IBEW LOCAL 280 MARKET RECOVERY PROGRAM

MATERIAL STIPEND BILLING STATEMENT

THIS FORM MUST BE SUBMITTED MONTHLY

MRP #:		CONTRACTOR NAME:	
JOB NAME:		FORM COMPLETED BY:	
Date	% of Work Complete		Dollar Amount Billed *
Total:			
Material Stipend requests may not exceed twenty percent (20%) in a month unless the duration of the job is less than five months in duration. The Union reserves the right to revoke, cancel, or terminate any award under the Market Recovery Program where a request for reimbursement has been made for materials used on a different project or for materials used on the project that are not included in the original contract (extras).			
Is the project completed? Yes No			
Submitted By:			
XSignature	Print Name)	/
This Report Must Be Completed and Mailed To: IBEW Local 280 P.O. Box404 Tangent, OR 97389			

^{*} Documentation of material expenditures are to be attached.