



## MITIGATION PROJECT RECORD – CONTRACT WORK

**AUTHORITY: 1976 PA 390; COMPLIANCE: VOLUNTARY**

I. GENERAL INFORMATION				
Subrecipient Name:		Project Number:		
Location of Work:	Description of Work:		Time Period:	Start Date      End Date
			-	
II. CONTRACT WORK RECORDS				
Dates Worked	Contractor	Billing / Invoice	Amount	Comments - Scope
Start      End		Number		
<b>TOTAL:</b>				

<b>I certify that the above information was transcribed from timesheets, payroll records, equipment log invoices, stock records or other documents which are available for audit.</b>	
Subrecipient's Authorized Representative	MSP/EMHSD USE ONLY
Signature:	This form has been reviewed and found correct with the exceptions as noted.  Reviewer Initials:

**\*\* NOTE: ATTACH REQUIRED DOCUMENTATION FOR EACH CONTRACT WORK RECORD LINE \*\***