

## HICS FORM 256 - PROCUREMENT SUMMARY REPORT

<b>1. Incident Name</b>				<b>2. Operational Period</b> (#                    ) DATE: FROM: _____ TO: _____ TIME: FROM: _____ TO: _____				
<b>3. Purchases</b>								
	P.O. / REFERENCE NUMBER	DATE / TIME	ITEM / SERVICE	VENDOR	DOLLAR AMOUNT	REQUESTOR NAME / DEPT (PLEASE PRINT)	APPROVED BY (PLEASE PRINT)	RECEIVED DATE / TIME
1								
	COMMENTS							
2								
	COMMENTS							
3								
	COMMENTS							
4								
	COMMENTS							
5								
	COMMENTS							
6								
	COMMENTS							
7								
	COMMENTS							
8								
	COMMENTS							
9								
	COMMENTS							
<b>4. Prepared by</b>								
				PRINT NAME: _____		SIGNATURE: _____		
				DATE/TIME: _____		FACILITY: _____		



**Purpose:** Summarizes and tracks procurements  
**Origination:** Hospital Incident Management Team (HIMT) personnel as directed by the Procurement Unit Leader  
**Copies to:** Finance/Administration Section Chief and Documentation Unit Leader

## HICS FORM 256 - PROCUREMENT SUMMARY REPORT

**PURPOSE:** The HICS 256 - Procurement Summary Report summarizes and tracks procurements. It may be completed by operational period or for the whole incident duration.

**ORIGINATION:** Completed by the Hospital Incident Management Team (HIMT) personnel as directed by the Procurement Unit Leader.

**COPIES TO:** Distributed to the Finance/Administration Section Chief and the Documentation Unit Leader.

**NOTES:** If additional pages are needed, use a blank HICS 256 and repaginate as needed. Additions may be made to the form to meet the organization's needs.

NUMBER	TITLE	INSTRUCTIONS
1	<b>Incident Name</b>	Enter the name assigned to the incident.
2	<b>Operational Period</b>	Enter the start date (m/d/y) and time (24-hour clock) and end date and time for the operational period to which the form applies.
3	<b>Purchases</b>	
	<b>P.O. / Reference number</b>	Enter purchase order or other acquisition reference number used by the facility.
	<b>Date / Time</b>	Enter date (m/d/y) and time prepared (24-hour clock).
	<b>Item / Service</b>	Enter the item or the service purchased.
	<b>Vendor</b>	Enter the name of the vendor.
	<b>Dollar Amount</b>	Enter the dollar amount spent.
	<b>Requestor Name / Department</b>	Enter the requestor's name and department.
	<b>Approved By</b>	Enter whom the purchase was approved by.
	<b>Received Date / Time</b>	Enter date (m/d/y) and time (24-hour clock) the item or service was received.
4	<b>Prepared by</b>	Enter the name and signature of the person preparing the form. Enter date (m/d/y), time prepared (24-hour clock), and facility.