

REPORT OF CONTINGENCY EXPENDITURES		TO:		REPORTING PERIOD		Report Control Symbol RCS:
				FROM	FY	
				TO		
		ATTENDEES PAID FOR WITH ORF		CONTINGENCY FUNDS EXPENDED		
DATE OF PAYMENT	FUNCTION, GUEST(S) OF HONOR, ACTUAL HOST OF EVENT, LOCATION, AND DATE OF EVENT	DOD	NON-DOD	ALL FOOD AND BEVERAGE ITEMS	GIFTS, MEMENTOS, FLOWERS, OTHER	TOTAL COST ¹
A	B	C	D	E	F	G
					TOTAL:	\$
NAME (Administrator/Project Officer)		OFFICE SYMBOL			TELEPHONE NUMBER (Comm/DSN)	
1. TOTAL ACCRUED EXPENDITURES PAID (DISBURSEMENTS) THIS REPORTING PERIOD		\$			2. TOTAL ACCRUED EXPENDITURES PAID TO DATE (Disbursements) \$	
3. TOTAL ACCRUED EXPENDITURES UNPAID AND UNDELIVERED ORDERS OUTSTANDING		\$			4. TOTAL OBLIGATIONS \$	
DATE	COMMAND			SIGNATURE OF COMMANDER OR DEPUTY COMMANDER		

¹Contingency plans reflected in column G were expended for the purpose set forth above and no other appropriated or nonappropriated funds could properly be charged. Expenditure were necessary in the interests of the United States and the United States Air Force.