**Medicare Part C and Part D Reporting Requirements**

**Data Validation Procedure Manual**

**Appendix I: Example Data File Inventory Log**

**Version 3.0**

Prepared by:

Centers for Medicare & Medicaid Services

Center for Medicare

Medicare Drug Benefit and C & D Data Group

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**Sponsoring Organization: Site Visit Date:**

| **Reporting Section** | **Name of Report Owner(s)** | **Name of Data File** | **Final Stage Sample, Final Stage File, Interim File, Source File, or Other** | **Number of Rows** | **Description of File (e.g., source system name, step in data production process, name of report or output file if applicable)** | **File Copied onto Secure Storage Device (Y/N)** |
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