EMERGENCY EQUIPMENT – USE INVOICE

PAGE 1 OF _____

1. CONTRACTOR a. name and address	2. INCIDENT OR PROJECT NAME
	3. AGREEMENT NUMBER *(from OF-294)*
	4. EFFECTIVE DATES OF AGREEMENT a. beginning b. ending
5. EQUIPMENT *(list make, model, serial number, etc.)*	6. POINT OF HIRE *(location when hired)*
	7. DATE OF HIRE / 8. TIME OF HIRE
9. ADMINISTRATIVE OFFICE FOR PAYMENT	10. THE WORK RATE IS BASED ON ALL OPERATING SUPPLIES BEING FURNISHED BY ☐ CONTRACTOR (wet) ☐ GOVERNMENT (dry)
	11. OPERATOR FURNISHED BY ☐ CONTRACTOR ☐ GOVERNMENT
	12. RESOURCE ORDER NUMBER

13. YEAR 2015 MO DA	14. WORK OR DAILY RATE a. UNITS WORKED (MI/HR/DAY)	b. RATE	c. AMOUNT	15. SPECIAL RATE a. UNITS WORKED (MI/HR/DAY)	b. RATE	c. AMOUNT	16. TOTAL AMOUNT EARNED (14C + 15C)	17. GUARANTEE	18. AMOUNT (COLUMN 16 OR 17, WHICHEVER IS GREATER)

19. CHARGE CODE	20. OBJECT CODE	23. GROSS AMOUNT DUE	
		24. ITEM 23 FROM PREVIOUS PAGE	
21. EQUIPMENT WAS ☐ RELEASED ☐ WITHDRAWN DATE: TIME:		25. TOTAL AMOUNT DUE	
		26. DEDUCTIONS *(attach statement)*	
22. REMARKS		27. ADDITIONS *(attach statement)* GRATUITY	
		28. NET AMOUNT DUE	

29. *NOTE: CONTRACT RELEASE FOR AND IN CONSIDERATION OF RECEIPT OF PAYMENT IN THE AMOUNT SHOWN ON "NET AMOUNT DUE: LINE 28, CONTRACTOR HEREBY RELEASES THE GOVERNMENT FROM ANY AND ALL CLAIMS ARISING UNDER THIS AGREEMENT EXEPT AS RESERVED IN "REMARKS" BLOCK 22.*

30. CONTRACTOR'S SIGNATURE	31. DATE	32. RECEIVING OFFICER'S SIGNATURE	33. DATE
34. PRINT NAME AND TITLE		35. PRINT NAME AND TITLE	

Emergency Equipment Deductions and Additions

(For use with OF-286 Blocks 26 and 27 – Deductions and Additions Statement)

Invoice #:
Official #:

1. CONTRACTOR	2. INCIDENT OR PROJECT NAME
	2a. ACCOUNTING CODE
5. EQUIPMENT Unique ID: Make: Request #: Model:	3. AGREEMENT NUMBER
	4. REPORT DATE/TIME

Activity Date	Description	Deductions	Additions
	Totals		