

**CONTRACT PERFORMANCE REPORT
FORMAT 1 - WORK BREAKDOWN STRUCTURE**

DOLLARS IN _____

Form Approved
OMB No. 0704-0188

The public reporting burden for this collection of information is estimated to average 3.1 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to the Department of Defense, Executive Services Directorate (0704-0188). Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.
PLEASE DO NOT RETURN YOUR FORM TO THE ABOVE ORGANIZATION. SUBMIT COMPLETED FORMS IN ACCORDANCE WITH CONTRACTUAL REQUIREMENTS.

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|------------------------------------|--|--------------------|----------------|---|--|-------------------------|--|
| 1. CONTRACTOR | | 2. CONTRACT | | 3. PROGRAM | | 4. REPORT PERIOD | |
| a. NAME | | a. NAME | | a. NAME | | a. FROM (YYYYMMDD) | |
| b. LOCATION (Address and ZIP Code) | | b. NUMBER | | b. PHASE | | b. TO (YYYYMMDD) | |
| | | c. TYPE | d. SHARE RATIO | c. EVMS ACCEPTANCE <input type="checkbox"/> NO <input type="checkbox"/> YES (YYYYMMDD) | | | |

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|-------------------------|--------------------|---------------------------------------|----------------------|-----------------|--------------------|---------------------|--------------------------|-------------------------------|
| 5. CONTRACT DATA | | | | | | | | |
| a. QUANTITY | b. NEGOTIATED COST | c. EST. COST AUTHORIZED UNPRICED WORK | d. TARGET PROFIT/FEE | e. TARGET PRICE | f. ESTIMATED PRICE | g. CONTRACT CEILING | h. EST. CONTRACT CEILING | i. DATE OF OTB/OTS (YYYYMMDD) |

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|--|---------------------------------------|--------------------------|--------------|--|--|---------------------------|--|
| 6. ESTIMATED COST AT COMPLETION | | | | 7. AUTHORIZED CONTRACTOR REPRESENTATIVE | | | |
| | MANAGEMENT ESTIMATE AT COMPLETION (1) | CONTRACT BUDGET BASE (2) | VARIANCE (3) | a. NAME (Last, First, Middle Initial) | | b. TITLE | |
| a. BEST CASE | | | | c. SIGNATURE | | d. DATE SIGNED (YYYYMMDD) | |
| b. WORST CASE | | | | | | | |
| c. MOST LIKELY | | | | | | | |

| 8. PERFORMANCE DATA | | | | | | | | | | | | | | | | |
|--|--------------------|--------------------|--------------------------------|--------------|----------|--------------------|--------------------|--------------------------------|---------------|-----------|---------------------------|-------------------------|-------------|---------------|----------------|---------------|
| ITEM (1) | CURRENT PERIOD | | | | | CUMULATIVE TO DATE | | | | | REPROGRAMMING ADJUSTMENTS | | | AT COMPLETION | | |
| | BUDGETED COST | | ACTUAL COST WORK PERFORMED (4) | VARIANCE | | BUDGETED COST | | ACTUAL COST WORK PERFORMED (9) | VARIANCE | | COST VARIANCE (12a) | SCHEDULE VARIANCE (12b) | BUDGET (13) | BUDGETED (14) | ESTIMATED (15) | VARIANCE (16) |
| | WORK SCHEDULED (2) | WORK PERFORMED (3) | | SCHEDULE (5) | COST (6) | WORK SCHEDULED (7) | WORK PERFORMED (8) | | SCHEDULE (10) | COST (11) | | | | | | |
| a. WORK BREAKDOWN STRUCTURE ELEMENT | | | | | | | | | | | | | | | | |
| b. COST OF MONEY | | | | | | | | | | | | | | | | |
| c. GENERAL & ADMINISTRATIVE | | | | | | | | | | | | | | | | |
| d. UNDISTRIBUTED BUDGET | | | | | | | | | | | | | | | | |
| e. SUBTOTAL (Performance Measurement Baseline) | | | | | | | | | | | | | | | | |
| f. MANAGEMENT RESERVE | | | | | | | | | | | | | | | | |
| g. TOTAL | | | | | | | | | | | | | | | | |

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|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| 9. RECONCILIATION TO CONTRACT BUDGET BASE | | | | | | | | | | | | | | | | |
| a. VARIANCE ADJUSTMENT | | | | | | | | | | | | | | | | |
| b. TOTAL CONTRACT VARIANCE | | | | | | | | | | | | | | | | |