**Small, Minority, Women, African-American (SMWAABE) Utilization Report**

Complete this form and attach to each Application for Payment
*Please check our website [www.mjboyle.com](http://www.mjboyle.com) for updated versions of this form*

Job name _____ Payment period to _____

Subcontractor or Supplier name _____

Identify all payments this period to ANY TIER SMWAABE sub-subcontractor or supplier

| Vendor | Goods or services | $ amount | Check all that apply | | | | |
|---|---|---|---|---|---|---|---|
| | | | SBE | MBE | WBE | AABE | Other |
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Please list ALL purchases for this project to minority vendors. This listing is not limited to major purchase orders. Examples of purchases that are eligible to be included are:

- Major materials purchases
- Sub-subcontractors
- Minor materials incidental to completing the project scope
- Temporary labor
- Equipment repairs
- Equipment fuel
- Flat repair

❒ No SMWAABE purchases this period

Submitted by:
Signature _____

Printed name_____ Date _____