SECURITY CLASSIFICATION_____

	COST DATA SUMMARY REPORT	*Form Approved* *OMB No. 0704-0188*

1. PROGRAM

a. MDAP:

b. PHASE:

2. PRIME MISSION PRODUCT

3. CONTRACTOR TYPE *(X one)*

☐ PRIME/ASSOCIATE

☐ DIRECT-REPORTING SUBCONTRACTOR

4. NAME/ADDRESS *(Include ZIP Code)*

5. APPROVED PLAN NUMBER

6. CUSTOMER *(Direct-Reporting Subcontractor Use Only)*

7. CONTRACT TYPE

8. CONTRACT PRICE

9. CONTRACT CEILING

10. TYPE ACTION

a. CONTRACT NO.:   c. SOLICITATION NO.:

b. LATEST MODIFICATION: d. NAME:

11. PERIOD OF PERFORMANCE

a. START DATE *(YYYYMMDD)*:

b. END DATE *(YYYYMMDD)*:

12. APPROPRIATION

☐ RDT&E

☐ PROCUREMENT

☐ O&M

13. REPORT CYCLE *(X one)*

☐ INITIAL

☐ INTERIM

☐ FINAL

14. SUBMISSION NUMBER

15. RESUBMISSION NUMBER

16. REPORT AS OF *(YYYYMMDD)*

17. NAME *(Last, First, Middle Initial)*

18. DEPARTMENT

19. TELEPHONE NUMBER *(Include Area Code)*

20. EMAIL ADDRESS

21. DATE PREPARED *(YYYYMMDD)*

WBS ELEMENT CODE A	WBS REPORTING ELEMENTS B	NUMBER OF UNITS TO DATE C	COSTS INCURRED TO DATE			NUMBER OF UNITS AT COMPLETION G	COSTS INCURRED AT COMPLETION		
			NONRECURRING D	RECURRING E	TOTAL F		NONRECURRING H	RECURRING I	TOTAL J

22. REMARKS

DD FORM 1921, APR 2007   PREVIOUS EDITION IS OBSOLETE.   SECURITY CLASSIFICATION_____