Clear Form

Michigan Department
of Transportation
0411 (03/2023)

______________________________ MUNICIPALITY

____________________________________ COUNTY ROAD COMMISSION

STATE TRUNKLINE MAINTENANCE MATERIAL REPORT

Information required by Act 17 of 1925. Failure to supply this information would result in non-payment for services.

FOR THE PERIOD OF ____________________ TO ____________________

ITEM	PURCHASED FROM	QUANTITY	UNIT PRICE	AMOUNT	HANDLING CHARGE	TOTAL AMOUNT	DISTRIBUTION			VOUCHER NUMBER
							CONTROL SECTION NUMBER	ACCOUNTING TEMPLATE	AMOUNT	

SUMMARY OF DISTRIBUTION											
SECTION NUMBER	TOTAL AMOUNT										