



**CONTRACTOR'S SUMMARY OF STORED MATERIALS
(OFF-SITE STORED MATERIALS/EQUIPMENT LIST)**

Contract No.: _____ Invoice No.: _____ Invoice Date: _____

Contractor Name: _____ Contractor Address: _____

Project Description:

| | | STORED PREVIOUS REPORTING PERIOD | | USED DURING THIS REPORTING PERIOD | | ADDED THIS REPORTING PERIOD | | BALANCE END OF THIS REPORTING PERIOD | |
|---------------|--|----------------------------------|--------|-----------------------------------|--------|-----------------------------|--------|--------------------------------------|--------|
| Item No. | Description of Item (include Model, Serial No., etc.) | Quantity | Amount | Quantity | Amount | Quantity | Amount | Quantity | Amount |
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| TOTALS | | | | | | | | | |

Submitted By:

Contractor: _____
 Signature _____ Printed Name _____ Date _____

Recommended By:

PMF/CM: Recommended Not Recommended

 Signature _____

 Project Manager (Printed Name) _____ Date _____

Approved By:

SDA: Approved Not Approved

 Signature _____

 Program Officer (Printed Name) _____ Date _____

Use as many sheets as necessary