

COLORADO DEPARTMENT OF TRANSPORTATION MONTHLY PAYMENT SUMMARY	Contractor:	Project:	SA:	PE Initials:
	Payment Period: / / - / /	Date Paid: / /	Received By CDOT: / /	

Following the receipt of a payment from the Department, this form must be completed to show all payments due to subcontractors, including suppliers, in accordance with CDOT Standard Specifications for Road and Bridge Construction 109.06. Please follow the instructions below:

- List all subcontractors whose work you reported in the pay estimate or invoice to CDOT. Attach additional pages if necessary.
- Accurately describe the work performed or supplies provided by the subcontractor.
- Mark whether you have requested approval of a good cause exception. A good cause exception is required if you did not pay your subcontractor within seven days of receipt of payment from the Department.
- List the amount of the invoice and current payment to the subcontractor.
- Mark whether subcontractor has completed the subcontract/purchase order and whether you have released retainage to such subcontractor.
- Submit a signed copy of this form to the Project Engineer. Failure to timely complete this form will result in delay of your next payment from the Department. Failure to accurately complete this form could result in the delay of future payments from the Department.

Subcontractor	Payment Date	Exception Requested	Invoice Amount	Payment Amount	Work Completed	Retainage Released
	/ /	☐ Y ☐ N	\$	\$	☐ Y ☐ N	☐ Y ☐ N
	/ /	☐ Y ☐ N	\$	\$	☐ Y ☐ N	☐ Y ☐ N
	/ /	☐ Y ☐ N	\$	\$	☐ Y ☐ N	☐ Y ☐ N
	/ /	☐ Y ☐ N	\$	\$	☐ Y ☐ N	☐ Y ☐ N
	/ /	☐ Y ☐ N	\$	\$	☐ Y ☐ N	☐ Y ☐ N
	/ /	☐ Y ☐ N	\$	\$	☐ Y ☐ N	☐ Y ☐ N
	/ /	☐ Y ☐ N	\$	\$	☐ Y ☐ N	☐ Y ☐ N
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	/ /	☐ Y ☐ N	\$	\$	☐ Y ☐ N	☐ Y ☐ N

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 complete, true and accurate and that my company has complied with CDOT Standard Specifications for Road and Bridge Construction and all other relevant contract provisions. I acknowledge that if payment has not been made consistent with the representations herein, my company may be liable for interest pursuant to CRS 24-91-103(2) and the Department may withhold payments to my company until all required payments have been made to subcontractors.

Contractor Representative Name	Signature	Title	Date