

ATTACHMENT 4

Contractor Weekly Status Report and Timesheet

Name: _____

Week Ending: _____

Company: _____

Total Hours: _____

ACHIEVEMENTS:

[List the activities or deliverables that you completed this week, and the hours associated with each, using the table below.]

Date	Project	Activities Summary	Hours	Location*

If location was not USAC offices, please indicate here.

CHALLENGES/PROBLEMS

[List any challenges or problems that may affect your ability to complete your assigned tasks, and any solutions you propose to address those challenges or problems.]

ALTERNATIVE STRATEGIES:

[If the project schedule or scope is at risk, list any alternative strategies you are exploring.]

By signing this timesheet, I certify the information above is true and correct.

CONTRACTOR SIGNATURE:

Offeror Contact Signature: _____ Date Signed: _____

Printed Name and Title of Contact: _____

UNIVERSAL SERVICE ADMINISTRATIVE CO SIGNATURE:

USAC Contracting Official Signature: _____ Date Signed: _____

Printed Name and Title of Contact: _____