REPORTS INVENTORY

CONTROL NO. SRB 930

PREPARE IN DUPLICATE

1. TITLE OF REPORT (If a fill-in report include Form No.): 930 TRANSC HOSP TRANS

2. TYPE OF REPORT: [ ] STATISTICAL [ ] NARRATIVE [L] MACHINE-NAME LISTING

3. FUNCTIONAL AREA: [L] PERSONNEL [ ] TRAINING [ ] ADMIN. GENERAL; [ ] LOGISTICS [ ] SECURITY [ ] OTHER (specify); [ ] MEDICAL [ ] FINANCE

4. NO. OF COPIES PREPARED: 1

5. FREQUENCY (weekly, monthly, quarterly, etc.): P

6. DISTRIBUTION (No. of components not number of copies):

7. FORMAT (memorandum, form, computer print-out, etc.): CP-O

8. ADP PROCESSING: [✓] YES [ ] NO — IF YES GIVE ADP PROCESSING NO.: H-01

9. DIRECTIVE AUTHORITY REQUIRING REPORT:

10. PREPARING COMPONENT (Include lowest level contributing information to report): OCS/OPERATIONS

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	X	HOURS PER REPORT	=	COST PER REPORT	X	TIMES PREPARED	=	COST PER YEAR
GS-06-3	4.21		.143		.60		26		15.60

B. COSTS OF COMPUTER PRODUCED REPORTS

					.20		26		5.20

TOTAL COSTS PER YEAR: $20.80

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.

14. FUTURE GOALS

GOAL PROPOSED BY COMPONENT FOR THIS REPORT

[ ] RETAIN AS IS [ ] OTHER (explain)
[ ] CHANGE
[ ] DISCONTINUE

ESTIMATED SAVINGS	
MAN-HOURS	DOLLARS

15. DATE OF INVENTORY: 2 NOV 1970

STAT

FORM 112