

REPORTS INVENTORY

CONTROL NO.

DDS/OC-011

PREPARE IN DUPLICATE

1. TITLE OF REPORT (if a fill-in report include Form No.)

PROGRAM REVIEW 5 YEAR

2. TYPE OF REPORT

STATISTICAL

NARRATIVE

MACHINE-NAME LISTING

3. FUNCTIONAL AREA

PERSONNEL

TRAINING

ADMIN. GENERAL

LOGISTICS

SECURITY

OTHER (specify)

MEDICAL

FINANCE

COMMUNICATIONS

4. NO. OF COPIES PREPARED

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

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

THREE

ANNUALLY

OC-Exe Director Controlled

7. FORMAT (memorandum, form, computer print-out, etc)
MEMORANDUM

8. ADP PROCESSING

YES

IF YES GIVE ADP PROCESSING NO.

NO

9. DIRECTIVE AUTHORITY REQUIRING REPORT

OC-EXECUTIVE DIRECTOR/COMP

10. PREPARING COMPONENT (include lowest level contributing information to report)

OC-CS/RSB

11. FEEDER REPORTS (State total number and identify by Title, Form No., or nomenclature. Attach separate sheet if necessary.)

N/A

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-12-16	10.00 average		60 hrs		600.00		annually		600.00
GS-06	3.75		2 hrs		7.50		annually		7.50
									607.50 TOTAL

B. COSTS OF COMPUTER PRODUCED REPORTS

830,474.90

2,340 TOTAL COSTS PER YEAR

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

TOTAL PROPOSED BY COMPONENT FOR THIS REPORT

RETAIN AS IS

OTHER (explain)

CHANGE

DISCONTINUE

ESTIMATED SAVINGS

MAN-HOURS

DOLLARS

15. DATE OF INVENTORY

16. EXTENSION