



MITIGATION PROJECT RECORD – MATERIALS / SUPPLIES / EQUIPMENT

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

I. GENERAL INFORMATION					
Subrecipient Name:		Project Number:		Select One: Subrecipient Project Expense In-Kind Contribution	
Location of Work:	Description of Work:			Time Period:	End Date
				Start Date	-

II. MATERIALS / SUPPLIES / EQUIPMENT PURCHASE(S)					
VENDOR	DESCRIPTION OF PURCHASE	TOTAL QUANTITY	UNIT PRICE	TOTAL PRICE	CHECK NUMBER
TOTAL:					

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.	
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 VENDOR LINE **