

Contract Data Requirements List

(2 Data Item)

Form Approved
OMB NO. 0704-0188

Public reporting burden for this collection of information is estimated to average 110 hours per response, including the time for reviewing instructions, searching existing data source, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports, 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302, and to the Office of Management and Budget, Paperwork Reduction Project (0704-0188), Washington, DC 20503. Please DO NOT RETURN your form to either of these addresses. Send completed form to the Government Issuing Contracting Officer for the Contract/PR No. listed in Block E.

A. CONTRACT LINE ITEM NO. 0002, 1002, 2002, 3002, & 4002	B. EXHIBIT A	C. CATEGORY: TDP _____ TM _____ OTHER _____
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D. SYSTEM/ITEM	E. CONTRACT/PR NO.: N62536-04-R-0008	F. CONTRACTOR:
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1. DATA ITEM NO. A001	2. TITLE OF DATA ITEM Contractor's Progress, Status and Management Report	3. SUBTITLE
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4. AUTHORITY (Data Acquisition Document No.) Use DI-MGMT-80227 for guidance.	5. CONTRACT REFERENCE Section C, Par. 3.1.5 and 6.1	6. REQUIRING OFFICE SPAWARSYSCEN Charleston
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7. DD 250 REQ	9. DIST STATEMENT REQUIRED	10. FREQUENCY Monthly	12. DATE OF FIRST SUBMISSION See block 16	14. DISTRIBUTION	
8. APP CODE		11. AS OF DATE See block 16.	13. DATE OF SUBSEQUENT SUBMISSION See block 16		

16. REMARKS Submit electronically as an e-mail attachment or on 3.5-inch floppy disk. Submit hard copies upon request only. Use current Microsoft® Office Package as used by SSSC Code 66. First date of submittal shall be the 15th day of the first full month after the contract award date. Subsequent submittals are due monthly, no later than the 15 th of each month. If specified by the government on each delivery order, progress reports may be submitted more frequently than monthly or they may be deleted as a requirement.	a. ADDRESSEE	b. COPIES	
	DRAFT	FINAL	
		Reg	Repro
	COR		
	As specified per task.		
	15. TOTAL →		

1. DATA ITEM NO. A002	2. TITLE OF DATA ITEM Technical Reports	3. SUBTITLE
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4. AUTHORITY (Data Acquisition Document No.) See remarks.	5. CONTRACT REFERENCE Section C, Par. 3.1.2 and 3.3.2	6. REQUIRING OFFICE SPAWARSYSCEN Charleston
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7. DD 250 REQ	9. DIST STATEMENT REQUIRED	10. FREQUENCY As required	12. DATE OF FIRST SUBMISSION As required	14. DISTRIBUTION	
8. APP CODE Draft required		11. AS OF DATE As required	13. DATE OF SUBSEQUENT SUBMISSION As required		

16. REMARKS Submit in electronic data format compatible with current Microsoft® Office Package in use at SPAWARSYSCEN Charleston. Submit electronically via e-mail or 3.5 inch floppy diskette. Supply hard copies upon request only.	a. ADDRESSEE	b. COPIES	
	DRAFT	FINAL	
		Reg	Repro
	As specified per task.		
	15. TOTAL →		

G. PREPARED BY M.A. DeForest	H. DATE 8-3-04	I. APPROVED BY R.B. Myers, II	J. DATE 8/3/04
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A. CONTRACT LINE ITEM NO. 0002, 1002, 2002, 3002, & 4002	B. EXHIBIT A	D. CATEGORY: TDP _____ TM _____ OTHER _____
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D. SYSTEM/ITEM	CONTRACT/PR NO.: N62536-04-R-0008	F. CONTRACTOR:
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1. DATA ITEM NO. A003	2. TITLE OF DATA ITEM Material Reports	4. SUBTITLE
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4. AUTHORITY (Data Acquisition Document No.)	5. CONTRACT REFERENCE Section C, Par. 7.3 and 7.4	6. REQUIRING OFFICE SPAWARSSYSCEN Charleston
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7. DD 250 REQ	9. DIST STATEMENT REQUIRED	10. FREQUENCY As required	12. DATE OF FIRST SUBMISSION As required	14. DISTRIBUTION
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8. APP CODE	11. AS OF DATE As required	13. DATE OF SUBSEQUENT SUBMISSION As required	a. ADDRESSEE
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16. REMARKS Submit in electronic data format compatible with current Microsoft Office Package in use at SPAWARSSYSCEN Charleston. Submit electronically via e-mail or 3.5 inch floppy diskette. Supply hard copies upon request only.				b. COPIES

1. DATA ITEM NO. A004	2. TITLE OF DATA ITEM Task/Delivery Order Close-out Report	3. SUBTITLE
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4. AUTHORITY (Data Acquisition Document No.)	5. CONTRACT REFERENCE Section C, Par. 7.0	6. REQUIRING OFFICE SPAWARSSYSCEN Charleston
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7. DD 250 REQ LT	9. DIST STATEMENT REQUIRED	10. FREQUENCY 90 after completion date of task/DO	12. DATE OF FIRST SUBMISSION As required	14. DISTRIBUTION
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8. APP CODE	11. AS OF DATE As required	13. DATE OF SUBSEQUENT SUBMISSION	a. ADDRESSEE
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16. REMARKS Submit in electronic data format compatible with current Microsoft Office Package in use at SPAWARSSYSCEN Charleston. Submit electronically via e-mail or 3.5 inch floppy diskette. Supply hard copies upon request only.				b. COPIES

G. PREPARED BY M.A. DeForest	H. DATE 8-3-04	I. APPROVED BY R.B. Myers, II	J. DATE 8/2/04
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