

EMERGENCY EQUIPMENT SHIFT TICKET

INVOICE POSTED BY (EQTR's initials)

NOTE: The responsible Government Officer will complete and submit this form each day or shift.

1. AGREEMENT NUMBER		2. RESOURCE ORDER NUMBER		3. CONTRACTOR (name)	
4. INCIDENT NAME/#		5. NO. OF OPERATORS		6. OPERATOR (name(s))	
7. ITEM DESCRIPTION & VIN/SERIAL #					
9. DATE		10. EQUIPMENT USE [ACTUAL TIME WORKED]		11. REMARKS (down time and cause, problems, etc.)	
MO/DA/YR	START	STOP	HRS/DAYS/MILES (circle one)		
			WORK	SPECIAL	
12. EQUIPMENT STATUS					
a. Inspected and under agreement		<input type="text"/>	b. Released by Government		<input type="text"/>
			c. Withdrawn by Contractor		<input type="text"/>
13. CONTRACTOR'S OR AUTHORIZED AGENT'S SIGNATURE			15. AUTHORIZED GOVERNMENT AGENT SIGNATURE		
14. PRINTED NAME AND TITLE			16. PRINTED NAME AND TITLE		17. DATE SIGNED

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USDA/USDI

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