

**PA CDBG-DR BUYOUT PROGRAM
 ACTIVITY WORKSHEET FOR OUTSIDE CONTRACTOR/VENDOR INVOICES**
 (Contract Services, Equipment Rentals, Materials, Supplies)

NO.:	APPLICANT:
CATEGORY:	LOCATION AND DESCRIPTION:

Contractor/Vendor	Description of Service or Purchase	Quantity	Unit of Measure (if applicable)	Unit Price	Cost	Invoice		Check	
						No.	Date	No.	Date

Worksheet No: _____ **Date:** _____ **Total: \$** _____

Prepared and Certified by: _____

Total Transferred to Summary of Costs Worksheet: (check one) Yes No