

## ATTACHMENT 4 - CONTRACT DISCREPANCY REPORT FORM

CONTRACT DISCREPANCY REPORT		
1. CONTRACT NUMBER		2. REPORT NUMBER FOR THIS DISCREPANCY
3. TO: <i>(Contracting Officer)</i>		4. FROM: <i>(Name of COR)</i>
5. DATES		
a. CDR PREPARED	b. RETURNED BY CONTRACTOR:	c. ACTION COMPLETE
6. DISCREPANCY OR PROBLEM <i>(Describe in detail. Include reference to PWS Directive; attach continuation sheet if necessary.)</i>		
7. SIGNATURE OF COR		Date:
8. SIGNATURE OF CONTRACTING OFFICER		Date:
9a. TO <i>(Contracting Officer)</i>	9a. FROM <i>(Contractor)</i>	
10. CONTRACTOR RESPONSE AS TO CAUSE, CORRECTIVE ACTION AND ACTIONS TO PREVENT RECURRENCE. <i>(Cite applicable quality control program procedures or new procedures. Attach continuation sheet(s) if necessary.)</i>		
11. SIGNATURE OF CONTRACTOR REPRESENTATIVE		Date:

12. GOVERNMENT EVALUATION. *(Acceptance, partial acceptance, reflection. Attach continuation sheet(s) if necessary.)*

13. GOVERNMENT ACTIONS *(Acceptance, partial acceptance, reflection. Attach continuation sheet(s) if necessary.)*

14. CLOSE OUT

	NAME	TITLE	SIGNATURE	DATE
CONTRACTOR NOTIFIED				
COR				
CONTRACTING OFFICER				