DEPARTMENT OF ENVIRONMENTAL PROTECTION
DIRECT MATERIAL PURCHASES SCHEDULE Date:_____

_____ _____
(Grantee) (Project Name and Number)

Billing Period:_____ Billing #_____

DEP Division: Recreation and Parks DEP Program: FRDAP

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Vendor Name	Vendor Invoice Number and Date	Check Number and Date	Project Cost	General Description and Project Element

TOTAL $_____

CERTIFICATION: I hereby certify that the purchases noted above were used in accomplishing the project.

CERTIFICATION: I hereby certify that invoices, canceled checks and other purchasing documentation have been maintained as required to support the costs reported above and are available upon request.

_____ _____

Project Administrator **Date** **Project Financial Officer** **Date**

FPS-A042