



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:

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