MASSACHUSETTS PORT AUTHORITY

Breakout of Eligible and Ineligible Costs for the FAA Grants

FAA Grant No.: _____

MPA Contract No.: _____ Finance Code: _____ Partial Requisition No. _____

Contract Title: _____ Contractor: _____ Period Beginning: _____

Date of Notice to Proceed: _____ Address: _____ Period Ending: _____

Original Contract Completion Date: _____ _____ Original Days Allowed: _____

Current Contract Completion Date: _____ Telephone No.: _____ Days Extended: _____

Contract Award Amount _____ Fax No.: _____ Total Days Allowed: _____

Current Adjusted Contract Amount: _____ Sheet No _____ of _____ Percent Work Completed: _____

A	B	C	D	E	F	G	H
Item No.	**Item Description**	**Unit**	**Unit Bid Price**	**Qty. to Date**	**Amount Earned to Date**	**Eligible for Grant**	**Ineligible for Grant**
					(D x E)		**(F – G)**
Total							

NOTE: Attach backup showing derivation of percent of FAA participation. Prepared By: _____

Distribution: Project Manager, Accounting (2), Consultant, Project File

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