



# Summary of Daily Traffic Item Tickets

Date:		Group:	Estimate Number:
Contract No.:	Project Name:		
Contractor:		Subcontractor:	

**Item No.**  **Operaton of Portable Changeable Message Sign**

Date	Hours			Ledger
			Entry No.:	
			Posted By:	
			Date:	
			Validated By:	
			Date:	
<b>Total</b>		<input style="width: 50px;" type="text"/>		

**Item No.**  **Sequential Arrow Sign**

Date	Hours			Ledger
			Entry No.:	
			Posted By:	
			Date:	
			Validated By:	
			Date:	
<b>Total</b>		<input style="width: 50px;" type="text"/>		

**Item No.**  **Operation of Transportable Attenuator**

Date	Hours			Ledger
			Entry No.:	
			Posted By:	
			Date:	
			Validated By:	
			Date:	
<b>Total</b>		<input style="width: 50px;" type="text"/>		

**Item No.**  **Other Traffic Control Labor**

Date	Hours			Ledger
			Entry No.:	
			Posted By:	
			Date:	
			Validated By:	
			Date:	
<b>Total</b>		<input style="width: 50px;" type="text"/>		

**Item No.**  **Flaggers and Spotters**

Date	Hours			Ledger
			Entry No.:	
			Posted By:	
			Date:	
			Validated By:	
			Date:	
<b>Total</b>		<input style="width: 50px;" type="text"/>		

Calculated By	Date	Checked By	Date
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