



**Office of General Services
Office of Business Diversity**

Design and Construction

Office of Business Diversity

29th Floor, Corning Tower

The Governor Nelson A. Rockefeller Empire State Plaza
Albany, New York 12242

Phone: (518) 486-9284

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CONSULTANT'S CUMULATIVE MONTHLY PAYMENT STATEMENT

Contract No.: _____

Consultant's Name, Address and Phone No.:	Consultant Federal ID No.:	MWBE Goals		Reporting Period	
		MBE%	WBE%	Month	Year
Description of Project:					
Firm Name, Address and Phone Number (List All Firms)	Description of Work or Supplies Provided	Designation		Payment This Month	Contract Amount
Federal ID No.:		<input type="checkbox"/> MBE <input type="checkbox"/> Sub <input type="checkbox"/> Broker <input type="checkbox"/> Joint Venture	<input type="checkbox"/> WBE <input type="checkbox"/> Supplier <input type="checkbox"/> Tiered Sub <input type="checkbox"/> Other	<input type="checkbox"/> No Payment This Month	
Federal ID No.:		<input type="checkbox"/> MBE <input type="checkbox"/> Sub <input type="checkbox"/> Broker <input type="checkbox"/> Joint Venture	<input type="checkbox"/> WBE <input type="checkbox"/> Supplier <input type="checkbox"/> Tiered Sub <input type="checkbox"/> Other	<input type="checkbox"/> No Payment This Month	
Federal ID No.:		<input type="checkbox"/> MBE <input type="checkbox"/> Sub <input type="checkbox"/> Broker <input type="checkbox"/> Joint Venture	<input type="checkbox"/> WBE <input type="checkbox"/> Supplier <input type="checkbox"/> Tiered Sub <input type="checkbox"/> Other	<input type="checkbox"/> No Payment This Month	
Federal ID No.:		<input type="checkbox"/> MBE <input type="checkbox"/> Sub <input type="checkbox"/> Broker <input type="checkbox"/> Joint Venture	<input type="checkbox"/> WBE <input type="checkbox"/> Supplier <input type="checkbox"/> Tiered Sub <input type="checkbox"/> Other	<input type="checkbox"/> No Payment This Month	
_____ Signature of Firm's Compliance Officer		_____ Print Name		_____ Date	
This form is required pursuant to contract specifications. Failure to submit will result in noncompliance with contract specifications.				For OGS Use Only	
				Reviewed By:	Date: