

**MBE REPORTING - MONTHLY UTILIZATION REPORT**

**Harrisburg Housing Authority  
351 Chestnut Street  
Harrisburg PA 17101-2785**

(Please type or print all information clearly)

Name and Address of Prime Contractor: \_\_\_\_\_

Name and Address of Sub-Contractor: \_\_\_\_\_

Employer Identification Number: \_\_\_\_\_ This Report is for the Month and Year of: \_\_\_\_\_

Name and Telephone # of Person Submitting Report: \_\_\_\_\_

Type of Profession, Company or Firm: \_\_\_\_\_

Signature of Company Official and Title:  X \_\_\_\_\_ Date Signed: \_\_\_\_\_

Job Title Trade Or Classification	Minority			Total White	Total Number Employed	Minority (%)	White (%)
	Total Black (Not Hispanic)	Total Hispanic	Total Asian or Pacific				
<b>Grand Total</b>							

\*This report is to be submitted on a monthly basis during the term of your contract with the Harrisburg Housing Authority. It is to be included with your invoicing. If you have subcontractors, please have them also complete & submit this form to this office. Failure to comply with this requirement may result in delays with processing your remittance. Should you need any assistance, please call Gary Deavers (717) 232-6781 ext 8002; fax (717) 963-2600; or e-mail: garyd@harrisburghousing.org