

**KANSAS DEPARTMENT OF TRANSPORTATION  
DBE PAYMENT AFFIDAVIT**

DBE SUBCONTRACTOR: \_\_\_\_\_

PRIME CONTRACTOR: \_\_\_\_\_

KDOT PROJECT NO: \_\_\_\_\_

MONTH: \_\_\_\_\_ YEAR: \_\_\_\_\_

BID ITEM NO. & NAME	QUANTITY	AMOUNT

Total Received This Month: \$ \_\_\_\_\_

Date Payment Received: \_\_\_\_\_

Signature: \_\_\_\_\_

**INSTRUCTIONS:**

This form is to be completed each month by the DBE subcontractor. It must be received in KDOT Office of Engineering Support by the 15th of each month. It should reflect payments received from the 1st to 31st of the proceeding month.