# Oil Spill Recovery Institute (OSRI) Financial Reporting Form

## Date: [ ]

## OSRI Contract No.: [ ]

**Contractor/Institution:**

**Remittance Address:**

**Contact Information:**

- **Name:** [ ]
- **Phone No.:** [ ]
- **Email:** [ ]

**Project Title:**

**Principal Investigator(s):**

**Grant Period:**

**Period for This Report or Invoice:**

**Cumulative Summary:**

- **Total Funds Approved By OSRI:** $-
- **OSRI Funds Received to Date:** $-
- **Funds Requested in this Invoice:** $-
- **TOTAL REMAINING:** $-

## CURRENT Report or Invoice Details:

<table>
<thead>
<tr>
<th>Cost Categories</th>
<th>Approved funds by category</th>
<th>Previously reported expenses</th>
<th>Expenses this invoice</th>
<th>Cumulative expenses with this invoice</th>
<th>Total funds remaining after this invoice</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Personnel Salaries</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
</tr>
<tr>
<td>b. Fringe Benefits</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
</tr>
<tr>
<td>c. Travel</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
</tr>
<tr>
<td>d. Contractual/consultants</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
</tr>
<tr>
<td>e. Commodities/Supplies</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
</tr>
<tr>
<td>f. Equipment</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
</tr>
<tr>
<td>g. Total Direct Charges</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
</tr>
<tr>
<td>h. Indirect</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
</tr>
<tr>
<td>k. TOTAL COSTS</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
</tr>
</tbody>
</table>

**Signed:** [ ]

**Dated:** [ ]

**Notes:**

1. Please make copies of this form as needed to submit with invoices.
2. Mail paper copies of this form and invoices to:
   - Penelope Oswalt, Finance Manager
   - Oil Spill Recovery Institute
   - P.O. Box 705
   - Cordova, AK 99574
   - Phone: (907)-224-6300 ext. 224
3. Email electronic copy of this form to:
   - poswalt@pwssc.org
   - and also to wspecafu@pwssc.org

**Form Date:** Oct 20, 2008