Standard Form Form p Comptrolle	n No. 10 — Revise rescribed by r General U Sved	For Release 200 SERVI	NO GONE REPORTED	REPURCHA	SERM	р. 1400120	0. Vou. ! 074-4	Yo,	*	
(Gen. Reg. No (Amended F	. 51, Supp. No. 11) ebruary 20, 1952)	SERVI	CES OTHER 1	THAN PER	SONAL	Bu	. Vou. No		+20	
U. S		COST REIM	BURSABLE				. [PΔ	ID BY	
V			reau, or establishment			مذ	SAPC	Gr.	1	
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To		(P					-			
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		dress)	(City) (State				UNIT	AMOUN'	NT	
No. and Date of Order	Date of Delivery or Service	(Enter description, it schedule, and o Discount Terms	em number of contract or Federal ther information deemed necessary		supply y)	QUANTITY -	Cost	Per	Dollars	Cte
		~							7.000	1.0
		Costs							1,663	43
AYMENT: Complete		·								
Partial		·								
Final		Use con	tinuation sheet(s) if n	ecessarv						
hipped from			eight	Government	B/L No.	<u> </u>		Total	1,663	43
certify that the	above bill is correc	t and just and that payme	nt has not been recei	ived.	(Pay	ee must NO	Tuse this			
		(Sign original only)								1
			\ T INITI		Į.			1		
Date			ATINTL							
		ulred wher	ulred when		Amount verifie		correct for		1,663	4
<u> </u>		. Title			(Sign	Signature or initials)		77		
Contract No. A	101	Date	Reg. No	0.	D	ate	In	nvoice Rec'o	l	
ursuant to autho	rity vested in me,	I certify that this account	is correct and proper	for payment.				10/-1		
Approved for \$				†				110/50	<u> </u>	
			SIGN						10/11/1	
у -	26090015-012215		ORIGINAL ONLY	Titl						5
n: . 	Notina ottio			Date		CONTR	MULINA	OILIOUN		
	THE REVERSE OF TE	IIS FORM MUST BE EXECUTED W	HEN PURCHASES ARE MAD	E OR SERVICES SE	CURED WITHO	UT WRITTEN AC	GREEMENT I	N ANY FORM		
	ACCOU	NTING CLASSIFICATION	(Appropriation Syn	nbol must be sl	nown; othe	er classificati	on option	al)		
		OT A TINIT!								
	STATINTL	STATINTL			OT 4 TI	N 1 -1	STAT	INTI		
					STATI	NIL	01711			
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Paid by Check	No	dated	19	., for \$			{ on Tre	easurer of the	ne United State	es in
Paid by { Cash, \$, on	, 19 Payee			(Sign original only)				
* When a voucher	is signed or receipte	d in the name of a company of a swellaste case in the secretary", or "Tressurer", a to approve are combined in will sign on the line below "A	r corporation, the par-				(Bign original			
and Adam and Torre										

Standard Form No. 1035a—Revised Form pre-Approacy of For Relabelian Workshop For Particle (Gen. Reg. No. 51, Supp. No. 11) September 7, 1959 (Gen. Reg. No. 51, Supp. No. 11) Services Other Than Personal

CONTINUATION SHEET

		(Department, bureau, or establishment)		UNIT PRICE		AMOUNT	
No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUAN- TITY	Cost	Per	Dollars	Cts
		Contract AlO1 - Applicable to all Systems				·	
		Direct Costs Properly Chargeable to Contract AlOl for the period 9/3/56 thru 9/9/56				STATIN	ITL
		Labor Week Ending September 9, 1956					
ATINTL		Overhead computed for the Communications Division at interim rate of		ow	uelar	v	
ATINTL		Other Costs - per schedule attached				13	4,0
		Tetal Labor, Overhead and Other Costs					
-ATINTL		G and A expense computed at interim rate of					
,		Total Costs				\$ 1,66	53.4
						STATII	NT

MEMORANDUM

CONTINUATION SHEET

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES		OUAN-	UNIT PRICE		AMOUNT		
		(Enter descrip	otion, item number of contract or i and other information deemed n	Federal supply schedule, necessary)	QUAN- TITY	Cost	Per	Dollars	Ct
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		85	PETTY CASH					7.	.78
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		72	CHICAGO STAND	529133				<u>52</u>	<u> </u>
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