

**MONTHLY REPORT OF HOURS WORKED**

This report of the hours worked on site (at ORNL or any other DOE or Company-owned or -leased facility) during the previous month must be completed and submitted to the Company before the fifth day of each month. Do not include paid, non-work time such as holidays, vacation, or sick leave in the reported hours worked.

Send the completed report to:	Ms. Carol Kendrick Oak Ridge National Laboratory P. O. Box 2008 MS 6348 Oak Ridge, TN 37831-6348
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Seller's name and address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Agreement number: \_\_\_\_\_

Seller's relationship to Company: \_\_\_\_\_ Subcontractor  
\_\_\_\_\_ Lower-Tier Subcontractor

Month ending: Month \_\_\_\_\_ Year \_\_\_\_\_

Total hours worked: \_\_\_\_\_

Total number of persons: \_\_\_\_\_

Seller: \_\_\_\_\_

By \_\_\_\_\_  
(Signature)

Title: \_\_\_\_\_

Date: \_\_\_\_\_