

<b>REPORTS INVENTORY</b>						CONTROL NO. DDS/OL/PMS-7					
PREPARE IN DUPLICATE											
1. TITLE OF REPORT (if a fill-in report include Form No.)  # 7 - Active Contracts					2. TYPE OF REPORT	<input checked="" type="checkbox"/> STATISTICAL <input type="checkbox"/> NARRATIVE <input type="checkbox"/> MACHINE-NAME LISTING					
3. FUNCTIONAL AREA		<input type="checkbox"/> PERSONNEL <input checked="" 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  2		5. FREQUENCY (weekly, monthly, quarterly, etc.)  monthly		6. DISTRIBUTION (No. of components not number of copies)  9							
7. FORMAT (memorandum, form computer print-out, etc.)  computer print-out		8. ADP PROCESSING <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td><input checked="" type="checkbox"/></td> <td>YES</td> <td>IF YES GIVE ADP PROCESSING NO.</td> </tr> <tr> <td><input type="checkbox"/></td> <td>NO</td> <td>24205</td> </tr> </table>		<input checked="" type="checkbox"/>	YES	IF YES GIVE ADP PROCESSING NO.	<input type="checkbox"/>	NO	24205	9. DIRECTIVE AUTHORITY REQUIRING REPORT  see 13	
<input checked="" type="checkbox"/>	YES	IF YES GIVE ADP PROCESSING NO.									
<input type="checkbox"/>	NO	24205									
10. PREPARING COMPONENT (include lowest level contributing information to report) OCS - PD/ICS, GP, CPB; SD/IDSS; OL/ [ ] DD/P/CMG; DD/S&T/OEL, ORD; DD/I/NPIC			11. FEEDER REPORTS (State total number and identify by Title, Form No., or nomenclature. Attach separate sheet if necessary.)								
<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"/> TIMES PREPARED	=	COST PER YEAR				
<u>DISTRIBUTION ONLY</u> 9	5.38	.25	=	1.34	24	=	32.16				
<b>B. COSTS OF COMPUTER PRODUCED REPORTS</b>											
	no. pgs 626	no. cys 2		per pg .03	12		450.72				
<b>TOTAL COSTS PER YEAR</b>						482.88					
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 1967 to D/OCS											
<b>14. FUTURE GOALS</b>											
GOAL PROPOSED BY COMPONENT FOR THIS REPORT					ESTIMATED SAVINGS						
<input type="checkbox"/>	RETAIN AS IS	<input checked="" type="checkbox"/>	OTHER (explain) reduce quantity to 1 copy		<del>XXXX-XXXX</del> computer processing	DOLLARS 75.12					
<input type="checkbox"/>	CHANGE										
<input type="checkbox"/>	DISCONTINUE										
16. DATE OF INVENTORY 8 Oct 1970		17. NAME AND TITLE OF PERSON FURNISHING INFORMATION Approved For Release 2006/11/13 : CIA-RDP75-00399R000100130032-8				18. EXTENSION [ ]					

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