

<b>NEVADA DIVISION OF EMERGENCY MANAGEMENT RENTED-LEASED EQUIPMENT RECORD</b>						PAGE _____ OF _____			
<b>APPLICANT NAME</b>					<b>PROJECT #</b>		<b>PCA #</b>		
<b>LOCATION/SITE</b>					<b>CATEGORY</b>		<b>PERIOD COVERING _____ TO _____</b>		
<b>DESCRIPTION OF WORK PERFORMED</b>									
TYPE OF EQUIPMENT Indicate size, capacity, horsepower make and model as appropriate	DATE USED	RATES PER HOUR	HOURS USED	TOTAL COST	VENDOR	INVOICE NO.	DATE PAID	AMOUNT PAID	CHECK #
		W/OPR							
		W/OUT OPR							
		W/OPR							
		W/OUT OPR							
		W/OPR							
		W/OUT OPR							
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		W/OPR							
		W/OUT OPR							
		W/OPR							
		W/OUT OPR							
GRAND TOTAL									
<b>I CERTIFY THAT THE ABOVE INFORMATION WAS OBTAINED FROM PAYROLL RECORDS, INVOICES, OR OTHER DOCUMENTS THAT ARE AVAILABLE FOR AUDIT.</b>									
<b>CERTIFIED</b>					<b>TITLE</b>			<b>DATE</b>	