

Classification

REPORTS INVENTORY						CONTROL NO. DDS/OL/SD-60 XXXXXXXXXX	
PREPARE IN DUPLICATE							
1. TITLE OF REPORT (If a fill-in report include Form No.) RIA Property In Use Reevaluation						2. TYPE OF REPORT <input checked="" type="checkbox"/> STATISTICAL <input type="checkbox"/> NARRATIVE <input type="checkbox"/> MACHINE-NAME LISTING	
3. FUNCTIONAL AREA		<input checked="" type="checkbox"/> PERSONNEL <input type="checkbox"/> LOGISTICS <input type="checkbox"/> MEDICAL		<input type="checkbox"/> TRAINING <input type="checkbox"/> SECURITY <input type="checkbox"/> FINANCE		ADMIN. GENERAL OTHER (specify)	
4. NO. OF COPIES PREPARED 1		5. FREQUENCY (weekly, monthly, quarterly, etc.) Semi-Monthly		6. DISTRIBUTION (No. of components not number of copies) 1			
7. FORMAT (memorandum, form computer print-out, etc) Computer Print-Out		8. ADP PROCESSING <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IF YES GIVE ADP PROCESSING NO. 115		9. DIRECTIVE AUTHORITY REQUIRING REPORT HR 			
10. PREPARING COMPONENT (include lowest level contributing information to report) OCS, OL/SD/FSB				11. FEEDER REPORTS (State total number and identify by Title, Form No., or nomenclature. Attach separate sheet if necessary.)			
12. COST FACTORS							
A. MANUAL PREPARATION AND REVIEW COSTS							
GRADE	HOURLY RATE	<input checked="" type="checkbox"/> HOURS PER REPORT	=	COST PER REPORT	<input checked="" type="checkbox"/> TIMES PREPARED	=	COST PER YEAR
GS-6	3.51	.25	=	.88	24	=	21.12
B. COSTS OF COMPUTER PRODUCED REPORTS							
			=	.25	24	=	8.00
TOTAL COSTS PER YEAR						29.12	
13. COMPLETE DETAILED JUSTIFICATION FOR THIS REPORT (in addition to directive or authority cited in item 9). IF KNOWN, INCLUDE DATE REPORT WAS FIRST STARTED AND COMPONENT WHO ESTABLISHED REQUIREMENT. A working tool for the analysis of Property In Use price changes.							
14. FUTURE GOALS							
GOAL PROPOSED BY COMPONENT FOR THIS REPORT						ESTIMATED SAVINGS	
<input type="checkbox"/> RETAIN AS IS <input type="checkbox"/> CHANGE <input checked="" type="checkbox"/> DISCONTINUE						<input type="checkbox"/> OTHER (explain) <div style="display: flex; justify-content: space-between;"> <div>MAN-HOURS 6</div> <div>DOLLARS 29.12</div> </div>	
16. DATE OF INVENTORY 25 Sept 70		17. NAME AND TITLE OF PERSON FURNISHING INFORMATION - AC/OL/SD/SMB/GMMS					18. EXTENSION