

REPORTS INVENTORY					CONTROL NO.	
PREPARE IN DUPLICATE					DDS/OL/PMS-4	
1. TITLE OF REPORT (if a fill-in report include Form No.)					2. TYPE OF REPORT	
#4 - Overrun History					<input checked="" type="checkbox"/> STATISTICAL	
					<input type="checkbox"/> NARRATIVE	
					<input type="checkbox"/> MACHINE-NAME LISTING	
3. FUNCTIONAL AREA		PERSONNEL		TRAINING		
<input checked="" type="checkbox"/> LOGISTICS				SECURITY		
		MEDICAL		FINANCE		
4. NO. OF COPIES PREPARED		5. FREQUENCY (weekly, monthly, quarterly, etc.)			6. DISTRIBUTION (No. of components not number of copies)	
2		twice yearly			2	
7. FORMAT (memorandum, form computer print-out, etc)		8. ADP PROCESSING			9. DIRECTIVE AUTHORITY REQUIRING REPORT	
computer print-out		<input checked="" type="checkbox"/> YES			see 13	
		IF YES GIVE ADP PROCESSING NO.				
		NO 24205				
10. PREPARING COMPONENT (include lowest level contributing information to report)				11. FEEDER REPORTS (State total number and identify by Title, Form No., or nomenclature. Attach separate sheet if necessary.)		
OCS - OL/PMS						
<b>12. COST FACTORS</b>						
<b>A. MANUAL PREPARATION AND REVIEW COSTS</b>						
GRADE	HOURLY RATE	<input checked="" type="checkbox"/>	HOURS PER REPORT	=	COST PER REPORT	<input checked="" type="checkbox"/>
9	5.38		2		10.76	2
						=
						GOST PER YEAR
						21.52
<b>B. COSTS OF COMPUTER PRODUCED REPORTS</b>						
	no.pgs		no.cys		per pg	
	68		2		.03	2
						=
						GOST PER YEAR
						8.16
<b>TOTAL COSTS PER YEAR</b>						<b>29.68</b>
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.						
D/L memo dated 22 Nov 67 to D/OCS						
<b>14. FUTURE GOALS</b>						
GOAL PROPOSED BY COMPONENT FOR THIS REPORT					ESTIMATED SAVINGS	
<input checked="" type="checkbox"/> RETAIN AS IS					STAT	
<input type="checkbox"/> CHANGE						
<input type="checkbox"/> DISCONTINUE						
<input type="checkbox"/> OTHER (explain)						
16. DATE OF INVENTORY		17. NAME AND TITLE OF PERSON FURNISHING INFORMATION			18. EXTENSION	
8 Oct. 1970		Procurement Assistant			<input type="checkbox"/>	

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