

TRANSMITTAL FORM

Transmittal No: _____

Project Name: _____

Date: _____

UNMC Project No.: _____

Design A/E Firm: _____

Name: _____

Address: _____

City/State/Zip: _____

Phone: _____

Fax: _____

Project No: _____

SHOP DRAWINGS
 PRODUCT DATA
 SAMPLES

Contractor: _____

The Contractor hereby approves this submittal and has complied with all requirements of the General Conditions and other requirements of the Contract Documents.

Name: _____

Address: _____

City/State/Zip: _____

Phone: _____

Fax: _____

Contractor Signature: _____

Spec. Section & Paragraph No.	Description of Item	Manufacturer	*	Action Taken

*Action recommended by A/E Firm

The above are returned with Action as designated in accordance with the following Legend:

- A - REVIEWED, NO EXCEPTIONS TAKEN
- B - REVIEWED, EXCEPTIONS TAKEN AS NOTED
- C - REVIEWED, REVISE AND RESUBMIT
- D - RECEIPT ACKNOWLEDGED - NO ACTION TAKEN
- E - REJECTED

BY: _____

DATE: _____

BY: _____

DATE: _____

UNMC FM&P