

S E C R E T

Voucher No. 3629  
21 January 1960

MEMORANDUM FOR: Chief, Finance Division

ATTENTION : Monetary Branch

SUBJECT : Disbursement by Treasury Check

1. It is kindly requested that a U. S. Treasury Check be drawn in favor of the company listed hereunder in the amount stated, which will be applicable to the contract or agreement shown. The contract number and invoice identification must appear on the check.

- a. Check drawn in favor of: Edgerton, Gernshtausen and Grier, Inc.
- b. Amount: \$120,720.81
- c. Contract Number: TE-2191
- d. Invoice Number: 62, 63, 66 and 67
- e. Check to be dated: 25 January 1960

2. Pertinent documentation in connection with this classified transaction which has not been included in accordance with Comptrollers Instruction No. 32 the Office of the Comptroller, DPD-DD/P.

3. The payment requested is based on progress made by the Contractor to date and should be processed against General Ledger Account No. 138 titled "Disbursement of Appropriated Funds Chargeable to Confidential Funds Allotments Awaiting DCI Certification." The Allotment Symbol applicable to this request is 0325-0966-2222 (07.9), and the amount is chargeable to General Ledger Account No. 601.0.

4. The check should be dated as stated in paragraph 1 and mailed in the attached self-addressed envelope. If no envelope is attached, the undersigned should be contacted on extension   when payment is ready for disposition.

SIGNED

Authorized Certifying Officer  
21 January 1960

Dist:

2 - Add

1 - Contract TE-2191 (Posting)

1 - Voucher

EL:jt/21 January 1960

S E C R E T

25X1

25X1

**PUBLIC VOUCHER FOR PURCHASES AND  
SERVICES OTHER THAN PERSONAL**

D. O. Vou. No. \_\_\_\_\_

Bu. Vou. No. \_\_\_\_\_

Page 1 of 1

U. S. \_\_\_\_\_

(Department, bureau, or establishment)

Voucher prepared at \_\_\_\_\_

(Give place and date)

THE UNITED STATES, Dr.,

Payee's Account No. \_\_\_\_\_

To Edgerton, Germeshausen & Grier, Inc.

(Payee)

Las Vegas, Nevada

(Address)

(City)

(State)

| No. and Date of Order                  | Date of Delivery or Service | ARTICLES OR SERVICES<br>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)<br>Discount Terms | Inv. Nos. | QUANTITY | UNIT PRICE |     | AMOUNT     |      |
|--|-----------------------------|---|-----------|----------|------------|-----|------------|------|
|  |                             |   |           |          | Cost       | Per | Dollars    | Cts. |
|  |                             |   | 62        |          |            |     | \$ 49,291. | 73   |
|  |                             |   | 63        |          |            |     | 4,929.     | 17   |
|  |                             |   | 66        |          |            |     | 60,454.    | 46   |
|  |                             |   | 67        |          |            |     | 6,045.     | 45   |
| Use continuation sheet(s) if necessary |                             |   |           |          |            |     |            |      |

PAYMENT:

Complete ☐

Partial ☐

Final ☐

Shipped from \_\_\_\_\_ to \_\_\_\_\_ Weight \_\_\_\_\_ Government B/L No. \_\_\_\_\_ Total \$120,720.81

I certify that the above bill is correct and just and that payment has not been received.

(Payee must NOT use this space)

(Sign original only)

Differences \_\_\_\_\_

Date \_\_\_\_\_ \*Payee \_\_\_\_\_

(This certificate not required when a like certificate is made by payee on attached bill or bills)

Amount verified; correct for

\$120,720.81

Per \_\_\_\_\_

Title \_\_\_\_\_

(Signature or initial)

STAT

Contract No. TE-2191 Date \_\_\_\_\_ Req. No. \_\_\_\_\_ Date \_\_\_\_\_ invoice rec'd.

Pursuant to authority vested in me, I certify that this account is correct and proper for payment

† Approved for \$ \_\_\_\_\_

By \_\_\_\_\_

**SIGN  
ORIGINAL  
ONLY**

Title \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

Paid by { Check No. \_\_\_\_\_ dated \_\_\_\_\_, 19\_\_\_\_, for \$\_\_\_\_\_ } on Treasurer of the United States in  
{ Cash, \$\_\_\_\_\_, on \_\_\_\_\_, 19\_\_\_\_. Payee \_\_\_\_\_ } favor of payee named above.

(Sign original only)

\* When a voucher is signed or receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear. For example: "John Doe Company, per John Smith, Secretary", or "Treasurer", as the case may be.  
† If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$\_\_\_\_\_", and over his official title.

Per \_\_\_\_\_

Title \_\_\_\_\_

Standard Form No. 1054—revised  
Form prescribed by  
Comptroller General, U. S.  
September 7, 1950  
Sen. Reg. No. 51, Supp. No. 11  
(Amended February 20, 1952)

# **PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL**

D. O. Vou. No. \_\_\_\_\_

Bu. Vou. No. 62U. S. Contracting Officer

(Department, bureau, or establishment)

Voucher prepared at \_\_\_\_\_

(Give place and date)

THE UNITED STATES, Dr.,

Payee's Account No. \_\_\_\_\_

To Edgerton, Germeshausen & Grier, Inc.

(Payee)

PAID BY

Encl #7  
270-8776-59

(Address)

(City)

(State)

| No. and Date of Order | Date of Delivery or Service | ARTICLES OR SERVICES<br>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)<br><br>Discount Terms | QUANTITY | UNIT PRICE |       | AMOUNT       |      |
|-----------------------|-----------------------------|---|----------|------------|-------|--------------|------|
|                       |                             |   |          | Cost       | Per   | Dollars      | Cts. |
|                       |                             | Month ending 31 October 1959  |          |            |       |              |      |
|                       |                             | Direct Labor  |          |            |       | \$ 14,338.11 |      |
|                       |                             | Materials & Services  |          |            |       | 15,832.33    |      |
|                       |                             | Travel  |          |            |       | 3,335.70     |      |
|                       |                             | Freight & Express   |          |            |       | 66.35        |      |
|                       |                             | Other Direct Charges  |          |            |       | 525.70       |      |
|                       |                             | Burden  |          |            |       | 11,128.58    |      |
|                       |                             | G & A   |          |            |       | 4,069.96     |      |
|                       |                             | Use continuation sheet(s) if necessary  |          |            |       |              |      |
|                       |                             |   |          |            | Total | \$ 49,291.73 |      |

## PAYMENT:

Complete ☐  
Partial ☐  
Final ☐

Shipped from \_\_\_\_\_ to \_\_\_\_\_ Weight \_\_\_\_\_ Government B/L No. \_\_\_\_\_

I certify that the above bill is correct and just and that payment has not been received.

(Sign original only)

(Payee must NOT use this space)

Differences \_\_\_\_\_

Date 10/31/59 Germeshausen & Grier, Inc.

(When a like certificate is made by payee on attached bill or bills)

Controller

Amount verified; correct for \_\_\_\_\_

(Signature or initials) ELContract No. \_\_\_\_\_ Date 4/26/57 Req. No. \_\_\_\_\_ Date \_\_\_\_\_ Invoice Rec'd. \_\_\_\_\_

Pursuant to authority vested in me, I certify that this account is correct and proper for payment.

STAT

† Approved for \$ \_\_\_\_\_

† \_\_\_\_\_  
(Authorized Certifying Officer)

By \_\_\_\_\_

SIGN  
ORIGINAL  
ONLY

Title \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

Paid by { Check No. \_\_\_\_\_ dated \_\_\_\_\_, 19\_\_\_\_, for \$ \_\_\_\_\_ (on Treasurer of the United States in favor of payee named above.)  
Cash, \$ \_\_\_\_\_, on \_\_\_\_\_, 19\_\_\_\_ Payee \_\_\_\_\_  
(Sign original only)

\* When a voucher is signed or receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear. For example: "John Doe Company, per John Smith, Secretary", or "Treasurer", as the case may be.  
† If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$ \_\_\_\_\_", and over his official title.

Per \_\_\_\_\_  
Title \_\_\_\_\_

Standard Form No. 1035

7 GAO 5030  
1035-104**Public Voucher for Purchases and  
Services Other Than Personal**

## CONTINUATION SHEET

U. S. Contracting Officer Sheet No. 1 of Bureau Voucher No. 62  
(Department, bureau, or establishment)

| No. and Date of Order | Date of Delivery or Service | ARTICLES OR SERVICES<br>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary) | QUAN-<br>TITY | UNIT PRICE |     | AMOUNT |             |
|-----------------------|-----------------------------|---|---------------|------------|-----|--------|-------------|
|                       |                             |   |               | Cost       | Per |        |             |
|                       |                             | <u>Direct Labor</u>   |               |            |     |        |             |
|                       |                             | Week ending 10/4/59   |               |            |     |        |             |
|                       |                             | " " 10/11/59  |               |            |     |        |             |
|                       |                             | " " 10/18/59  |               |            |     |        |             |
|                       |                             | " " 10/25/59  |               |            |     |        |             |
|                       |                             | Month " 10/31/59  |               |            |     |        |             |
|                       |                             | Total Direct Labor  |               |            |     |        |             |
|                       |                             | Materials & Services  |               |            |     |        |             |
|                       |                             | Travel  |               |            |     |        |             |
|                       |                             | Freight & Express   |               |            |     |        |             |
|                       |                             | Other Direct Charges  |               |            |     |        |             |
|                       |                             | *Burden   |               |            |     |        |             |
|                       |                             | Total Direct Costs  |               |            |     |        | 45,221.77   |
|                       |                             | G & A   |               |            |     |        |             |
|                       |                             | Total Direct Costs @ 9%   |               |            |     |        | 4,069.96    |
|                       |                             |   |               |            |     |        | \$49,291.73 |
|                       |                             | *Burden:  |               |            |     |        |             |
|                       |                             | October Non Premium Direct Labor 13,910.73 @ 80%  |               |            |     |        | \$11,128.58 |

Standard Form No. 1004  
 Form prescribed by  
 Comptroller General, U. S.  
 September 7, 1950  
 (Gen. Reg. No. 51, Supp. No. 11)  
 (Amended February 20, 1952)

# **BLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL**

D. O. Vou. No. \_\_\_\_\_  
 Bu. Vou. No. 63

U. S. \_\_\_\_\_ Contracting Officer \_\_\_\_\_  
 (Department, bureau, or establishment)

Voucher prepared at \_\_\_\_\_  
 (Give place and date)

THE UNITED STATES, Dr., Payee's Account No. \_\_\_\_\_

To \_\_\_\_\_ Edgerton, Germeshausen & Grier, Inc. \_\_\_\_\_  
 (Payee)

|                    |
|--------------------|
| PAID BY            |
| <i>Encl #8</i>     |
| <i>872-8776-59</i> |
| <i>1-2</i>         |

| No. and Date of Order | Date of Delivery or Service | ARTICLES OR SERVICES<br>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)<br><br>Discount Terms | QUANTITY | UNIT PRICE |     | AMOUNT     |      |
|-----------------------|-----------------------------|---|----------|------------|-----|------------|------|
|                       |                             |   |          | Cost       | Per | Dollars    | Cts. |
|                       |                             | Month ending 31 October 1959<br><br>Fixed Fee   |          |            |     | \$4,929.17 |      |

## PAYMENT:

Complete ☐  
 Partial ☐  
 Final ☐

Use continuation sheet(s) if necessary

Shipped from \_\_\_\_\_ to \_\_\_\_\_ Weight \_\_\_\_\_ Government B/L No. \_\_\_\_\_ Total \_\_\_\_\_

I certify that the above bill is correct and just and that payment has not been received.

(Payee must NOT use this space)

(Sign original only)

Differences \_\_\_\_\_

Date 12/21/59 \*Payee Edgerton, Germeshausen & Grier, Inc.

a like certificate is made by payee on attached bill or bills)

Amount verified; correct for \_\_\_\_\_

(Signature or initials) *EE*

\$4,929.17 STAT

Contract No. 15-2191 Date 4/26/57 Req. No. \_\_\_\_\_ Date \_\_\_\_\_ Invoice Rec'd. \_\_\_\_\_

Pursuant to authority vested in me, I certify that this account is correct and proper for payment.

† Approved for \$ \_\_\_\_\_

† \_\_\_\_\_  
 (Authorized Certifying Officer)

By \_\_\_\_\_

**SIGN  
 ORIGINAL  
 ONLY**

Title \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

65. WJ SE 3 23 PM '59

Paid by { Check No. \_\_\_\_\_ dated \_\_\_\_\_, 19\_\_\_\_, for \$ \_\_\_\_\_ (on Treasurer of the United States in favor of payee named above.)  
 { Cash, \$ \_\_\_\_\_, on \_\_\_\_\_, 19\_\_\_\_. Payee \_\_\_\_\_  
 (Sign original only)

\* When a voucher is signed or receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear. For example: "John Doe Company, per John Smith, Secretary", or "Treasurer", as the case may be.  
 † If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$ \_\_\_\_\_", and over his official title.

Per \_\_\_\_\_  
 Title \_\_\_\_\_

Standard Form No. 1035

7 GAO 5030,  
1035-104**Public Voucher for Purchases and  
Services Other Than Personal**

## CONTINUATION SHEET

U. S. \_\_\_\_\_ Contracting Officer \_\_\_\_\_ Sheet No. 1 of Bureau Voucher No. 63  
(Department, bureau, or establishment)

| No. and Date<br>of Order | Date of<br>Delivery<br>or Service | ARTICLES OR SERVICES<br>(Enter description, item number of contract or Federal supply schedule,<br>and other information deemed necessary)  | QUAN-<br>TITY | UNIT PRICE |     | AMOUNT   |    |
|--------------------------|-----------------------------------|---|---------------|------------|-----|----------|----|
|                          |                                   |   |               | Cost       | Per |          |    |
|                          |                                   | Costs thru October 1959   |               |            |     | 113,704  | 42 |
|                          |                                   | Fixed Fee Earned (10% of above)   |               |            |     | 11,370   | 44 |
|                          |                                   | Fixed Fee Previously Billed   |               |            |     | 6,441    | 27 |
|                          |                                   | Amount of this Voucher  |               |            |     | \$ 4,929 | 17 |
|                          |                                   | <p>"I certify that the Fixed Fee claimed is correct and just;<br/>and that it is proportionate to the progress made on the<br/>Contract."</p> <p>EDGERTON, GERMESHAUSEN &amp; GRIER, INC.</p> <div style="border: 1px solid black; width: 200px; height: 30px; margin: 10px auto;"></div> <p style="text-align: right;"><i>[Signature]</i><br/>Controller</p> |               |            |     |          |    |
|                          |                                   |   |               |            |     | STAT     |    |

Standard Form No. 1001  
Form prescribed by  
Comptroller General, U. S.  
September 7, 1950  
(Gen. Reg. No. 51, Supp. No. 11)  
(Amended February 20, 1952)

Approved For Release 2008/12/11 : CIA-RDP65-00523R000100160030-2

**PUBLIC VOUCHER FOR PURCHASES AND  
SERVICES OTHER THAN PERSONAL**

Bu. Vou. No. 66

U. S. Contracting Officer  
(Department, bureau, or establishment)

Voucher prepared at \_\_\_\_\_  
(Give place and date)

THE UNITED STATES, Dr., Payee's Account No.

To Edgerton, Germeshausen & Grier, Inc.  
(Payee)

|                |
|----------------|
| PAID BY        |
| <i>8632-57</i> |
| COPY 1 OF 2    |

| No. and Date of Order | Date of Delivery or Service | ARTICLES OR SERVICES<br>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)<br>Discount Terms | QUANTITY | UNIT PRICE |     | AMOUNT  |      |
|-----------------------|-----------------------------|---|----------|------------|-----|---------|------|
|                       |                             |   |          | Cost       | Per | Dollars | Cts. |
|                       |                             | Month ending 30 November 1959   |          |            |     |         |      |
|                       |                             | Direct Labor  |          |            |     | 18,003. | 76   |
|                       |                             | Materials & Services  |          |            |     | 21,481. | 57   |
|                       |                             | Travel  |          |            |     | 2,516.  | 13   |
|                       |                             | Freight & Express   |          |            |     | 113.    | 69   |
|                       |                             | Other Direct Charges  |          |            |     | 611.    | 76   |
|                       |                             | Burden  |          |            |     | 12,735. | 90   |
|                       |                             | G & A   |          |            |     | 4,991.  | 65   |

PAYMENT:

Complete ☐  
Partial ☐  
Final ☐

Use continuation sheet(s) if necessary

Shipped from \_\_\_\_\_ to \_\_\_\_\_ Weight \_\_\_\_\_ Government B/L No. \_\_\_\_\_ Total \$60,454.46

I certify that the above bill is correct and just and that payment has not been received.

(Payee must NOT use this space)

(Sign original only)

Differences \_\_\_\_\_

Date 12/15/59 \*Payee Edgerton, Germeshausen & Grier, Inc.

(when a like certificate is made by payee on attached bill or bills)

Amount verified; correct for \_\_\_\_\_

(Signature or initials) EL STAT

Cont. \_\_\_\_\_ e 4/26/57 Req. No. \_\_\_\_\_ Date \_\_\_\_\_ Invoice Rec'd. \_\_\_\_\_

Pursuant to authority vested in me, I certify that this account is correct and proper for payment.

† Approved for \$ \_\_\_\_\_

† \_\_\_\_\_  
(Authorized Certifying Officer)

By \_\_\_\_\_

**SIGN  
ORIGINAL  
ONLY**

Title \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

Paid by { Check No. \_\_\_\_\_ dated \_\_\_\_\_, 19\_\_\_\_, for \$ \_\_\_\_\_ } on Treasurer of the United States in favor of  
{ Cash, \$ \_\_\_\_\_, on \_\_\_\_\_, 19\_\_\_\_, Payee \_\_\_\_\_ }  
(Sign original only)

\* When a voucher is signed or receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear. For example: "John Doe Company, per John Smith, Secretary", or "Treasurer", as the case may be.  
† If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$ \_\_\_\_\_" and over his official title.

Per \_\_\_\_\_

Title \_\_\_\_\_

Approved For Release 2008/12/11 : CIA-RDP65-00523R000100160030-2

16-22900-6

**CONTINUATION SHEET**

| No. and Date of Order | Date of Delivery or Service | ARTICLES OR SERVICES<br>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)  | QUAN-TITY | UNIT PRICE |     | AMOUNT |  |
|-----------------------|-----------------------------|--|-----------|------------|-----|--------|--|
|                       |                             |  |           | Cost       | Per |        |  |
|                       |                             | <u>Direct Labor</u><br><br>Week ending 11/1/59 1,742.72<br>" " 11/8/59 1,620.88<br>" " 11/15/59 4,636.77<br>" " 11/22/59 2,032.60<br>" " 11/29/59 1,329.13<br>Month " 11/30/59 <u>6,641.66</u><br>Total Direct Labor 18,003.76 ✓<br>Materials & Services 21,481.57<br>Travel 2,516.13<br>Freight & Express 113.69<br>Other Direct Charges 611.76<br>*Burden <u>12,735.90</u> ✓<br>Total direct costs 55,462.81<br>G & A 4,991.65<br>Total Direct Costs @ 9% <u>\$60,454.46</u> |           |            |     |        |  |
| November              |                             | *Burden:<br>Non Premium Direct Labor 15,919.88 @ 80% \$12,735.90 ✓   |           |            |     |        |  |



Standard Form No. 1004 - revised  
Form prescribed by  
Comptroller General, U. S.  
September 7, 1950  
(Gen. Reg. No. 51, Supp. No. 11)  
(Amended February 20, 1952)

# **PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL**

Bu. Vou. No. 67

U. S. Contracting Officer  
(Department, bureau, or establishment)

Voucher prepared at  
(Give place and date)

THE UNITED STATES, Dr., Payee's Account No.

To Edgerton, Germeshausen & Grier, Inc.  
(Payee)

PAID BY

DYD 8633-59  
1 2

|                       |                             | (Address)   | (City) | (State)        | QUANTITY | UNIT PRICE |         | AMOUNT     |  |
|-----------------------|-----------------------------|---|--------|----------------|----------|------------|---------|------------|--|
| No. and Date of Order | Date of Delivery or Service | ARTICLES OR SERVICES<br>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary) |        | Cost           |          | Per        | Dollars | Cts.       |  |
|                       |                             |   |        | Discount Terms |          |            |         |            |  |
|                       |                             | Month ending 30 November 1959   |        |                |          |            |         |            |  |
|                       |                             | Fixed Fee   |        |                |          |            |         | \$6,045.45 |  |
| PAYMENT:              |                             |   |        |                |          |            |         |            |  |
| Complete              |                             | <input type="checkbox"/>  |        |                |          |            |         |            |  |
| Partial               |                             | <input type="checkbox"/>  |        |                |          |            |         |            |  |
| Final                 |                             | <input type="checkbox"/>  |        |                |          |            |         |            |  |
|                       |                             | Use continuation sheet(s) if necessary  |        |                |          |            |         |            |  |

## PAYMENT:

Complete ☐  
Partial ☐  
Final ☐

Shipped from to Weight Government B/L No. Total

I certify that the above bill is correct and just and that payment has not been received.

(Sign original only)

Date 12/15/59 \*Payee Edgerton, Germeshausen & Grier, Inc.

(Indicate when a like certificate is made by payee on attached bill or bills)

Contract No. 15 2121 Date 4/26/57 Req. No. Date Invoice Rec'd.

Pursuant to authority vested in me, I certify that this account is correct and proper for payment.

† Approved for \$

† (Authorized Certifying Officer)

By

SIGN  
ORIGINAL  
ONLY

Title

Title

Date

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

65. Hd 21 1 21 330

Paid by { Check No. dated 19, for \$ { on Treasurer of the United States in favor of  
Cash, \$, on 19, Payee (Sign original only)

\* When a voucher is signed or receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear. For example: "John Doe Company, per John Smith, Secretary", or "Treasurer", as the case may be.  
† If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$" and over his official title.

**CONTINUATION SHEET**

| No. and Date of Order | Date of Delivery or Service | ARTICLES OR SERVICES<br>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)   | QUAN-<br>TITY | UNIT PRICE |     | AMOUNT      |      |
|-----------------------|-----------------------------|---|---------------|------------|-----|-------------|------|
|                       |                             |   |               | Cost       | Per |             |      |
|                       |                             | Costs thru November 1959<br>Fixed Fee Earned (10% of above)<br>Fixed Fee Previously Billed<br>Amount of this Voucher  |               |            |     | 174,158.88  |      |
|                       |                             |   |               |            |     | 17,415.89   |      |
|                       |                             |   |               |            |     | 11,370.44   |      |
|                       |                             |   |               |            |     | \$ 6,045.45 |      |
|                       |                             | <p>"I certify that the Fixed Fee claimed is correct and just; and that it is proportionate to the progress made on the Contract."</p> <p>EDGERTON, GERMESHAUSEN &amp; GRIER, INC.</p> <div style="border: 1px solid black; width: 200px; height: 50px; margin: 10px 0;"></div> <p style="text-align: right;">_____<br/>Controller</p> |               |            |     |             | STAT |