Attachment 9B - Contract Discrepancy Report

CONTRACT DISCREPANCY REPORT			. CONTRACT NUMBER
Report Number:			Date:
2. TO: (Contractor and Manager Name)		3. FROM: (Name of COR)	
DATES			
CONTRACTOR NOTIFICATION	CONTRACTOR RESPONSE DUE BY	RETURNED BY CONTRACTOR	ACTION COMPLETE
4. DISCREPANCY OR PROBLEM (Describe in Detail: Include reference in PWS / SOW or Directive: Attach continuation sheet if necessary.)			
5. SIGNATURE OF CONTRACTING OFFICER'S REPRESENTATIVE (COR)			
6. TO: (<i>COR</i>)		7. FROM: (Contractor)	
8. CONTRACTOR RESPONSE AS TO CAUSE, CORRECTIVE ACTION AND ACTIONS TO PREVENT RECURRENCE. ATTACH CONTINUATION SHEET IF NECESSARY. (Cite applicable Q.A. program procedures or new A.W. procedures.)			
9. SIGNATURE OF CONTRACTOR REPRESENTATIVE			10. DATE
11. GOVERNMENT EVALUATION OF CONTRACTOR RESPONSE/RESOLUTION PLAN: (Acceptable response/plan, partial acceptance of response/plan, rejection: attach continuation sheet if necessary)			
12. GOVERNMENT ACTIONS (Payment withholding, cure notice, show cause, other.)			
	CLOSE O		
CONTRACTOR NOTIFIED	NAME AND TITLE	SIGNATURE	DATE
COR			
CONTRACTING OFFICER			