RECOVERY ACT - SUBCONTRACTOR MONTHLY JOBS REPORT

SUBCONTRACT NUMBER: _____ (eg, 4000_ _ _ _ _ _) **SUBCONTRACTOR NAME:** _____

Monthly Report For (insert Calendar Month & Year Covered by Report): _____ (Due every month the subcontract is active. ☐ /KŜŎʅ KŜŊŜ if final submission.)

_____
SUBCONTRACTOR COMPANY OFFICIAL'S NAME & TITLE (Printed)

_____ _____
SIGNATURE **DATE**

SUBMIT COMPLETED FORM VIA E-MAIL NO LATER THAN 4:00 PM EASTERN TIME THREE (3) CALENDAR DAYS AFTER THE END OF EACH CALENDAR MONTH TO:
(1) DEE FOUST (foustds@ornl.gov)
(2) UT-BATTELLE SUBCONTRACT ADMINISTRATOR, and
(3) UT-BATTELLE TECHNICAL PROJECT OFFFICER

SUBCONTRACT LINE ITEM NO.	JOBS CREATED MONTHLY - SELLER ONLY (Report Jobs for Lower-Tier Subcontractors on Page 2)				JOBS RETAINED MONTHLY - SELLER ONLY (Report Jobs for Lower-Tier Subcontractors on Page 2)				TOTAL FTEs = C + F
	Job Title/Category	A. Cumulative Hours Worked	B. Cumulative Hours Available	C. Calculated FTEs = A / B	Job Title/Category	D. Cumulative Hours Worked	E. Cumulative Hours Available	F. Calculated FTEs = D / E	

A & D = the total number of hours worked on the task **since inception**.
B & E = the total number of hours available **over the life of the task** based on your company's definition of an FTE.
Examples of the calculation are attached.