FEDERAL EMERGENCY MANAGEMENT AGENCY

MATERIALS SUMMARY RECORD

Page of

1. APPLICANT	2. PA ID	3. PW #	4. DISASTER NUMBER
5. LOCATION/SITE		6. CATEGORY	7. PERIOD COVERING to

8. DESCRIPTION OF WORK PERFORMED

VENDOR	DESCRIPTION	QUAN.	UNIT PRICE	TOTAL PRICE	DATE PURCHASED	DATE USED	INFO FROM (CHECK ONE)	
							INVOICE	STOCK
			$	$			☐	☐
			$	$			☐	☐
			$	$			☐	☐
			$	$			☐	☐
			$	$			☐	☐
			$	$			☐	☐
			$	$			☐	☐
			$	$			☐	☐
			$	$			☐	☐
			$	$			☐	☐
			$	$			☐	☐
			$	$			☐	☐
		GRAND TOTAL →		$				

I CERTIFY THAT THE ABOVE INFORMATION WAS OBTAINED FROM PAYROLL RECORDS, INVOICES, OR OTHER DOCUMENTS THAT ARE AVAILABLE FOR AUDIT.

CERTIFIED	TITLE	DATE

FEMA Form 90-124, NOV 98