STATE OF NEW JERSEY
SCHOOLS DEVELOPMENT AUTHORITY

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

NJSDA Form 813

Page ____ of ____

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
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

Reset Form Print Form