

Nebraska Department of Transportation Highway Safety Office

Child Safety Seat Inspection Station

Inventory Status Report

FY 201_

Organization: _____

Project Manager: _____

Address: _____

City/State/Zip: _____

Telephone: _____

Email: _____

Inventory Month	Inventory on 1 st of the month	Inventory End of month	Seats Checked	Seats Distributed	Seats Purchased
October					
November					
December					
January					
February					
March					
April					
May					
June					
July					
August					
September					
Total for Current Fiscal Year					

Report submitted by:

Signature of Authorized Representative
Child Safety Seat Inspection Station

Print or Type Name

Return completed form to:

Simera Reynolds
NDOT Highway Safety Office
P.O. Box 94612
Lincoln, Nebraska 68509-4612

Phone: (402) 471-2017
FAX: (402) 471-3865
Email: simera.reynolds@nebraska.gov