

ADBECA, INC.

ARKANSAS DISADVANTAGE BUSINESS ENTERPRISE CONTRACTORS ASSOCIATION, INC.

DBE SUPPORTIVE SERVICE TASK FORM

DATE: _____

TO: _____

FROM: _____

APPROVED BY: _____

SUBJECT: DBE Supportive Service Assistance/Training

Approval was granted to _____ on _____ to Provide assistance for the following;

	<u>Total Invoice</u>	<u>Reimbursable Amt.</u>
Task No. 1 _____	\$ _____	\$ _____
Task No. 2 _____	\$ _____	\$ _____
Task No. 3 _____	\$ _____	\$ _____

Reimbursable amount is limited to the actual invoice amount up to a combined limit of \$1200.00 per year per DBE.

AUTHORIZATION IS STRICTLY LIMITED TO THE SPECIFIC TASK

The Arkansas DBE Contractors Association is not responsible for selection of consultants by DBEs and both the consultant and the DBE are aware that the Association neither recommends nor guarantees the services or products provided.

Cc. DBE Firm: _____

CONSULTANT: _____

NOTE: CONSULTANT- RETURNS THIS COPY WITH INVOICE AND PROVIDE:

Social Security Number: _____

Or Tax ID Number _____

1510 South Broadway
Little Rock, AR 72202

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Fax No.: 501-375-1277
