U.S. DEPARTMENT OF ENERGY
OFFICE OF CIVILIAN RADIOACTIVE WASTE MANAGEMENT
OFFICE OF QUALITY ASSURANCE

AUDIT REPORT

OF THE

OFFICE OF CIVILIAN RADIOACTIVE WASTE MANAGEMENT

WASHINGTON D.C.

AUDIT NUMBER YM-ARC-95-15
JULY 10 THROUGH 14, 1995

Prepared by: _____ **Date:** 07/27/95
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Approved by: _____ **Date:** 7/27/95
Donald G. Horton
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1.0 EXECUTIVE SUMMARY

As a result of Quality Assurance (QA) Audit YM-ARC-95-15, the audit team determined that the Office of Civilian Radioactive Waste Management (OCRWM) and its direct support contractors are satisfactorily implementing an effective QA program in accordance with the U.S. Department of Energy (OCRWM) Quality Assurance Requirements and Description (QARD), DOE/RW-0333P, Revision 2, and OCRWM implementing procedures for QA Program Elements 1.0, 2.0, 4.0, 5.0, 6.0, 7.0, 16.0, 17.0, 18.0, and Supplement I, and Appendices A and B.

The audit team identified eight deficiencies during the audit that resulted in the issuance of four Performance Reports (PRs). YMQAD-95-P-001 related to a lack of revision to QA Controls Document. YMQAD-95-P-002 related to procedures not identifying requirements of QARD Supplement I. YMQAD-95-P-003 relates to a procurement document not including certain information. YMQAD-95-P-004 relates to a problem with humidity and temperature controls for the QA records area. Four of the eight deficiencies identified by the audit team were corrected prior to the postaudit meeting, as described in Section 5.5.2 of this report. Additionally, there were two recommendations resulting from the audit, as described in Section 6.0 of this report.

2.0 SCOPE

The audit was conducted to evaluate the adequacy of, compliance to, and the effectiveness of the OCRWM QA Program, as described in the QARD and the OCRWM implementing procedures. OCRWM support organizations included in the scope of the audit were Energy Information Administration (EIA)/Z-Inc., Weston, and ASTA Engineering.

A follow-up of one previously issued Corrective Action Request (CAR) was included in the scope of this audit to determine the effectiveness of OCRWM corrective actions.

The QA program elements/requirements evaluated during the audit, in accordance with the approved audit plan, are as follows:

QUALITY ASSURANCE PROGRAM ELEMENTS

- 1.0 Organization
- 2.0 Quality Assurance Program
- 4.0 Procurement Document Control
- 5.0 Implementing Documents
- 6.0 Document Control
- 7.0 Control of Purchased Items and Services
- 16.0 Corrective Action
- 17.0 Quality Assurance Records
- 18.0 Audits

Supplement I, Software
Appendix A, High Level Radioactive Waste Form Production
Appendix B, Transportation

The following QA program elements/requirements were not reviewed during the audit because OCRWM has no activity for which these elements apply:

3.0 Design Control
8.0 Identification and Control of Items
9.0 Control of Special Processes
10.0 Inspection
11.0 Test Control
12.0 Control of Measuring and Test Equipment
13.0 Handling, Storage, and Shipping
14.0 Inspection, Test, and Operating Status
15.0 Nonconformances
Supplement II, Sample Control
Supplement III, Scientific Investigations
Supplement IV, Field Surveying

TECHNICAL AREAS

The technical scope of the audit included the following area, in accordance with the approved audit plan:

- Software controls implemented by EIA/Z-Inc. for the International Nuclear Model Personnel Computer (PCINM) and Form RW-859, Nuclear Fuel data.

3.0 AUDIT TEAM

The following is a list of audit team members, and their assigned areas of responsibility.

Name/Title/Organization	QA Program Elements/Requirements or Technical Area
Richard L. Maudlin Audit Team Leader (ATL) Yucca Mountain Quality Assurance Division (YMQAD)	2.0 (Management Assessment)
Patrick V. Auer, Auditor, YMQAD	2.0, 16.0, and 18.0
Patout H. Cotter, Auditor, YMQAD	2.0, 5.0, 6.0 and 16.0

Name/Title/Organization	QA Program Elements/Requirements, or Technical Area
Vance A. Cannaday, Auditor, Headquarters Quality Assurance Division (HQQAD)	17.0, and Appendices A & B
Norman C. Frank, HQQAD	1.0, 2.0, 5.0, 6.0, 16.0, and 17.0
Emily S. Reiter, Auditor, HQQAD	1.0, 2.0, 4.0, and 7.0
John R. Matras, Auditor/Technical Specialist, YMQAD	Supplement I, EIA/Z-Inc. Software

4.0 AUDIT MEETINGS AND PERSONNEL CONTACTED

The preaudit meeting was held at OCRWM Headquarters in Washington, D.C. on July 10, 1995. A daily debriefing and coordination meeting was held with OCRWM Headquarters management and staff, and daily audit team meetings were held to discuss issues and potential deficiencies. The audit was concluded with a postaudit meeting held at OCRWM Headquarters in Washington, D.C. on July 14, 1995. Personnel contacted during the audit are listed in Attachment 1. The list includes those who attended the preaudit and postaudit meetings.

5.0 SUMMARY OF AUDIT RESULTS

5.1 Program Effectiveness

The audit team concluded that, in general, the OCRWM QA Program is adequate and is being satisfactorily implemented for the scope of this audit. Individually, QA Program Elements 1.0, 2.0, 4.0, 5.0, 6.0, 7.0, 16.0, 17.0, 18.0, and Supplement I, and Appendices A and B are satisfactorily being implemented.

5.2 Stop Work or Immediate Corrective Actions Taken

There were no Stop Work Orders, immediate corrective actions or related additional items resulting from this audit.

5.3 QA Program Audit Activities

A summary table of audit results is provided in Attachment 2. The details of the audit evaluation, along with the objective evidence reviewed, are contained within the audit checklists. The checklists are kept and maintained as QA Records.

5.4 Technical Audit Activity

The technical activity covered during the audit was software utilized by EIA/Z-Inc. in activities related to the PCINM and Form RW-859, Nuclear Fuel data.

The evaluation included the technical adequacy of the above task, and the adequacy of the following as applicable:

1. Technical qualifications of the technical personnel.

2. Understanding of procedural requirements as they pertain to the related work.

3. Adequacy of technical procedures.

Z-Inc. Software Controls for the International Nuclear Model Personal Computer and Form RW-859, Nuclear Fuel Data.

Two software applications were evaluated during the audit. One was the Form RW-0859, Nuclear Fuel Data Survey, a computer resident database system that manages data provided to the EIA by nuclear utilities on a periodic basis. The other was the International Nuclear Model Personal Computer and Disaggrete Spent Fuel Forecasting Program (PCINM/DISAG) a linear-calculation application that projects into the future the capacity and burnup of nuclear facilities in the United States and foreign countries. Both data management systems were robust due to the numerous reviews performed throughout the life cycle of the data as described later in the evaluation.

RW-0859 data are provided to EIA in both hard copy and electronic format from nuclear utilities in response to an EIA request. The data is received from commercial nuclear power plants that are in operation, under construction, or being planned, from all owners of spent nuclear fuel or irradiated fuel, and from all those who possess irradiated nuclear fuel from commercial nuclear power reactors. The database is baselined yearly in an electronic and hard copy format. The EIA Survey Report is titled "Spent Nuclear Fuel Discharges from US Nuclear Reactor (YEAR)".

These reports are available to the general public. Data from these reports are used as input to the Unified Database, PCINM/DISAG (discussed in this report), and the Characteristics Database.

Data in the report is technical and administrative in nature and includes near-term estimates of spent fuel, reactor name, fuel cycle, fuel assembly number, assembly type, weight burnup rate, and if defective or not.

PCINM/DISAG contains linear calculations. PCINM/DISAG produces annual summary reports for several reactor categories over a user-specified projection period. These reports include annual generation of electricity measured in gigawatthours-electric (GWhe), annual and cumulative requirements for U_3O_8, annual requirements for enrichment services, annual discharges of spent fuel, and total spent fuel discharges less the spent fuel withdrawn for processing. The uranium concentrate requirements are reported as requirements for U_3O_8 or "yellow cake" measured in millions of pounds; the enrichment service requirements are measured in separate work units; the discharges of spent fuel are expressed in metric tons of initial heavy metal; the annual electrical generation is measured in gigawatthours; and the on-line and year-end capacities are measured in gigawatts. The projected discharges of spent fuel exclude fuel removed from the reactor that is designated for reinsertion.

To reconcile the differences between the PCINM and RW-0859 Nuclear Fuel Data Survey forecasts, DISAG compares the reactor-specific projections made by the utilities to the aggregate PCINM projections. The comparison methodology preserves the PCINM aggregate projections of annual spent fuel discharges and electric generation by adjusting the reactor-specific fuel burnup levels provided by the utilities. The methodology also preserves the nature and shape of the burnup distributions projected by the utilities. These projections appear in the annual EIA's publication "World Nuclear Capacity and Fuel Cycle Requirements."

The inputs to PCINM are Form RW-0859 data and fuel diets calculated using a statistical analysis technique developed by Dave Andress, an EIA consultant. The calculations used by the PCINM model are documented in the PCINM model manual. These calculations were extracted from the mainframe version of the model and coded into the Clipper database. The results of the PCINM were then compared with the mainframe version for three years in making yearly projections. After three years it was felt the PCINM was reliable to use directly without comparison to the mainframe version. Other methods used to verify and validate the output of PCINM were hand calculations and a four unit model. The final check is performed by an independent EIA agency. As to date the only document approved in accordance with the QA program is the Life Cycle Plan for both software applications. No work to the Life Cycle Plan was identified during the audit.

A number of sources are routinely reviewed to maintain the Form RW-859 and PCINM/DISAG and validate the information contained in the reports. These various data sources document new reactor orders, construction schedules,

reactor cancellations, and cessation of operations. Status changes are determined from a review of different industry and government sources, Nuclear Regulatory Commission (NRC) and Electric Power Research Institute (EPRI) publications, and through a review of each utility's previous year's survey submission. Specific sources reviewed include:

- Form EIA-254, "Semiannual Report on Status of Reactor Construction"
- "Name-and-Address Contracts Listing," an OCRWM listing of standard contracts for nuclear reactors with low- or full-power licenses
- Form RW-859 Mailing Label File, updated annually with new respondent information
- Monthly "Standard Reports of Remittance Advice," including the Form NWPA-830G, Appendix G to Annex A
- Form EIA-759, "Monthly Power Plant Report"
- NRC Operating Data Reports and Operations Center Plant Status Report
- "NRC Information Digest," 1995 edition, published by the NRC Office of the Controller
- "Electricity from Nuclear Energy," 1992-1993 edition, published by the Nuclear Energy Institute (formerly the U.S. Council for Energy Awareness)
- "Nuclear News" magazine, Semiannual List of Scheduled Outages at U.S. Nuclear Power Plants
- Other nuclear industry literature, including the publications, "Nuclear Plant Journal," "Nuclear Waste News," "Nucleonics Week," and Radwaste Magazine"

PCINM/DISAG results are statistical in nature. The predicted results are affected by such factors as major-early-retirement of reactors, reactor upgrades, license renewal, etc. If these reviews are intended to be a quality affecting process in the future, then these reviews need to be formalized which includes the establishment of criteria, and documenting the review process and results. The technical reviews need to address the intended use of the data and the reviews performed by a degreed nuclear professional. Also, some of the data like reactor capacity may not need to be under the QA program. These reviews do not relieve the users of this information from evaluating the adequacy of the data for the intended use.

Personnel possessed an adequate understanding of the quality procedure applied to the development of the life cycle plan and were technically competent to perform the work. There were no technical procedures associated with this work.

Demonstrations were run on both RW-0859 and PCINM/DISAG. The demonstrations were run by the auditor. The user manuals were easy to follow and the displays were menu driven making it very easy to use. The information presented was what was expected. No discrepancies were identified.

Overall RW-0859 and PCINM/DISAG are robust data management systems. The robustness is a credit to the numerous checks, reviews, verifications, and validations throughout the life cycle of the data. The data management systems implemented older computer system technologies but this did not seem to affect the reliability of the presented data. In fact RW-0859 had not changed in the last four years. Finally, demonstrations of both managements systems revealed that they were easy to use, with menu driven displays, and the user instructions were easy to follow.

5.5 Summary of Deficiencies

The audit team identified eight deficiencies during the audit for which four PRs were issued. Four of the eight deficiencies were corrected prior to the post audit meeting. Additionally, there were two recommendations resulting from the audit, which are detailed in Section 6.0 of this report.

Synopses of deficiencies documented as PRs, deficiencies corrected during the audit, and follow-up of previously identified CARs are detailed below. The PRs have been issued to the OCRWM responsible individuals in accordance with AP-16.1Q, Revision 0.

5.5.1 Performance Reports (PRs)

YMQAD-95-P-001

Quality Assurance Procedure (QAP) 2.3, Revision 1, Paragraph 6.6.2 states that revisions to the QA Controls Document (QACD) shall be accomplished in accordance with Subsections 6.1 through 6.5. Contrary to this requirement, no revision to the QACD was prepared after the decision was made that the RW-0859 and PCINM work would be done under the QARD requirements.

YMQAD-95-P-002
QARD, Section 5.0 requires that work shall be performed according to controlled implementing documents. Also Supplement I requires systems to be established for Configuration Management, Media Control, Defect Reporting and Resolution, and Use of Software. Contrary to these requirements, the implementing document for the control of EIA software, HLP-SI.1Q, does not address QARD Supplement I requirements for Software Configuration Management, Defect Reporting and Resolution, Media Control, and Use of Software.

YMQAD-95-P-003
Headquarters Line Procedure (HLP)-7.1Q, Revision 0, Attachment 9.2 requires a statement to be added to the scope of work when it is not subject to QARD requirements as follows: "THE WORK [or tasks] described are not subject to OCRWM quality assurance requirements." Justification shall be provided that the work does not meet the criteria for QARD applicability. Contrary to this requirement, Contract No. DEAC01-94-RW-00261, Statement of Work does not contain the required statement or justification for work that does not meet the criteria for QARD applicability.

YMQAD-95-P-004
HLP-17.2Q, Revision 0, Paragraph 6.4.2 requires that the Quality Records Center (QRC) store QA Records to prevent damage from temperature, humidity, and pressure. QARD, Revision 2, Section 5.0, Subsection 5.2.2.D requires implementing documents to include the following information, qualitative or quantitative acceptance criteria sufficient for determining that activities are satisfactorily accomplished.... Contrary to these requirements, the QRC QA Records Vault does not have provisions to prevent damage to QA Records from temperature, humidity, and pressure. In addition, there are no acceptance parameters for the storage of records described within the procedure.

5.5.2 Deficiencies Corrected During the Audit

Deficiencies which are considered isolated in nature and only requiring remedial action can be corrected during the audit. The following deficiencies were identified and corrected during the audit:

1. HLP-2.1Q, Revision 0, Paragraph 5.4.1e requires the supervisor to attach objective evidence of verification that supports the stated education and experience.

Contrary to this requirement, the supporting documentation for two individuals did not state that the minimum experience requirement had been met, nor was there any way to determine the years of experience of the two individuals from the documentation provided. This condition was corrected through the issuance of a memorandum clarifying the experience of at the time the Position Qualification Statement was signed.

2. HLP-7.1Q, Revision 0, Paragraph 7.1 requires procurement documents which identify the scope of work, technical and QA requirements, and proposal evaluation statements to be designated as Lifetime QA Records. During the review of various Work Authorization Directives and associated memorandums and Document Review Records (DRRs) contained in Quality Records Package (QRP) 94-0890.00, the records were identified as non-permanent. Prior to the completion of the audit, the records in question were corrected to reflect "Lifetime QA Records"

3. HLP-17.1Q, Revision 0, Paragraph 6.6b requires that "special processed" QA records be controlled by providing two copies to the QRC. Contrary to this requirement, the tapes for RW-0859 data have not been sent as two copies to the QRC. Prior to completion of the audit, two copies of Final Form RW-0859 data disks for 1992 and 1993 were submitted to the QRC. A new table of contents was prepared for QRP-93-0748.00.

4. QAP 18.2, Revision 6, Paragraph 7.0 requires that documents listed in Subsections 7.1 and 7.2 be collected and maintained as QA Records. Contrary to this requirement, Audit Report and Audit Plan for Audit HQ-ARP-95-01 have not been transmitted to the records center. Prior to completion of the audit, a copy of the audit report and audit plan were formally transmitted to the QRC

5.5.3 Follow-up of Previously Identified CARs

CAR YM-94-060

This CAR identified deficiencies related to position descriptions and position qualifications not being properly documented. The position descriptions and qualification packages reviewed during this audit were found satisfactory. Actions taken as a result of this CAR are considered to be effective in preventing recurrence.

6.0 RECOMMENDATIONS

The following recommendations resulted from the audit and are presented for consideration by OCRWM management.

1. It is recommended that additional surveillances be performed in all areas for which HQQAD has a responsibility for evaluation of quality affecting activities (i.e., RW-30, RW-40, EIA, Weston, Environmental Managemnt (EM), etc.). This will assure comprehensive coverage of all quality affecting work being performed by OCRWM and support contractor personnel.

2. A log should be maintained which lists planned surveillances, in-process, or complete in order to better track completion of the surveillance and associated reports.

7.0 LIST OF ATTACHMENTS

Attachment 1: Personnel Contacted During the Audit
Attachment 2: Summary Table of Audit Results

ATTACHMENT 1

Personnel Contacted During the Audit

Name	Organization/Title	Preaudit Meeting	Contacted During Audit	Postaudit Meeting
Andress, D.	EIA, Industry Specialist		X	
Andress, A.	EIA, Programmer		X	
Bauer, R	Weston, Program Mgr	X		
Baumbach, R	HQAD/QATSS, Sr. QA Specialist		X	X
Booth, W	Weston, QA Manager	X	X	X
Brandt, H.	DOE/RW-15, Director, Administration		X	
Bronushas, D.	Z-Inc., Programmer/Data Analyst		X	
Carlson, J.	DOE/RW-37, Director, Systems Eng.	X	X	X
Clark, R.	DOE/RW-3.1, Division Director	X	X	
Desell, L.	DOE/RW-44/45, Waste Ops Div. Dir.	X	X	X
Diaz, M.	DOE/YMQAD, General Engineer	X		X
Dreyfus, D.	DOE/RW-1, Director, OCRWM		X	
Ellis-Brown, D.	TRW, Records Control Specialist		X	
George, J.	HQAD/QATSS, Verification Lead	X	X	
Gomberg, S.	DOE/RW-37, Team Leader		X	
Hallaren, T.	Z-Inc., Programmer		X	
Hanauer, S.	DOE/RW, Sr. Technical Advisor			X
Harris, M	Weston, QA Assistant	X		X
Houggins, K.	Z-Inc., Data Analyst		X	
Jackson, D.	DOE/EIA, QA Analyst		X	
Jackson, T.	HQAD/QATSS, Technical Admin.		X	
Johnson, B.	DOE/RW-14, Contracting Officer		X	
Kumar, P.	DOE/RW-44, General Engineer		X	
Leahy, J.	DOE/RW-14, Contract Analyst	X	X	
Lentz, H.	HQAD/QATSS, Sr QA Specialist		X	
Liggett, W.	DOE/EIA, Analyst		X	
Little, C.	EIA/Z-Inc., QA Assistant	X	X	X
McCarthy, W.	Z-Inc., Sr. Data Analyst		X	
Minning, R.	DOE/RW-2, Special Assistant		X	
Murthy, R.	DOE/RW-3.1, QA Specialist	X	X	X
Nikodem, D.	EIA-531, QA Coordinator	X	X	X
Palabrica, R.	ASTA Engineering, Program Manager	X		X
Quan, C.	DOE/RW-37, Physical Scientist		X	
Roccapriore, G.	DOE/OCRWM, Training Officer		X	
Richardson, P.	HQAD/QATSS, Technical Admin.		X	
Ruffin, G.	TRW, QRC Manager		X	
Senderling, M.	DOE/RW-37, General Engineer	X		X
Shelor, D.	DOE/RW-40, Div. Director OWAST	X	X	X

Thorpe, J.	EIA/Z-Inc., Program Manager	X	X	
Truong, T.	DOE/RW-37, Systems Engineer		X	
Van, T.	DOE/RW-37, Team Leader, Conf. Mgt		X	
Wagner, L.	HQAD/QATSS, HQ Division Manager	X	X	X
Weber, C.	DOE/RW-3.1, QA Specialist			
Williams, J.	DOE/RW-46, Director, Eng. Division	X		
Wood, T.	DOE/RW-14, Director, Contract Mgt.		X	

LEGEND:

DOE . . . . . Department of Energy
QATSS. . . . . Quality Assurance Technical Support Services
YMQAD. . . . . Yucca Mountain Quality Assurance Division
OWAST. . . . . Office of Waste Acceptance, Storage, and Transportation

ATTACHMENT 2
SUMMARY TABLE OF AUDIT RESULTS

QA ELEMENT/ ACTIVITIES	DOCUMENTS	DETAILS (Checklist)	PRs	CDA	RECOM-MENDATION	*ADE-QUACY*	*COM-PLIANCE*	*OVER-ALL*
1	QAP-1.1, Revision 2	YM-ARC-95-15-01, Pgs. 2-6	N	N	N	*SAT*	*SAT*	*SAT*
2	QARD, Sec 2.0	Pgs. 7-9	N	N	N	*SAT*	*SAT*	*SAT*
	HLP-2.1Q, Revision 0	Pgs. 10-16	N	1	N	*SAT*	*SAT*	
	HLP-2.10Q, Revision 0	Pgs. 17-25	N	N	N	*N/A*	*N/A*	
	QAP-2.3, Revision 1	Pgs. 26-32	YMQA D-95-P-001	N	N	*SAT*	*UNSAT*	
	QAP-2.4, Revision 0	Pgs. 33-34	N	N	N	*SAT*	*N/A*	
	QAP-2.5, Revision 1	Pg. 35	N	N	N	*SAT*	*N/A*	
	QAP-2.6, Revision 3	Pg. 36	N	N	N	*SAT*	*N/A*	
	QAP-2.7, Revision 2	Pgs. 37-42	N	N	N	*SAT*	*SAT*	
	QAP-2.8, Revision 1	Pgs. 43-46	N	N	1&2	*N/A*	*SAT*	
4/7	HLP-7.1Q, Revision 0	Pgs. 56-64	YMQA D-95-P-003	2	N	*SAT*	*SAT*	*SAT*
	QAP-7.2, Revision 0	Pg. 65	N	N	N	*N/A*	*N/A*	
5	QAP-3.5, Revision 2	Pg. 47	N	N	N	*N/A*	*N/A*	*SAT*
	QAP-5.1, Revision 6	Pgs. 48-52	N	N	N	*SAT*	*SAT*	

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SUMMARY TABLE OF AUDIT RESULTS

QA ELEMENT/ ACTIVITIES	DOCUMENTS	DETAILS (Checklist)	PRs	CDA	RECOM-MENDATION	*ADE-QUACY*	*COM-PLIANCE*	*OVER-ALL*
6	HLP-6.1Q, Revision 0	Pg. 53	N	N	N	*SAT*	*SAT*	*SAT*
	QAP-6.2, Revision 2	Pgs. 54-55	N	N	N	*SAT*	*SAT*	
16	QAP-16.1, Revision 6	Pgs. 66-77	N	N	N	*SAT*	*SAT*	*SAT*
	QAP-16.3, Revision 0	Pgs. 78-79	N	N	N	*N/A*	*SAT*	
17	HLP-17.1Q, Revision 0	Pgs. 80-86	N	3	N	*SAT*	*SAT*	*SAT*
	HLP-17.2Q, Revision 0	Pgs. 87-94	YMQA D-95-P-004	N	N	*SAT*	*SAT*	
18	QAP-18.1, Revision 4	Pgs. 95-102	N	N	N	*N/A*	*SAT*	SAT
	QAP-18.2, Revision 6	Pgs. 103-109	N	4	N	*SAT*	*SAT*	
SI	QARD, Supplement 1 QARD, Section 5.0	Pgs. 110-120	YMQA D-95-P-002	N	N	*UNSAT*	*SAT*	*SAT*
Appendix A	QARD, Appendix A	Pgs. 121-123	N	N	N	*SAT*	*SAT*	*SAT*
Appendix B	QARD, Appendix B	Pg. 124	N	N	N	*SAT*	*SAT*	*SAT*
TECHNICAL AREA	PCINM/DISAG Form RW-859	YM-ARC-95-15-02, Pgs. 1-15	N	N	N	*SAT*	*SAT*	*SAT*

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SUMMARY TABLE OF AUDIT RESULTS

QA ELEMENT/ ACTIVITIES	DOCUMENTS	DETAILS (Checklist)	PRs	CDA	RECOM-MENDATION	*ADE-QUACY*	*COM-PLIANCE*	*OVER-ALL*
TOTAL			4	4	2			

LEGEND:

PRs. . . . . Performance Reports
SAT . . . . . Satisfactory
CDA . . . . . Corrected During the Audit
ADEQUACY. Requirements in Procedures Meet QARD
COMPLIANCE.Procedures Implemented

OVERALL. . . . . .Summary of Elemets
N. . . . . .None
N/A. . . . . .Not Applicable