

ARKANSAS DEPARTMENT OF EMERGENCY MANAGEMENT

Materials Summary Record Instructions

This form is used to capture the costs of materials that were used during disaster related respond or repairs. Supporting documentation is needed for verification of costs which include proof of payment.

1. **State Disaster No.** – Provided to the applicant by ADEM and used for document tracking.
2. **Page** – Used to list the number of pages.
3. **Applicant** – Name of the local jurisdiction (Usually a City or County).
4. **Applicants Project #** - Used for applicant tracking purposes. A reference to identify each specific project.
5. **Location/Site** – Used to identify the damaged area. Include specific details (Address and/or road names).
6. **Period Covering** - Dates for each specific form.
7. **Vendor** – Enter the name of the vendor that material and/or supplies were purchased through.
8. **Description** – Enter a brief description of the purchased material or supplies.
9. **Invoice Number** – Enter the invoice number for each purchase.
10. **Unit Price** – Enter the unit prices of each material purchased.
11. **Total Price** – Enter the total cost of the material.
12. **Purchase Date** – Enter the date the material was purchased.
13. **Date Used** – Enter the date the material was used.
14. **Invoice or Stock** – Put an “X” were appropriate.
15. **Page Total** – Enter the sum of the total price column.
16. **Grant Total** – Enter the sum from all succeeding pages. Used for only page 1.
17. **Certified/Authorized Signature** – Signature of authorized person.
18. **Title** – Job title of authorized person
19. **Date** – Date of signature