

**COLORADO DEPARTMENT OF TRANSPORTATION  
CONSULTANT CERTIFICATION OF ACTUAL PAYMENT TO A FIRST TIME  
EMERGING SMALL BUSINESS**

Project code #	Project #	Subcontract start date	Subcontract finish date
Project Manager name & phone #		Location	

CONSULTANT (You are required to complete this form only at the completion of the ESB's subcontract.)

- List the ESB subconsultant and the amount you have paid or will pay the business for work performed and materials used on the project.
- Return this form to the Project Manager with CDOT Form #1261 and a billing requesting reimbursement payment.
- Retain supporting documentation for a minimum of seven years from the project acceptance date.

ESB name	Amount paid
	_____

x10%

**TOTAL ELIGIBLE REIMBURSEMENT AMOUNT:**

=	_____
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**(NOTE:** If the Total Eligible Reimbursement Amount is greater than \$5,000, Consultant will be reimbursed \$5,000 per Chapter 4 Section II (3) (a) in the ESB Rules.)

I declare under penalty of perjury in the second degree, and any other applicable state or federal laws, that the statements made in this document are true and complete to the best of my knowledge.

Consultant name	Date
Authorized Consultant representative signature and title	Date

I certify this Consultant has met the contract requirements and is eligible for payment.

Authorized CDOT representative signature and title	Date
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