

**SCHEDULE D2
MPS - NEIGHBORHOOD SCHOOLS INITIATIVE
HUB Firm Payments- Summary**

**THIS FORM IS USED ONLY BY CONTRACTORS
HOLDING A SINGLE CONTRACT FOR MULTIPLE SITES**



Prime Contractor name

Contact Person for this Report

Month & Year Covered by this Report

Report#

Site #	1	2	3	4	5
Site/School Name					

Check to indicate that you have submitted a completed Schedule D1 for each MPS site listed in one through five above.

If more than 7 HUB subcontractors, please copy and provide additional sheets.

Contractor Name Prime contractor receipts on top line	Check if owner purchase	HUB Status		Check or Transaction Number	Total Amount PAID for completed MPS NSI Work	Mark "X" if contractor has or will work on each site noted.				
		MBE	WBE			Site 1	Site 2	Site 3	Site 4	Site 5

List HUB subcontractors below

The contractor shall sign this Schedule D2 submittal and attach at least one Schedule D1 for each Site noted above. The accompanying Schedule D1 forms should be signed, but are not required to be notarized. The signature notarized on this form shall suffice.

Sign above to indicate that this information is accurate and true

Subscribed and sworn before me this ____ day of _____, 200__ AD

Notary Public, State of Wisconsin

My Commission Expires

