listed amount to the SBE Subcontractor as indicated above for work performed and/or material supplied on the above contract/project.

Prime Contractor Authorized Signature: _____ Date: _____

II. SUBCONTRACTOR ACKNOWLEDGMENT

I hereby certify that our firm has received the listed amount from the Prime Contractor as indicated above for subcontract work performed and/or material supplied on the above contract/project.

Subcontractor Authorized Signature: _____ Date: _____

Submit this form with the Prime Contractor's final **FORM D** (SBE Monthly Report) to:

Department of Administration
Office of Small Business Development
City Hall – Room 606
200 East Wells St
Milwaukee, WI 53202
Fax: 286-8752
E-mail: osbd@milwaukee.gov