

SECRET
(When Filled In)

REQUEST FOR PAYMENT AND POSTING VOUCHER

VOUCHER NO. - DATE 2-12

TO : Accounts Division
THROUGH: Monetary Division

(Room
(Room

Bldg.
Bldg.)

DIVISION VOUCHER NO.

Request payment be made and/or transaction be recorded as indicated below. Pertinent documentation in support of this transaction is on file in this office.

SUBJECT REFUND ON CONTRACT 2263, 2264 + 6744
GOODYEAR AEROSPACE CORP.

INVOICE NO(S) 56, 117 + 129

CONTRACT NO CW6744, LP2264, LP2263

AMOUNT \$
CASH PAYMENT U. S. TREASURY CHECK AGENT CASHIER CHECK BANK CASHIER'S CHECK

X THE ATTACHED CHECKS AND/OR CASH IN THE AMOUNT OF \$29,519.64 SHOULD BE TAKEN INTO ACCOUNT AS INDICATED BELOW.

I HEREBY AUTHORIZE MY AGENT, WHOSE SIGNATURE APPEARS BELOW, TO RECEIVE \$ OF OFFICIAL FUNDS IN CURRENCY ON MY BEHALF.

DATE	SIGNATURE OF PAYEE	DATE	SIGNATURE OF AGENT	DATE	SIGNATURE OF RECIPIENT								
DESCRIPTION-ALL OTHER ACCOUNTS 13-33	28-33 T/A NO.	34-39 STATION CODE	40-41 EXCISE	42-47 OBLIG. REF. NO.	48-49 PAY PER. LIQ. CODE	50 OR CASH YR.	51-54 GENERAL LEDGER ACCT. NO.	55-56 ALLOT.-COST-FAN ACCOUNT SYMBOL	51-66 CK. NO.	67-70 OBJECT CLASS	68-70 DUE DATE	71-80 AMOUNT	
DESCRIPTION-ADVANCE ACCOUNTS 13-27	SHIP. DOC. NO.	REG. RPT. NO.	EDNE	ADVANCE ACCT. NO.	EMP. NO.				X REF. NO.			DEBIT	CREDIT
GOODYEAR-REF				88211224			14241	6761-1021		2540			2800.83
GOODYEAR-REF				88211224			14241	6761-1021		2540			13,127.57
GOODYEAR-REF				88211223			14241	6761-1021		2540			12,892.04
GOODYEAR												29,519.64	

ORIG & 1-ADDRESSEE
1-CONTROL FILE
1-VOU FILE

2951964
2951964
2951964

DATE 3/19/71 PREPARED BY DATE REVIEWED BY DATE SIGNATURE

THE GOODYEAR TIRE & RUBBER COMPANY

Sanitized Copy Approved for Release 2010/12/09 : CIA-RDP72B00464R000800100001-6 7318

INVOICE NO. OR DATE	DATE OF ENTRY	GOODYEAR REGISTER NO.	CO. CODE	CLASS ENTRY	INVOICE AMOUNT	DISC. %	DISCOUNT	NET AMOUNT
18656	3 5	W18656	261	1	29,519.64			29,519.64
REFUND OF OVERPAYMENT AS					A RESULT OF FINAL NEGOTIATION			
SEE REVERSE SIDE					29,519.64			29,519.64

Sanitized Copy Approved for Release 2010/12/09 : CIA-RDP72B00464R000800100001-6

COMPANY CODE

111-114-115 The Goodyear Tire & Rubber Co. Sanitized Copy Approved for Release 2010/12/09 : CIA-RDP72B00464R000800100001-6

- 112 The Goodyear Tire & Rubber Co. - Lincoln Plant
- 113 The Goodyear Tire & Rubber Co. - Marysville Plant
- 121 The Goodyear Tire & Rubber Co. - Point Pleasant Plant
- 123 The Goodyear Tire & Rubber Co. - Logan Plant
- 124 The Goodyear Tire & Rubber Co. - Bakersfield Plant
- 125 The Goodyear Tire & Rubber Co. - Danville Plant
- 126 The Goodyear Tire & Rubber Co. - Madisonville Plant
- 127 The Goodyear Tire & Rubber Co. - Union City Tenn.
- 129 The Goodyear Tire & Rubber Co. - Gadsden Plant
- 131 The Goodyear Tire & Rubber Co. - Los Angeles Plant
- 132 The Goodyear Tire & Rubber Co. - Topeka Plant
- 133 The Goodyear Tire & Rubber Co. - New Bedford Plant
- 134 The Goodyear Tire & Rubber Co. - Jackson Plant
- 135 The Goodyear Tire & Rubber Co. - Windsor Plant
- 136 The Goodyear Tire & Rubber Co. - Niagara Falls Plant
- 137 The Goodyear Tire & Rubber Co. - North Chicago Plant
- 138 The Goodyear Tire & Rubber Co. - Chehalis Plant
- 139 The Goodyear Tire & Rubber Co. - Houston Synthetic Rubber Plant
- 141 The Goodyear Tire & Rubber Co. - Beaumont Chemical Plant
- 142 The Goodyear Tire & Rubber Co. - Luckey, Ohio
- 144 The Goodyear Tire & Rubber Co. - Ashland, Ohio
- 145 The Goodyear Tire & Rubber Co. - Cedar town Mill
- 171 The Goodyear Tire & Rubber Co. - Rockmart Mill
- 172 The Goodyear Tire & Rubber Co. - Cartersville Mill
- 173 The Goodyear Tire & Rubber Co. - Decatur Mill
- 174 The Goodyear Tire & Rubber Co. - Decatur Mill
- 251 Goodyear International Corporation
- 261 Goodyear Aerospace Corporation - Akron Division
- 262 Goodyear Aerospace Corporation - Arizona Division
- 263 Goodyear Aerospace Corporation - Jackson Division

- 2. VENDOR'S CREDIT
- 3. TRANSPORTATION DEDUCTION
- 4. INSURANCE DEDUCTION
- 5. TAX DEDUCTION
- 6. ERROR IN EXTENSION
- 7. ERROR IN PRICE
- 8. CORRECTION NOTICE ENCLOSED
- 9. SPECIFIC CASH DISCOUNT
- Y. OUR DEBIT MEMO (Y INVOICE)
- Z. OUR DEBIT MEMO (Z INVOICE)

604 Sanitized Copy Approved for Release 2010/12/09 : CIA-RDP72B00464R000800100001-6

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION DEPARTMENT OF THE NAVY	DATE VOUCHER PREPARED March 12, 1971	VOUCHER NUMBER 56
	CONTRACT NUMBER AND DATE	PAID BY
	REQUISITION NUMBER AND DATE	

PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION AKRON, OHIO 44315 <i>CW 6744</i>	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER
	GOVERNMENT B/L NUMBER

SHIPPED FROM _____ TO _____ WEIGHT _____

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT <small>(1)</small>
				COST	PER	
		Settlement Adjustmnet Made on February 4, 1971				
		Total Billed				Total Allowed
		Cost 1,903,400.03		Cost		1,900,880.00
		Fee 140,400.00		Fee		140,120.00
		Total 2,043,800.03		Total		2,041,000.00
		Cost Adjustment				(2,520.03)
		Fee Adjustment				(280.00)
		Total Credit Adjustment				(2,800.03)
TOTAL						(2,800.03)

(Use continuation sheet(s) if necessary) **(Payee must NOT use the space below)**

PAYMENT:	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
<input type="checkbox"/> COMPLETE	= \$	= \$1.00	
<input type="checkbox"/> PARTIAL	BY ?		
<input type="checkbox"/> FINAL	TITLE		
<input type="checkbox"/> PROGRESS		Amount verified; correct for	
<input type="checkbox"/> ADVANCE		(Signature or initials)	

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

(Date) 3/12/71 (Authorized Certifying Officer) _____ (Title) _____

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

Appropriation Symbol and Subhead	Object Class	Expenditure Account	Chargeable Activity	Bureau Cont. or Subauth'n Activity	Bureau Control No.	Sub-auth'n No.	Identifi-cation No.	Amount
HAR								

I.R. No's.

PAID BY	CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER	ON (Name of bank)
	CASH	DATE	PAYEE'S	
	\$			

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

SECRET
(When Filled In)

REQUEST FOR PAYMENT AND POSTING VOUCHER

VOUCHER NO.-DATE 2-12

TO : Accounts Division (Room Bldg.)
 THROUGH: Monetary Division (Room Bldg.)

DIVISION VOUCHER NO.

117.617 0502

Request payment be made and/or transaction be recorded as indicated below. Pertinent documentation in support of this transaction is on file in this office.

SUBJECT

PAYMENT TO GOODYEAR AEROSPACE CORPORATION INVOICE NO(S). 55

AMOUNT \$ 21,060.00 CONTRACT NO. CW-6744

CASH PAYMENT U.S. TREASURY CHECK AGENT CASHIER CHECK BANK CASHIER'S CHECK

THE ATTACHED CHECKS AND/OR CASH IN THE AMOUNT OF \$ SHOULD BE TAKEN INTO ACCOUNT AS INDICATED BELOW.

I HEREBY AUTHORIZE MY AGENT, WHOSE SIGNATURE APPEARS BELOW, TO RECEIVE \$ OF OFFICIAL FUNDS IN CURRENCY ON MY BEHALF.

DATE	SIGNATURE OF PAYEE	DATE	SIGNATURE OF AGENT	DATE	SIGNATURE OF RECIPIENT									
DESCRIPTION-ALL OTHER ACCOUNTS 13-33		34-39 STATION CODE	40-41 EXPENDED	42-47 OBLIG. REF. NO.	48-49 PAY PER. LIO. CODE	50 CA OR C O S T YR	51-54 GENERAL LEDGER ACCT. NO.	55-56 ALLOT.-COST-FAN ACCOUNT SYMBOL	61-66 CK. NO.	67-70 OBJECT CLASS	68-70 DUE DATE	71-80 AMOUNT	DEBIT	CREDIT
DESCRIPTION-ADVANCE ACCOUNTS 13-27		SHIP. DOC. NO.	132-33 DIV.	REC. RPT. NO.	PROJECT NO.	EMP. NO.			X REF. NO.					
	GOODYEAR					88006744	14341	7761-1021		2540		21,060.00		
	GOODYEAR													21,060.00
TOTALS												21,060.00	21,060.00	

ORIG & 1-ADDRESSEE
 CONTR FILE
 YOU FILE

DATE 7-11-69 PREPARED BY _____ DATE _____ REVIEWED BY _____

CERTIFIED FOR PAYMENT OR CREDIT: 25X1
 DATE _____ SIGNATURE (signed) _____ 25X1

Standard Form No. 1034
 7 GAO 5000
 1084-110-04
 Sanitized Copy Approved for Release 2010/12/09 : CIA-RDP72B00464R000800100001-6
 PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION DEPARTMENT OF THE NAVY U. S. GOVERNMENTG	DATE VOUCHER PREPARED July 2, 1969	VOUCHER NUMBER 55
	CONTRACT NUMBER AND DATE	PAID BY
	REQUISITION NUMBER AND DATE	

PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION AKRON, OHIO 44315 <i>payment with back per com</i> <i>5-14-69</i>	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER
	GOVERNMENT B/L NUMBER

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT ⁽¹⁾	
				COST	PER		
	7/2/69	FIXED FEE ALLOWED				140,400.00	
		FIXED FEE BILLED				119,340.00	
		FIXED FEE DUE				21,060.00	
		(M.O. 9116AR) COST REIMBURSABLE					
PROVISIONAL PAYMENT (Payee must NOT use the space below)						TOTAL	21,060.00

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
	= \$	= \$1.00	
	BY 2		
	TITLE	Amount verified; correct for 21,060.00 <i>(Signature or initials)</i>	

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

(Date)	(Title)	STAT
Appropriation Symbol and Subhead	n; other classification optional)	
(Date)	Bureau No.	Sub-auth'n No.
	Identifi-cation No.	Amount

I.R. No's.	(Date)	AUTHORIZED CERTIFYING OFFICER
PAID BY	CHECK NUMBER	ON TREASURER OF THE UNITED STATES
	CASH	DATE
	CHECK NUMBER	ON (Name of bank)
		PAYEE 3

1 When stated in foreign currency, insert name of currency.
 2 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 in the space provided, over his official title.
 3 When a voucher is 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.

SECRET
(When Filled In)

REQUEST FOR PAYMENT AND POSTING VOUCHER												VOUCHER NO. - DATE 2-12							
TO : Accounts Division (Room)						Bldg.)						DIVISION VOUCHER NO.							
THROUGH: Monetary Division (Room)						Bldg.)						9 Apr 69 5209							
Request payment be made and/or transaction be recorded as indicated below. Pertinent documentation in support of this transaction is on file in this office.																			
SUBJECT										INVOICE NO(S).				53 + 54					
PAYMENT TO <i>Goodyear Aerospace Corp.</i>										CONTRACT NO.				CW-6744					
AMOUNT <i>\$2,473.20</i>										CHECK TO BE DATED									
CASH PAYMENT			<input checked="" type="checkbox"/> U.S. TREASURY CHECK			AGENT CASHIER CHECK			BANK CASHIER'S CHECK										
THE ATTACHED CHECKS AND/OR CASH IN THE AMOUNT OF \$ SHOULD BE TAKEN INTO ACCOUNT AS INDICATED BELOW.																			
I HEREBY AUTHORIZE MY AGENT, WHOSE SIGNATURE APPEARS BELOW, TO RECEIVE \$ OF OFFICIAL FUNDS IN CURRENCY ON MY BEHALF.																			
DATE		SIGNATURE OF PAYEE				DATE		SIGNATURE OF AGENT				DATE		SIGNATURE OF RECIPIENT					
DESCRIPTION-ALL OTHER ACCOUNTS 13-33		28-33 T/A NO.		34-39 STATION CODE		40-41 EXPENSE		42-47 OBLIG. REF. NO.		48-49 PAY PER. LIQ. CODE		50-54 CA OR COST YR.		55-56 ALLOT.-COST-FAN ACCOUNT SYMBOL		67-70 OBJECT CLASS		71-80 AMOUNT	
DESCRIPTION-ADVANCE ACCOUNTS 13-27		SHIP. DOC. NO.		REC. RPT. NO.		ADVANCE ACCT. NO.		EMP. NO.		GENERAL LEDGER ACCT. NO.		FUND YR.		61-66 CK. NO.		68-70 DUE DATE		DEBIT CREDIT	
		32-33 DIV.		PROJECT NO.										X REF. NO.					
<i>Goodyear</i>						<i>88 006714</i>				<i>14241 77</i>				<i>61- 1021 7540</i>				<i>2,473.20</i>	
<i>Goodyear</i>																		<i>2,473.20</i>	
<i>orig / - address</i>																			
<i>1 - contract CW-6744 (POST)</i>																			
<i>1 - Voucher</i>																			
TOTALS												<i>2,473.20</i>		<i>2,473.20</i>					
DATE		PREPARED BY				DATE		REVIEWED BY				DATE		CERTIFIED FOR PAYMENT OR CREDIT					
<i>4-8-69</i>														25V1 25X1					

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION	DATE VOUCHER PREPARED	SCHEDULE NO.
	CONTRACT NUMBER AND DATE CW-6744	PAID BY
	REQUISITION NUMBER AND DATE	

PAYEE'S NAME AND ADDRESS Goodyear Aerospace Corporation	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER
	GOVERNMENT B/L NUMBER

SHIPPED FROM _____ TO _____ WEIGHT _____

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUANTITY	UNIT PRICE		AMOUNT (¹)
				COST	PER	
		53 (Orig Inv Att)				(439.37)
		54 " " "				2,912.57

(Use continuation sheet(s) if necessary) **(Payee must NOT use the space below)** **TOTAL** 2,473.20

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE = \$1.00	DIFFERENCES
	= \$		
	BY ²		
	TITLE		

Pursuant to authority of _____ for payment.

9 APR 1954 (Date)

ACCOUNTING CLASSIFICATION

PAID BY	CHECK NUMBER ON TREASURER OF THE UNITED STATES	CHECK NUMBER ON (Name of bank)
	CASH DATE	PAYEE ³

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

Standard

7 GAG 5000
1034-11a-06

SERVICES OTHER THAN PERSONAL

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION U.S. DEPARTMENT OF THE NAVY U. S. GOVERNMENT	DATE VOUCHER PREPARED January 27, 1969	VOUCHER NUMBER 53
	CONTRACT NUMBER AND DATE	PAID BY
	REQUISITION NUMBER AND DATE	

FEB 3 10 11 AM '69

CW 6744

PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION AKRON, OHIO 44315	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER

SHIPPED FROM	TO	WEIGHT	GOVERNMENT B/L NUMBER
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NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT ⁽¹⁾
				COST	PER	
	12/1/68 thru 12/31/68	DIRECT CHARGES OVERHEAD G&A EXPENSE FIXED FEE (M.O. 8146AR) COST REIMBURSABLE PROVISIONAL PAYMENT		CURRENT (493.40) 91.05 (37.02) -		TO-DATE 1,111,362.46 634,855.52 154,269.48 119,340.00
				(439.37)		

(Use continuation sheet(s) if necessary) (Payee must NOT use the space below) TOTAL 2,019,827.46

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
	= \$	= \$1.00	
	BY 2		
	TITLE		Amount verified; correct for <i>(Signature or initials)</i>

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

(Date) _____ (Authorized Certifying Officer)² _____ (Title) _____

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)								
Appropriation Symbol and Subhead	Object Class	Expenditure Account	Chargeable Activity	Bureau Cont. or Subanth'n Activity	Bureau Control No.	Sub-auth'n No.	Identifi-cation No.	Amount

PAID BY	CHECK NUMBER ON TREASURER OF THE UNITED STATES	CHECK NUMBER ON (Name of bank)
	CASH DATE	PAYEE 3

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

Standard Form No. 10350
7 GAO 5000
1035-208-01

**Public Voucher for Purchases and
Services Other Than Personal**
CONTINUATION SHEET

MEMORANDUM

U. S. GOVERNMENT

Sheet No. **1** of Voucher No. **53**

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	UNIT PRICE		AMOUNT
				Cost	Per	
						TO-DATE
	12/1/68 thru 12/31/68	DIRECT CHARGES				
		<u>Salaries & Wages</u>				
		Regular		115.06		575,060.26
		Overtime Premium		-0-		8,769.52
				<u>115.06</u>		<u>583,829.78</u>
		<u>Material Subject to Mat'l Handling Expense</u>				
		Purchases - Fixed Prices		(682.50)		401,814.39
		Sub-Contract				342.90
		Paints & Solvents				1,706.56
		Stores Material		75.75		4,187.82
		Plant Engr. Make Ready				47,061.95
		Material Transfers		(606.75)		<u>455,113.62</u>
		<u>Material Not Subject to Handling Expense</u>				
		IBM Computer Charge		(1.71)		5,093.22
		Other Direct Charges		(1.71)		2,732.91
				<u>(1.71)</u>		<u>7,826.13</u>
		Total Material		(608.46)		462,939.75
		Travel		-0-		64,592.93
		Total Direct Charges		(493.40)		1,111,362.46

Services Other Than Personal
CONTINUATION SHEET

MEMORANDUM

U. S. GOVERNMENT Sheet No. 2 of Voucher No. 53
(Department, bureau, or establishment)

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	UNIT PRICE		AMOUNT
				Cost	Per	
	12/1/68 thru 12/31/68	OVERHEAD Burden Center				To-Date
		Salaries & Wages	Rate		Burden	
	501	Engr. Support				169,446.34
	501	Akron Engr. Support				3,333.83
	503	Engr.				111,662.05
	503	Akron Engr.				13,195.31
	507	Akron Shipping				275.34
	509	Akron Squadron				3.73
	511	Plant Engr.	5.86	.9778	157	5.73
	511	Akron Plant Engr.				22,818.44
	515	Metalcraft Parts Mfg. & Tooling				204.85
	517	Misc. Metalcraft Assy				12,545.77
	517	Akron Metalcraft				98,697.98
	519	Plastics				4,153.77
	519	Akron Plastics				5,426.89
	521	Elec. Assy	105.22	1.5081	734	158.69
	521	Akron Elec. Assy				82,633.33
	531	Qual Control	3.98	.9045	226	3.60
	531	Akron Qual Control				5,242.60
	534	Engr. Field Service				8,804.75
	545	Fabric Assy				438.84
	573	Off Site				53.78
						421.08
			115.06			51,544.33
		Material Handling Expense			168.02	572,477.82
		Total Overhead			(76.97)	62,377.70
		G&A Expense 9.2% of Manufacturing Expense			91.05	634,855.52
		Fixed Fee			(37.02)	154,269.48
					-0-	119,340.00

7 GAO 5300
1034-110-06

SERVICES OTHER THAN PERSONAL

6744

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION DEPARTMENT OF THE NAVY U. S. GOVERNMENT	DATE VOUCHER PREPARED February 13, 1969	VOUCHER NUMBER 54
	CONTRACT NUMBER AND DATE FEB 19 9 00 AM '69	PAID BY
	REQUISITION NUMBER AND DATE	

STAT

PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION AKRON, OHIO 44315	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER

SHIPPED FROM	TO	WEIGHT	GOVERNMENT B/L NUMBER
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NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT <small>(1)</small>
				COST	PER	
	1/1/69 thru 1/31/69	DIRECT CHARGES OVERHEAD G&A EXPENSE FIXED FEE		CURRENT	TO-DATE	
				2,293.93	1,113,656.39	
				337.12	635,192.64	
				281.52	154,551.00	
				-0-	119,340.00	
		(M.O. 8146AR) COST REIMBURSABLE PROVISIONAL PAYMENT		2,912.57		

(Use continuation sheet(s) if necessary) **(Payee must NOT use the space below)** TOTAL **2,022,740.03**

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
	= \$	= \$1.00	
	BY ?		
	TITLE		

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

 (Date) (Authorized Certifying Officer)²

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)							
Appropriation Symbol and Subhead	Object Class	Expenditure Account	Chargeable Activity	Bureau Cont. or Subauth'n Activity	Bureau Control No.	Sub-auth'n No.	Identification No.

I.R. No's	CHECK NUMBER ON TREASURER OF THE UNITED STATES	CHECK NUMBER ON (Name of bank)
	CASH DATE	PAYEE *

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

Standard Form No. 1225d
7 GAO 5000
1035-205-01

Public Voucher for Purchases and
Services Other Than Personal
CONTRIBUTION SHEET

MEMORANDUM

U. S. GOVERNMENT (Department, bureau, or establishment) Sheet No. 1 of Voucher No. 54

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	UNIT PRICE		AMOUNT
				Cost	Per	
	1/1/69 thru 1/31/69	DIRECT CHARGES		CURRENT		TO-DATE
		<u>Salaries & Wages</u>				
		Regular		27.85		575,088.11
		Overtime Premium		-0-		8,769.52
				<u>27.85</u>		<u>583,857.63</u>
		<u>Material Subject to Mat'l Handling Expense</u>				
		Purchases - Fixed Price	1,031.00			402,845.39
		Sub-Contract				342.90
		Paints & Solvents				1,706.56
		Stores Material				4,187.82
		Plant Engr. Make Ready				
		Material Transfers	1,235.00			48,296.95
			<u>2,266.00</u>			<u>457,379.62</u>
		<u>Material Not Subject to Handling Expense</u>				
		IBM Computer Charge				5,093.22
		Other Direct Charges		.08		2,732.99
				<u>.08</u>		<u>7,826.21</u>
		Total Material	2,266.08			465,205.83
		Travel		-0-		64,592.93
		Total Direct Charges	2,293.93			1,113,656.39

Services Other Than Personal
CONTINUATION SHEET

MEMORANDUM

U. S. GOVERNMENT

(Department, bureau, or establishment)

Sheet No. 2

of Voucher No. 54

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	UNIT PRICE		AMOUNT
				Cost	Per	
	1/1/69 thru 1/31/69	OVERHEAD				
		<u>Burden Center</u>				<u>To-Date</u>
		<u>Salaries & Wages</u>				
		<u>Rate</u>				
		501 Engr. Support				169,446.34
		501 Akron Engr. Support				3,333.83
		503 Engr.				111,662.05
		503 Akron Engr.				13,195.31
		507 Akron Shipping				275.34
		509 Akron Squadron				3.75
		511 Plant Engr.				2,818.44
		511 Akron Plant Engr.				204.35
		515 Metalcraft Parts Mfg. & Tooling				12,545.77
		517 Misc. Metalcraft Assy				98,697.98
		517 Akron Metalcraft				4,153.77
		519 Plastics				5,426.89
		519 Akron Plastics				1,575.29
		521 Elec. Assy	27.85	1.1572711	32.23	82,665.56
		521 Akron Elec. Assy				5,242.60
		531 Qual Control				8,804.75
		531 Akron Qual Control				438.84
		534 Engr. Field Service				53.78
		545 Fabric Assy				421.08
		573 Off Site				51,544.33
		=	27.85		32.23	572,510.05
		Material Handling Expense			304.89	62,682.59
		Total Overhead			337.12	635,192.64
		G&A Expense				
		10.7% of Manufacturing Expense			281.52	154,551.00
		Fixed Fee			-0-	119,340.00

SECRET
(When Filled In)

REQUEST FOR PAYMENT AND POSTING VOUCHER												VOUCHER NO. - DATE 2-12													
TO : Accounts Division (Room Bldg.) THROUGH: Monetary Division (Room Bldg.)										DIVISION VOUCHER NO. <i>14 Jan 69 3537</i>															
Request payment be made and/or transaction be recorded as indicated below. Pertinent documentation in support of this transaction is on file in this office.																									
SUBJECT										INVOICE NO (S). <i>52</i>															
PAYMENT TO <i>Goodyear Aerospace Corp.</i>										CONTRACT NO. <i>CW-6744</i>															
AMOUNT <i>\$5,017.92</i>										CHECK TO BE DATED															
CASH PAYMENT <input checked="" type="checkbox"/>				U. S. TREASURY CHECK				AGENT CASHIER CHECK				BANK CASHIER'S CHECK													
THE ATTACHED CHECKS AND/OR CASH IN THE AMOUNT OF \$ SHOULD BE TAKEN INTO ACCOUNT AS INDICATED BELOW.																									
I HEREBY AUTHORIZE MY AGENT, WHOSE SIGNATURE APPEARS BELOW, TO RECEIVE \$ OF OFFICIAL FUNDS IN CURRENCY ON MY BEHALF.																									
DATE		SIGNATURE OF PAYEE				DATE		SIGNATURE OF AGENT				DATE		SIGNATURE OF RECIPIENT											
DESCRIPTION-ALL OTHER ACCOUNTS 13-33		28-33 T/A NO.		34-39 STATION CODE		40-41 EXPENSE		42-47 OBLIG. REF. NO.		48-49 PAY PER. LIQ. CODE		50-54 CA OR CO S T YR.		51-54 GENERAL LEDGER ACCT. NO.		55-56 ALLOT.-COST-FAN ACCOUNT SYMBOL		61-66 CK. NO. X REF. NO.		67-70 OBJECT CLASS		68-70 DUE DATE		71-80 AMOUNT	
DESCRIPTION-ADVANCE ACCOUNTS 13-27		SHIP. DOC. NO.		REC. RPT. NO.		PROJECT NO.		ADVANCE-ACCT. NO. EMP. NO.		GENERAL LEDGER ACCT. NO.		GENERAL LEDGER ACCT. NO.		GENERAL LEDGER ACCT. NO.		GENERAL LEDGER ACCT. NO.		GENERAL LEDGER ACCT. NO.		GENERAL LEDGER ACCT. NO.		GENERAL LEDGER ACCT. NO.		GENERAL LEDGER ACCT. NO.	
<i>Goodyear</i>								<i>88006744</i>		<i>142417761</i>		<i>10212540</i>		<i>5,017.92</i>											
<i>Goodyear</i>																									
												TOTALS		<i>5,017.92 5,017.92</i>											
DATE		REVIEWED BY				DATE		CERTIFIED FOR PAYMENT OR CREDIT																	
<i>1-13-68</i>								(Signed)																	

7.GAO 5000
1034-110-06

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION DEPARTMENT OF THE NAVY U. S. GOVERNMENT	DATE VOUCHER PREPARED November 20, 1968	VOUCHER NUMBER 52
	CONTRACT NUMBER AND DATE	PAID BY
	REQUISITION NUMBER AND DATE	

PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION AKRON, OHIO 44315	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER

CW-6744

SHIPPED FROM	TO	WEIGHT	GOVERNMENT B/L NUMBER
--------------	----	--------	-----------------------

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT (1)
				COST	PER	
	11/18/68 thru 11/30/68	DIRECT CHARGES OVERHEAD G&A EXPENSE FIXED FEE		<u>CURRENT</u>		<u>TO-DATE</u>
				2,049.52		1,111,855.86
				2,418.92		634,764.47
				549.48		154,306.50
				-0-		119,340.00
	(M.O. 8146AR) COST REIMBURSABLE PROVISIONAL PAYMENT			5,017.92		
				TOTAL		2,020,266.83

(Use continuation sheet(s) if necessary)		STAT
PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR <u> </u> (Date) BY <u> </u> TITLE <u> </u> (Date)	
		DIFFERENCES
		amount verified; correct for
		(Signature or initials)

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

(Date) _____ (Authorized Certifying Officer)² _____ (Title) _____

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)								
Appropriation Symbol and Subhead	Object Class	Expenditure Account	Chargeable Activity	Bureau Cont. or Subauth'n Activity	Bureau Control No.	Sub-auth'n No.	Identification No.	Amount

I.R. No's	CHECK NUMBER ON TREASURER OF THE UNITED STATES	CHECK NUMBER ON (Name of bank)
PAY BY	CASH DATE	PAYEE ³
	\$	

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

Standard Form No. 1035a
7 GAO-5000
1035-206-01

**Purchase Voucher for Purchases and
Services Other Than Personal**
CONTINUATION SHEET

MEMORANDUM

U. S. - GOVERNMENT

Sheet No. 1 of Voucher No. 52

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	UNIT PRICE		AMOUNT
				Cost	Per	
				<u>CURRENT</u>		<u>TO-DATE</u>
	11/18/68 thru 11/30/68	DIRECT CHARGES				
		<u>Salaries & Wages</u>				
		Regular		963.23		574,945.20
		Overtime Premium		-0-		8,769.52
				<u>963.23</u>		<u>583,714.72</u>
		<u>Material Subject to Mat'l Handling Expense</u>				
		Purchases - Fixed Price		1,031.00		402,496.89
		Sub-Contract				342.90
		Paints & Solvents				1,706.56
		Stores Material		17.66		4,112.07
		Plant Engr. Make Ready				<u>47,061.95</u>
		Material Transfers		<u>1,048.66</u>		<u>455,720.37</u>
		<u>Material Not Subject to Handling Expense</u>				
		IBM Computer Charge				5,093.22
		Other Direct Charges		<u>37.63</u>		<u>2,734.62</u>
				<u>37.63</u>		<u>7,827.84</u>
		Total Material		1,086.29		463,548.21
		Travel		-0-		64,592.93
		Total Direct Charges		<u>2,049.52</u>		<u>1,111,855.86</u>

Services Other Than Personal
CONTINUATION SHEET

MEMORANDUM

U. S. GOVERNMENT Sheet No. 2 of Voucher No. 52
(Department, bureau, or establishment)

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	UNIT PRICE		AMOUNT
				Cost	Per	
	11/18/68 thru 11/30/68	OVERHEAD				
		<u>Burden Center</u>				<u>To-Date</u>
		<u>Salaries & Wages</u>		<u>Rate</u>	<u>Burden</u>	
		501 Engr. Support	158.45	2.3591669	373.81	169,446.34
		501 Akron Engr. Support				3,333.83
		503 Engr.	32.22 ,	3.9745500	128.06	111,662.05
		503 Akron Engr.				13,195.31
		507 Akron Shipping				275.34
		509 Akron Squadron				3.75
		511 Plant Engr.	9.15	3,2983607	30.18	2,812.81
		511 Akron Plant Engr.				204.35
		515 Metalcraft Parts Mfg. & Tooling	.45	12,5383333	5.64	12,545.77
		517 Misc. Metalcraft Assy				98,697.98
		517 Akron Metalcraft				4,153.77
		519 Plastics				5,426.89
		519 Akron Plastics				1,575.29
		521 Elec. Assy	740.09	2.1654529	1,602.63	82,474.64
		521 Akron Elec. Assy				5,242.60
		531 Qual Control	22.87	5,7625711	131.79	8,801.15
		531 Akron Qual Control				438.84
		534 Engr. Field Service				53.78
		545 Fabric Assy				421.08
		573 Off Site				51,544.33
			963.23		2,272.11 ✓	572,309.80
		Material Handling Expense			146.81	62,454.67
		Total Overhead			2,418.92 ✓	634,764.47
		G&A Expense			549.48 ✓	154,306.50
		Fixed Fee			-0-	119,340.00

SECRET
(When Filled In)

REQUEST FOR PAYMENT AND POSTING VOUCHER												VOUCHER NO. - DATE 2-12							
TO : Accounts Division (Room)						Bldg.)						DIVISION VOUCHER NO.							
THROUGH: Monetary Division (Room)						Bldg.)						31 Dec 68 3352							
Request payment be made and/or transaction be recorded as indicated below. Pertinent documentation in support of this transaction is on file in this office.																			
SUBJECT										INVOICE NO(S). 50451									
PAYMENT TO <i>Goodyear Aerospace Corporation</i>										CONTRACT NO. <i>CW-6744</i>									
AMOUNT <i>#16,247.58</i>										CHECK TO BE DATED									
CASH PAYMENT		<input checked="" type="checkbox"/> U.S. TREASURY CHECK		AGENT CASHIER CHECK		BANK CASHIER'S CHECK													
THE ATTACHED CHECKS AND/OR CASH IN THE AMOUNT OF \$ SHOULD BE TAKEN INTO ACCOUNT AS INDICATED BELOW.																			
I HEREBY AUTHORIZE MY AGENT, WHOSE SIGNATURE APPEARS BELOW, TO RECEIVE \$ OF OFFICIAL FUNDS IN CURRENCY ON MY BEHALF.																			
DATE		SIGNATURE OF PAYEE				DATE		SIGNATURE OF AGENT				DATE		SIGNATURE OF RECIPIENT					
DESCRIPTION-ALL OTHER ACCOUNTS 13-33		34-39 STATION CODE		40-41 EXPOSED		42-47 OBLIG. REF. NO.		48-49 PAY PER. LIQ. CODE		50-54 OR. C O S T YR.		51-54 GENERAL LEDGER ACCT. NO.		55-56 ALLOT.-COST-FAN ACCOUNT SYMBOL		67-70 OBJECT CLASS		71-80 AMOUNT	
ADVANCE ACCOUNTS 13-27		SHIP. DOC. NO.		REC. RPT. NO.		ADVANCE ACCT. NO.		EMP. NO.		FUND		61-66 CK. NO.		68-70 DUE DATE		DEBIT		CREDIT	
		192-33 DIV.		PROJECT NO.								X REF. NO.							
<i>Goodyear</i>						<i>88006744</i>				<i>142417761-</i>		<i>10212540</i>		<i>16,247.58</i>					
<i>Goodyear</i>																		<i>16,247.58</i>	
														TOTALS		<i>16,247.58 16,247.58</i>			
DATE		REVIEWED BY				DATE		CERTIFIED FOR PAYMENT OR CREDIT				SIGNATURE OF CERTIFYING OFFICER							
<i>12-31-68</i>												<i>(Signed)</i>							

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC
DOWNGRADING AND DECLASSIFICATION

Standard form no. 1054
7 GAO 5000
1034-111

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

VOUCHER NO.

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION

DATE VOUCHER PREPARED

SCHEDULE NO.

CONTRACT NUMBER AND DATE
CW-6744

PAID BY

REQUISITION NUMBER AND DATE

DATE INVOICE RECEIVED

DISCOUNT TERMS

PAYEE'S ACCOUNT NUMBER

PAYEE'S NAME AND ADDRESS

Goodyear Aerospace Corporation

SHIPPED FROM TO WEIGHT

GOVERNMENT B/L NUMBER

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT ⁽¹⁾
				COST	PER	
		50 (Orig Inv Att)				8,510.29
		51 " " "				7,737.29

(Use continuation sheet(s) if necessary) **(Payee must NOT use the space below)** TOTAL 16,247.58

PAYMENT:
 COMPLETE
 PARTIAL
 FINAL
 PROGRESS
 ADVANCE

APPROVED FOR = \$ _____ EXCHANGE RATE = \$1.00 DIFFERENCES _____

BY: _____

TITLE _____

Amount verified correct **16,247.58**

Pursuant to authority: **31 DEC 196**
(Date)

PAID BY

CHECK NUMBER ON TREASURER OF THE UNITED STATES CHECK NUMBER ON (Name of bank)

CASH DATE PAYEE ³

\$ _____

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

7 GAO 5000
1034-110-06

SERVICES OTHER THAN PERSONAL

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION DEPARTMENT OF THE NAVY U. S. GOVERNMENT DEC 12 8 52 AM '68	DATE VOUCHER PREPARED November 25, 1968	VOUCHER NUMBER 50
	CONTRACT NUMBER AND DATE	PAID BY
	REQUISITION NUMBER AND DATE	

PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION AKRON, OHIO 44315 <i>CV-6744</i>	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER
	GOVERNMENT B/L NUMBER

SHIPPED FROM _____ TO _____ WEIGHT _____

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT (1)
				COST	PER	
	10/21/68 thru 10/31/68	DIRECT CHARGES OVERHEAD G&A EXPENSE FIXED FEE (M.O. 8126AR) COST REIMBURSABLE PROVISIONAL PAYMENT		CURRENT	TO-DATE	
				3,261.91		1,106,507.63
				4,275.32		628,642.19
				973.06		153,021.80
				-0-		119,340.00
				8,510.29		
(Use continuation sheet(s) if necessary)				(Payee must NOT use the space below)		TOTAL
						2,007,511.62

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
	BY:	= \$	
	TITLE		
	Amount verified; correct for		

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

(Date) _____ (Authorized Certifying Officer) _____ (Title) _____

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)							
Appropriation Symbol and Subhead	Object Class	Expenditure Account	Chargeable Activity	Bureau Cont. or Subauth'n Activity	Bureau Control No.	Sub-auth'n No.	Identifi-cation No.
							Amount

I.R. No's _____

PAID BY	CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER	ON (Name of bank)
	CASH	DATE	PAYEE'S	

1 When stated in foreign currency, insert name of currency.
 2 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 in the space provided, over his official title.
 3 When a voucher is 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.

Services Other Than Personal

CONTINUATION SHEET

U.S. GOVERNMENT (Department, bureau, or establishment) Sheet No. 1 of Voucher No. 50

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	UNIT PRICE		AMOUNT
				Cost	Per	
	10/2/68 thru 10/31/68	DIRECT CHARGES				TO-DATE
		<u>Salaries & Wages</u>				
		Regular		3,201.39		570,683.26
		Overtime Premium		4.01		8,769.52
				<u>3,205.40</u>		<u>579,452.78</u>
		<u>Material Subject to Mat'l Handling Expense</u>				
		Purchases - Fixed Price				401,465.89
		Sub-Contract				342.90
		Paints & Solvents		26.20		1,706.56
		Stores Material		14.08		4,094.41
		Plant Engr. Make Ready				
		Material Transfers				47,061.95
				<u>40.28</u>		<u>454,671.71</u>
		<u>Material Not Subject to Handling Expense</u>				
		IBM Computer Charge				5,093.22
		Other Direct Charges		16.23		2,696.99
				<u>16.23</u>		<u>7,790.21</u>
		Total Material		56.51		462,461.92
		Travel		-0-		64,592.93
		Total Direct Charges		<u>3,261.91</u>		<u>1,106,507.63</u>

Services Other Than Personal

CONTINUATION SHEET

U.S. GOVERNMENT (Department, bureau, or establishment) Sheet No. 2 of Voucher No. 50

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	UNIT PRICE		AMOUNT
				Cost	Per	
	10/21/68 thru 10/31/68	OVERHEAD				
		Salaries & Wages			Burden	To-Date
		Rate				
		Burden Center				
		501 Engr. Support		1,894.84	2,487.50	166,682.58
		501 Akron Engr. Support				3,333.83
		503 Engr.	472.17	1.459432	541.08	111,021.94
		503 Akron Engr.				13,195.31
		507 Akron Shipping				275.34
		509 Akron Squadron				3.75
		511 Plant Engr.				2,748.13
		511 Akron Plant Engr.				204.35
		515 Metalcraft Parts				
		Mfg. & Tooling	42.21	1.9620943	82.82	12,529.78
		517 Misc. Metalcraft Assy				98,697.98
		517 Akron Metalcraft				4,153.77
		519 Plastics				5,426.89
		519 Akron Plastics				1,575.29
		521 Elec. Assy	603110	1.5508705	935.33	80,345.80
		521 Akron Elec. Assy				5,242.60
		531 Qual Control	189.07	1.1527477	217.95	8,438.96
		531 Akron Qual Control				438.84
		534 Engr. Field Service				53.78
		545 Fabric Assy				421.08
		573 Off Site				51,544.33
			3,201.39		4,264.68	566,334.33
		Material Handling Expense			10.64	62,307.86
		Total Overhead			4,275.32	628,642.19
		G&A Expense			973.06	153,021.80
		Fixed Fee			-0-	119,340.00

7 GAO 5000
1034-110-06

SERVICES OTHER THAN PERSONAL

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION DEPARTMENT OF THE NAVY U. S. GOVERNMENT	DATE VOUCHER PREPARED November 25, 1968	VOUCHER NUMBER 51
	CONTRACT NUMBER AND DATE	PAID BY
	REQUISITION NUMBER AND DATE	

PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION AKRON, OHIO 44315	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER
	GOVERNMENT B/L NUMBER

SHIPPED FROM _____ TO _____ WEIGHT _____

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT <small>(1)</small>
				COST	PER	
	11/1/68 thru 11/17/68	DIRECT CHARGES OVERHEAD G&A EXPENSE FIXED FEE (M.O. 8146AR) COST REIMBURSABLE PROVISIONAL PAYMENT		CURRENT 3,298.71 3,703.36 735.22 -0-		TO-DATE 1,109,806.34 632,345.55 153,757.02 119,340.00
				7,737.29		

(Use continuation sheet(s) if necessary) **(Payee must NOT use the space below)** TOTAL 2,015,248.91 ✓

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
	= \$	= \$1.00	
	BY ?		
	TITLE		Amount verified; correct for <i>(Signature or initials)</i>

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

(Date) _____ (Authorized Certifying Officer)² _____ (Title) _____

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)								
Appropriation Symbol and Subhead	Object Class	Expenditure Account	Chargeable Activity	Bureau Cont. or Subauth'n Activity	Bureau Control No.	Sub-auth'n No.	Identifi-cation No.	Amount

I.R. No's	CHECK NUMBER ON TREASURER OF THE UNITED STATES	CHECK NUMBER ON (Name of bank)
	CASH DATE	PAYEE :

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

Services Other Than Personal

CONTINUATION SHEET

U.S. GOVERNMENT

(Department, bureau, or establishment)

Sheet No. 1

of Voucher No. 51

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	UNIT PRICE		AMOUNT
				Cost	Per	
	11/1/68 thru 11/17/68	DIRECT CHARGES				
		<u>Salaries & Wages</u>				TO-DATE
		Regular		3,298.71		573,981.97
		Overtime Premium		-0-		8,769.52
				<u>3,298.71</u>		<u>582,751.49</u>
		<u>Material Subject to Mat'l Handling Expense</u>				
		Purchases - Fixed Price				401,465.89
		Sub-Contract				342.90
		Paints & Solvents				1,706.56
		Stores Material				4,094.41
		Plant Engr. Make Ready				
		Material Transfers				47,061.95
				<u>-0-</u>		<u>454,671.71</u>
		<u>Material Not Subject to Handling Expense</u>				
		IBM Computer Charge				5,093.22
		Other Direct Charges				2,696.99
				<u>-0-</u>		<u>7,790.21</u>
		Total Material		-0-		462,461.92
		Travel		-0-		64,592.93
		Total Direct Charges		3,298.71		1,109,806.34

Standard Form No. 1035
7 GAO 5000
1035-107**PUBLIC VOUCHER FOR PURCHASES AND
SERVICES OTHER THAN PERSONAL**

CONTINUATION SHEET

SHEET NO. 2

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT						VOUCHER NUMBER	
U. S. GOVERNMENT						51	
NUMBER 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)			UNIT PRICE		AMOUNT
					COST	PER	
	11/1/68 thru 11/17/68	OVERHEAD					
		<u>Burden Center</u>	<u>Salaries & Wages</u>	<u>Rate</u>	<u>Burden</u>	<u>To-Date</u>	
		501 Engr. Support	2,186.55	1.0930233	2,389.95	169,072.53	
		501 Akron Engr. Support				3,333.83	
		503 Engr.	504.35	1.0152672	512.05	111,533.99	
		503 Akron Engr.				13,195.31	
		507 Akron Shipping				275.34	
		509 Akron Squadron				3.75	
		511 Plant Engr.	35.90	.9582173	34.40	2,782.53	
		511 Akron Plant Engr.				204.35	
		515 Metalcraft Parts Mfg. & Tooling	5.28	1.9602273	10.35	12,540.13	
		517 Misc. Metalcraft Assy				98,697.98	
		517 Akron Metalcraft				4,153.77	
		519 Plastics				5,426.89	
		519 Akron Plastics				1,575.29	
		521 Elec. Assy	334.31	1.5740181	526.21	80,872.01	
		521 Akron Elec. Assy				5,242.60	
		531 Qual Control	232.32	.9917355	230.40	8,669.36	
		531 Akron Qual Control				438.84	
		534 Engr. Field Service				53.78	
		545 Fabric Assy				421.08	
		573 Off Site				51,544.33	
			3,298.71		3,703.36	570,037.69	
		Material Handling Expense			-0-	62,307.86	
		Total Overhead			3,703.36	632,345.55	
		G&A Expense 10.5% OF MANUFACTURINE EXPENSE			735.22	153,757.02	
		Fixed FEE			-0-	119,340.00	

Standard Sanitized Copy Approved for Release 2010/12/09 : CIA-RDP72B00464R000800100001-6

7 GAO 5000
1034-110

SERVICES OTHER THAN PERSONAL

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION	DATE VOUCHER PREPARED	VOUCHER NUMBER	
	CONTRACT NUMBER AND DATE CW-6744		PAID BY
	REQUISITION NUMBER AND DATE		
PAYEE'S NAME AND ADDRESS Goodyear Aerospace Corporation		DATE INVOICE RECEIVED	
		DISCOUNT TERMS	
		PAYEE'S ACCOUNT NUMBER	

SHIPPED FROM	TO	WEIGHT	GOVERNMENT B/L NUMBER
--------------	----	--------	-----------------------

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT (¹)
				COST	PER	
		48 (Orig Inv Att)				12,793.15
		49 " " "				10,969.80

(Use continuation sheet(s) if necessary) **(Payee must NOT use the space below)** **TOTAL** **23,762.95**

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
	= \$	= \$1.00	
	BY :		
	TITLE	Amount verified; correct for	

Pursuant to **4 NC** (Date)

STAT

PAID BY	CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER	ON (Name of bank)
	CASH	DATE	PAYEE ³	

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

Standard

7 AO. 5000
1034-110-06

SERVICES OTHER THAN PERSONAL

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION DEPARTMENT OF THE NAVY U. S. GOVERNMENT	DATE VOUCHER PREPARED October 28, 1968	VOUCHER NUMBER 48
	CONTRACT NUMBER AND DATE 11755	PAID BY
	REQUISITION NUMBER AND DATE Nov 2 11 19 11755	

PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION AKRON, OHIO 44315 <i>6744</i>	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER
	GOVERNMENT B/L NUMBER

SHIPPED FROM	TO	WEIGHT	GOVERNMENT B/L NUMBER
--------------	----	--------	-----------------------

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT ⁽¹⁾
				COST	PER	
	9/1/68 thru 9/30/68	DIRECT CHARGES OVERHEAD G&A EXPENSE FIXED FEE (M.O. 8116AR) COST REIMBURSABLE PROVISIONAL PAYMENT		CURRENT	TO-DATE	
				6,354.16		1,098,081.46
				5,415.07		619,439.32
				1,023.92		151,170.75
				00-		119,310.00
				12,793.15		
TOTAL						1,988,031.53

(Use continuation sheet(s) if necessary) (Payee must NOT use the space below)

PAYMENT:	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
<input type="checkbox"/> COMPLETE	= \$	= \$1.00	
<input type="checkbox"/> PARTIAL	BY ²		
<input type="checkbox"/> FINAL			
<input type="checkbox"/> PROGRESS	TITLE		
<input type="checkbox"/> ADVANCE			
			Amount verified; correct for <i>(Signature or initials)</i>

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

(Date) _____ (Authorized Certifying Officer) ³ _____ (Title) _____

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)								
Appropriation Symbol and Subhead	Object Class	Expenditure Account	Chargeable Activity	Bureau Cont. or Subauth'n Activity	Bureau Control No.	Sub-auth'n No.	Identifi-cation No.	Amount

I.R. No's	CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER	ON (Name of bank)
	CASH	DATE	PAYEE ³	
	\$			

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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 "Manager" or "President".

Services Other Than Personal

CONTINUATION SHEET

U.S. GOVERNMENT (Department, bureau, or establishment) Sheet No. 1 of Voucher No. 48

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	UNIT PRICE		AMOUNT
				Cost	Per	
		DIRECT CHARGES				
	9/1/68 thru 9/30/68					
		<u>Salaries & Wages</u>				
		Regular		4,636.79		562,509.17
		Overtime Premium		163.66		8,698.95
				<u>4,800.45</u>		<u>571,208.12</u>
		<u>Material Subject to Mat'l Handling Expense</u>				
		Purchases - Fixed Price Sub-Contract		1,470.70		401,340.89
		P Paints & Solvents		71.38		342.90
		Stores Material		2.86		1,680.36
		Plant Engr. Make Ready				4,080.33
		Material Transfers				
				<u>1,544.94</u>		<u>47,061.95</u>
						<u>454,506.13</u>
		<u>Material Not Subject To Handling Expense</u>				
		IBM Computer Charge				5,093.22
		Other Direct Charges		8.77		2,680.76
				<u>8.77</u>		<u>7,773.98</u>
		Total Material		1,558.71		462,280.41
		Travel		-0-		64,592.93
		Total Direct Charges		6,354.16		1,098,081.46

Services Other Than Personal

CONTINUATION SHEET

U.S. GOVERNMENT

(Department, bureau, or establishment)

Sheet No. 2

of Voucher No. 48

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	UNIT PRICE		AMOUNT
			Salaries & Wages	Rate		Cost	Per	
	9/1/68 thru 9/30/68	OVERHEAD						
		Burden Center				Burden		To-Date
		501 Engr. Support	3,334.32	.9994	332	3,332.45		160,382.83
		501 Akron Engr. Support						3,333.83
		503 Engr.	294.17	.9852	299	289.83		109,891.88
		503 Akron Engr.						13,195.31
		507 Akron Shipping						275.34
		509 Akron Squadron						3.75
		511 Plant Engr.						2,748.13
		511 Akron Plant Engr.						204.35
		515 Metalcraft Parts Mfg. & Tooling	310.82	1.8868	155	586.46		12,446.96
		517 Misc. Metalcraft Assy						98,697.98
		517 Akron Metalcraft						4,153.77
		519 Plastics						5,426.89
		519 Akron Plastics						1,575.29
		521 Elec. Assy	477.58	1.7665	273	843.68		79,236.31
		521 Akron Ele.c Assy						5,242.60
		531 Qual Control	219.90	.9465	232	208.15		7,881.35
		531 Akron Qual Control						438.84
		534 Engr. Field Service						53.78
		545 Fabric Assy						421.08
		573 Off Site						51,544.33
			4,636.79			5,260.57		557,154.60
		Material Handling Expense				154.50		62,284.72
		Total Overhead				5,415.07		619,439.32
		G&A Expense						
		8.7% of Manufacturing Expense				1,023.92		151,170.75
		Fixed Fee				-0-		119,340.00

Standard Form No. 1034
GPO 5000
1034-110-06

**PUBLIC VOUCHER FOR PURCHASE OF
SERVICES OTHER THAN PERSONAL**

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION DEPARTMENT OF THE NAVY U. S. GOVERNMENT	DATE VOUCHER PREPARED October 28, 1968	VOUCHER NUMBER 49
	CONTRACT NUMBER AND DATE	PAID BY
	REQUISITION NUMBER AND DATE Nov 7 11 19 AM '68	

PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION AKRON, OHIO 44315 <i>CW-6744</i>	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER
	GOVERNMENT B/L NUMBER

SHIPPED FROM	TO	WEIGHT
--------------	----	--------

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT (¹)
				COST	PER	
	10/1/68 thru 10/20/68	DIRECT CHARGES OVERHEAD G&A EXPENSE FIXED FEE		CURRENT	TO-DATE	
				5,164.26 ✓		1,103,215.72
				4,927.55 ✓		624,366.87
				877.99 ✓		152,018.74
				-0-		119,310.00
		(M.O. 8116AR) COST REIMBURSABLE PROVISIONAL PAYMENT		10,969.80		
					TOTAL	1,999,001.33

(Use continuation sheet(s) if necessary) **(Payee must NOT use the space below)**

PAYMENT:	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
<input type="checkbox"/> COMPLETE	= \$	= \$1.00	
<input type="checkbox"/> PARTIAL	BY ?		
<input type="checkbox"/> FINAL			
<input type="checkbox"/> PROGRESS	TITLE		
<input type="checkbox"/> ADVANCE			
			Amount verified; correct for <i>(Signature or initials)</i>

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

(Date) _____ (Authorized Certifying Officer) _____ (Title) _____

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

Appropriation Symbol and Subhead	Object Class	Expenditure Account	Chargeable Activity	Bureau Cont. or Subanth'n Activity	Bureau Control No.	Sub-auth'n No.	Identification No.	Amount

PAID BY	CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER	ON (Name of bank)
	CASH	DATE	PAYEE *	
	\$			

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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"

Services Other Than Personal

CONTINUATION SHEET

U.S. GOVERNMENT (Department, bureau, or establishment) Sheet No. 1 of Voucher No. 49

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	UNIT PRICE		AMOUNT
				Cost	Per	
	10/1/68 thru 10/20/68	<u>DIRECT CHARGES</u>		CURRENT		TO-DATE
		<u>Salaries & Wages</u>				
		Regular		4,972.70		567,481.87
		Overtime Premium		66.56		8,765.51
				<u>5,039.26</u>		<u>576,247.38</u>
		<u>Material Subject to Mat'l Handling Expense</u>				
		Purchases - Fixed Price		125.00		401,465.89
		Sub-Contract				342.90
		Paints & Solvents				1,680.36
		Stores Material				4,080.33
		Plant Engr. Make Ready				
		Material Transfers				<u>47,061.95</u>
				<u>125.00</u>		<u>451,631.43</u>
		<u>Material Not Subject to Handling Expense</u>				
		IBM Computer Charge				5,093.22
		Other Direct Charges				2,680.76
				<u>-0-</u>		<u>7,773.98</u>
		Total Material		125.00		462,405.41
		Travel		-0-		64,592.93
		Total Direct Charges		<u>5,164.26</u>		<u>1,103,245.72</u>

Services Other Than Personal

CONTINUATION SHEET

U.S. GOVERNMENT Sheet No. 2 of Voucher No. 49
(Department, bureau, or establishment)

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	UNIT PRICE		AMOUNT
			Salaries & Wages	Rate		Cost	Per	
	10/1/68 thru 10/20/68	OVERHEAD						
		<u>Burden Center</u>	<u>Salaries & Wages</u>	<u>Rate</u>		<u>Burden</u>	<u>To-Date</u>	
		501 Engr. Support	3,857.10	.9883721	3,812.25	164,195.08		
		501 Akron Engr. Support				3,333.83		
		503 Engr.	640.92	.9189602	588.98	110,480.86		
		503 Akron Engr.				13,195.31		
		507 Akron Shipping				275.34		
		509 Akron Squadron				3.75		
		511 Plant Engr.				2,748.13		
		511 Akron Plant Engr.				204.35		
		515 Metalcraft Parts Mfg. & Tooling				12,446.96		
		517 Misc. Metalcraft Assy				98,697.98		
		517 Akron Metalcraft				4,153.77		
		519 Plastics				5,426.89		
		519 Akron Plastics				1,575.29		
		521 Elec. Assy	100.34	1.7356986	174.16	79,410.47		
		521 Akron Ele c. Assy				5,242.60		
		531 Qual Control	374.34	.9073569	339.66	8,221.01		
		531 Akron Qual Control				438.84		
		534 Engr. Field Service				53.78		
		545 Fabric Assy				421.08		
		573 Off Site				51,544.33		
			4,972.70		4,915.05	562,069.65		
		Material Handling Expense			12.50	62,297.22		
		Total Overhead			4,927.55	624,366.87		
		G&A Expense						
		8.7% of Manufacturing Expens			877.99	152,048.74		
		Fixed Fee			-0-	119,340.00		

SECRET
(When Filled In)

File

REQUEST FOR PAYMENT AND POSTING VOUCHER

VOUCHER NO. - DATE 2-12

TO : Accounts Division (Room Bldg.)
THROUGH: Monetary Division (Room Bldg.)

DIVISION VOUCHER NO.
3 Oct 68 1891

Request payment be made and/or transaction be recorded as indicated below. Pertinent documentation in support of this transaction is on file in this office.

SUBJECT: _____ INVOICE NO(S): **47**
PAYMENT TO: **Goodyear Aerospace Corp.** CONTRACT NO. **EW-6744**
AMOUNT: **\$ 4,832.25** CHECK TO BE DATED _____

CASH PAYMENT U.S. TREASURY CHECK AGENT CASHIER CHECK BANK CASHIER'S CHECK

THE ATTACHED CHECKS AND/OR CASH IN THE AMOUNT OF \$ _____ SHOULD BE TAKEN INTO ACCOUNT AS INDICATED BELOW.

I HEREBY AUTHORIZE MY AGENT, WHOSE SIGNATURE APPEARS BELOW, TO RECEIVE \$ _____ OF OFFICIAL FUNDS IN CURRENCY ON MY BEHALF.

DATE	SIGNATURE OF PAYEE	DATE	SIGNATURE OF AGENT	DATE	SIGNATURE OF RECIPIENT
------	--------------------	------	--------------------	------	------------------------

DESCRIPTION-ALL OTHER ACCOUNTS 13-33		34-39 STATION CODE	40-41 EXCISE	42-47 OBLIG. REF. NO.	48-49 PAY PER. LIQ. CODE	50 CA OR. C O S T YR	51-54 GENERAL LEDGER ACCT. NO.	55-56 ALLOT.-COST-FAN ACCOUNT SYMBOL	61-66 CK. NO. X REF. NO.	67-70 OBJECT CLASS	68-70 DUE DATE	71-80 AMOUNT		
DESCRIPTION-ADVANCE ACCOUNTS 13-27	SHIP. DOC. NO.	REC. RPT. NO.	PROJECT NO.	ADVANCE ACCT. NO.	EMP. NO.							DEBIT	CREDIT	
<i>Goodyear</i>				88006744			1424177	61-1021	2540			4,832.25	4,832.25	
<i>Goodyear</i>														
												TOTALS	4,832.25	4,832.25

*Emp of Addendum 4,832.25
Mount EW-6744
Womack*

DATE: **10-3-68** REVIEWED BY: _____ CERTIFIED FOR PAYMENT OR CREDIT: _____
SIGNATURE OF CERTIFYING OFFICER: _____ DATE: _____

7 GAO 5000
1034-110-06

SERVICES OTHER THAN PERSONAL

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION DEPARTMENT OF THE NAVY U. S. GOVERNMENT	DATE VOUCHER PREPARED Sept. 24, 1968	VOUCHER NUMBER 47
	CONTRACT NUMBER AND DATE	PAID BY
	REQUISITION NUMBER AND DATE	

PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION AKRON, OHIO 44315 <i>CW-6744</i>	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER
	GOVERNMENT B/L NUMBER

SHIPPED FROM _____ TO _____ WEIGHT _____

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT <small>(1)</small>
				COST	PER	
	8/1/68 thru 8/31/68	DIRECT CHARGES OVERHEAD G&A EXPENSE FIXED FEE (M.O. 8116AR) COST REIMBURSABLE PROVISIONAL PAYMENT		CURRENT	TO -DATE	
				1,988.04		1,091,727.30
				2,424.97		614,024.25
				419.24		150,146.83
				-0-		119,340.00
				4,832.25 ✓		
				TOTAL		1,975,238.38 STAT

(Use continuation sheet(s) if necessary)

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	(Signature or initials) _____
	(Date)	
	BY ?	
	3 OCT 1968	

TITLE (Date) _____

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

(Date) _____ (Authorized Certifying Officer) _____ (Title) _____

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

Appropriation Symbol and Subhead	Object Class	Expenditure Account	Chargeable Activity	Bureau Cont. or Subauth'n Activity	Bureau Control No.	Sub-auth'n No.	Identification No.	Amount

I.R. No's _____

PAID BY	CHECK NUMBER ON TREASURER OF THE UNITED STATES	CHECK NUMBER ON (Name of bank)
	CASH DATE	PAYEE'S

\$ _____

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 1

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT

U. S. GOVERNMENT

VOUCHER NUMBER

47

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
	8/1/68 thru 8/31/68	DIRECT CHARGES			CURRENT	TO-DATE
		<u>SALARIES & WAGES</u>				
		Regular		2,230.25		557,872.38
		Overtime Premium		17.74		8,535.29
				<u>2,247.99</u>		<u>566,407.67</u>
		<u>MATERIAL SUBJECT TO MAT'L HANDLING EXPENSE</u>				
		Purchases - Fixed Price		(280.00)		399,870.19
		Sub-Contract				342.90
		Paints & Solvents		17.39		1,608.98
		Stores Material		5.06		4,077.47
		Plant Engr. Make Ready				
		Material Transfers		(7.75)		47,061.95
				<u>(265.30)</u>		<u>452,961.49</u>
		<u>MATERIAL NOT SUBJECT TO HANDLING EXPENSE</u>				
		IBM Computer Charge				5,093.22
		Other Direct Charges		5.35		2,671.99
				<u>5.35</u>		<u>7,765.21</u>
		Total Material		(259.95)		460,726.70
		Travel		-0-		64,592.93
		Total Direct Charges		1,988.04		1,091,727.30

Standard Form No. 1035
7 GAO 5000
1035-107**PUBLIC VOUCHER FOR PURCHASES AND
SERVICES OTHER THAN PERSONAL**

CONTINUATION SHEET

SHEET NO. 2

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT

U. S. GOVERNMENT

VOUCHER NUMBER

47

NUMBER 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)			UNIT PRICE		AMOUNT
					COST	PER	
	8/1/68 thru 8/31/68	OVERHEAD					
		Burden Center	Salaries & Wages	Rate	Burden	To-Date	
		501 Engr. Support	1,363.09	1.0378625	1,414.70 ✓	157,050.38	
		501 Akron Engr. Support				3,333.83	
		503 Engr.	450.21	.9303214	418.84 ✓	109,602.05	
		503 Akron Engr.				13,195.31	
		507 Akron Shipping				275.34	
		509 Akron Squadron				3.75	
		511 Plant Engr.				2,748.13	
		511 Akron Plant Engr.				204.35	
		515 Metalcraft Parts Mfg. & Tooling	57.51	1.7031821	97.95 ✓	11,860.50	
		517 Misc. Metalcraft Assy				98,697.98	
		517 Akron Metalcraft				4,153.77	
		519 Plastics				5,426.89	
		519 Akron Plastics				1,575.29	
		521 Elec. Assy	249.91	1.6742827	418.42 ✓	78,392.63	
		521 Akron Elec. Assy				5,242.60	
		531 Qual Control	109.53	.9032229	98.93 ✓	7,673.20	
		531 Akron Qual Control				438.84	
		534 Engr. Field Service				53.78	
		545 Fabric Assy				421.08	
		573 Off Site				51,544.33	
			2,230.25		2,448.84	551,894.03	
		Material Handling Expense			(23.87)	62,130.22	
		Total Overhead			2,424.97 ✓	614,024.25	
		G&A Expense					
		9.5% of Manufacturing Expense			419.24 ✓	150,146.83	
		Fixed Fee			-0-	119,340.00	

SECRET
(When Filled In)

File

REQUEST FOR PAYMENT AND POSTING VOUCHER										VOUCHER NO.--DATE 2-12						
TO : Accounts Division (Room) Bldg.)						DIVISION VOUCHER NO.										
THROUGH: Monetary Division (Room) Bldg.)						3 Sep 68 1256										
Request payment be made and/or transaction be recorded as indicated below. Pertinent documentation in support of this transaction is on file in this office.																
SUBJECT						INVOICE NO(S). <i>46</i>										
PAYMENT TO <i>Goodyear Aerospace Corp.</i>						CONTRACT NO. <i>CW-6744</i>										
AMOUNT <i>\$ 2,140.86</i>						CHECK TO BE DATED										
CASH PAYMENT <input checked="" type="checkbox"/>			U.S. TREASURY CHECK			AGENT CASHIER CHECK			BANK CASHIER'S CHECK							
THE ATTACHED CHECKS AND/OR CASH IN THE AMOUNT OF \$ SHOULD BE TAKEN INTO ACCOUNT AS INDICATED BELOW.																
I HEREBY AUTHORIZE MY AGENT, WHOSE SIGNATURE APPEARS BELOW, TO RECEIVE \$ OF OFFICIAL FUNDS IN CURRENCY ON MY BEHALF.																
DATE				SIGNATURE OF PAYEE				DATE				SIGNATURE OF AGENT				
DESCRIPTION-ALL OTHER ACCOUNTS 13-33		34-39 STATION CODE		40-41 EXPOSED	42-47 OBLIG. REF. NO.		48-49 PAY PER. LIQ. CODE	50-54 OR C O S T Y R	51-54 GENERAL LEDGER ACCT. NO.		55-56 ALLOT.-COST-FAN ACCOUNT SYMBOL		67-70 OBJECT CLASS		71-80 AMOUNT	
DESCRIPTION-ADVANCE ACCOUNTS 13-27		28-33 T/A No.	SHIP. DOC. NO.	32-33 DIV.	REC. RPT. NO.	PROJECT NO.	ADVANCE ACCT. NO.	EMP. NO.	FUND S	61-66 CK. NO.	X REF. NO.	68-70 DUE DATE	DEBIT		CREDIT	
<i>Goodyear</i>							<i>88006744</i>		<i>1424177</i>	<i>61-1021</i>	<i>2540</i>		<i>2,140.86</i>		<i>CF</i>	
<i>Goodyear</i>													<i>2,140.86</i>		<i>CF</i>	
												<i>2,140.86</i>		<i>2,140.86</i>		
TOTALS												<i>2,140.86</i>		<i>2,140.86</i>		
DATE <i>9-3-68</i>				REVIEWED BY				CERTIFIED FOR PAYMENT OR CREDIT				SIGNATURE OF CERTIFYING OFFICER (Signed)				

25X1

25X1

SERVICES OTHER THAN PERSONAL

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION DEPARTMENT OF THE NAVY U. S. GOVERNMENT	DATE VOUCHER PREPARED AUGUST 26, 1968 CONTRACT NUMBER AND DATE 11 708 REQUISITION NUMBER AND DATE	VOUCHER NUMBER 46 PAID BY
---------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------	----------------------------------------

PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION AKRON, OHIO 44315 <i>0W-6744</i>	DATE INVOICE RECEIVED	DISCOUNT TERMS	PAYEE'S ACCOUNT NUMBER
-------------------------------------------------------------------------------------------------------------------	-----------------------	----------------	------------------------

SHIPPED FROM _____ TO _____ WEIGHT _____ GOVERNMENT B/L NUMBER _____

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUANTITY	UNIT PRICE		AMOUNT ⁽¹⁾
				COST	PER	
7/1/68 THRU 7/31/68 {M.O. 8146AR} COST REIMBURSABLE PROVISIONAL PAYMENT		DIRECT CHARGES OVERHEAD G&A EXPENSE FIXED FEE		<u>CURRENT</u>	<u>TO-DATE</u>	
				\$1,396.66	\$1,089,739.26	
				558.46	611,599.28	
				185.74	149,727.59	
				0-	119,340.00	
			\$2,140.86			

(Use continuation sheet(s) if necessary)

PAYMENT:	APPROVED FOR	TOTALS \$ 1,970,406. STAT
<input type="checkbox"/> COMPLETE	BY:	DIFFERENCES
<input type="checkbox"/> PARTIAL	(Date)	
<input type="checkbox"/> FINAL	TITLE	
<input type="checkbox"/> PROGRESS	SEP 1968	
<input type="checkbox"/> ADVANCE	(Date)	Amount verified; correct for signature or initials

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

(Date) _____ (Authorized Certifying Officer)² _____ (Title) _____

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

Appropriation Symbol and Subhead	Object Class	Expenditure Account	Chargeable Activity	Bureau Cont. or Subauth'n Activity	Bureau Control No.	Sub-auth'n No.	Identification No.	Amount

I.R. No's _____

PAID BY	CHECK NUMBER ON TREASURER OF THE UNITED STATES	CHECK NUMBER ON (Name of bank)
	CASH DATE	PAYEE #

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

Standard Form No. 1035
7 GAO 5000
1035-107**PUBLIC VOUCHER FOR PURCHASES AND
SERVICES OTHER THAN PERSONAL**

CONTINUATION SHEET

SHEET NO. **L**

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT

U. S. GOVERNMENT

VOUCHER NUMBER

46

NUMBER 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	UNIT PRICE		AMOUNT
				COST	PER	
7/1/68 THRU 7/31/68		DIRECT CHARGES				
		<u>SALARIES & WAGES</u>				
		REGULAR	584.31			555,642.13
		OVERTIME PREMIUM	-0-			8,517.55
			584.31			564,159.68
		<u>MATERIAL SUBJECT TO MAT'L HANDLING EXPENSE</u>				
		PURCHASES - FIXED PRICE	840.00			400,150.19
		SUB-CONTRACT				342.90
		PAINTS & SOLVENTS	35.26			1,591.59
		STORES MATERIAL				4,072.41
		PLANT ENGR. MAKE READY				
		MATERIAL TRANSFERS	(64.32)			47,069.70
			810.94			453,226.79
		<u>MATERIAL NOT SUBJECT TO HANDLING EXPENSE</u>				
		IBM COMPUTER CHARGE				5,093.22
	OTHER DIRECT CHARGES	1.41			2,666.64	
		1.41			7,759.86	
	TOTAL MATERIAL	812.35			460,986.65	
	TRAVEL	-0-			64,592.93	
	TOTAL DIRECT CHARGES	\$1,396.66		\$1,089,739.26		

Standard Form No. 1035
7 GAO 5000
1035-107

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

CONTINUATION SHEET

SHEET NO. 2

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT		U. S. GOVERNMENT				VOUCHER NUMBER
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
		OVERHEAD				
7/1/68 THRU 7/31/68		BURDEN CENTER				TO-DATE
		SALARIES & WAGES		RATE	BURDEN	
50I ENGR. SUPPORT		255.97	.972692I	248.98		155,635.68
50I AKRON ENGR. SUPPORT						3,333.83
503 ENGR.		97.67	.9305826	90.99		109,183.21
503 AKRON ENGR.						13,195.31
507 AKRON SHIPPING						275.34
509 AKRON SQUADRON						3.75
5II PLANT ENGR.						22,748.13
5II AKRON PLANT ENGR.						204.35
5I5 METALCRAFT PARTS MFG. & TOOLING		148.45	1.752846I	260.21		11,762.55
5I7 MISC METALCRAFT ASSY						98,697.98
5I7 AKRON METALCRAFT						4,153.77
5I9 PLASTICS						5,426.89
5I9 AKRON PLASTICS						1,575.29
52I ELEC. ASSY.		82.22	1.5553393	127.88		77,974.21
52L AKRON ELEC. ASSY						5,242.60
53I QUAL CONTROL						7,574.27
53I AKRON QUAL CONTROL						438.84
534 ENGR. FIELD SERVICE						53.78
545 FABRIC ASSY						421.08
573 OFF SITE						51,544.33
		584.31		727.96		549,445.19
		MATERIAL HANDLING EXPENSE		(169.50)		62,154.09
		TOTAL OVERHEAD		558.46		611,599.28
		G&A EXPENSE 9.5% OF MANUFACTURING EXPENSE		185.74		149,727.59
		FIXED FEE		-0-		119,340.00

SECRET
(When Filled In)

REQUEST FOR PAYMENT AND POSTING VOUCHER												VOUCHER NO. - DATE 2-12											
TO : Accounts Division (Room) THROUGH: Monetary Division (Room)										Bldg.) Bldg.)		DIVISION VOUCHER NO. 31 Jul 68 0570											
Request payment be made and/or transaction be recorded as indicated below. Pertinent documentation in support of this transaction is on file in this office.																							
SUBJECT										INVOICE NO(S): 45													
PAYMENT TO <i>Goodyear Aerospace Corporation</i>										CONTRACT NO. <i>CW-6744</i>													
AMOUNT <i>\$ 2,100.26</i>										CHECK TO BE DATED													
CASH PAYMENT		<input checked="" type="checkbox"/> U. S. TREASURY CHECK		AGENT CASHIER CHECK		BANK CASHIER'S CHECK																	
THE ATTACHED CHECKS AND/OR CASH IN THE AMOUNT OF \$ SHOULD BE TAKEN INTO ACCOUNT AS INDICATED BELOW.																							
I HEREBY AUTHORIZE MY AGENT, WHOSE SIGNATURE APPEARS BELOW, TO RECEIVE \$ OF OFFICIAL FUNDS IN CURRENCY ON MY BEHALF.																							
DATE				SIGNATURE OF PAYEE				DATE				SIGNATURE OF AGENT				DATE				SIGNATURE OF RECIPIENT			
DESCRIPTION-ALL OTHER ACCOUNTS 13-33		34-39 STATION CODE		40-41 EXPOSED		42-47 OBLIG. REF. NO.		48-49 PAY PER. LIQ. CODE		50-54 CA OR C O S T YR		51-54 GENERAL LEDGER ACCT. NO.		55-56 ALLOT.-COST-FAN ACCOUNT SYMBOL		57-70 OBJECT CLASS		71-80 AMOUNT					
DESCRIPTION-ADVANCE ACCOUNTS 13-27		SHIP. DOC. NO.		REC. RPT. NO.		ADVANCE ACCT. NO.		EMP. NO.						81-88 CK. NO.		68-70 DUE DATE		DEBIT		CREDIT			
<i>Goodyear</i>						<i>81 006744</i>				<i>1424/77</i>		<i>61-1021</i>		<i>256</i>				<i>2,100 26</i>		<i>2,100 26</i>			
<i>Goodyear</i>																							
														TOTALS		<i>2,100 26</i>		<i>2,100 26</i>					
DATE				DATE				REVIEWED BY				CERTIFIED FOR PAYMENT OR CREDIT											
<i>31 July 68</i>												DATE											
												SIGNATURE OF CERTIFYING OFFICER											
												<i>(Signature)</i>											
												25X1											

*Original address
1 Contract CW-6744
Wash*

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION DEPARTMENT OF THE NAVY U. S. GOVERNMENT	DATE VOUCHER PREPARED July 26, 1968	VOUCHER NUMBER 45
	CONTRACT NUMBER AND DATE 8 47 AM '68	PAID BY CW-6744
	REQUISITION NUMBER AND DATE JUL 29 1968	

PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION AKRON, OHIO 44315	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER
	GOVERNMENT B/L NUMBER

SHIPPED FROM _____ TO _____ WEIGHT _____

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT ⁽¹⁾
				COST	PER	
	6/1/68 thru 6/30/68	Direct Charges Overhead G&A Expense Fixed Fee		CURRENT	TO-DATE	
				943.66 ✓	1,088,342.60	
				974.39 ✓	611,040.82	
				182.21 ✓	149,541.85	
				-0-	119,340.00	
		(M.O. 8146AR) COST REIMBURSABLE PROVISIONAL PAYMENT		2,100.26		
(Use continuation sheet(s) if necessary) (Payee must NOT use the space below) TOTAL						1,968,265.27

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
	= \$	= \$1.00	
	BY ?		
	TITLE	Amount verified; correct for <i>(Signature or initials)</i>	

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

(Date) _____ (Authorized Certifying Officer)² _____ (Title) _____

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

Appropriation Symbol and Subhead	Object Class	Expenditure Account	Chargeable Activity	Bureau Cont. or Subanth'n Activity	Bureau Control No.	Sub-auth'n No.	Identifi-cation No.	Amount

PAID BY	I.R. No's	CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER (Date)
		CASH	DATE	PAYEE JUL 1968
		\$		(Date)

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

TITLE _____

Sanitized Copy Approved for Release 2010/12/09 : CIA-RDP72B00464R000800100001-6

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 1

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT		U. S. GOVERNMENT			VOUCHER NUMBER	
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
	6/1/68 thru 6/30/68	DIRECT CHARGES		CURRENT		TO-DATE
		<u>Salaries & Wages</u>				
		Regular		921.34		555,057.82
		Overtime Premium		20.56		8,517.55
				<u>941.90</u>		<u>563,575.37</u>
		<u>Material Subject to Mat'l Handling Expense</u>				
		Purchases - Fixed Price				399,310.19
		Sub-Contract				342.90
		Paints & Solvents				1,556.33
		Stores Material				4,072.41
		Plant Engr. Make Ready				
		Material Transfers				<u>47,134.02</u>
				<u>-0-</u>		<u>452,415.85</u>
		<u>Material Not Subject to Handling Expense</u>				
		IBM Computer Charge				5,093.22
		Other Direct Charges		1.76		2,665.23
				<u>1.76</u>		<u>7,758.45</u>
		Total Material		1.76		460,174.30
		Travel		-0-		64,592.93
		Total Direct Charges		943.66		1,088,342.60

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 2

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT

U. S. GOVERNMENT

VOUCHER NUMBER

45

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
	6/1/68 thru 6/30/68	OVERHEAD				
		Burden Center			Burden	To-Date
		Salaries & Wages	Rate			
		501 Engr. Support	500.76	.9721423	486.81	155,386.70
		501 Akron Engr. Support				3,333.83
		503 Engr.	286.82	.8317760	238.57	109,092.32
		503 Akron Engr.				13,195.31
		507 Akron Shipping				275.34
		509 Akron Squadron				3.75
		511 Plant Engr.				2,748.13
		511 Akron Plant Engr.				204.35
		515 Metalcraft Parts Mfg. & Tooling	107.42	1.8779557	201.73	11,502.34
		517 Misc. Metalcraft Assy.				98,697.98
		517 Akron Metalcraft				4,153.77
		519 Plastics				5,426.89
		519 Akron Plastics				1,575.29
		521 Elec. Assy.	26.34	1.7949886	47.28	77,846.33
		521 Akron Elec. Assy.				5,242.60
		531 Qual Control				7,574.27
		531 Akron Qual Control				438.84
		534 Engr. Field Service				53.78
		545 Fabric Assy.				421.08
		573 Off Site				51,544.33
			921.34		974.39	548,717.23
		Material Handling Expense			-0-	62,323.59
		Total Overhead			974.39	611,040.82
		G&A Expense 9.5% of Manufacturing Expense			182.21	149,541.85
		Fixed Fee			-0-	119,340.00

SECRET
(When Filled In)

REQUEST FOR PAYMENT AND POSTING VOUCHER												VOUCHER NO. - DATE 2-12							
TO : Accounts Division (Room)						Bldg.)						DIVISION VOUCHER NO.							
THROUGH: Monetary Division (Room)						Bldg.)						25 Jun 68 8035							
Request payment be made and/or transaction be recorded as indicated below. Pertinent documentation in support of this transaction is on file in this office.																			
SUBJECT										INVOICE NO (S)									
PAYMENT TO <i>Goodyear Aerospace Corporation</i>										CONTRACT NO. <i>CW-6744</i>									
AMOUNT \$ <i>1,164.77</i>										CHECK TO BE DATED									
CASH PAYMENT			<input checked="" type="checkbox"/> U. S. TREASURY CHECK			AGENT CASHIER CHECK			BANK CASHIER'S CHECK										
THE ATTACHED CHECKS AND/OR CASH IN THE AMOUNT OF \$ SHOULD BE TAKEN INTO ACCOUNT AS INDICATED BELOW.																			
I HEREBY AUTHORIZE MY AGENT, WHOSE SIGNATURE APPEARS BELOW, TO RECEIVE \$ OF OFFICIAL FUNDS IN CURRENCY ON MY BEHALF.																			
DATE		SIGNATURE OF PAYEE				DATE		SIGNATURE OF AGENT				DATE		SIGNATURE OF RECIPIENT					
DESCRIPTION-ALL OTHER ACCOUNTS 13-33		34-38 STATION CODE		40-41 EXCPOND		42-47 OBLIG. REF. NO.		48-49 PAY PER. LIQ. CODE		50-54 GAGORCOSTYR		51-54 GENERAL LEDGER ACCT. NO.		55-56 ALLOT.-COST-FAN ACCOUNT SYMBOL		67-70 OBJECT CLASS		71-80 AMOUNT	
DESCRIPTION-ADVANCE ACCOUNTS 13-27		SHIP. DOC. NO.		REC. RPT. NO.		ADVANCE ACCT. NO.		EMP. NO.		FY		61-66 CK. NO.		68-70 DUE DATE		DEBIT		CREDIT	
<i>Goodyear</i>						<i>88006744</i>						<i>14247761-1021</i>		<i>2540</i>		<i>1164 77</i>		<i>1164 77</i>	
<i>Goodyear</i>																			
<i>Original of Advance Contract CW-6744 Voucher</i>																			
TOTALS												<i>1164 77</i>		<i>1164 77</i>					
DATE		REVIEWED BY				DATE		CERTIFIED FOR PAYMENT OR CREDIT				DATE		SIGNATURE		25X1			
<i>26 Jun 68</i>														<i>(Signature)</i>					

SECRET

GROUP 1 EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

(10-49)

Standard FORM NO. 1007
7 GAO 5000
1034-110-04

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION DEPARTMENT OF THE NAVY U. S. GOVERNMENT	DATE VOUCHER PREPARED June 17, 1968 CONTRACT NUMBER AND DATE REQUISITION NUMBER AND DATE JUN 25 8 33 AM '68	VOUCHER NUMBER 44 PAID BY DATE INVOICE RECEIVED DISCOUNT TERMS PAYEE'S ACCOUNT NUMBER
PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION AKRON, OHIO 44315 <i>CLW-6744</i>		

SHIPPED FROM	TO	WEIGHT	GOVERNMENT B/L NUMBER
--------------	----	--------	-----------------------

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT (1)
				COST	PER	
	5/1/68 thru 5/31/68	Direct Charges Overhead G&A Expense Fixed Fee		Current 472.54 596.06 96.17 -0-		To-Date 1,087,398.94 610,066.43 149,359.64 119,340.00
(M.O. 8116AR) PROVISIONAL PAYMENT COST REIMBURSABLE				1,164.77		

(Use continuation sheet(s) if necessary) **(Payee must NOT use the space below)** **TOTAL** 1,966,165.01

PAYMENT:	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
<input type="checkbox"/> COMPLETE	= \$	= \$1.00	
<input type="checkbox"/> PARTIAL	BY ?		
<input type="checkbox"/> FINAL			
<input type="checkbox"/> PROGRESS	TITLE		Amount verified; correct for
<input type="checkbox"/> ADVANCE			(Signature or initials)

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

(Date) (Authorized Certifying Officer) (Title)

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

Appropriation Symbol and Subhead	Object Class	Expenditure Account	Chargeable Activity	Bureau Cont. or Subauth'n Activity	Bureau Control No.	Sub-auth'n No.	Identifi-cation No.	Amount

I.R. No's.	CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER (Date)
	CASH	DATE	PAYEE JUN 17 1968 (Date)
	\$		

1 When stated in foreign currency, insert name of currency.
2 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 in the space provided, over his official title.
3 When a voucher is 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.

TITLE

Services Other Than Personal
CONTINUATION SHEET

U. S. GOVERNMENT

Sheet No. 1 of Voucher No. 44

(Department, bureau, or establishment)

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	UNIT PRICE		AMOUNT
				Cost	Per	
	5/1/68 thru 5/31/68	DIRECT CHARGES				TO-DATE
		<u>Salaries & Wages</u>				
		Regular		605.62		554,136.48
		Overtime Premium		12.88		8,496.99
				<u>618.50</u>		<u>562,633.47</u>
		<u>Material Subject to Mat'l Handling Expense</u>				
		Purchases - Fixed Price		(125.00)		399,310.19
		Sub-Contract				342.90
		Paints & Solvents				1,556.33
		Stores Material		1.00		4,072.41
		Plant Engr. Make Ready				
		Material Transfers		(23.02)		47,134.02
				<u>(147.02)</u>		<u>452,415.85</u>
		<u>Material Not Subject to Handling Expense</u>				
		IBM Computer Charge				5,093.22
		Other Direct Charges		1.06		2,663.47
				<u>1.06</u>		<u>7,756.69</u>
		Total Material		(145.96)		460,172.54
		Travel		-0-		64,592.93
		Total Direct Charges		472.54		1,087,398.94

Services Other Than Personal
CONTINUATION SHEET

U. S. GOVERNMENT Sheet No. 2 of Voucher No. 44
 (Department, bureau, or establishment)

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	UNIT PRICE		AMOUNT
				Cost	Per	
	5/1/68 thru 5/31/68	OVERHEAD				
		<u>Burden Center</u>			<u>Burden</u>	<u>To-Date</u>
		Salaries & Wages	Rate			
		501 Engr. Support	293.13	.9094941	266.60	154,899.89
		501 Akron Engr. Support				3,333.83
		503 Engr.	181.69	.7042215	127.95	108,853.75
		503 Akron Engr.				13,195.31
		507 Akron Shipping				275.34
		509 Akron Squadron				3.75
		511 Plant Engr.				2,748.13
		511 Akron Plant Engr.				204.35
		515 Metalcraft Parts Mfg. & Tooling	129.17	1.6891693	218.19	11,300.61
		517 Misc. Metalcraft Assy.				98,697.98
		517 Akron Metalcraft				4,153.77
		519 Plastics				5,426.89
		519 Akron Plastics				1,575.29
		521 Elec. Assy	1.63	1.4969325	2.44	77,799.05
		521 Akron Elec. Assy				5,242.60
		531 Qual Control				7,574.27
		531 Akron Qual Control				438.84
		534 Engr. Field Service				53.78
		545 Fabric Assy.				421.08
		573 Off Site				51,544.33
			605.62		615.18	547,742.84
		Material Handling Expense			(19.12)	62,323.59
		Total Overhead			596.06	610,066.43
		G&A Expense 9.0% of Manufacturing Expense			96.17	149,359.64
		Fixed Fee			-0-	119,340.00

SECRET
(When Filled In)

REQUEST FOR PAYMENT AND POSTING VOUCHER										VOUCHER NO. - DATE 2-12					
TO : Accounts Division (Room) THROUGH: Monetary Division (Room)								Bldg.) Bldg.)		DIVISION VOUCHER NO. 4 June 68 7580					
Request payment be made and/or transaction be recorded as indicated below. Pertinent documentation in support of this transaction is on file in this office.															
SUBJECT								INVOICE NO(S) 43							
PAYMENT TO <i>Goodyear Aerospace Corporation</i>								CONTRACT NO. <i>CW-6744</i>							
AMOUNT \$ <i>929.03</i>								CHECK TO BE DATED							
CASH PAYMENT		<input checked="" type="checkbox"/> U.S. TREASURY CHECK		AGENT CASHIER CHECK		BANK CASHIER'S CHECK									
THE ATTACHED CHECKS AND/OR CASH IN THE AMOUNT OF \$ SHOULD BE TAKEN INTO ACCOUNT AS INDICATED BELOW.															
I HEREBY AUTHORIZE MY AGENT, WHOSE SIGNATURE APPEARS BELOW, TO RECEIVE \$ OF OFFICIAL FUNDS IN CURRENCY ON MY BEHALF.															
DATE		SIGNATURE OF PAYEE				DATE		SIGNATURE OF AGENT				DATE		SIGNATURE OF RECIPIENT	
DESCRIPTION-ALL OTHER ACCOUNTS 13-33		34-39 STATION CODE		40-41 EXPOSED	42-47 OBLIG. REF. NO.	48-49 PAY PER. LIQ. CODE	50 OR C O S T YR	51-54 GENERAL LEDGER ACCT. NO.	55-56 ALLOT-COST-FAN ACCOUNT SYMBOL		67-70 OBJECT CLASS	71-80 AMOUNT			
DESCRIPTION-ADVANCE ACCOUNTS 13-27		28-33 T/A No.	SHIP. DOC. NO.	REC. RPT. NO.	ADVANCE ACCT. NO.	EMP. NO.	FUND SY	61-66 CK. NO.	68-70 DUE DATE	X REF. NO.	DEBIT	CREDIT			
<i>Goodyear</i>						<i>88006744</i>		<i>1424177</i>	<i>61-1021</i>	<i>2540</i>	<i>929.03</i>	<i>929.03</i>			
<i>Goodyear</i>															
<i>Virginia address</i>															
<i>1 Central CW-6744</i>															
<i>Went</i>															
DATE <i>4 June 68</i>										TOTALS		<i>929.03</i>	<i>929.03</i>		
DATE		REVIEWED BY				DATE		CERTIFIED FOR PAYMENT OR CREDIT							
								SIGNATURE OF CERTIFYING OFFICER <i>Signed</i>							

25X1

25X1

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION DEPARTMENT OF THE NAVY U. S. GOVERNMENT	DATE VOUCHER PREPARED May 20, 1968	VOUCHER NUMBER 43
	CONTRACT NUMBER AND DATE	PAID BY
MAY 31 9 12 AM '68 REQUISITION NUMBER AND DATE		

PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION AKRON, OHIO 44315 <i>CW-6744</i>	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER
	GOVERNMENT B/L NUMBER

SHIPPED FROM _____ TO _____ WEIGHT _____

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT (1)
				COST	PER	
	4/1/68 thru 4/30/68	Direct Charges Overhead G & A Expense Fixed Fee		<u>Current</u>	<u>To-Date</u>	
				651.19	1,086,926.40	
				203.48	609,470.37	
				74.36	149,263.47	
				-0-	119,340.00	
		(M.O. 8146AR) PROVISIONAL PAYMENT COST REIMBURSABLE		929.03		

(Use continuation sheet(s) if necessary) (Payee must NOT use the space below) TOTAL \$1,965,000.24

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
	= \$	= \$1.00	
	BY ?		
	TITLE	Amount verified; correct for <i>(Signature or initials)</i>	

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

(Date) _____ (Authorized Certifying Officer) ? _____ (Title) _____

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)								
Appropriation Symbol and Subhead	Object Class	Expenditure Account	Chargeable Activity	Bureau Cont. or Subauth'n Activity	Bureau Control No.	Sub-auth'n No.	Identifi-cation No.	Amount

I.R. No's.	CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUM
	CASH	DATE	(Date)
	\$		5 JUN 1968

1 When stated in foreign currency, insert name of currency.
 2 If the ability to certify and authority to approve are combined in one person, one signature only otherwise the approving officer will sign in the space provided, over his official title.
 3 When a voucher is 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.

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 1

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT				VOUCHER NUMBER		
U. S. GOVERNMENT				43		
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUANTITY	UNIT PRICE		AMOUNT
				COST	PER	
	4/1/68 thru 4/30/68	DIRECT CHARGES		CURRENT		TO-DATE
		<u>Salaries & Wages</u>				
		Regular		195.48		553,530.86
		Overtime Premium		6.55		8,484.11
				<u>202.03</u>		<u>562,014.97</u>
		<u>Material Subject to Mat'l Handling Expense</u>				
		Purchases - Fixed Price		638.00		399,435.19
		Sub-Contract				342.90
		Paints & Solvents		6.48		1,556.33
		Stores Material				4,071.41
		Plant Engr. Make Ready				
		Material Transfers		(195.72)		47,157.04
				<u>448.76</u>		<u>452,562.87</u>
		<u>Material Not Subject to Handling Expense</u>				
		IBM Computer Charge				5,093.22
		Other Direct Charges		.40		2,662.41
				<u>.40</u>		<u>7,755.63</u>
		Total Material		449.16		460,318.50
		Travel		-0-		64,592.93
		Total Direct Charges		\$651.19	\$	1,086,926.40

Standard Form No. 1035
7 GAO 5000
1035-107

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

CONTINUATION SHEET

SHEET NO. 2

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT

U. S. GOVERNMENT

VOUCHER NUMBER

43

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
	4/1/68 thru 4/30/68	OVERNEAD				
		Burden Center				
		Salaries & Wages				
		Rate				
		501 Engr. Support	139.28	.8582711	Burden	To-Date
		501 Akron Engr. Support			119.54	154,633.29
		503 Engr.	45.41	.7727373		3,333.83
		503 Akron Engr.			35.09	108,725.80
		507 Akron Shipping				13,195.31
		509 Akron Squadron				275.34
		511 Plant Engr.	3.57	.9131653	3.26	3.75
		511 Akron Plant Engr.				2,748.13
		515 Metalcraft Parts				204.35
		Mfg. & Tooling	7.22	1.8047091	13.03	11,082.42
		517 Misc. Metalcraft Assy				98,697.98
		517 Akron Metalcraft				4,153.77
		519 Plastics				5,426.89
		519 Akron Plastics				1,575.29
		521 Elec. Assy.				77,796.61
		521 Akron Elec. Assy.				5,242.60
		531 Qual. Control				7,574.27
		531 Akron Qual Control				438.84
		534 Engr. Field Service				53,278
		545 Fabric Assy.				5,421.08
		573 Off Site				51,544.33
			\$195.48		\$170.92	\$547,127.66
		Material Handling Expense			\$ 32.56	\$ 62,342.71
		Total Overhead			\$203.48	\$609,470.37
		G & A Expense				
		8.7% Of Manufacturing Expense			\$ 74.36	\$149,263.47
		Fixed Fee			-0-	119,340.00

SECRET
(When Filled In)

REQUEST FOR PAYMENT AND POSTING VOUCHER

VOUCHER NO. - DATE 2-12

TO : Accounts Division (Room Bldg.)
 THROUGH: Monetary Division (Room Bldg.)

DIVISION VOUCHER NO. 4296
 10 Jan 68

Request payment be made and/or transaction be recorded as indicated below. Pertinent documentation in support of this transaction is on file in this office.

SUBJECT INVOICE NO(S) 50

PAYMENT TO *Goodyear Aerospace Corporation* CONTRACT NO. *@W-6644*

AMOUNT \$ *9,495.75* CHECK TO BE DATED

CASH PAYMENT U. S. TREASURY CHECK AGENT CASHIER CHECK BANK CASHIER'S CHECK

THE ATTACHED CHECKS AND/OR CASH IN THE AMOUNT OF \$ SHOULD BE TAKEN INTO ACCOUNT AS INDICATED BELOW.

I HEREBY AUTHORIZE MY AGENT, WHOSE SIGNATURE APPEARS BELOW, TO RECEIVE \$ OF OFFICIAL FUNDS IN CURRENCY ON MY BEHALF.

DATE SIGNATURE OF PAYEE DATE SIGNATURE OF AGENT DATE SIGNATURE OF RECIPIENT

DESCRIPTION-ALL OTHER ACCOUNTS 13-33		34-38 STATION CODE	40-41 EX CODE	42-47 OBLIG. REF. NO.	48-49 PAY PER. LIQ. CODE	50 CA OR C O S T Y R	51-54 GENERAL LEDGER ACCT. NO.	55-56 ALLOT.-COST-FAN ACCOUNT SYMBOL	67-70 OBJECT CLASS	71-80 AMOUNT	
DESCRIPTION-ADVANCE ACCOUNTS 13-27		SHIP. DOC. NO.	REC. RPT. NO.	ADVANCE ACCT. NO.	EMP. NO.			81-86 CK. NO.	68-70 DUE DATE	DEBIT	CREDIT
<i>Goodyear</i>				<i>211225</i>			<i>1 4241 67</i>	<i>61-1021</i>	<i>25%</i>	<i>9,495.75</i>	<i>9495.75</i>
<i>Goodyear</i>											<i>9495.75</i>

*Original @ 16 address
 - 1 Cont @ W-6644
 W. Wash*

TOTALS *9495.75* *9495.75*

DATE *9 Jan 68*

DATE REVIEWED BY DATE CERTIFIED FOR PAYMENT OR CREDIT SIGNATURE OF CERTIFYING OFFICER (Signed)

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION DEPARTMENT OF THE NAVY U. S. GOVERNMENT	DATE VOUCHER PREPARED JAN 9 December 26, 1967	VOUCHER NUMBER 50
	CONTRACT NUMBER AND DATE 2 10 PM '68	PAID BY
	REQUISITION NUMBER AND DATE	

PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION Akron, Ohio 44315 <u>10 Jan 68</u> (Date) <u>1-10-68</u>	DATE INVOICE RECEIVED
	DISCOUNT TERMS STAT
	PAYEE'S ACCOUNT NUMBER
	GOVERNMENT B/L NUMBER

SHIPPED FROM _____ (Date) _____ AUTHORIZED CERTIFYING OFFICER _____ WEIGHT _____

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT (1)
				COST	PER	
	11/30/67	Fixed Fee Fee Billed Balance Due		Current		to-Date \$63,305.00 \$53,809.25

(Use continuation sheet(s) if necessary) (Payee)

PAYMENT:	APPROVED FOR	[Redacted Signature]
<input type="checkbox"/> COMPLETE	= \$	
<input type="checkbox"/> PARTIAL	BY 2	
<input type="checkbox"/> FINAL	TITLE	
<input type="checkbox"/> PROGRESS		Amount verified; correct for
<input type="checkbox"/> ADVANCE		(Signature or initials)

Pursuant to authority vested in me, I certify that this voucher is correct and proper for payment.
 _____ (Date) _____ (Authorized Certifying Officer) 2 _____ (Title)

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

Appropriation Symbol and Subhead	Object Class	Expenditure Account	Chargeable Activity	Bureau Cont. or Subauth'n Activity	Bureau Control No.	Sub-auth'n No.	Identifi-cation No.	Amount

I.R. No's

PAID BY	CHECK NUMBER ON TREASURER OF THE UNITED STATES	CHECK NUMBER ON (Name of bank)
	CASH DATE	PAYEE 3

1 When stated in foreign currency, insert name of currency.
 2 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 in the space provided, over his official title.
 3 When a voucher is 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.

7 GAO 5000
1034-110-06

SERVICES OTHER THAN PERSONAL

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION DEPARTMENT OF THE NAVY U. S. GOVERNMENT	DATE VOUCHER PREPARED April 24, 1968	VOUCHER NUMBER 42
	CONTRACT NUMBER AND DATE	PAID BY
	REQUISITION NUMBER AND DATE	

PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION AKRON, OHIO 44315 [Redacted] (Date) 1 MAY 1968	DATE INVOICE RECEIVED STAT
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER
	SHIPPED FROM

WEIGHT	GOVERNMENT B/L NUMBER
--------	-----------------------

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT <small>(1)</small>
				COST	PER	
	3/18/68 thru 3/31/68	Direct Charges Overhead G&A Expense Fixed Fee (M.O. 8116AR) COST REIMBURSABLE PROVISIONAL PAYMENT		<u>CURRENT</u> \$198.32 ✓ 55.32 ✓ 22.07 ✓ -0-	<u>TO-DATE</u> \$1,086,275.21 609,266.89 149,189.11 119,340.00	
				\$275.71 ✓		

(Use continuation sheet(s) if necessary) **(Payee must NOT use the space below)** TOTAL \$1,964,071.21

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
	BY 2	= \$	
	TITLE	= \$1.00	
	Amount verified; correct for <i>(Signature or initials)</i>		

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

(Date) _____ (Authorized Certifying Officer) _____ (Title) _____

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)								
Appropriation Symbol and Subhead	Object Class	Expenditure Account	Chargeable Activity	Bureau Cont. or Subanth'n Activity	Bureau Control No.	Sub- auth'n No.	Identifi- cation No.	Amount

PAID BY	CHECK NUMBER ON TREASURER OF THE UNITED STATES	CHECK NUMBER ON (Name of bank)
	CASH DATE	PAYEE 3

1 When stated in foreign currency, insert name of currency.
2 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 in the space provided, over his official title.
3 When a voucher is 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.

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 1

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT		U. S. GOVERNMENT			VOUCHER NUMBER	
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
	3/18/68 thru 3/31/68	DIRECT CHARGES		CURRENT		TO-DATE
		<u>Salaries & Wages</u>				
		Regular		\$114.74	\$	553,335.38
		Overtime Premium		-0-		8,477.56
				<u>\$114.74</u>	\$	<u>561,812.94</u>
		<u>Material Subject to Mat'l Handling Expense</u>				
		Purchases- Fixed Price		\$164.58	\$	398,797.19
		Sub-Contract				342.90
		Paints & Solvents		1.78		1,549.85
		Stores Material				4,071.41
		Plant Engineering Make Ready		(83.20)		47,352.76
		Material Transfers		<u>\$ 83.16</u>	\$	<u>452,114.11</u>
		<u>Material Not Subject to Handling Expense</u>				
		IBM Computer Charge		\$	\$	5,093.22
		Other Direct Charges		.12		2,662.01
				<u>\$.12</u>	\$	<u>7,755.23</u>
		Total Material		\$ 83.58	\$	459,869.34
		Travel		-0-	\$	64,592.93
		Total Direct Charges		<u>\$198.32</u>	\$	<u>\$1,086,275.21</u>

Standard Form No. 1035
7 GAQ 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 2

U. S. DEPARTMENT, BUREAU, OR ESTABLISHMENT					VOUCHER NUMBER			
U. S. GOVERNMENT					42			
NUMBER 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)			QUANTITY	UNIT PRICE		AMOUNT
						COST	PER	
	3/18/68 thru 3/31/68	OVERHEAD						
		<u>Burden Center</u>	<u>Salaries & Wages</u>	<u>Rate</u>		<u>Burden</u>		<u>To-Date</u>
	501	Engr. Support	4.29	1.0466200	4.49	\$	154,513.75	
	501	Akron Engr. Support					3,333.83	
	503	Engr.	51.80	.8920849	46.21		108,690.71	
	503	Akron Engr.					13,195.31	
	507	Akron Shipping					275.34	
	509	Akron Squadron					3.75	
	511	Plant Engr.	1.79	.99050279	1.62		2,744.87	
	511	Akron Plant Engr.					204.35	
	515	Metalcraft Parts						
		Mfg. & Tooling	.03	1.3333333	.04		11,069.39	
	517	Misc. Metalcraft Assy					98,697.98	
	517	Akron Metalcraft					4,153.77	
	519	Plastics					5,426.89	
	519	Akron Plastics					1,575.29	
	521	Elec. Assy. (1.15)		2.1391304	(2.46)		77,796.61	
	521	Akron Elec. Assy					5,242.60	
	531	Qual Control	57.98	.7330114	42.50		7,574.27	
	531	Akron Qual Control					438.84	
	534	Engr. Field Service					53.78	
	545	Fabric Assy.					421.08	
	573	Off Site					51,544.33	
			\$114.74		\$92.40	\$	546,956.74	
		Material Handling Expense			(37.08)	\$	62,310.15	
		Total Overhead			\$55.32	\$	609,266.89	
		G & A Expense						
		8.7 % of Manufacturing Expense			\$22.07	\$	149,189.11	
		Fixed Fee			-0-	\$	119,340.00	

SECRET
(When Filled In)

REQUEST FOR PAYMENT AND POSTING VOUCHER

VOUCHER NO.—DATE 2-12

TO : Accounts Division (Room Bldg.)
THROUGH: Monetary Division (Room Bldg.)

DIVISION VOUCHER NO.
3 Apr. 68 6323

Request payment be made and/or transaction be recorded as indicated below. Pertinent documentation in support of this transaction is on file in this office.

SUBJECT: *Goodyear Aerospace Corp.* INVOICE NO(S): *40 + 41*
PAYMENT TO: *Goodyear Aerospace Corp.* CONTRACT NO.: *CW-6744*
AMOUNT: *\$ 3,951.02* CHECK TO BE DATED

CASH PAYMENT U. S. TREASURY CHECK AGENT CASHIER CHECK BANK CASHIER'S CHECK

THE ATTACHED CHECKS AND/OR CASH IN THE AMOUNT OF \$ SHOULD BE TAKEN INTO ACCOUNT AS INDICATED BELOW.

I HEREBY AUTHORIZE MY AGENT, WHOSE SIGNATURE APPEARS BELOW, TO RECEIVE \$ OF OFFICIAL FUNDS IN CURRENCY ON MY BEHALF.

DATE SIGNATURE OF PAYEE DATE SIGNATURE OF AGENT DATE SIGNATURE OF RECIPIENT

DESCRIPTION-ALL OTHER ACCOUNTS 13-33		34-39 STATION CODE	40-41 EXPENSE	42-47 OBLIG. REF. NO.	48-49 PAY PER. LIQ. CODE	50 OR C O S T YR	51-54 GENERAL LEDGER ACCT. NO.	55-56 ALLOT.-COST-FAN ACCOUNT SYMBOL	61-66 CK. NO.	67-70 OBJECT CLASS	68-70 DUE DATE	71-80 AMOUNT	
DESCRIPTION-ADVANCE ACCOUNTS 13-27	SHIP. DOC. NO.	REC. RPT. NO.	PROJECT NO.	ADVANCE ACCT. NO.	EMP. NO.				X REF. NO.			DEBIT	CREDIT
<i>Goodyear</i>				<i>88 006744</i>			<i>14241 77</i>	<i>61-1021</i>		<i>2540</i>		<i>3,951.02</i>	<i>3,951.02</i>
<i>Goodyear</i>													<i>3,951.02</i>

John J. Alderson
160 Street CW-6744
Voucher

TOTALS *3951.02 3951.02*

DATE *30 Apr 68*

APPROVED BY: [Signature] CERTIFIED FOR PAYMENT OR CREDIT: [Signature]

Standard Form 7 GAO 5000 1034-111
PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL
 VOUCHER NO. 100001-6

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION	DATE VOUCHER PREPARED	SCHEDULE NO.	
	CONTRACT NUMBER AND DATE CW-6744		PAID BY
	REQUISITION NUMBER AND DATE		

PAYEE'S NAME AND ADDRESS Goodyear Aerospace Corp.	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER
	GOVERNMENT B/L NUMBER

SHIPPED FROM _____ TO _____ WEIGHT _____

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUANTITY	UNIT PRICE		AMOUNT <small>(1)</small>
				COST	PER	
		40 (Orig. Inv. Att.)				\$2,516.43
		41 " "				1,434.59

(Use continuation sheet(s) if necessary) **(Payee must NOT use the space below)** TOTAL \$3,951.02

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE	DIFFERENCES	
	= \$	= \$1.00		
	BY			
	TITLE		Amount verified; correct for	3,951.02

Pursuant to authority vested in _____
 A APP
 (Date)

STAT

Blank space for additional information or signature.

PAID BY	CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER	ON (Name of bank)
	CASH	DATE	PAYEE ³	

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION DEPARTMENT OF THE NAVY U.S. GOVERNMENT	DATE VOUCHER PREPARED March 26, 1968	VOUCHER NUMBER 40
	CONTRACT NUMBER AND DATE	PAID BY
	REQUISITION NUMBER AND DATE App 7 11 17 AM '68	

PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION Akron, Ohio 44315	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER
	GOVERNMENT B/L NUMBER

CP-6744

SHIPPED FROM	TO	WEIGHT
--------------	----	--------

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUANTITY	UNIT PRICE		AMOUNT (¹)
				COST	PER	
	2/19/68 thru 2/29/68	Direct Charges Overhead G & A Expense Fixed Fee		Current \$1,454.05	✓	To-Date \$1,084,972.65
				860.97	✓	608,996.04
				201.41	✓	149,052.22
				-0-		119,340.00
	(MO 8146AR)	COST REIMBURSABLE PROVISIONAL PAYMENT		\$2,516.43	✓	

(Use continuation sheet(s) if necessary) (Payee must NOT use the space below) TOTAL \$1,962,360.91

PAYMENT:	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
<input type="checkbox"/> COMPLETE	= \$	= \$1.00	
<input type="checkbox"/> PARTIAL	BY ²		
<input type="checkbox"/> FINAL			
<input type="checkbox"/> PROGRESS	TITLE	Amount verified; correct for <i>(Signature or initials)</i>	
<input type="checkbox"/> ADVANCE			

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

(Date) _____ (Authorized Certifying Officer)² _____ (Title) _____

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown, other classification optional)								
Appropriation Symbol and Subhead	Object Class	Expenditure Account	Chargeable Activity	Bureau Cont. or Subanth'n Activity	Bureau Control No.	Sub-auth'n No.	Identification No.	Amount

I.R. No's	CHECK NUMBER ON TREASURER OF THE UNITED STATES	CHECK NUMBER ON (Name of bank)
PAID BY	CASH DATE	PAYEE ³
	\$	

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 1

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT U.S. GOVERNMENT				VOUCHER NUMBER 40		
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
	2/19/68 thru 2/29/68	DIRECT CHARGES		Current		To-Date
		<u>Salaries & Wages</u>				
		Regular	\$	871.37		\$ 553,147.40
		Overtime Premium		.41		8,477.56
			\$	871.78		\$ 561,624.96
		<u>Material-Subject to Material Handling Expense</u>				
		Purchases - Fixed Price	\$	530.60		\$ 397,601.61
		Sub-Contract		-		342.90
		Paints & Solvents		8.65		1,548.07
		Stores Material		-		4,071.41
		Plant Engineering Make-Ready		-		-
		Material Transfers		41.76		47,435.96
		Sub-Total	\$	581.01		\$ 450,999.95
		<u>Material-Not Subject to Material Handling Expense</u>				
		IBM Computer Charge	\$	-		\$ 5,093.22
		Other Direct Charges		1.26		2,661.59
		Sub-Total	\$	1.26		\$ 7,754.81
		Total Material	\$	582.27		\$ 458,754.76
		<u>Travel</u>	\$	-0-		\$ 64,592.93
		TOTAL DIRECT CHARGES	\$	1,454.05		\$1,084,972.65

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 2

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT						VOUCHER NUMBER	
U.S. GOVERNMENT						40	
NUMBER 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)	QUANTITY	UNIT PRICE		AMOUNT	
				COST	PER		
	2/19/68 thru 2/29/68	OVERHEAD					
		<u>Burden Center</u>					
		Salaries & Wages	Rate			<u>To-Date</u>	
501		Engineering Support	\$194.79	1.06	1203	\$207.28	\$154,494.87
501		Akron Eng. Support	-	-	-	-	3,333.83
503		Engineering	583.30	.85	4720	501.33	108,622.46
503		Akron Engineering	-	-	-	-	13,195.31
507		Akron Shipping	-	-	-	-	275.34
509		Akron Squadron	-	-	-	-	3.75
511		Plant Engineering	12.51	.93	20544	11.66	2,743.25
511		Akron Plant Eng.	-	-	-	-	204.35
515		Metalcraft Parts					
		Mfg. & Tooling	3.42	2.74	26901	9.38	11,059.88
517		Metalcraft Assembly	-	-	-	-	98,697.98
517		Akron Metalcraft	-	-	-	-	4,153.77
519		Plastics	-	-	-	-	5,426.89
519		Akron Plastics	-	-	-	-	1,575.29
521		Electronic Assembly	77.38	1.04	27759	80.69	77,763.47
521		Akron Elec. Assembly	-	-	-	-	5,242.60
531		Quality Control	(.03)	-0-	-	1.25	7,531.77
531		Akron Qual. Control	-	-	-	-	438.84
534		Eng. Field Service	-	-	-	-	53.78
545		Fabric Assembly	-	-	-	-	421.08
573		Off-Site	-	-	-	-	51,544.33
			\$871.37	-	-	\$811.59	\$546,782.84
		<u>Material Handling Expense</u>				\$ 49.38	\$ 62,213.20
		TOTAL OVERHEAD				\$860.97	\$608,996.04
		G & A Expense					
		8.7% of Manufacturing Expense				\$201.41	\$149,052.22
		Fixed Fee				-0-	\$119,340.00

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION DEPARTMENT OF THE NAVY U.S. GOVERNMENT	DATE VOUCHER PREPARED March 26, 1968	VOUCHER NUMBER 41
	CONTRACT NUMBER AND DATE	PAID BY
	REQUISITION NUMBER AND DATE Apr 7 10 11 1968	

PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION Akron, Ohio 44315	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER
	GOVERNMENT B/L NUMBER

ep-6744

SHIPPED FROM _____ TO _____ WEIGHT _____

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUANTITY	UNIT PRICE		AMOUNT (¹)
				COST	PER	
	3/1/68 thru 3/17/68	Direct Charges Overhead G & A Expense Fixed Fee		Current \$1,104.21 215.53 114.82 -0-		To-Date \$1,086,076.89 609,211.57 149,167.04 119,340.00
		COST REIMBURSABLE PROVISIONAL PAYMENT		\$1,434.59		
TOTAL						\$1,963,795.50

(Use continuation sheet(s) if necessary) **(Payee must NOT use the space below)**

PAYMENT:	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
<input type="checkbox"/> COMPLETE	= \$	= \$1.00	
<input type="checkbox"/> PARTIAL	BY ²		
<input type="checkbox"/> FINAL			
<input type="checkbox"/> PROGRESS	TITLE		Amount verified; correct for
<input type="checkbox"/> ADVANCE			<i>(Signature or initials)</i>

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

(Date) *(Authorized Certifying Officer)* *(Title)*

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

Appropriation Symbol and Subhead	Object Class	Expenditure Account	Chargeable Activity	Bureau Cont. or Subauth'n Activity	Bureau Control No.	Sub-auth'n No.	Identification No.	Amount

I.R. No's	CHECK NUMBER ON TREASURER OF THE UNITED STATES	CHECK NUMBER ON (Name of bank)
PAID BY	CASH	PAYEE ³
	\$	DATE

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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, _____"

Standard Form No. 1035
7 GAO 5000
1035-107

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

CONTINUATION SHEET

SHEET NO. 1

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT U.S. GOVERNMENT		VOUCHER NUMBER 41				
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN- TITY	UNIT PRICE		AMOUNT
				COST	PER	
	3/1/68 thru 3/17/68	DIRECT CHARGES		Current		To-Date
		<u>Salaries & Wages</u>				
		Regular	\$	73.24		\$ 553,220.64
		Overtime Premium		-0-		8,477.56
			\$	73.24		\$ 561,698.20
		<u>Material-Subject to Material Handling Expense</u>				
		Purchases - Fixed Price	\$1,031.00			\$ 398,632.61
		Sub-Contract	-			342.90
		Paints & Solvents	-			1,548.07
		Stores Material	-			4,071.41
		Plant Engineering Make-Ready	-			-
		Material Transfers	-			47,435.96
		Sub-Total	\$1,031.00			\$ 452,030.95
		<u>Material-Not Subject to Material Handling Expense</u>				
		IBM Computer Charge				\$ 5,093.22
		Other Direct Charges				2,661.59
		Sub-Total		-0-		\$ 7,754.81
		Total Material	\$1,031.00			\$ 459,785.76
		<u>Travel</u>	\$	-0-		\$ 64,592.93
		TOTAL DIRECT CHARGES	\$1,104.24			\$1,086,076.89

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 2

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT
U.S. GOVERNMENT

VOUCHER NUMBER
47

NUMBER 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	UNIT PRICE		AMOUNT
				COST	PER	
	3/1/68 thru 3/17/68	OVERHEAD				
		<u>Burden Center</u>				
		Salaries & Wages	Rate		Burden	To-Date
501		Engineering Support	\$14.84	.9696765	\$ 14.39	\$154,509.26
501		Akron Eng. Support	-	-	-	3,333.83
503		Engineering	25.96	.8489985	22.04	108,644.50
503		Akron Engineering	-	-	-	13,195.31
507		Akron Shipping	-	-	-	275.34
509		Akron Squadron	-	-	-	3.75
511		Plant Engineering	-	-	-	2,743.25
511		Akron Plant Eng.	-	-	-	204.35
515		Metalcraft Parts				
		Mfg. & Tooling	5.24	1.8072519	9.47	11,069.35
517		Metalcraft Assembly	-	-	-	98,697.98
517		Akron Metalcraft	-	-	-	4,153.77
519		Plastics	-	-	-	5,426.89
519		Akron Plastics	-	-	-	1,575.29
521		Electronic Assembly	27.20	1.3088235	35.60	77,799.07
521		Akron Elec.Assembly	-	-	-	5,242.60
531		Quality Control	-	-	-	7,531.77
531		Akron Qual. Control	-	-	-	438.84
534		Eng. Field Service	-	-	-	53.78
545		Fabric Assembly	-	-	-	421.08
573		Off-Site	-	-	-	51,544.33
			\$73.24	-	\$ 81.50	\$546,864.34
		<u>Material Handling Expense</u>			\$134.03	\$ 62,347.23
		TOTAL OVERHEAD			\$215.53	\$609,211.57
		G & A Expense				
		8.7% of Manufacturing Expense			\$114.82	\$149,167.04
		Fixed Fee			-0-	\$119,340.00

SECRET
(When Filled In)

REQUEST FOR PAYMENT AND POSTING VOUCHER

VOUCHER NO. - DATE 2-12
DIVISION VOUCHER NO.
12 Mar. 68 5756

TO : Accounts Division (Room Bldg.)
THROUGH: Monetary Division (Room Bldg.)

Request payment be made and/or transaction be recorded as indicated below. Pertinent documentation in support of this transaction is on file in this office.

SUBJECT: *Goodyear Aerospace Corporation* INVOICE NO(S): *38 and 39*
PAYMENT TO: *Goodyear Aerospace Corporation* CONTRACT NO.: *CW-6744*
AMOUNT: *\$ 14,651.53* CHECK TO BE DATED

CASH PAYMENT U.S. TREASURY CHECK AGENT CASHIER CHECK BANK CASHIER'S CHECK

THE ATTACHED CHECKS AND/OR CASH IN THE AMOUNT OF \$ SHOULD BE TAKEN INTO ACCOUNT AS INDICATED BELOW.

I HEREBY AUTHORIZE MY AGENT, WHOSE SIGNATURE APPEARS BELOW, TO RECEIVE \$ OF OFFICIAL FUNDS IN CURRENCY ON MY BEHALF.

DATE SIGNATURE OF PAYEE DATE SIGNATURE OF AGENT DATE SIGNATURE OF RECIPIENT

DESCRIPTION-ALL OTHER ACCOUNTS 13-33		34-39 STATION CODE	40-41 EX CODE	42-47 OBLIG. REF. NO.	48-49 PAY PER. LIQ. CODE	50 CA OR. C O S T YR.	51-54 GENERAL LEDGER ACCT. NO.	55-56 ALLOT.-COST-FAN ACCOUNT SYMBOL	61-66 CK. NO. X REF. NO.	67-70 OBJECT CLASS	68-70 DUE DATE	71-80 AMOUNT	
DESCRIPTION-ADVANCE ACCOUNTS 13-27		SHIP. DOC. NO.	REC. RPT. NO.	ADVANCE ACCT. NO.	EMP. NO.							DEBIT	CREDIT
<i>Goodyear</i>					<i>88006744</i>		<i>1424177</i>	<i>61-1021</i>	<i>2540</i>			<i>14,651.53</i>	<i>14,651.53</i>
<i>Goodyear</i>													
												<i>Original of address</i>	
												<i>Contact CW-6744</i>	
												<i>1 check</i>	
TOTALS												<i>14,651.53</i>	<i>14,651.53</i>

DATE *12 Mar 68* P DATE REVIEWED BY CERTIFIED FOR PAYMENT OR CREDIT *25X1*
DATE SIGNATURE *25X1*

Sanitized Copy Approved for Release 2010/12/09 : CIA-RDP72B00464R000800100001-6

Standard Form No. 1054
7 GAO 5000
1034-111

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

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION	DATE VOUCHER PREPARED	SCHEDULE NO.
	CONTRACT NUMBER AND DATE CW-6744	PAID BY
	REQUISITION NUMBER AND DATE	
PAYEE'S NAME AND ADDRESS Goodyear Aerospace Corp.	DATE INVOICE RECEIVED	
	DISCOUNT TERMS	
	PAYEE'S ACCOUNT NUMBER	
	GOVERNMENT B/L NUMBER	
SHIPPED FROM	TO	WEIGHT

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT (¹)
				COST	PER	
		38 (Orig. Inv. Att.)				\$11,299.09
		39 " "				3,352.44

(Use continuation sheet(s) if necessary) **(Payee must NOT use the space below)** **TOTAL \$14,651.53**

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
	= \$	= \$1.00	
	BY :		
	TITLE	Amount verified: correct for \$14,651.53	
Pursuant to authority _____ (Date) _____			

ACCOUNTING CLASSIFICATION

PAID BY	CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER	ON (Name of bank)
	CASH	DATE	PAYEE ¹	
	\$			

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

7 GAO 5000
1034-110-06

SERVICES OTHER THAN PERSONAL

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION DEPARTMENT OF THE NAVY U. S. GOVERNMENT	DATE VOUCHER PREPARED February 26, 1968	VOUCHER NUMBER 38
	CONTRACT NUMBER AND DATE	PAID BY
	REQUISITION NUMBER AND DATE	

PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION Akron, Ohio 44315	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER
	SHIPPED FROM TO WEIGHT GOVERNMENT B/L NUMBER

CP-6744

SHIPPED FROM	TO	WEIGHT	GOVERNMENT B/L NUMBER
--------------	----	--------	-----------------------

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT (1)
				COST	PER	
	1/15/68 thru 1/31/68	Direct Charges Overhead G & A Expense Fixed Fee		Current		To-Date
			\$	7,507.12		\$1,081,627.08
				2,835.97		606,942.47
				956.00		148,582.49
				-0-		119,340.00
	(M.O. 8746AR) COST REIMBURSABLE PROVISIONAL PAYMENT		\$	1,299.09		\$1,956,492.04

(Use continuation sheet(s) if necessary) **(Payee must NOT use the space below)** TOTAL \$1,956,492.04

PAYMENT:	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
<input type="checkbox"/> COMPLETE	= \$	= \$1.00	
<input type="checkbox"/> PARTIAL	BY 2		
<input type="checkbox"/> FINAL			
<input type="checkbox"/> PROGRESS	TITLE		Amount verified; correct for
<input type="checkbox"/> ADVANCE			(Signature or initials)

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

(Date) (Authorized Certifying Officer)² (Title)

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)								
Appropriation Symbol and Subhead	Object Class	Expenditure Account	Chargeable Activity	Bureau Cont. or Subauth'n Activity	Bureau Control No.	Sub-auth'n No.	Identifi-cation No.	Amount

I.R. No's	CHECK NUMBER ON TREASURER OF THE UNITED STATES	CHECK NUMBER ON (Name of bank)
	CASH DATE	PAYEE 1

1 When stated in foreign currency, insert name of currency.
2 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 in the space provided, over his official title.
3 When a voucher is 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.

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 1

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT		U. S. GOVERNMENT			VOUCHER NUMBER 38	
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
	1/15/68 thru 1/31/68	DIRECT CHARGES				
		<u>Salaries & Wages</u>				
		Regular		\$1,838.24	\$	551,164.71
		Overtime Premium		37.90		8,465.95
				<u>\$1,876.14</u>	\$	<u>559,630.66</u>
		<u>Material Subject to Mat'l Handling Expense</u>				
		Purchases - Fixed Price		\$5,617.67	\$	396,302.01
		Sub-Contract				342.90
		Paints & Solvents		11.66		1,539.42
		Stores Material				4,071.41
		Plant Engr. Make Ready				
		Material Transfers		(30.08)		47,394.20
				<u>\$5,599.25</u>	\$	<u>449,649.94</u>
		<u>Material Not Subject to Handling Expense</u>				
		IBM Computer Charge		\$ 16.20	\$	5,093.22
		Other Direct Charges		15.53		2,660.33
				<u>\$ 31.73</u>	\$	<u>7,753.55</u>
		Total Material		\$5,630.98	\$	457,403.49
		Travel		-0-	\$	64,592.93
		Total Direct Charges		\$7,507.12	\$	1,081,627.08

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 2

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT						VOUCHER NUMBER		
U. S. GOVERNMENT						38		
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>			QUANTITY	UNIT PRICE		AMOUNT
						COST	PER	
	1/15/68 thru 1/31/68	OVERHEAD						
		<u>Burden Center</u>	<u>Salaries & Wages</u>	<u>Rate</u>		<u>Burden</u>		<u>To-Date</u>
		501 Engr. Support	\$ 323.19	.8478604		\$ 274.02		\$153,980.71
		501 Akron Engr. Support						3,333.83
		503 Engr.	213.08	.5916557		126.07		107,731.89
		503 Akron Engr.						13,195.31
		507 Akron Shipping						275.34
		509 Akron Squadron						3.75
		511 Plant Engr.						2,731.59
		511 Akron Plant Engr.						204.35
		515 Metalcraft Parts Mfg. & Tooling	38.40	1.5450521		59.33		10,996.35
		517 Metalcraft Assy						98,697.98
		517 Akron Metalcraft						4,153.77
		519 Plastics						5,426.89
		519 Akron Plastics	1,242.01	1.3184596		1,637.54		11,575.29
		521 Elec. Assy.	1,242.01	1.3184596		1,637.54		77,353.34
		521 Akron Elec. Assy.						5,242.60
		531 Qual Control	21.56	.5148423		11.10		7,517.60
		531 Akron Qual Control						438.84
		534 Engr. Field Service						53.78
		545 Fabric Assy.						421.08
		573 Off Site						51,544.33
			\$1,838.24			\$2,108.06		\$544,878.62
		Material Handling Expense				\$ 727.91		\$ 62,063.85
		Total Overhead				\$2,835.97		\$606,942.47
		G & A Expense				\$ 956.00		\$148,582.49
		Fixed Fee				\$ -0-		\$119,340.00

7 GAO 5000
1034-110-66

SERVICES OTHER THAN PERSONAL

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION DEPARTMENT OF THE NAVY U. S. GOVERNMENT	DATE VOUCHER PREPARED February 26, 1968	VOUCHER NUMBER 39
	CONTRACT NUMBER AND DATE	PAID BY
	REQUISITION NUMBER AND DATE	

PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION Akron, Ohio 44315	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER
	<i>ep 6744</i>

SHIPPED FROM	TO	WEIGHT	GOVERNMENT B/L NUMBER
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NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT ⁽¹⁾
				COST	PER	
	2/1/68 thru 2/18/68	Direct Charges Overhead G & A Expense Fixed Fee		Current \$1,891.52 1,192.60 268.32 -0-	To-Date \$1,083,518.60 608,135.07 148,850.81 119,340.00	
	(M.O. 8146AR) COST REIMBURSABLE PROVISIONAL PAYMENT			\$3,352.44		

(Use continuation sheet(s) if necessary) **(Payee must NOT use the space below)** TOTAL \$1,959,814.48

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
	= \$	= \$1.00	
	BY ²		
	TITLE	Amount verified; correct for <i>(Signature or initials)</i>	

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

(Date) _____ (Authorized Certifying Officer) ³ _____ (Title) _____

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)								
Appropriation Symbol and Subhead	Object Class	Expenditure Account	Chargeable Activity	Bureau Cont. or Subauth'n Activity	Bureau Control No.	Sub-auth'n No.	Identifi-cation No.	Amount

I.R. No's	CHECK NUMBER ON TREASURER OF THE UNITED STATES	CHECK NUMBER ON (Name of bank)
	CASH DATE	PAYEE ¹

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 1

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT		U. S. GOVERNMENT			VOUCHER NUMBER	
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
				CURRENT		TO-DATE
	2/1/68 thru 2/18/68	DIRECT CHARGES				
		<u>Salaries & Wages</u>				
		Regular		\$1,111.32	\$	552,276.03
		Overtime Premium		11.20		8,477.15
				<u>\$1,122.52</u>	\$	<u>560,753.18</u>
		<u>Material Subject to Mat'l Handling Expense</u>				
		Purchases - Fixed Price		\$ 769.00	\$	397,071.01
		Sub-Contract				342.90
		Paints & Solvents				1,539.42
		Stores Material				4,071.41
		Plant Engr. Make Ready				
		Material Transfers				
				<u>\$ 769.00</u>	\$	<u>47,394.20</u>
						<u>450,418.94</u>
		<u>Material Not Subject to Handling Expense</u>				
		IBM Computer Charge		\$	\$	5,093.22
		Other Direct Charges				2,660.33
				<u>-0-</u>	\$	<u>7,753.55</u>
		Total Material		\$ 769.00	\$	458,172.49
		Travel		-0-	\$	64,592.93
		Total Direct Charges		\$1,891.52	\$1,083,518.60	

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 2

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT						VOUCHER NUMBER		
U. S. GOVERNMENT						39		
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>			QUANTITY	UNIT PRICE		AMOUNT
						COST	PER	
	2/1/68 thru 2/18/68	OVERHEAD						
		Burden Center	Salaries & Wages	Rate		Burden	To-Date	
		501 Engr. Support	\$ 344.32	.891	2639	\$ 306.88	\$154,287.59	
		501 Akron Engr. Support					3,333.83	
		503 Engr.	480.26	.8104	777	389.24	108,121.13	
		503 Akron Engr.					13,195.31	
		507 Akron Shipping					275.34	
		509 Akron Squadron					3.75	
		511 Plant Engr.					2,731.59	
		511 Akron Plant Engr.					204.35	
		515 Metalcraft Parts Mfg. & Tooling	31.85	1.7001	570	54.15	11,050.50	
		517 Metalcraft					98,697.98	
		517 Akron Metalcraft					4,153.77	
		519 Plastics					5,426.89	
		519 Akron Plastics					1,575.29	
		521 Elec. Assy.	238.56	1.3809	524	329.44	77,682.78	
		521 Akron Elec. Assy.					5,242.60	
		531 Qual Control	16.33	.7911	819	12.92	7,530.52	
		531 Akron Qual Control					438.84	
		534 Engr. Field Service					53.78	
		545 Fabric Assy.					421.08	
		573 Off Site					51,544.33	
			\$1,111.32			\$1,092.63	\$545,971.25	
		Material Handling Expense				\$ 99.97	\$ 62,163.82	
		Total Overhead				\$1,192.60	\$608,135.07	
		G & A Expense						
		8.7% of Manufacturing Expense				\$ 268.32	\$148,850.81	
		Fixed Fee				-0-	\$119,340.00	

SECRET
(When Filled In)

REQUEST FOR PAYMENT AND POSTING VOUCHER

VOUCHER NO. - DATE 2-12

TO : Accounts Division (Room)
THROUGH: Monetary Division (Room) Bldg. Bldg.

DIVISION VOUCHER NO. 4819
1 Feb. 68

Request payment be made and/or transaction be recorded as indicated below. Pertinent documentation in support of this transaction is on file in this office.

SUBJECT: *Goodyear Aerospace Corporation* INVOICE NO(S): *36 and 37*
PAYMENT TO: *Goodyear Aerospace Corporation* CONTRACT NO.: *CW-6744*
AMOUNT: *\$ 8,593.44* CHECK TO BE DATED:

CASH PAYMENT U. S. TREASURY CHECK AGENT CASHIER CHECK BANK CASHIER'S CHECK

THE ATTACHED CHECKS AND/OR CASH IN THE AMOUNT OF \$ SHOULD BE TAKEN INTO ACCOUNT AS INDICATED BELOW.

I HEREBY AUTHORIZE MY AGENT, WHOSE SIGNATURE APPEARS BELOW, TO RECEIVE \$ OF OFFICIAL FUNDS IN CURRENCY ON MY BEHALF.

DATE SIGNATURE OF PAYEE DATE SIGNATURE OF AGENT DATE SIGNATURE OF RECIPIENT

DESCRIPTION-ALL OTHER ACCOUNTS 13-33		34-39 STATION CODE		40-41 REF. CODE	42-47 OBLIG. REF. NO.		48-49 PAY PER. LIQ. CODE	50 CA OR C O S T YR	51-54 GENERAL LEDGER ACCT. NO.	55-56 ALLOT.-COST-FAN ACCOUNT SYMBOL		67-70 OBJECT CLASS	71-80 AMOUNT	
DESCRIPTION-ADVANCE ACCOUNTS 13-27		28-33 SHIP. DOC. NO.	32-33 REC. RPT. NO.		42-47 ADVANCE ACCT. NO.	42-47 EMP. NO.				55-56 CK. NO.	55-56 X REF. NO.		68-70 DUE DATE	DEBIT
<i>Goodyear</i>					<i>006744</i>				<i>1424177</i>	<i>61-1021</i>	<i>2540</i>		<i>8,593.44</i>	<i>8,593.44</i>
<i>Goodyear</i>														
<i>Original @ Address</i>														
<i>1 Entry CW-6744</i>														
<i>1 Check</i>														

TOTALS *8593.44* *8,593.44* *25X1*

DATE *2-1-68* REVIEWED BY _____ CERTIFIED FOR PAYMENT OR CREDIT DATE _____ SIGNATURE OF (Signed) _____ 25X1

Standard 7 GAO 5000 1034-110 Sanitized Copy Approved for Release 2010/12/09 : CIA-RDP72B00464R000800100001-6

SERVICES OTHER THAN PERSONAL

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION	DATE VOUCHER PREPARED	VOUCHER NUMBER
	CONTRACT NUMBER AND DATE CW-6744	PAID BY
	REQUISITION NUMBER AND DATE	
PAYEE'S NAME AND ADDRESS Goodyear Aerospace Corp.	DATE INVOICE RECEIVED	
	DISCOUNT TERMS	
	PAYEE'S ACCOUNT NUMBER	
	GOVERNMENT B/L NUMBER	

SHIPPED FROM	TO	WEIGHT
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NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUANTITY	UNIT PRICE		AMOUNT ⁽¹⁾
				COST	PER	
		36 (Orig. Inv. Att.)				\$5,437.44
		37 " "				3,156.00

(Use continuation sheet(s) if necessary) **(Payee must NOT use the space below)** **TOTAL \$8,593.44**

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
	= \$	= \$1.00	
	BY ²		
	TITLE		Amount verified; correct for \$8,593.44 <i>(Signature or initials)</i>

Pursuant to authority 2-1-68 (Date) STAT

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

PAID BY	CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER	ON <i>(Name of bank)</i>
	CASH	DATE	PAYEE ³	
	\$			

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION DEPARTMENT OF THE NAVY U. S. GOVERNMENT	DATE VOUCHER PREPARED January 23, 1968 CONTRACT NUMBER AND DATE REQUISITION NUMBER AND DATE JAN 30 11 22 AM '68	VOUCHER NUMBER 36 PAID BY
-----------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------	-------------------------------------

PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION Akron, Ohio 44315	DATE INVOICE RECEIVED	DISCOUNT TERMS	PAYEE'S ACCOUNT NUMBER
---------------------------------------------------------------------------------	-----------------------	----------------	------------------------

CW 6744

SHIPPED FROM	TO	WEIGHT	GOVERNMENT B/L NUMBER
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NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT (1)
				COST	PER	
	12/18/67 thru 12/31/67	Direct Charges Overhead G & A Expense Fixed Fee		Current		To-Date
				\$3,545.15		\$1,072,768.72
				1,555.29		602,502.68
				337.00		147,425.55
				-0-		119,340.00
	(M.O. 8116AR) COST REIMBURSABLE PROVISIONAL PAYMENT			\$5,137.44		

(Use continuation sheet(s) if necessary) (Payee must NOT use the space below) **TOTAL \$1,942,036.95**

PAYMENT:	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
<input type="checkbox"/> COMPLETE	= \$	= \$1.00	
<input type="checkbox"/> PARTIAL	BY 2		
<input type="checkbox"/> FINAL	TITLE		
<input type="checkbox"/> PROGRESS			
<input type="checkbox"/> ADVANCE			
			Amount verified; correct for <i>(Signature or initials)</i>

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

(Date) (Authorized Certifying Officer)² (Title)

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)								
Appropriation Symbol and Subhead	Object Class	Expenditure Account	Chargeable Activity	Bureau Cont. or Subauth'n Activity	Bureau Control No.	Sub-auth'n No.	Identifi-cation No.	Amount

I.R. No's	CHECK NUMBER ON TREASURER OF THE UNITED STATES	CHECK NUMBER ON (Name of bank)
PAID BY	CASH DATE	PAYEE 3
\$		

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

Standard Form No. 1035
7 GAO 5400
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 1

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT

U. S. GOVERNMENT

VOUCHER NUMBER

36

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
	12/18/67 thru 12/31/67	DIRECT CHARGES		Current		To-Date
		<u>Salaries & Wages</u>				
		Regular		\$1,133.54	\$	547,898.35
		Overtime Premium		26.59		8,406.93
				<u>\$1,160.13</u>	<u>\$</u>	<u>556,305.28</u>
		<u>Material Subject to Mat'l Handling Expense</u>				
		Purchases-Fixed Price		\$2,370.29	\$	390,782.34
		Sub-Contract				342.90
		Paints & Solvents		8.91		1,527.76
		Stores Material				4,071.41
		Plant Engr. Make Ready				
		Material Transfers				47,424.28
				<u>\$2,379.20</u>	<u>\$</u>	<u>444,148.69</u>
		<u>Material Not Subject to Handling Expense</u>				
		IBM Computer Charge				5,077.02
		Other Direct Charges		5.82		2,614.80
				<u>\$ 5.82</u>	<u>\$</u>	<u>7,721.82</u>
		Total Material		\$2,385.02	\$	451,870.51
		Travel		-0-	\$	64,592.93
		Total Direct Charges		\$3,545.15	\$	1,072,768.72

Standard Form No. 1095
7 GAO 560
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 2

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT

U. S. GOVERNMENT

VOUCHER NUMBER
36

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUANTITY	UNIT PRICE		AMOUNT
				COST	PER	
	12/18/67 thru 12/31/67	OVERHEAD				
		<u>Burden Center</u>				<u>To-Date</u>
		Salaries & Wages				
		Rate				
		501 Engr. Support	330.32	.8523856	281.56	153,309.64
		501 Akron Engr. Support				3,333.83
		503 Engr.	127.29	1.0732186	136.61	107,408.06
		503 Akron Engr.				13,195.31
		507 Akron Shipping				275.34
		509 Akron Squadron				3.75
		511 Plant Engr.	10.90	.7440367	8.11	2,731.59
		511 Akron Plant Engr.				204.35
		515 Metalcraft Parts Mfg. & Tooling	24.19	.2959901	7.16	10,896.46
		517 Metalcraft Assy.				98,697.98
		517 Akron Metalcraft				4,153.77
		519 Plastics				5,426.89
		519 Akron Plastics				1,575.29
		521 Elec. Assy.	633.60	1.2745265	807.54	74,760.21
		521 Akron Elec. Assy.				5,242.60
		531 Qual Control	7.24	.6919890	5.01	7,480.90
		531 Akron Qual Control				438.84
		534 Engr. Field Service				53.78
		545 Fabric Assy.				421.08
		573 Off Site				51,544.33
		\$1,133.54			\$1,245.99	\$541,154.00
		Material Handling Expense			\$ 309.30	\$ 61,348.68
		Total Overhead			\$1,555.29	\$602,502.68
		G & A Expense			\$ 337.00	\$147,425.55
		Fixed Fee			-0-	\$119,340.00

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION DEPARTMENT OF THE NAVY U. S. GOVERNMENT	DATE VOUCHER PREPARED January 23, 1968 CONTRACT NUMBER AND DATE REQUISITION NUMBER AND DATE Jan 30 1968	VOUCHER NUMBER 37 PAID BY
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PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION Akron, Ohio 44315	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER
	<i>EW 67 44</i>

SHIPPED FROM	TO	WEIGHT	GOVERNMENT B/L NUMBER
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NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT (1)
				COST	PER	
	1/1/68 thru 1/14/68	Direct Charges Overhead G & A Expense Fixed Fee (M.O. 8146AR)		Current	To-Date	
				\$1,351.24	\$1,074,119.96	
				1,603.82	604,106.50	
				200.94	147,626.49	
				-0-	119,340.00	
		COST REIMBURSABLE PROVISIONAL PAYMENT		\$3,156.00		

(Use continuation sheet(s) if necessary) **(Payee must NOT use the space below)** **TOTAL** \$1,945,192.95

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
	= \$	= \$1.00	
	BY 2		
	TITLE	Amount verified; correct for <i>(Signature or initials)</i>	

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

(Date) (Authorized Certifying Officer) 2 (Title)

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)								
Appropriation Symbol and Subhead	Object Class	Expenditure Account	Chargeable Activity	Bureau Cont. or Subauth'n Activity	Bureau Control No.	Sub-auth'n No.	Identifi-cation No.	Amount

PAID BY	CHECK NUMBER ON TREASURER OF THE UNITED STATES	CHECK NUMBER ON (Name of bank)
	CASH DATE	PAYEE 3
\$		

1 When stated in foreign currency, insert name of currency.
 2 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 in the space provided, over his official title.
 3 When a voucher is 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.

Standard Form No. 1035
7 GAO 5900
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 1

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT
U. S. GOVERNMENT

VOUCHER NUMBER
37

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
		DIRECT CHARGES		CURRENT		TO-DATE
	1/1/68 thru 1/14/68	<u>Salaries & Wages</u>				
		Regular		\$1,428.12		\$ 549,326.47
		Overtime Premium		21.12		8,428.05
				\$1,449.24		\$ 557,754.52
		<u>Material Subject to Mat'l Handling Expense</u>				
		Purchases- Fixed Price		\$ (98.00)		\$ 390,684.34
		Sub-Contract				342.90
		Paints & Solvents				1,527.76
		Stores Material				4,071.41
		Plant Engineering Make Ready				
		Material Transfer				47,424.28
				\$ (98.00)		\$ 444,050.69
		<u>Material Not Subject to Handling Expense</u>				
		IBM Computer Charge		\$		\$ 5,077.02
		Other Direct Charges				2,644.80
				-0-		\$ 7,721.82
		Total Material		\$ (98.00)		\$ 451,772.51
		Travel		-0-		\$ 64,592.93
		Total Direct Charges		\$1,351.24		\$1,074,119.96

Standard Form No. 1035
7 GAO 5090
1035-407

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 2

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT		U. S. GOVERNMENT				VOUCHER NUMBER
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUANTITY	UNIT PRICE		AMOUNT
				COST	PER	
	1/1/68 thru 1/14/68	OVERHEAD				
		Burden Center				To-Date
		Salaries & Wages	Rate			
		501 Engr. Support	\$ 471.16	.8427074	\$ 397.05	\$153,706.69
		501 Akron Engr. Support				3,333.83
		503 Engr.	208.64	.9478528	197.76	107,605.82
		503 Akron Engr.				13,195.31
		507 Akron Shipping				275.34
		509 Akron Squadron				3.75
		511 Plant Engr.				2,731.59
		511 Akron Plant Engr.				204.35
		515 Metalcraft Parts Mfg. & Tooling	22.82	1.7773883	40.56	10,937.02
		517 Metalcraft Assy.				98,697.98
		517 Akron Metalcraft				4,153.77
		519 Plastics				5,426.89
		519 Akron Plastics				1,575.29
		521 Elec. Assy.	696.30	1.3723826	955.59	75,715.80
		521 Akron Elec. Assy.				5,242.60
		531 Qual Control	29.20	.8767123	25.60	7,506.50
		531 Akron Qual Control				438.84
		534 Engr. Field Service				53.78
		545 Fabric Assy.				421.08
		573 Off Site				51,544.33
			\$1,428.12		\$1,616.56	\$542,770.56
		Material Handling Expense			(12.74)	\$ 61,335.94
		Total Overhead			\$1,603.82	\$604,106.50
		G & A Expense 6.8% of Manufacturing Expense			200.94	\$147,626.49
		Fixed Fee			-0-	\$119,340.00

SECRET
(When Filled In)

REQUEST FOR PAYMENT AND POSTING VOUCHER												VOUCHER NO. - DATE 2-12			
TO : Accounts Division (Room)						Bldg.)						DIVISION VOUCHER NO.			
THROUGH: Monetary Division (Room)						Bldg.)						10 Jan 68 4311			
Request payment be made and/or transaction be recorded as indicated below. Pertinent documentation in support of this transaction is on file in this office.															
SUBJECT										INVOICE NO(S).					
PAYMENT TO <i>Goodyear Aerospace Corporation</i>										35					
AMOUNT \$ 2632.30										CONTRACT NO. CW-6744					
CHECK TO BE DATED															
CASH PAYMENT <input checked="" type="checkbox"/>				U.S. TREASURY CHECK				AGENT CASHIER CHECK				BANK CASHIER'S CHECK			
THE ATTACHED CHECKS AND/OR CASH IN THE AMOUNT OF \$ SHOULD BE TAKEN INTO ACCOUNT AS INDICATED BELOW.															
I HEREBY AUTHORIZE MY AGENT, WHOSE SIGNATURE APPEARS BELOW, TO RECEIVE \$ OF OFFICIAL FUNDS IN CURRENCY ON MY BEHALF.															
DATE		SIGNATURE OF PAYEE				DATE		SIGNATURE OF AGENT				DATE		SIGNATURE OF RECIPIENT	
DESCRIPTION-ALL OTHER ACCOUNTS 13-33		34-39 STATION CODE		40-41 EXPOSED	42-47 OBLIG. REF. NO.		48-49 PAY PER. LIQ. CODE	50 CA OR. YR	51-54 GENERAL LEDGER ACCT. NO.		55-56 ALLOT.-COST-FAN ACCOUNT SYMBOL		67-70 OBJECT CLASS	71-80 AMOUNT	
DESCRIPTION-ADVANCE ACCOUNTS 13-27		28-33 T/A NO.	SHIP. DOC. NO.	REC. RPT. NO.	ADVANCE ACCT. NO.	EMP. NO.	CODE	YR	FUND S	61-66 CK. NO.	X REF. NO.	68-70 DUE DATE	DEBIT	CREDIT	
		132-33 DIV.	PROJECT NO.			88006744		1	424177	61-1021	2540		2,632 30	2,632 30	
													Original of Address 1 Content W. Lee Jr		
												TOTALS		2,632 30	2,625X120
DATE		DATE				REVIEWED BY				DATE		CERTIFIED FOR PAYMENT OR CREDIT			
10 Jan 68												SIGNATURE (Signed) 25X1			

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION DEPARTMENT OF THE NAVY U. S. GOVERNMENT	DATE VOUCHER PREPARED December 26, 1967	VOUCHER NUMBER 35
	CONTRACT NUMBER AND DATE JAN 11 2 40 PM '68	PAID BY
	REQUISITION NUMBER AND DATE	

PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION Akron, Ohio <i>10 Jan 68</i> (Date)	<i>W-6744</i>	DATE INVOICE RECEIVED
		DISCOUNT TERMS STAT
		PAYEE'S ACCOUNT NUMBER
		GOVERNMENT B/L NUMBER

SHIPPED FROM *1-10-68* (Date) AUTHORIZED CERTIFYING OFFICER

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUANTITY	UNIT PRICE		AMOUNT (1)
				COST	PER	
	12/1/67 thru 12/17/67	Direct Charges Overhead G & A Expense Fixed Fee		Current	To-Date	
		(M.O. 8116AR)		820.12	1,069,223.57	
		COST REIMBURSABLE		1,635.38	600,947.39	
		PROVISIONAL PAYMENT		176.80	147,088.55	
				-0-	119,340.00	
				2,632.30		
TOTAL						1,936,599.51

(Use continuation sheet(s) if necessary) (Payee must NOT use the space below)

PAYMENT:	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
<input type="checkbox"/> COMPLETE	= \$	= \$1.00	
<input type="checkbox"/> PARTIAL	BY 2		
<input type="checkbox"/> FINAL			
<input type="checkbox"/> PROGRESS	TITLE		Amount verified; correct for
<input type="checkbox"/> ADVANCE			(Signature or initials)

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

(Date) (Authorized Certifying Officer) (Title)

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

Appropriation Symbol and Subhead	Object Class	Expenditure Account	Chargeable Activity	Bureau Cont. or Subauth'n Activity	Bureau Control No.	Sub-auth'n No.	Identification No.	Amount

I.R. No's

PAID BY	CHECK NUMBER ON TREASURER OF THE UNITED STATES	CHECK NUMBER ON (Name of bank)
	CASH DATE	PAYEE 3
\$		

1 When stated in foreign currency, insert name of currency.
2 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 in the space provided, over his official title.
3 When a voucher is 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, Vice President."

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 1

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT

U. S. GOVERNMENT

VOUCHER NUMBER 35

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
	12/1/67 thru 12/17/68	DIRECT CHARGES				
		<u>Salaries & Wages</u>				
		Regular		1,320.67		546,764.81
		Overtime Premium =		4.45		8,380.34
				<u>\$1,325.12</u>	\$	<u>555,145.15</u>
		<u>Material Subject to Mat'l Handling Expense</u>				
		Purchases - Fixed Price		\$ (505.00)	\$	388,412.05
		Sub-Contract				342.90
		Paints & Solvents				1,518.85
		Stores Material				4,071.41
		Plant Engr. Make Ready				
		Material Transfers				47,424.28
				<u>\$ (505.00)</u>	\$	<u>441,769.49</u>
		<u>Material Not Subject to Handling Expense</u>				
		IBM computer Charge				5,077.02
		Other Direct Charges				2,638.98
				-0-	\$	<u>7,716.00</u>
		Total Material		\$ (505.00)	\$	449,485.49
		Travel		-0-	\$	64,592.93
		Total Direct Charges		\$ 820.12	\$	1,069,223.57

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 2

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT U. S. GOVERNMENT

VOUCHER NUMBER 35

NUMBER 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	UNIT PRICE		AMOUNT	
				COST	PER		
	12/1/67 thru 12/17/67	OVERHEAD Salaries & Wages Rate			Burden	To-Date	
		Burden Center					
	501	Engr. Support	143.82	.8794	326	126.48	153,028.08
	501	Akron Engr. Support					3,333.83
	503	Engr.	361.76	.9040	248	327.04	107,271.45
	503	Akron Engr.					13,195.31
	507	Akron Shipping					275.34
	509	Akron Squadron					3.75
	511	Plant Engr.	19,42	.9546	859	18.54	2,723.48
	511	Akron Plant Engr.					204.35
	515	Metalcraft Parts Mfg. & Tooling	132.00	2.0397	727	269.25	10,889.30
	517	Metalcraft Assy.					98,697.98
	517	Akron Metalcraft					4,153.77
	519	Plastics					5,426.89
	519	Akron Plastics					1,575.29
	521	Elec. Assy.	627.07	1.4772	194	926.32	73,952.67
	521	Akron Elec. Assy.					5,242.60
	531	Qual Control	36.60	.9125	683	33.40	7,475.89
	531	Akron Qual Control					438.84
	534	Engr. Field Service					53.78
	545	Fabric Assy.=					421.08
	573	Off Site					51,544.33
			1,320.67			1,701.03	539,908.01
		Material Handling Expense				(65.65)	61,039.38
		Total Overhead				1,635.38	600,947.39
		G & A Expense 7.2% of Manufacturing Expense				176.80	147,088.55
		Fixed Fee				-0-	119,340.00

SECRET
(When Filled In)

REQUEST FOR PAYMENT AND POSTING VOUCHER												VOUCHER NO.--DATE 2-12									
TO : Accounts Division (Room) THROUGH: Monetary Division (Room)										Bldg.) Bldg.)		DIVISION/VOUCHER NO. 10 Jan. 68 4299									
Request payment be made and/or transaction be recorded as indicated below. Pertinent documentation in support of this transaction is on file in this office.																					
SUBJECT										INVOICE NO(S). 34											
PAYMENT TO <i>Goodyear Aerospace Corp.</i>										CONTRACT NO. CW-6744											
AMOUNT \$7,420.74										CHECK TO BE DATED											
CASH PAYMENT		<input checked="" type="checkbox"/> U. S. TREASURY CHECK		AGENT CASHIER CHECK		BANK CASHIER'S CHECK															
THE ATTACHED CHECKS AND/OR CASH IN THE AMOUNT OF \$ SHOULD BE TAKEN INTO ACCOUNT AS INDICATED BELOW.																					
I HEREBY AUTHORIZE MY AGENT, WHOSE SIGNATURE APPEARS BELOW, TO RECEIVE \$ OF OFFICIAL FUNDS IN CURRENCY ON MY BEHALF.																					
DATE		SIGNATURE OF PAYEE				DATE				SIGNATURE OF AGENT				DATE		SIGNATURE OF RECIPIENT					
DESCRIPTION-ALL OTHER ACCOUNTS 13-33		28-33 T/A NO.		34-39 STATION CODE		40-41 EXPOSED		42-47 OBLIG. REF. NO.		48-49 PAY PER. LIQ. CODE		50 CA OR C O S T YR		51-54 GENERAL LEDGER ACCT, NO.		55-56 ALLOT.-COST-FAN ACCOUNT SYMBOL		67-70 OBJECT CLASS		71-80 AMOUNT	
DESCRIPTION-ADVANCE ACCOUNTS 13-27		SHIP. DOC. NO.		REC. RPT. NO.		ADVANCE ACCT. NO.		EMP. NO.		CODE		FUND S		61-66 CK. NO.		68-70 DUE DATE		DEBIT		CREDIT	
<i>Goodyear</i>						88006744				1		424177		61-1021		2540		7,420.74		7,420.74	
<i>Goodyear</i>																				7,420.74	
												TOTALS		7,420.74		7,420.74					
DATE		REVIEWED BY				DATE				CERTIFIED FOR PAYMENT OR CREDIT											
10 Jan 68										SIGNATURE OF CERTIFYING OFFICER (Signed)											
										25X1											
										25X1											

Standard Form No. 1002
7 GAO 5000
1034-110-06

FUEL VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION DEPARTMENT OF THE NAVY U. S. GOVERNMENT	DATE VOUCHER PREPARED December 26, 1967	VOUCHER NUMBER 34
	CONTRACT NUMBER AND DATE JAN 8 2 10 11 68	PAID BY

PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION Akron, Ohio 44315 <i>W 16744</i>	DATE INVOICE RECEIVED
	DISCOUNT TERMS STAT
	PAYEE'S ACCOUNT NUMBER
	GOVERNMENT B/L NUMBER

SHIPPED FROM (Date) 10 Jan 68 AUTHORIZED CERTIFYING OFFICER _____ WEIGHT _____

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUANTITY	UNIT PRICE		AMOUNT (¹)
				COST	PER	
	11/13/67 thru 11/30/67	Direct Charges Overhead G & A Expense Fixed Fee		Current	To-Date	
				4,383.71		1,068,403.45
				2,615.87		599,312.01
				421.16		146,911.75
				-0-		119,340.00
	(M.O. 8116AR)	COST REIMBURSABLE PROVISIONAL PAYMENT		7,420.74		

(Use continuation sheet(s) if necessary) (Payee must NOT use the space below) **TOTAL** 1,933,967.21

PAYMENT:	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
<input type="checkbox"/> COMPLETE	= \$	= \$1.00	
<input type="checkbox"/> PARTIAL	BY ²		
<input type="checkbox"/> FINAL			
<input type="checkbox"/> PROGRESS	TITLE		Amount verified; correct for
<input type="checkbox"/> ADVANCE			<i>(Signature or initials)</i>

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

(Date) _____ (Authorized Certifying Officer)² _____ (Title) _____

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)								
Appropriation Symbol and Subhead	Object Class	Expenditure Account	Chargeable Activity	Bureau Cont. or Subauth'n Activity	Bureau Control No.	Sub-auth'n No.	Identification No.	Amount

I.R. No's	CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER	ON (Name of bank)
	CASH	DATE	PAYEE ³	
	\$			

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

Standard Form No. 1035
 GAO 5000
 1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 1

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT		U. S. GOVERNMENT			VOUCHER NUMBER	
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
		DIRECT CHARGES		Current		To-Date
	11/13/67 thru 11/30/67	Salaries & Wages				
		Regular		\$1,975.87	\$	545,444.14
		Overtime Premium		20.61		8,375.89
				<u>1,996.48</u>		<u>553,820.03</u>
		<u>Material Subject to Mat'l Handling Expense</u>				
		Purchases - Fixed Price		8,064.93		388,917.05
		Sub-Contract				342.90
		Paints & Solvents		74.50		1,518.85
		Stores Material		517.12		4,071.41
		Plant Engr. Make Ready				
		Material Transfers		(6,288.42)		47,424.28
				<u>2,368.13</u>		<u>442,274.49</u>
		<u>Material Not Subject to Handling Expense</u>				
		IBM Computer Charge				5,077.02
		Other Direct Charges		19.10		2,638.98
				<u>19.10</u>		<u>7,716.00</u>
		Total Material		2,387.23		449,990.49
		Travel		-0-		64,592.93
		Total Direct Charges		\$4,383.71	\$	\$1,068,403.45

Standard Form No. 1035
 GAO 5000
 1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 2

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT

U. S. GOVERNMENT

VOUCHER NUMBER
 34

NUMBER 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	UNIT PRICE		AMOUNT
						COST	PER	
	11/13/67 thru 11/30/67	OVERHEAD						
		Burden Center	Salaries & Wages	Rate	Burden		To-Date	
		501 Engr. Support	487.02	.8317912	406.56		152,901.60	
		501 Akron Engr. Support					3,333.83	
		503 Engr.	288.47	1.0747045	310.02		106,944.41	
		503 Akron Engr.					13,195.31	
		507 Akron Shipping					275.34	
		509 Akron Squadron					3.75	
		511 Plant Engr.	.05	.6000000	.03		2,704.94	
		511 Akron Plant Engr.					204.35	
		515 Metalcraft Parts Mfg. & Tooling	301.42	1.7943401	540.85		10,620.05	
		517 Metalcraft Assy.					98,697.98	
		517 Akron Metalcraft					4,153.77	
		519 Plastics					5,426.89	
		519 Akron Plastics					1,575.29	
		521 Elec. Assy.	783.45	1.1992980	939.59		73,026.35	
		521 Akron Elec. Assy.					5,242.60	
		531 Qual Control	115.46	.9610255	110.96		7,442.49	
		534 Akron Qual Control					438.84	
		534 Engr. Field Service					53.78	
		545 Fabric Assy.					421.08	
		573 Off Site					51,544.33	
			1,975.87		2,308.01		538,206.98	
		Material Handling Expense			307.86		61,105.03	
		Total Overhead			2,615.87		599,312.01	
		G & A Expense			421.16		116,911.75	
		Fixed Fee			-0-		119,340.00	

SECRET
(When Filled In)

REQUEST FOR PAYMENT AND POSTING VOUCHER		VOUCHER NO. - DATE 2-12
TO : Accounts Division (Room) Bldg.)	THROUGH: Monetary Division (Room) Bldg.)	DIVISION VOUCHER NO. 4 Dec 67 3578

Request payment be made and/or transaction be recorded as indicated below. Pertinent documentation in support of this transaction is on file in this office.

SUBJECT		INVOICE NO(S). 32 + 33
PAYMENT TO GOODYEAR AEROSPACE CORP		CONTRACT NO. CW-6744
AMOUNT #49,537.29		CHECK TO BE DATED
CASH PAYMENT <input checked="" type="checkbox"/>	U. S. TREASURY CHECK <input type="checkbox"/>	AGENT CASHIER CHECK <input type="checkbox"/>
THE ATTACHED CHECKS AND/OR CASH IN THE AMOUNT OF \$ SHOULD BE TAKEN INTO ACCOUNT AS INDICATED BELOW.		

I HEREBY AUTHORIZE MY AGENT, WHOSE SIGNATURE APPEARS BELOW, TO RECEIVE \$										OF OFFICIAL FUNDS IN CURRENCY ON MY BEHALF.			
DATE	SIGNATURE OF PAYEE			DATE	SIGNATURE OF AGENT			DATE	SIGNATURE OF RECIPIENT				
DESCRIPTION-ALL OTHER ACCOUNTS 13-33		34-39 STATION CODE		40-41 EX P E N D	42-47 OBLIG. REF. NO.	48-49 PAY PER. LIQ. CODE	50 CA OR C O S T YR.	51-54 GENERAL LEDGER ACCT. NO.	55-56 ALLOT.-COST-FAN ACCOUNT SYMBOL		67-70 OBJECT CLASS	71-80 AMOUNT	
DESCRIPTION-ADVANCE ACCOUNTS 13-27		SHIP. DOC. NO.	REC. RPT. NO.	ADVANCE ACCT. NO.	EMP. NO.				61-66 CK. NO.	X REF. NO.	68-70 DUE DATE	DEBIT	CREDIT
Goodyear					88006744			1424177	61-1021	2540		49,537.29	
Goodyear													49,537.29
<i>Dr. & Release</i> <i>Montreal - CW-6744</i> <i>Voucher</i>													
TOTALS											49,537.29	49,537.29	

DATE 4 Dec 67	REVIEWED BY	CERTIFIED FOR PAYMENT OR CREDIT
		DATE SIGNATURE (Signed)

Standard Form 7 GAO 5000 1034-110 Sanitized Copy Approved for Release 2010/12/09 : CIA-RDP72B00464R000800100001-6

SERVICES OTHER THAN PERSONAL

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION	DATE VOUCHER PREPARED	VOUCHER NUMBER
	CONTRACT NUMBER AND DATE CW-6744	PAID BY
	REQUISITION NUMBER AND DATE	

PAYEE'S NAME AND ADDRESS Goodyear Aerospace Corp.	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER
	GOVERNMENT B/L NUMBER

SHIPPED FROM	TO	WEIGHT	GOVERNMENT B/L NUMBER
--------------	----	--------	-----------------------

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT ⁽¹⁾
				COST	PER	
		32 (Orig. Inv. Att.)				\$27,261.88
		33 " "				22,275.41

(Use continuation sheet(s) if necessary) **(Payee must NOT use the space below)** **TOTAL \$49,537.29**

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
	= \$	= \$1.00	
	BY ²		
	TITLE		Amount verified; correct for \$49,537.29 <i>(Signature or initials)</i>

Pursuant to authority v **12-4-87** (Date) STAT

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

PAID BY	CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER	ON (Name of bank)
	CASH	DATE	PAYEE ³	

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION DEPARTMENT OF THE NAVY U. S. GOVERNMENT	DATE VOUCHER PREPARED November 22, 1967	VOUCHER NUMBER 32
DEC	CONTRACT NUMBER AND DATE	PAID BY
	REQUISITION NUMBER AND DATE 100 PM 167	

PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION Akron, Ohio 44315 <i>EW-6744</i>	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER
	GOVERNMENT B/L NUMBER

SHIPPED FROM _____ TO _____ WEIGHT _____

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT (1)
				COST	PER	
	10/16/67 thru 10/31/67	Direct Charges Overhead G & A Expense Fixed Fee (M.O. 8146AR) COST REIMBURSABLE PROVISIONAL PAYMENT		Current \$17,770.70 7,565.62 1,925.56 -0-	PER	To-Date \$1,047,543.31 592,470.52 144,917.23 119,340.00
				\$27,261.88		

(Use continuation sheet(s) if necessary) (Payee must NOT use the space below) **TOTAL** \$1,904,271.06

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
	= \$	= \$1.00	
	BY 2		
	TITLE		Amount verified; correct for <i>(Signature or initials)</i>

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

 (Date) (Authorized Certifying Officer) 2 (Title)

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown, other classification optional)								
Appropriation Symbol and Subhead	Object Class	Expenditure Account	Chargeable Activity	Bureau Cont. or Subauth'n Activity	Bureau Control No.	Sub-auth'n No.	Identification No.	Amount

PAID BY	CHECK NUMBER ON TREASURER OF THE UNITED STATES	CHECK NUMBER ON (Name of bank)
	CASH DATE	PAYEE 3
\$		

1 When stated in foreign currency, insert name of currency.
 2 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 in the space provided, over his official title.
 3 When a voucher is 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.

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 1

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT		U. S. GOVERNMENT			VOUCHER NUMBER	
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
	10/16/67 thru 10/31/67	DIRECT CHARGES		<u>Current</u>		<u>To-Date</u>
		<u>Salaries & Wages</u>				
		Regular		\$ 5,105.12	\$	541,552.36
		Overtime		32.22		8,306.76
				<u>5,137.34</u>		<u>549,859.12</u>
		<u>Material Subject to Mat'l Handling Expense</u>				
		Purchases Fixed Price		12,041.81		366,340.12
		Sub-Contract		-		342.90
		Paints & Solvents		41.70		1,444.35
		Stores Material		13.35		3,554.29
		Plant Engr. Make Ready		-		-
		Material Transfers		532.12		53,712.70
				<u>12,628.98</u>		<u>425,394.36</u>
		<u>Material Not Subject to Handling Expense</u>				
		IBM Computer Charge		-		5,077.02
		Other Direct Charges		4.38		2,619.88
				<u>4.38</u>		<u>7,696.90</u>
		Total Material		12,633.36		433,091.26
		<u>Travel</u>		-0-		64,592.93
		Total Direct Charges		<u>17,770.70</u>		1,047,543.31

Standard Form No. 1035
7 GAO 5000
1035-107

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

CONTINUATION SHEET

SHEET NO. 2

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT					U. S. GOVERNMENT		VOUCHER NUMBER
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT	
				COST	PER		
	10/16/67 thru 10/31/67	OVERHEAD					
		Burden Center				To-Date	
		Salaries & Wages	Rate				
		501 Engr. Support	\$1,378.65	.8415551	\$1,160.21	\$151,855.20	
		501 Akron Engr. Support				3,333.83	
		503 Engr.	1,753.75	.9575139	1,679.24	106,208.07	
		503 Akron Engr.				13,195.31	
		507 Akron Shipping				275.34	
		509 Akron Squadron				3.75	
		511 Plant Engr.	36.45	.9604938	35.01	2,699.85	
		511 Akron Plant Engr.				204.35	
		515 Melatcraft Parts Mfg. & Tooling	442.06	1.9361851	855.91	9,292.99	
		517 Melatcraft Assy.				98,697.98	
		517 Akron Metalcraft				4,153.77	
		519 Plastics	760.28	1.6942142	1,288.10	5,426.89	
		519 Akron Plastics				1,575.29	
		521 Elec. Assy.	485.41	1.4135267	686.14	71,605.13	
		521 Akron Elec. Assy.				5,242.60	
		531 Qual Control	248.76	.9394999	233.71	7,331.53	
		531 Akron Qual Control				438.84	
		534 Engr. Field Service				53.78	
		545 Fabric Assy.	(.24)	60.3333333	(14.48)	421.08	
		573 Off Site				51,544.33	
			5,105.12		5,923.84	533,559.91	
		Material Handling Expense			1,641.78	58,910.61	
		Total Overhead			7,565.62	592,470.52	
		G & A Expense					
		7.6 % of Manufacturing Expense			1,925.56	144,917.23	
		Fixed Fee			-0-	119,340.00	

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION XXXXXXXXXXXXXXXXXXXX DEPARTMENT OF THE NAVY U. S. GOVERNMENT	DATE VOUCHER PREPARED NOVember 22, 1967	VOUCHER NUMBER 33
	CONTRACT NUMBER AND DATE	PAID BY
	REQUISITION NUMBER AND DATE DEC 7 1967	

PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION Akron, Ohio 44315 <i>ew-6744</i>	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER
	GOVERNMENT B/L NUMBER

SHIPPED FROM _____ TO _____ WEIGHT _____

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT (1)
				COST	PER	
	11/1/67 thru 11/12/67	Direct Charges Overhead G & A Expense Fixed Fee (M.O. 8116AR)		Current \$16,476.43 ✓ 4,225.62 ✓ 1,573.36 ✓ -0-	PER	To-Date \$1,064,019.74 596,696.14 146,490.59 119,340.00 ✓
		COST REIMBURSABLE PROVISIONAL PAYMENT		22,275.41 ✓		
TOTAL						1,926,546.17

(Use continuation sheet(s) if necessary) (Payee must NOT use the space below)

PAYMENT:	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
<input type="checkbox"/> COMPLETE	= \$	= \$1.00	
<input type="checkbox"/> PARTIAL	BY 2		
<input type="checkbox"/> FINAL			
<input type="checkbox"/> PROGRESS	TITLE		
<input type="checkbox"/> ADVANCE			Amount verified; correct for <i>(Signature or initials)</i>

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

(Date) _____ (Authorized Certifying Officer) _____ (Title) _____

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

Appropriation Symbol and Subhead	Object Class	Expenditure Account	Chargeable Activity	Bureau Cont. or Subauth'n Activity	Bureau Control No.	Sub-auth'n No.	Identifi-cation No.	Amount

I.R. No's

PAID BY	CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER	ON (Name of bank)
	CASH	DATE	PAYEE 3	
	\$			

1 When stated in foreign currency, insert name of currency.
2 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 in the space provided, over his official title.
3 When a voucher is 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.

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 1

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT		U. S. GOVERNMENT			VOUCHER NUMBER	
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
	11/1/67 thru 11/12/67	DIRECT CHARGES		Current		To-Date
		<u>Salaries & Wages</u>				
		Regular		\$ 1,915.91		\$ 543,468.27
		Overtime		48.52		8,355.28
				<u>1,964.43</u>		<u>551,823.55</u>
		<u>Material Subject to Mat'l Handling Expense</u>				
		Purchases Fixed Price		14,512.00		380,852.12
		Sub-Contract		-		342.90
		Paints & Solvents		-		1,444.35
		Stores Material		-		3,554.29
		Plant Engr. Make Ready		-		-
		Material Transfers		-		53,712.70
				<u>14,512.00</u>		<u>439,906.36</u>
		<u>Material not Subject to Mat'l Handling Expense</u>				
		IBM Computer Charges		-		5,077.02
		Other Direct Charges		-		2,619.88
				<u>-0-</u>		<u>7,696.90</u>
		Total Material		14,512.00		447,603.26
		<u>Travel</u>		-0-		64,592.93
		Total Direct Charges		16,476.43		1,064,019.74

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 2

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT					VOUCHER NUMBER	
U. S. GOVERNMENT					33	
NUMBER 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	UNIT PRICE		AMOUNT
				COST	PER	
	11/1/67 thru 11/12/67	OVERHEAD				
		<u>Burden Center</u>			<u>Burden</u>	<u>To-Date</u>
		Salaries & Wages	Rate			
		501 Engr. Support	\$ 727.56	.8794326	\$ 639.84 ✓	\$152,495.04
		501 Akron Engr. Support				3,333.83
		503 Engr.	471.58	.9040248	426.32 ✓	106,634.39
		503 Akron Engr.				13,195.31
		507 Akron Shipping				275.34
		509 Akron Squadron				3.75
		511 Plant Engr.	5.29	.9565217	5.06 ✓	2,704.91
		511 Akron Plant Engr.				204.35
		515 Metalcraft Parts Mfg. & Tooling	385.44	2.0397727	786.21 ✓	10,079.20
		517 Metalcraft Assy.				98,697.98
		517 Akron Metalcraft				4,153.77
		519 Plastics				5,426.89
		519 Akron Plastics				1,575.29
		521 Elec. Assy.	326.04	1.4772114	481.63 ✓	72,086.76
		521 Akron Elec. Assy.				5,242.60
		531 Qual Control				7,331.53
		531 Akron Qual Control				438.84
		534 Engr. Field Service				53.78
		545 Fabric Assy.				421.08
		573 Off Site				51,544.33
			\$1,915.91		\$2,339.06 ✓	\$535,898.97
		Material Handling Expense			1,886.56 ✓	60,797.17
		Total Overhead			4,225.62 ✓	596,696.14
		G & A Expense				
		7.6% of Manufacturing Expense			1,573.36 ✓	146,490.59
		Fixed Fee			-0-	119,340.00

SECRET

(When Filled In)

REQUEST FOR PAYMENT AND POSTING VOUCHER

VOUCHER NO.-DATE 2-12

TO : Accounts Division (Room Bldg.)
THROUGH: Monetary Division (Room Bldg.)

DIVISION VOUCHER NO. 1 Nov. 67 2830

Request payment be made and/or transaction be recorded as indicated below. Pertinent documentation in support of this transaction is on file in this office.

SUBJECT: Good Year Aerospace Corp. INVOICE NO(S): 30 + 31
PAYMENT TO: #28,087.49 CONTRACT NO: CW-6744
AMOUNT: \$28,087.49 CHECK TO BE DATED

CASH PAYMENT [X] U.S. TREASURY CHECK AGENT CASHIER CHECK BANK CASHIER'S CHECK
THE ATTACHED CHECKS AND/OR CASH IN THE AMOUNT OF \$ SHOULD BE TAKEN INTO ACCOUNT AS INDICATED BELOW.

I HEREBY AUTHORIZE MY AGENT, WHOSE SIGNATURE APPEARS BELOW, TO RECEIVE \$ OF OFFICIAL FUNDS IN CURRENCY ON MY BEHALF.
DATE SIGNATURE OF PAYEE DATE SIGNATURE OF AGENT DATE SIGNATURE OF RECIPIENT

Table with columns: DESCRIPTION-ALL OTHER ACCOUNTS 13-33, 28-33 T/A NO., 34-39 STATION CODE, 40-41 EXCEED, 42-47 OBLIG. REF. NO., 48-49 PAY PER. LIQ. CODE, 50-54 CA OR C S T YR, 51-54 GENERAL LEDGER ACCT. NO., 55-56 ALLOT.-COST-FAN ACCOUNT SYMBOL, 61-66 CK. NO., 67-70 OBJECT CLASS, 68-70 DUE DATE, 71-80 AMOUNT (DEBIT/CREDIT).

TOTALS 28,087.49 28,625X119
DATE 1 Nov 67
REVIEWED BY
CERTIFIED FOR PAYMENT OR CREDIT
DATE (signed) 25X1

Standard Form NO. 1097
7 GAO 5000
1034-111*

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION	DATE VOUCHER PREPARED	SCHEDULE NO.
	CONTRACT NUMBER AND DATE CW-6744	PAID BY
	REQUISITION NUMBER AND DATE	

PAYEE'S NAME AND ADDRESS Goodyear Aerospace Corporation Goodyear, Arizona	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER
	GOVERNMENT B/L NUMBER

SHIPPED FROM	TO	WEIGHT	GOVERNMENT B/L NUMBER
--------------	----	--------	-----------------------

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT (¹)
				COST	PER	
INVOICE NUMBERS						
		30 (Orig Inv Attached)				\$17,057.11
		31 " " "				11,030.38
						\$28,087.49

(Use continuation sheet(s) if necessary) **(Payee must NOT use the space below)** **TOTAL** \$28,087.49

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
	= \$	= \$1.00	
	BY ²		
	TITLE		Amount verified; correct for \$28,087.49 <i>(Signature or initials)</i>

Pursuant to authority **11-1-67** (Date) STAT

PAID BY	CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER	ON (Name of bank)
	CASH	DATE	PAYEE ³	

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

7 GAO 5000
1034-110-02

SERVICES OTHER THAN PERSONAL

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION DEPARTMENT OF THE NAVY U. S. GOVERNMENT	DATE VOUCHER PREPARED October 23, 1967	VOUCHER NUMBER 30
	CONTRACT NUMBER AND DATE	PAID BY
	REQUISITION NUMBER AND DATE	

PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION Akron, Ohio 44315	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER
	GOVERNMENT B/L NUMBER

SHIPPED FROM _____ TO _____ WEIGHT _____

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT <small>(1)</small>
				COST	PER	
	9/18/67 thru 9/30/67	Direct Charges Overhead G & A Expense Fixed Fee (M.O. 8116AR) COST REIMBURSABLE PROVISIONAL PAYMENT		Current	To-Date	
				\$11,123.82	\$1,023,239.06	
				4,921.54	581,187.17	
				1,011.75	142,212.57	
				-0-	119,340.00	
				\$17,057.11		
TOTAL						\$1,865,978.80

(Use continuation sheet(s) if necessary) **(Payee must NOT use the space below)**

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
	BY 2	= \$1.00	
	TITLE	Amount verified; correct for <i>(Signature or initials)</i>	
	Pursuant to authority vested in me, I certify that this voucher is correct and proper for payment.		

(Date) _____ (Authorized Certifying Officer) 2 _____ (Title) _____

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

Appropriation Symbol and Subhead	Object Class	Expenditure Account	Chargeable Activity	Bureau Cont. or Subauth'n Activity	Bureau Control No.	Sub-auth'n No.	Identifi-cation No.	Amount

I.R. No's

PAID BY	CHECK NUMBER ON TREASURER OF THE UNITED STATES	CHECK NUMBER ON (Name of bank)
	CASH DATE	PAYEE 3

1 When stated in foreign currency, insert name of currency.
 2 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 in the space provided, over his official title.
 3 When a voucher is 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.

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 1

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT		U. S. GOVERNMENT			VOUCHER NUMBER	
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
	9/18/67 thru 9/30/67	DIRECT CHARGES		CURRENT		TO-DATE
		<u>Salaries & Wages</u>				
		Regular		\$ 3,319.91	\$	533,127.31
		Overtime Premium		40.49		8,246.92
				<u>3,360.40</u>		<u>541,374.23</u>
		<u>Material Subject to Mat'l Handling Expense</u>				
		Purchases - Fixed Price		7,636.32		351,112.31
		Sub-Contract				342.90
		Paints & Solvents		17.30		1,402.65
		Stores Material		4.48		3,540.94
		Plant Engr. Make Ready				
		Material Transfers		(69.59)		53,180.58
				<u>\$ 7,588.51</u>	\$	<u>409,579.38</u>
		<u>Material Not Subject to Handling Expense</u>				
		IBM Computer Charge		156.25	\$	5,077.02
		Other Direct Charges		18.66		2,615.50
				<u>\$ 174.91</u>	\$	<u>7,692.52</u>
		Total Material		<u>\$ 7,763.42</u>	\$	<u>417,271.90</u>
		<u>Travel</u>		-0-	\$	64,592.93
		Total Direct Charges		<u>\$ 11,123.82</u>	\$	<u>\$ 1,023,239.06</u>

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 2

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT						VOUCHER NUMBER
U. S. GOVERNMENT						30
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
	9/18/67 thru 9/30/67	OVERHEAD Salaries & Wages Burden Center				
			Rate	Burden	To-Date	
		501 Engr. Support \$ 718.64	.7793610	\$ 560.08 ✓	\$149,839.37	
		501 Akron Engr. Support			3,333.83	
		503 Engr. 1,413.57	.8079331	1,142.07 ✓	103,531.68	
		503 Akron Engr.			13,195.31	
		507 Akron Shipping			275.34	
		509 Akron Squadron			3.75	
		511 Plant Engr. 46.87	.9468743	44.38 ✓	2,650.03	
		511 Akron Plant Engr.			204.35	
		515 Metalcraft Parts Mfg. & Tooling 356.48	2.3194008	826.82 ✓	8,149.48	
		517 Metalcraft Assy.			98,697.98	
		517 Akron Metalcraft			4,153.77	
		519 Plastics			4,138.79	
		519 Akron Plastics			1,575.29	
		521 Elec. Assy. 496.78	1.5912067	791.97 ✓	70,207.21	
		521 Akron Elec. Assy.			5,242.60	
		531 Qual Control 287.57	.9156379	263.31 ✓	6,701.55	
		531 Akron Qual Control			438.84	
		534 Engr. Field Service			53.78	
		545 Fabric Assy.			395.24	
		573 Off Site			51,544.33	
		\$3,319.91		\$3,628.63 ✓	\$524,332.52	
		Material Handling Expense		\$1,292.91	\$ 56,854.65	
		Total Overhead		\$4,921.54 ✓	\$581,187.17	
		G & A Expense		\$1,011.75	\$142,212.57	
		Fixed Fee		-0-	\$119,340.00	

Standard Form 100-1007
7 GAO 5000
1034-110-06

FEDERAL GOVERNMENT
SERVICES OTHER THAN PERSONAL

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION DEPARTMENT OF THE NAVY U. S. GOVERNMENT	DATE VOUCHER PREPARED October 23, 1967	VOUCHER NUMBER 31
	CONTRACT NUMBER AND DATE	PAID BY
	REQUISITION NUMBER AND DATE	

PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION Akron, Ohio 44315 <i>OW-6744</i>	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER
	GOVERNMENT B/L NUMBER

SHIPPED FROM	TO	WEIGHT
--------------	----	--------

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUANTITY	UNIT PRICE		AMOUNT (1)
				COST	PER	
	10/1/67 thru 10/15/67	Direct Charges Overhead G & A Expense Fixed Fee		Current \$ 6,533.55 3,717.73 779.10 -0-	To-Date \$1,029,772.61 584,904.90 142,991.67 119,340.00	
		(M.O. 8146AR) COST REIMBURSABLE PROVISIONAL PAYMENT		\$11,030.38		
TOTAL						\$1,877,009.18

(Use continuation sheet(s) if necessary) (Payee must NOT use the space below)

PAYMENT:	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
<input type="checkbox"/> COMPLETE	= \$	= \$1.00	
<input type="checkbox"/> PARTIAL	BY 2		
<input type="checkbox"/> FINAL			
<input type="checkbox"/> PROGRESS	TITLE		Amount verified; correct for
<input type="checkbox"/> ADVANCE			(Signatures or initials)

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

(Date) _____ (Authorized Certifying Officer)² _____ (Title) _____

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

Appropriation Symbol and Subhead	Object Class	Expenditure Account	Chargeable Activity	Bureau Cont. or Subauth'n Activity	Bureau Control No.	Sub-auth'n No.	Identification No.	Amount

I.R. No's

PAID BY	CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER	ON (Name of bank)
	CASH	DATE	PAYEE 3	

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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 "The Company" or "The Corporation".

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 1

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT

U. S. GOVERNMENT

VOUCHER NUMBER
31

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
	10/1/67 thru 10/15/67	DIRECT CHARGES				
		<u>Salaries & Wages</u>				
		Regular		\$3,319.93		\$ 536,447.24
		Overtime Premium		27.62		8,274.54
				\$3,347.55		\$ 544,721.78
		<u>Material Subject to Mat'l Handling Expense</u>				
		Purchases - Fixed Price		\$3,186.00		\$ 354,298.31
		Sub-Contract				342.90
		Paints & Solvents				1,402.65
		Stores Material				3,540.94
		Plant Engr. Make Ready				
		Material Transfers				53,180.58
				\$3,186.00		\$ 412,765.38
		<u>Material NOT Subject to Handling Expense</u>				
		IBM Computer Charge				\$ 5,077.02
		Other Direct Charges				2,615.50
				-0-		\$ 7,692.52
		Total Material		\$3,186.00		\$ 420,457.90
		<u>Travel</u>		-0-		\$ 64,592.93
		Total Direct Charges		\$6,533.55		\$1,029,772.61

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 2

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT		U. S. GOVERNMENT			VOUCHER NUMBER	
					31	
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
	10/1/67 thru 10/15/67	OVERHEAD				
		Burden Center	Salaries & Wages	Rate	Burden	To-Date
	501	Engr. Support	\$1,008.58	.8483412	855.62 ✓	\$150,694.99
	501	Akron Engr. Support				3,333.83
	503	Engr.	1,185.85	.8408736	997.15 ✓	104,528.83
	503	Akron Engr.				13,195.31
	507	Akron Shipping				275.34
	509	Akron Squadron				3.75
	511	Plant Engr.	15.80	.9373418	14.81 ✓	2,664.84
	511	Akron Plant Engr.				204.35
	515	Metalcraft Parts Mfg. & Tooling	135.91	2.1161062	287.60 ✓	8,437.08
	517	Metalcraft Assy.				98,697.98
	517	Akron Metalcraft				4,153.77
	519	Plastics				4,138.79
	519	Akron Plastics				1,575.29
	521	Elec. Assy.	494.62	1.4390441	711.78 ✓	70,918.99
	521	Akron Elec. Assy.				5,242.60
	531	Qual Control	461.89	.8579315	396.27 ✓	7,097.82
	531	Akron Qual Control				438.84
	534	Engr. Field Service				53.78
	545	Fabric Assy.	17.28	2.3333333	40.32 ✓	435.56
	573	Off Site				51,544.33
			\$3,519.93		\$3,303.55 ✓	\$527,636.07
		Material Handling Expense			414.18	57,268.83
		Total Overhead			3,717.73 ✓	584,904.90
		G & A Expense				
		7.6 % of Manufacturing Expense			779.10 ✓	142,991.67
		Fixed Fee			-0-	119,340.00

SECRET
(When Filled In)

REQUEST FOR PAYMENT AND POSTING VOUCHER												VOUCHER NO. - DATE 2-12				
TO : Accounts Division (Room)						THROUGH: Monetary Division (Room)						DIVISION VOUCHER NO.				
												2 Oct 67 2037				
Request payment be made and/or transaction be recorded as indicated below. Pertinent documentation in support of this transaction is on file in this office.																
SUBJECT										INVOICE NO(S).						
PAYMENT TO <i>Goodyear Aerospace Corporation</i>										CONTRACT NO. <i>CW-6744</i>						
AMOUNT <i># 55,196.29</i>										CHECK TO BE DATED						
CASH PAYMENT			<input checked="" type="checkbox"/> U.S. TREASURY CHECK			AGENT CASHIER CHECK			CASHIER'S CHECK							
THE ATTACHED CHECKS AND/OR CASH IN THE AMOUNT OF \$ SHOULD BE TAKEN INTO ACCOUNT AS INDICATED BELOW.																
I HEREBY AUTHORIZE MY AGENT, WHOSE SIGNATURE APPEARS BELOW, TO RECEIVE \$ OF OFFICIAL FUNDS IN CURRENCY ON MY BEHALF.																
DATE		SIGNATURE OF PAYEE				DATE		SIGNATURE OF AGENT				DATE		SIGNATURE OF RECIPIENT		
DESCRIPTION-ALL OTHER ACCOUNTS 13-33		34-39 STATION CODE		40-41 EXPENSE	42-47 OBLIG. REF. NO.		48-49 PAY PER. LIQ. CODE	50 CA OR C O C YR	51-54 GENERAL LEDGER ACCT. NO.		55-56 ALLOT.-COST-FAN ACCOUNT SYMBOL		57-70 OBJECT CLASS	71-80 AMOUNT		
DESCRIPTION-ADVANCE ACCOUNTS 13-27		SHIP. DOC. NO.	REC. RPT. NO.	PROJECT NO.	ADVANCE ACCT. NO.	EMP. NO.	CODE	ACCT. NO.	FUND	61-66 CK. NO.	X REF. NO.	68-70 DUE DATE	DEBIT		CREDIT	
<i>Goodyear</i>					<i>88006744</i>			<i>1424177</i>		<i>61-1021</i>	<i>2540</i>	<i>2540</i>	<i>55,196.29</i>		<i>55,196.29</i>	
<i>Goodyear</i>																
TOTALS												<i>55,196.29</i>		<i>55,196.29</i>		
DATE		REVIEWED BY				DATE		CERTIFIED FOR PAYMENT OR CREDIT				25X1				
<i>2 Oct 67</i>												<i>(Signed)</i>				

Sanitized Copy Approved for Release 2010/12/09 : CIA-RDP72B00464R000800100001-6

Standard Form No. 1034
7 GAO 5000
1034-111

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION	DATE VOUCHER PREPARED	SCHEDULE NO.
	CONTRACT NUMBER AND DATE CW-6744	PAID BY
	REQUISITION NUMBER AND DATE	
	PAYEE'S NAME AND ADDRESS Goodyear Aerospace Corp.	
DISCOUNT TERMS		
PAYEE'S ACCOUNT NUMBER		
SHIPPED FROM	TO	WEIGHT
		GOVERNMENT B/L NUMBER

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT (¹)
				COST	PER	
		28 (Orig. Inv. Att.)				\$27,053.14
		29 " "				28,143.15
TOTAL						\$55,196.29

(Use continuation sheet(s) if necessary) **(Payee must NOT use the space below)**

PAYMENT:	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
<input type="checkbox"/> COMPLETE	=\$	=\$1.00	
<input type="checkbox"/> PARTIAL	BY :		
<input type="checkbox"/> FINAL	TIT		
<input type="checkbox"/> PROGRESS			55,196.29
<input type="checkbox"/> ADVANCE			

Pursuant to authority
2 OCT 1967
(Date)

PAID BY	CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER	ON (Name of bank)
	CASH	DATE	PAYEE ³	
	\$			

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

55-1138
Copy 1
3 pages

U. S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION U. S. GOVERNMENT	DATE VOUCHER PREPARED Sept. 25, 1967	VOUCHER NUMBER 28
	CONTRACT NUMBER AND DATE	PAID BY
	REQUISITION NUMBER AND DATE	

SEP 29 11 37 AM '67

PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION Akron, Ohio 44315	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER
	GOVERNMENT B/L NUMBER

CW-6744

SHIPPED FROM	TO	WEIGHT
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NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUANTITY	UNIT PRICE		AMOUNT (¹)
				COST	PER	
	8/21/67 thru 8/31/67	Direct Charges Overhead G & A Expense Fixed Fee (M.O. 8146AR) COST REIMBURSABLE PROVISIONAL PAYMENT		Current \$18,582.07 6,423.15 2,017.92 -0-		To-Date \$992,308.92 570,109.63 139,019.99 119,340.00
				\$27,053.14		

(Use continuation sheet(s) if necessary) **(Payee must NOT use the space below)** TOTAL \$1,820,778.54

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
	= \$	= \$ 1.00	
	BY ²		
	TITLE		

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

(Date) _____ (Authorized Certifying Officer)² _____ (Title) _____

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

PAID BY	CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER	ON (Name of bank)
	CASH	DATE	PAYEE ³	

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 1

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT

U. S. GOVERNMENT

VOUCHER NUMBER
28

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
	8/21/67 thru 8/31/67	DIRECT CHARGES		<u>Current</u>		<u>To-Date</u>
		<u>Salaries & Wages</u>				
		Regular		\$ 4,033.27		\$526,201.36
		Overtime Premium		81.97		8,123.15
				<u>\$ 4,115.24</u>		<u>\$534,324.51</u>
		<u>Material Subject to Mat'l Handling Expense</u>				
		Purchases - Fixed Price		\$10,773.97		\$327,358.99
		Sub-Contract		-		342.90
		Paints & Solvents		37.41		1,385.35
		Stores Material		85.34		3,536.46
		Plant Engr. Make Ready		-		-
		Material Transfers		3,527.99		53,250.17
				<u>\$14,424.71</u>		<u>\$385,873.87</u>
		<u>Material Not Subject to Handling Expense</u>				
		IBM Computer Charge		-		\$ 4,920.77
		Other Direct Charges		\$ 33.32		2,596.84
				<u>\$ 33.32</u>		<u>\$ 7,517.61</u>
		Total Material		\$14,458.03		\$393,391.48
		<u>Travel</u>		\$ 8.80		\$ 64,592.93
		TOTAL DIRECT CHARGES		\$18,582.07		\$992,308.92

Standard Form No. 1035
7 GAO 5000
1035-107

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

CONTINUATION SHEET

SHEET NO. 2

U. S. DEPARTMENT, BUREAU, OR ESTABLISHMENT

U. S. GOVERNMENT

VOUCHER NUMBER
28

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
	8/21/67 thru 8/31/67	OVERHEAD				
		Burden Center				
		Salaries & Wages	Rate	Burden	To-Date	
		501 Engr. Support	\$1,976.65	.8981054	\$1,775.24	\$1147,967.63
		501 Akron Engr. Support	-	-	-	3,333.83
		503 Engr.	582.08	1.0235535	595.79	101,718.81
		503 Akron Engr.	-	-	-	13,195.31
		507 Akron Shipping	-	-	-	275.34
		509 Akron Aquadron	-	-	-	3.75
		511 Plant Engr.	28.53	-	(25.48)	2,548.77
		511 Akron Plant Engr.	-	-	-	204.35
		515 Metalcraft Parts Mfg. & Tooling	306.49	2.2069562	676.41	6,740.00
		517 Metalcraft Assy.	-	-	-	98,697.98
		517 Akron Metalcraft	-	-	-	4,153.77
		519 Plastics	3.69	1.5176152	5.60	4,138.79
		519 Akron Plastics	-	-	-	1,575.29
		521 Elec. Assy.	983.12	1.4082716	1,384.50	68,018.84
		521 Akron Elec. Assy.	-	-	-	5,242.60
		531 Qual Control	144.01	.8048052	115.90	6,395.85
		531 Akron Qual Control	-	-	-	438.84
		534 Engr. Field Service	-	-	-	53.78
		545 Fabric Assy.	8.70	2.2965517	19.98	395.24
		573 OffSite	-	-	-	51,544.33
			\$4,033.27	-	\$4,547.94	\$516,643.10
		Material Handling Expense			\$1,875.21	\$ 53,466.53
		TOTAL OVERHEAD			\$6,422.15	\$570,109.63
		G & A Expense			\$2,047.92	\$139,019.99
		Fixed Fee			-0-	\$119,340.00

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Copy 1
3 pages

Standard Form No. 1034
7 GAO 5000
1034-110-02

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION U. S. GOVERNMENT	DATE VOUCHER PREPARED September 22, 1967	VOUCHER NUMBER 29
	CONTRACT NUMBER AND DATE	PAID BY
	REQUISITION NUMBER AND DATE	

SEP 29 11 36 AM '67

CW-6744

PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION Akron, Ohio 44315	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER

SHIPPED FROM	TO	WEIGHT	GOVERNMENT B/L NUMBER
--------------	----	--------	-----------------------

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUANTITY	UNIT PRICE		AMOUNT (¹)
				COST	PER	
	9/1/67 thru 9/17/67	Direct Charges Overhead G & A Expense Fixed Fee (M.O. 8116AR) COST REIMBURSABLE PROVISIONAL PAYMENT		Current \$19,806.32 6,156.00 2,180.83 -0-		To-Date \$1,012,115.24 576,265.63 141,200.82 119,340.00
				\$28,143.15		
TOTAL						\$1,848,921.69

(Use continuation sheet(s) if necessary) **(Payee must NOT use the space below)**

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
	= \$	= \$ 1.00	
	BY ²		
	TITLE		Amount verified; correct for
			(Signature or initials)

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

(Date) (Authorized Certifying Officer)² (Title)

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

PAID BY	CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER	ON (Name of bank)
	CASH	DATE	PAYEE ³	

PER	
TITLE	

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 1

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT

U. S. GOVERNMENT

VOUCHER NUMBER

29

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
	9/1/67 thru 9/17/67	DIRECT CHARGES		<u>CURRENT</u>		<u>TO-DATE</u>
		<u>Salaries & Wages</u>				
		Regular		\$ 3,606.04		\$ 529,807.40
		Overtime		83.28		8,206.43
				\$ 3,689.32		\$ 538,013.83
		<u>Material Subject to Mat'l Handling Expense</u>				
		Purchase -Fixed Price		\$16,117.00		\$ 343,475.99
		Sub-Contract		-		342.90
		Paints & Solvents		-		1,385.35
		Stores Material		-		3,536.46
		Plant Engr. Make Ready		-		
		Material Transfers		-		53,250.17
				\$16,117.00		\$ 401,990.87
		<u>Material Not Subject to Handling Expense</u>				
		IBM Computer Charges				\$ 4,920.77
		Other Direct Charges				2,596.84
				\$ -0-		\$ 7,517.61
		Total Material		\$16,117.00		\$ 409,508.48
		<u>Travel</u>		\$ -0-		\$ 64,592.93
		TOTAL DIRECT CHARGES		\$19,806.32		\$1,012,115.24

Standard Form No. 1035
7 GAO 3000
1035-107**PUBLIC VOUCHER FOR PURCHASES AND
SERVICES OTHER THAN PERSONAL**

CONTINUATION SHEET

SHEET NO. 2

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT						VOUCHER NUMBER
U. S. GOVERNMENT						29
NUMBER 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	UNIT PRICE		AMOUNT
				COST	PER	
	9/1/67 thru 9/17/67	OVERHEAD				
		Burden Center				
		Salaries & Wages	Rate	Burden	To-Date	
		501 Engr. Support	\$1,464.34	.8957346	\$1,311.66	\$149,279.29
		501 Akron Engr. Support	-	-	-	3,333.83
		503 Engr.	769.20	.8720749	670.80	102,389.61
		503 Akron Engr.	-	-	-	13,195.31
		507 Akron Shipping	-	-	-	275.34
		509 Akron Squadron	-	-	-	3.75
		511 Plant Engr.	61.25	.9286531	56.88	2,605.65
		511 Akron Plant Engr.	-	-	-	204.35
		515 Metallcraft Parts Mfg. & Tooling	301.44	1.9329220	582.66	7,322.66
		517 Metallcraft Assy.	-	-	-	98,697.98
		517 Akron Metallcraft	-	-	-	4,153.77
		519 Plastics	-	-	-	4,138.79
		519 Akron Plastics	-	-	-	1,575.29
		521 Elec. Assy.	960.40	1.4539775	1,396.40	69,415.24
		521 Akron Elec. Assy.	-	-	-	5,242.60
		531 Qual. Control	49.41	.8579235	42.39	6,438.24
		531 Akron Qual. Control	-	-	-	438.84
		534 Engr. Field Service	-	-	-	53.78
		545 Fabric Assy.	-	-	-	395.24
		573 OffSite	-	-	-	51,544.33
			\$3,606.04	-	\$4,060.79	\$520,703.89
		Material Handling Expense			\$2,095.21	\$ 55,561.74
		TOTAL OVERHEAD			\$6,156.00	\$576,265.63
		G & A Expense				
		8.4% of Manufacturing Expense			\$2,180.83	\$141,200.82
		Fixed Fee			-0-	\$119,340.00

SECRET
(When Filled In)

REQUEST FOR PAYMENT AND POSTING VOUCHER										VOUCHER NO. - DATE 2-12							
TO : Accounts Division (Room) Bldg.)						DIVISION VOUCHER NO.											
THROUGH: Monetary Division (Room) Bldg.)						6 Sept. 67 1430											
Request payment be made and/or transaction be recorded as indicated below. Pertinent documentation in support of this transaction is on file in this office.																	
SUBJECT								INVOICE NO(S). 26 + 27									
PAYMENT TO Goodyear Aerospace Corp.								CONTRACT NO. CW-6744									
AMOUNT # 73,761.30								CHECK TO BE DATED									
CASH PAYMENT		<input checked="" type="checkbox"/> U.S. TREASURY CHECK		AGENT CASHIER CHECK		BANK CASHIER'S CHECK											
THE ATTACHED CHECKS AND/OR CASH IN THE AMOUNT OF \$ SHOULD BE TAKEN INTO ACCOUNT AS INDICATED BELOW.																	
I HEREBY AUTHORIZE MY AGENT, WHOSE SIGNATURE APPEARS BELOW, TO RECEIVE \$ OF OFFICIAL FUNDS IN CURRENCY ON MY BEHALF.																	
DATE		SIGNATURE OF PAYEE				DATE		SIGNATURE OF AGENT		DATE		SIGNATURE OF RECIPIENT					
DESCRIPTION - ALL OTHER ACCOUNTS 13 - 33		34 - 39 STATION CODE		40 - 41 E X C H A N G E		42 - 47 OBLIG. REF. NO.		48 - 49 PAY PER. LIQ. CODE		50 - 54 CA OR GENERAL LEDGER ACCT. NO.		55 - 66 ALLOT. COST - FAN ACCOUNT SYMBOL		67 - 70 OBJECT CLASS		71 - 80 AMOUNT	
ADVANCE ACCOUNTS 13 - 27		SHIP. DOC. NO. /A NO.		REC. RPT. NO.		ADVANCE ACCT. NO. EMP. NO.				F I N I S H E D		61 - 66 CK. NO. X REF. NO.		68 - 70 DUE DATE		DEBIT CREDIT	
Goodyear						88 006744		1424177		61-1021		2540		73,761.30		73,761.30	
Goodyear																73,761.30	
										TOTALS		73,761.30		73,761.30			
DATE		REVIEWED BY				DATE		SIGNATURE OF CERTIFYING OFFICER		DATE		SIGNATURE OF CERTIFYING OFFICER					
5 Sept 67								(Signed)									

Standard Sanitized Copy Approved for Release 2010/12/09 : CIA-RDP72B00464R000800100001-6
7 GAO 5000
1034-110

**FEDERAL GOVERNMENT VOUCHER FOR PURCHASES AT
SERVICES OTHER THAN PERSONAL**

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION	DATE VOUCHER PREPARED	VOUCHER NUMBER
	CONTRACT NUMBER AND DATE CW-6744	PAID BY
	REQUISITION NUMBER AND DATE	
PAYEE'S NAME AND ADDRESS Goodyear Aerospace Corp.		DATE INVOICE RECEIVED
		DISCOUNT TERMS
		PAYEE'S ACCOUNT NUMBER
		GOVERNMENT B/L NUMBER

SHIPPED FROM	TO	WEIGHT
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NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT (¹)
				COST	PER	
		26 (Orig. Inv. Att.)				\$45,245.32
		27 " "				28,515.98

(Use continuation sheet(s) if necessary) **(Payee must NOT use the space below)** TOTAL \$73,761.30

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
	= \$	= \$1.00	
	BY ²		
	TITLE		Amount verified correct by \$73,761.30

Pursuant to authority vested in me as Director of the Federal Bureau of Investigation, I have approved this voucher for payment on the date shown above.

6 SEP 1967
(Date)

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

PAID BY	CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER	ON (Name of bank)
	CASH	DATE	PAYEE ³	

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is received 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.

55F-73385
1, 2, 3
3 pages

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Standard Form No. 1034
7 GAO 5000
1034-110-02

SERVICES OTHER THAN PERSONAL

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION U.S. GOVERNMENT	DATE VOUCHER PREPARED August 30, 1967	VOUCHER NUMBER 26
	CONTRACT NUMBER AND DATE	PAID BY
	REQUISITION NUMBER AND DATE	

PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION Akron, Ohio 44315	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER
	GOVERNMENT B/L NUMBER

EW-6744

SHIPPED FROM	TO	WEIGHT	GOVERNMENT B/L NUMBER
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NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT (1)
				COST	PER	
(M.O. 8146)	7/17/67 thru 7/31/67	Direct Charges Overhead G & A Expense Fixed Fee COST REIMBURSABLE PROVISIONAL PAYMENT		Current		To-Date
				\$24,983.92		\$ 956,771.25
				16,870.00		554,384.27
				3,391.40		134,713.90
				-0-		119,340.00
				\$45,245.32		

(Use continuation sheet(s) if necessary) (Payee must NOT use the space below) TOTAL \$1,765,209.42

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
	= \$	= \$ 1.00	
	BY ²		
	TITLE		Amount verified; correct for
			(Signature or initials)

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

(Date) _____ (Authorized Certifying Officer)² _____ (Title) _____

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

PAID BY	CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER	ON (Name of bank)
	CASH	DATE	PAYEE ³	
	\$			

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

Standard Form No. 1035
7 GAO 5000
1035-107

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

CONTINUATION SHEET

SHEET NO. 1

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT **U.S. GOVERNMENT**

VOUCHER NUMBER **26**

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
	4/17/67 thru 7/31/67	DIRECT CHARGES				
		<u>Salaries & Wages</u>				
		Regular		\$11,327.37		\$514,935.26
		Overtime Premium		229.35		7,946.97
				<u>\$11,556.72</u>		<u>\$522,882.23</u>
		<u>Material Subject to Mat'l Handling Expense</u>				
		Purchases - Fixed Price		\$ 6,137.62		\$307,051.02
		Sub-Contract		-		342.90
		Paints & Solvents		59.05		1,347.94
		Stores Material		111.00		3,451.12
		Plant Engr. Make Ready		-		-
		Material Transfers		4,596.47		49,722.18
				<u>\$10,904.14</u>		<u>\$361,915.16</u>
		<u>Material Not Subject to Handling Expense</u>				
		IBM Computer Charge		\$ 603.38		\$ 4,920.77
		Other Direct Charges		197.20		2,563.52
				<u>\$ 800.58</u>		<u>\$ 7,484.29</u>
		Total Material		\$11,704.72		\$369,399.45
		<u>Travel</u>		\$ 1,722.48		\$ 64,489.57
		TOTAL DIRECT CHARGES		\$24,983.92		\$956,771.25

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 2

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT		U. S. GOVERNMENT			VOUCHER NUMBER	
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
	7/17/67 thru 7/31/67	OVERHEAD				
		Salaries & Wages	Rate	Burden	To-DATE	
		Burden Center				
		501 Engr. Support \$ 3,231.01	1.3533725	\$ 4,372.76 ✓	\$113,914.25	
		501 Akron Engr. Support 290.36	.8091679	234.95 ✓	3,333.83	
		503 Engr. 1,967.95	1.0586804	2,083.43 ✓	99,687.26	
		503 Akron Engr. 1,179.00	1.0780746	1,271.05 ✓	13,195.31	
		507 Akron Shipping 25.93	1.3702275	35.53 ✓	275.34	
		509 Akron Squadron -	-	-	3.75	
		511 Plant Engr. 198.73	.9374528	186.30 ✓	2,401.24	
		511 Akron Plant Engr. -	-	-	204.35	
		515 Metalcraft Pts. Mfg. 1,201.54	2.0494865	2,462.54 ✓	4,876.78	
		517 Metalcraft Assy, -	-	-	98,697.98	
		517 Akron Metalcraft 241.56	1.7941196	433.46 ✓	4,153.77	
		519 Plastics 2.55	2.5411765	6.48 ✓	4,133.19	
		519 Akron Plastics 151.81	1.5541796	235.94 ✓	1,575.29	
		521 Electronic Assy. \$ 2,161.50	1.5593986	3,370.64 ✓	63,760.97	
		521 Akron Ele. Assy. 411.03	1.2886894	529.69 ✓	5,242.60	
		531 Qual. Control 161.18	.9672416	155.90 ✓	6,164.25	
		531 Akron Qual. Control 101.52	.8117612	82.41 ✓	438.84	
		534 Engr. Field Service -	-	-	53.78	
		545 Fabric Assy. .16	67.8750000	10.86 ✓	375.26	
		573 Off Site 1.54	.6493506	1.00 ✓	51,544.33	
		\$11,327.37		\$15,472.94 ✓	\$504,032.37	
		Material Handling Expense		\$ 1,397.06	\$ 50,351.90	
		TOTAL OVERHEAD		\$16,870.00 ✓	\$554,384.27	
		G & A Expense		\$ 3,391.40	\$134,713.90	
		Fixed Fee		-0-	\$119,340.00	

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PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

86
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3 pages

U. S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION U. S. GOVERNMENT	DATE VOUCHER PREPARED August 30, 1967	VOUCHER NUMBER 27
	CONTRACT NUMBER AND DATE	PAID BY
	REQUISITION NUMBER AND DATE	

PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION Akron, Ohio 44315	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER
	GOVERNMENT B/L NUMBER

OW-6744

SHIPPED FROM	TO	WEIGHT
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NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN- TITY	UNIT PRICE		AMOUNT (¹)
				COST	PER	
	8/1/67 thru 8/20/67	Direct Charges Overhead G & A Expense Fixed Fee		Current \$16,955.60 9,302.21 2,258.17 -0-	To-Date \$ 973,726.85 563,686.48 136,972.07 119,340.00	
(M.O. 8146AR)		COST REIMBURSABLE PROVISIONAL PAYMENT		\$28,515.98		

(Use continuation sheet(s) if necessary) **(Payee must NOT use the space below)** TOTAL \$1,793,725.40

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
	= \$	= \$ 1.00	
	BY ²		
	TITLE	Amount verified; correct for	

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

(Date) (Authorized Certifying Officer)² (Title)

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

PAID BY	CHECK NUMBER ON TREASURER OF THE UNITED STATES	CHECK NUMBER ON (Name of bank)
	CASH DATE	PAYEE ³

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 1

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT

U. S. GOVERNMENT

VOUCHER NUMBER
27

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
	8/1/67 thru 8/20/67	DIRECT CHARGES				
		<u>Salaries & Wages</u>				
		Regular		\$ 7,232.83		\$522,168.09
		Overtime Premium		94.21		8,041.18
				<u>\$ 7,327.04</u>		<u>\$530,209.27</u>
		<u>Material Subject to Mat'l Handling Expense</u>				
		Purchases-Fixed Price		\$ 9,534.00		\$316,585.02
		Sub-Contract		-		342.90
		Paints & Solvents		-		1,347.94
		Stores Material		-		3,451.12
		Plant Engr. Make Ready		-		-
		Material Transfers		-		49,722.18
				<u>\$ 9,534.00</u>		<u>\$371,149.16</u>
		<u>Material Not Subject to Handling Expense</u>				
		IBM Computer Charge		-		\$ 4,920.77
		Other Direct Charges		-		2,563.52
				<u>-0-</u>		<u>\$ 7,484.29</u>
		Total Material		\$ 9,534.00		\$378,933.45
		Travel		94.56		64,584.13
		TOTAL DIRECT CHARGES		\$16,955.60		\$973,726.85

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 2

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT U. S. GOVERNMENT VOUCHER NUMBER 27

NUMBER 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)	QUANTITY	UNIT PRICE		AMOUNT
				COST	PER	
	8/1/67 thru 8/20/67	OVERHEAD				
		Burden Center				
		Salaries & Wages	Rate	Burden	To-Date	
501		Engr. Support	\$2,640.58	.8627123	\$2,278.14 ✓	\$116,192.39
501		Akron Engr. Support	-	-	-	3,333.83
503		Engr.	1,642.74	.8740032	1,435.76 ✓	101,123.02
503		Akron Engr.	-	-	-	13,195.31
507		Akron Shipping	-	-	-	275.34
509		Akron Squadron	-	-	-	3.75
511		Plant Engr.	144.24	1.1994592	173.01 ✓	2,574.25
511		Akron Plant Engr.	-	-	-	204.35
515		Metalcraft Parts Mfg. & Tooling	644.81	1.8405577	1,186.81 ✓	6,063.59
517		Metalcraft Assy.	-	-	-	98,697.98
517		Akron Metalcraft	-	-	-	4,153.77
519		Plastics	-	-	-	4,133.19
519		Akron Plastics	-	-	-	1,575.29
521		Elec. Assy.	\$2,031.61	1.4143315	2,873.37 ✓	66,634.34
521		Akron Elec. Assy.	-	-	-	5,242.60
531		Qual. Control	128.85	.8979433	115.70 ✓	6,279.95
531		Akron Qual. Control	-	-	-	438.84
534		Engr. Field Service	-	-	-	53.78
545		Fabric Assy.	-	-	-	375.26
573		Off Site	-	-	-	51,514.33
			\$7,232.83	-	\$8,062.79 ✓	\$512,095.16
		Material Handling Expense			\$1,239.42	\$ 51,591.32
		TOTAL OVERHEAD			\$9,302.21 ✓	\$563,686.48
		G & A Expense 8.6% of Manufacturing Expense			\$2,258.17	\$136,972.07
		Fixed Fee			-0-	\$119,340.00

SECRET
(When Filled In)

REQUEST FOR PAYMENT AND POSTING VOUCHER

VOUCHER NO. - DATE 2-12

TO : Accounts Division (Room)
THROUGH: Monetary Division (Room) Bldg.)
 Bldg.)

DIVISION VOUCHER NO.

2 Aug 67 0690

Request payment be made and/or transaction be recorded as indicated below. Pertinent documentation in support of this transaction is on file in this office.

SUBJECT
PAYMENT TO: Goodyear Aerospace Corp.
AMOUNT: \$103,089.65

INVOICE NO(S): 24425
 CONTRACT NO. CW-6744
 CHECK TO BE DATED

CASH PAYMENT U.S. TREASURY CHECK AGENT CASHIER CHECK BANK CASHIER'S CHECK

THE ATTACHED CHECKS AND/OR CASH IN THE AMOUNT OF \$ SHOULD BE TAKEN INTO ACCOUNT AS INDICATED BELOW.

I HEREBY AUTHORIZE MY AGENT, WHOSE SIGNATURE APPEARS BELOW, TO RECEIVE \$ OF OFFICIAL FUNDS IN CURRENCY ON MY BEHALF.

DATE SIGNATURE OF PAYEE DATE SIGNATURE OF AGENT DATE SIGNATURE OF RECIPIENT

DESCRIPTION - ALL OTHER ACCOUNTS 13 - 33		34 - 39 STATION CODE	40 - 41 EXPOSED	42 - 47 OBLIG. REF. NO.	48 - 49 PAY PER. LIQ. CODE	50 CA OR COST YR.	51 - 54 GENERAL LEDGER ACCT. NO.	55 - 66 ALLOT. - COST - FAN ACCOUNT SYMBOL	67 - 70 OBJECT CLASS	71 - 80 AMOUNT	
DESCRIPTION - ADVANCE ACCOUNTS 13 - 27	SHIP. DOC. NO.	REC. RPT. NO.	ADVANCE ACCT. NO.	EMP. NO.				61 - 66 CK. NO.	68 - 70 DUE DATE	DEBIT	CREDIT
Goodyear				88006744			1424177	61-1081	2540	103,089.65	
Goodyear											103,089.65

Orig + 1 Addressee
 1 Contact CW-6744
 1 Voucher

DATE: 2 Aug 67
 REVIEWED BY: [Signature]
 CERTIFIED FOR PAYMENT OR CREDIT: [Signature]
 SIGNATURE OF CERTIFYING OFFICER: [Signature]
 (Signed)

TOTALS 103,089.65 103,089.65

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 7 GAO 5000
 1034-110
FEDERAL GOVERNMENT VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION	DATE VOUCHER PREPARED	VOUCHER NUMBER
	CONTRACT NUMBER AND DATE CW-6744	PAID BY
	REQUISITION NUMBER AND DATE	

PAYEE'S NAME AND ADDRESS Goodyear Aerospace Corp.	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER
	GOVERNMENT B/L NUMBER

SHIPPED FROM	TO	WEIGHT
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NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUANTITY	UNIT PRICE		AMOUNT <i>(1)</i>
				COST	PER	
		24 (Orig. Inv. Att.)				\$ 63,094.67
		25 " "				39,994.98

(Use continuation sheet(s) if necessary) **(Payee must NOT use the space below)** TOTAL \$103,089.65

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
	= \$	= \$1.00	
	BY :		
	TITLE		Amount verified; correct for \$103,089.65 <i>(Signature or initials)</i>

Pursuant to authority v. **[Signature]** STAT
(Date) **[Signature]** *(Authorized Certifying Officer)* **[Signature]** *(Contracting Officer)*
 ACCOUNTING CLASSIFICATION *(Appropriation symbol must be shown; other classification optional)*

PAID BY	CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER	ON <i>(Name of bank)</i>
	CASH	DATE	PAYEE ³	

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

PER
TITLE

SSF-T-2324
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3 pages

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Standard Form No. 1034
7 GAO 5000
1034-110-02

FEDERAL GOVERNMENT VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

U. S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION U. S. GOVERNMENT	DATE VOUCHER PREPARED July 26, 1967	VOUCHER NUMBER 21
	CONTRACT NUMBER AND DATE	PAID BY
	REQUISITION NUMBER AND DATE	

PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION Akron, Ohio 44315	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER

CW-6744

SHIPPED FROM	TO	WEIGHT	GOVERNMENT B/L NUMBER
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NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT (¹)
				COST	PER	
(M.O. 8146AR)	6/19/67 thru 6/30/67	Direct Charges Overhead G & A Expense Fixed Fee COST REIMBURSABLE PROVISIONAL PAYMENT		Current		To-Date
				\$32,098.68		\$ 909,306.38
				21,649.23		525,322.96
				4,944.81		128,132.65
				4,401.95		117,207.13
				\$63,094.67		

(Use continuation sheet(s) if necessary) (Payee must NOT use the space below) TOTAL \$1,679,969.12

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
	= \$	= \$ 1.00	
	BY ²		
	TITLE	Amount verified; correct for	
		(Signature or initials)	

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

(Date) _____ (Authorized Certifying Officer)² _____ (Title) _____

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

PAID BY	CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER	ON (Name of bank)
	CASH	DATE	PAYEE ³	
	\$			

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

Standard Form No. 1035
7 GAO 5000
1035-107PUBLIC VOUCHER FOR PURCHASES AND
SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 1

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT

U. S. GOVERNMENT

VOUCHER NUMBER

24

NUMBER 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	UNIT PRICE		AMOUNT
				COST	PER	
	6/19/67 thru 6/30/67	DIRECT CHARGES				
		<u>Salaries & Wages</u>				
		Regular		\$24,058.01		\$493,477.18
		Overtime Premium		199.10		7,580.89
				<u>\$24,257.11</u>		<u>\$501,058.07</u>
		<u>Material Subject to Mat'l Handling Expense</u>				
		Purchases - Fixed Price		\$ 5,164.71		\$289,412.25
		Sub-Contract		-		342.90
		Paints & Solvents		166.15		1,288.89
		Stores Material		298.86		3,340.12
		Plant Engineering Make Ready		-		-
		Material Transfers		974.77		45,125.71
				<u>\$ 6,604.49</u>		<u>\$339,509.87</u>
		<u>Material Not Subject to Handling Expense</u>				
		IBM Computer Charge		\$ 370.19		\$ 4,317.39
		Other Direct Charges		241.46		2,366.32
				<u>\$ 611.65</u>		<u>\$ 6,683.71</u>
		Total Material		\$ 7,216.14		\$346,193.58
		<u>Travel</u>		\$ 625.43		\$ 62,054.73
		TOTAL DIRECT CHARGES		<u>\$32,098.68</u>		<u>\$909,306.38</u>

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 2

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT					VOUCHER NUMBER	
U. S. GOVERNMENT					24	
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
	6/19/67 thru 6/30/67	OVERHEAD				
		<u>Burden Center</u>				
		<u>Salaries & Wages</u>	<u>Rate</u>	<u>Burden</u>	<u>To-Date</u>	
		501 Engr. Support	\$ 5,193.03	.8767733	\$ 4,553.11	\$135,598.74
		501 Akron Engr. Suppt.	255.60	.7525822	192.36	3,098.88
		503 Engineering	5,533.72	.8790922	4,864.65	95,524.83
		503 Akron Engr.	972.97	1.0743188	1,045.28	11,924.26
		507 Akron Shipping	27.45	1.3690346	37.58	239.81
		509 Akron Squadron	-	-	-	3.75
		511 Plant Engr.	26.91	1.1791156	31.73	2,063.94
		511 Akron Plant Engr.	-	-	-	204.35
		517 Metalcraft	1,799.11	1.5977678	2,874.56	98,697.98
		517 Akron Metalcraft	81.43	1.7196365	140.03	3,720.31
		519 Plastics	49.91	1.6469645	82.20	4,052.15
		519 Akron Plastics	156.80	1.9380102	303.88	1,339.35
		521 Electronic Assy.	1,743.58	1.3861022	2,416.78	58,693.52
		521 Akron Elec. Assy.	560.84	1.2280508	688.74	4,712.91
		531 Quality Control	342.76	.9976660	341.96	5,702.11
		531 Akron Qual. Control	70.53	.7514533	53.00	356.43
		534 Engr. Field Service	-	-	-	53.78
		545 Fabric Assy.	-	-	-	332.84
		573 Off Site	7,243.37	.4384658	3,175.97	51,543.33
			<u>\$24,058.01</u>	-	<u>\$20,801.83</u>	<u>\$177,863.27</u>
		Material Handling Expense			\$ 847.40	\$ 47,459.69
		TOTAL OVERHEAD			\$21,649.23	\$525,322.96
		G & A Expense				
		9.2% of Manufacturing Expense			\$ 4,944.81	\$128,132.65
		Fixed Fee @ 7.5%			\$4,401.95	\$117,207.13

55-7-3325
 021
 3 pages

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION U. S. GOVERNMENT	DATE VOUCHER PREPARED July 26, 1967	VOUCHER NUMBER 25
	CONTRACT NUMBER AND DATE	PAID BY
	REQUISITION NUMBER AND DATE	

PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION Akron, Ohio 44315 CW 6744	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER
	GOVERNMENT B/L NUMBER

SHIPPED FROM	TO	WEIGHT	GOVERNMENT B/L NUMBER
--------------	----	--------	-----------------------

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUANTITY	UNIT PRICE		AMOUNT (1)
				COST	PER	
	7/1/67 thru 7/16/67	Direct Charges Overhead G & A Expense Fixed Fee		Current	To-Date	
				\$22,480.95	\$ 931,787.33	
				12,191.31	537,514.27	
				3,189.85	131,322.50	
				2,132.87	119,340.00	
(M.O. 8146AR)		COST REIMBURSABLE PROVISIONAL PAYMENT		\$39,994.98		

(Use continuation sheet(s) if necessary) (Payee must NOT use the space below) TOTAL \$1,719,964.10

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
	= \$	= \$1.00	
	BY ²		
	TITLE	Amount verified; correct for	
		(Signature or initials)	

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

(Date) (Authorized Certifying Officer)² (Title)

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

CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER	ON (Name of bank)
CASH	DATE	PAYEE ³	
\$			

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 1

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT					VOUCHER NUMBER	
U. S. GOVERNMENT					25	
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
	7/1/67 thru 7/16/67	DIRECT CHARGES				
		<u>Salaries & Wages</u>				
		Regular		\$10,130.71		\$503,607.89
		Overtime Premium		136.73		7,717.62
				<u>\$10,267.44</u>		<u>\$511,325.51</u>
		<u>Material Subject to Mat'l. Handling Expense</u>				
		Purchases - Fixed Price		\$11,501.15		\$300,913.40
		Sub-Contract		-		342.90
		Paints & Solvents		-		1,288.89
		Stores Material		-		3,340.12
		Plant Engineering Make Ready		-		-
		Material Transfers		-		45,125.71
				<u>\$11,501.15</u>		<u>\$351,011.02</u>
		<u>Material not subject to Handling Expense</u>				
		IBM Computer Charge		-		\$ 4,317.39
		Other Direct Charges		-		2,366.32
				<u>-0-</u>		<u>\$ 6,683.71</u>
		Total Material		\$11,501.15		\$357,694.73
		<u>Travel</u>		\$ 712.36		\$ 62,767.09
		TOTAL DIRECT CHARGES		<u>\$22,480.95</u>		<u>\$931,787.33</u>

Standard Form No. 1035
7 GAO 5000
1035-107

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

CONTINUATION SHEET

SHEET NO. 2

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT U. S. GOVERNMENT					VOUCHER NUMBER 25	
NUMBER 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	UNIT PRICE		AMOUNT
				COST	PER	
	7/1/67 thru 7/16/67	OVERHEAD				
		<u>Burden Center</u>				
		<u>Salaries & Wages</u>	<u>Rate</u>	<u>Burden</u>	<u>To-Date</u>	
501		Engr. Support	\$ 4,570.01	.8627443	\$ 3,942.75 ✓	\$139,541.49
501		Akron Engr. Support	-	-	-	3,098.88
503		Engineering	2,475.00	.8400000	2,079.00 ✓	97,603.83
503		Akron Engr.	-	-	-	11,924.26
507		Akron Shipping	-	-	-	239.81
509		Akron Squadron	-	-	-	3.75
511		Plant Engr.	169.00	.8934911	151.00 ✓	2,214.94
511		Akron Plant Engr.	-	-	-	204.35
515		Metalcraft Parts Mfg. & Tooling	1,272.62	1.8970628	2,414.24 ✓	2,414.24
517		Metalcraft Assembly	-	-	-	98,697.98
517		Akron Metalcraft	-	-	-	3,720.31
519		Plastics	43.25	1.7239306	74.56 ✓	4,126.71
519		Akron Plastics	-	-	-	1,339.35
521		Electronic Assy.	1,247.43	1.3602447	1,696.81 ✓	60,390.33
521		Akron Elec. Assy.	-	-	-	4,712.91
531		Quality Control	336.96	.9088319	306.24 ✓	6,008.35
531		Akron Qual. Control	-	-	-	356.43
534		Engr. Field Service	-	-	-	53.78
545		Fabric Assembly	16.44	1.9197080	31.56 ✓	364.40
573		Off Site	-	-	-	51,543.33
			\$10,130.71	-	\$10,696.16 ✓	\$488,559.43
		Material Handling Expense			\$ 1,495.15	\$ 48,954.84
		TOTAL OVERHEAD			\$12,191.31 ✓	\$537,514.27
		G & A Expense				
		9.2% of Manufacturing Expense			\$ 3,189.85 ✓	\$131,322.50
		Fixed Fee			\$ 2,132.87 ✓	\$119,340.00

SECRET
(When Filled In)

REQUEST FOR PAYMENT AND POSTING VOUCHER										VOUCHER NO. - DATE 2-12			
TO : Accounts Division (Room Bldg.)		THROUGH: Monetary Division (Room Bldg.)								DIVISION VOUCHER NO. 30 June 67 7691			
Request payment be made and/or transaction be recorded as indicated below. Pertinent documentation in support of this transaction is on file in this office.													
SUBJECT								INVOICE NO(S). 22+23					
PAYMENT TO Goodyear Aerospace Corp.								CONTRACT NO. CW-6744					
AMOUNT \$178,211.07								CHECK TO BE DATED					
CASH PAYMENT <input checked="" type="checkbox"/>		U.S. TREASURY CHECK		AGENT CASHIER CHECK		BANK CASHIER'S CHECK							
THE ATTACHED CHECKS AND/OR CASH IN THE AMOUNT OF \$ SHOULD BE TAKEN INTO ACCOUNT AS INDICATED BELOW.													
I HEREBY AUTHORIZE MY AGENT, WHOSE SIGNATURE APPEARS BELOW, TO RECEIVE \$						OF OFFICIAL FUNDS IN CURRENCY ON MY BEHALF.							
DATE	SIGNATURE OF PAYEE			DATE	SIGNATURE OF AGENT			DATE	SIGNATURE OF RECIPIENT				
DESCRIPTION - ALL OTHER ACCOUNTS 13 - 33		34 - 39 STATION CODE		40 - 41	42 - 47 OBLIG. REF. NO.	48 - 49	50 CA OR C O S T YR.	51 - 54 GENERAL LEDGER ACCT. NO.	55 - 66 ALLOT. - COST - FAN ACCOUNT SYMBOL		67 - 70 OBJECT CLASS	71 - 80 AMOUNT	
DESCRIPTION - ADVANCE ACCOUNTS 13 - 27		SHIP. DOC. NO.	REC. RPT. NO.	EXC	ADVANCE ACCT. NO.	PAY PER. LIO. CODE			61 - 66 CK. NO.	68 - 70 DUE DATE	DEBIT	CREDIT	
Goodyear					88006744						178,211.07		
Goodyear												178,211.07	
										TOTALS		178,211.07	178,211.07
DATE	REVIEWED BY			CERTIFIED FOR PAYMENT OR CREDIT				SIGNATURE OF CERTIFYING OFFICER		25X1			
29 June 67								(Signed)					

Standard Form No. 1934
7 GAO 5000
1034-111

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

VOUCHER NO.

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION	DATE VOUCHER PREPARED	SCHEDULE NO.
	CONTRACT NUMBER AND DATE CW-6744	PAID BY
	REQUISITION NUMBER AND DATE	
PAYEE'S NAME AND ADDRESS Goodyear Aerospace Corp.	DATE INVOICE RECEIVED	
	DISCOUNT TERMS	
	PAYEE'S ACCOUNT NUMBER	
	GOVERNMENT B/L NUMBER	

SHIPPED FROM	TO	WEIGHT
--------------	----	--------

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT ⁽¹⁾
				COST	PER	
		22 (Orig. Inv. Att.)				\$ 80,852.90
		23 " "				97,358.17

(Use continuation sheet(s) if necessary) **(Payee must NOT use the space below)** **TOTAL** \$178,211.07

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
	BY:	= \$	= \$1.00
	TITLE	Amount verified; correct for \$178,211.07	
		(Signature or initials)	

Pursuant to authority vested in me by _____ (Contracting Officer) STAT

30 June 7 (Date) _____ (Authorized Certifying Officer)

ACCOUNTING CLASSIFICATION

PAID BY	CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER	ON (Name of bank)
	CASH	DATE	PAYEE ³	
	\$			

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

Standard Form No. 1034
7 GAO 50000
1034-110-02

FEDERAL GOVERNMENT
VOUCHER FOR PURCHASES AND
SERVICES OTHER THAN PERSONAL

(313)

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION U. S. GOVERNMENT	DATE VOUCHER PREPARED June 21, 1967	VOUCHER NUMBER 22
	CONTRACT NUMBER AND DATE JUN 29 1 11 PM 67	PAID BY
PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION Akron, Ohio 44315 <i>ew 6744</i>	REQUISITION NUMBER AND DATE	DATE INVOICE RECEIVED
		DISCOUNT TERMS
		PAYEE'S ACCOUNT NUMBER
		GOVERNMENT B/L NUMBER

SHIPPED FROM	TO	WEIGHT	GOVERNMENT B/L NUMBER
--------------	----	--------	-----------------------

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT (1)
				COST	PER	
	5/15/67 thru 5/31/67	Direct Charges Overhead G & A Expense Fixed Fee		Current	To-Date	
				\$45,258.47 ✓	\$	819,960.53
				23,616.98 ✓		477,985.24
				6,336.55 ✓		115,557.76
				5,640.90 ✓		106,012.75 ✓
(M.O. 8146AR)		COST REIMBURSABLE PROVISIONAL PAYMENT		\$80,852.90		

(Use continuation sheet(s) if necessary) **(Payee must NOT use the space below)**

PAYMENT:	APPROVED FOR	EXCHANGE RATE	DIFFERENCES	TOTAL	\$1,519,516.28
<input type="checkbox"/> COMPLETE	= \$	= \$ 1.00	✓	✓	
<input type="checkbox"/> PARTIAL	BY ²				
<input type="checkbox"/> FINAL	TITLE		Amount verified; correct for		
<input type="checkbox"/> PROGRESS			(Signature or initials)		
<input type="checkbox"/> ADVANCE					

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

(Date) (Authorized Certifying Officer)² (Title)

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

PAID BY	CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER	ON (Name of bank)
	CASH	DATE	PAYEE ³	
	\$			

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

Standard Form No. 1035
7 GAO 5000
1035-107

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

CONTINUATION SHEET

SHEET NO. 1

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT U. S. GOVERNMENT					VOUCHER NUMBER 22	
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN- TITY	UNIT PRICE		AMOUNT
				COST	PER	
	5/15/67 thru 5/31/67	DIRECT CHARGES			Current	To-Date
		Salaries & Wages				
		Regular			\$24,373.90	\$445,539.57
		Overtime Premium			233.14	6,909.23
					<u>\$24,607.04</u>	<u>\$452,448.80</u>
		<u>Material Subject to Mat'l Handling Expense</u>				
		Purchases - Fixed Price			\$13,551.78	\$256,260.54
		Sub-Contract			-0-	342.90
		Paints & Solvents			75.80	1,122.74
		Stores Material			46.66	3,041.26
		Plant Engineering Make Ready			-	-
		Material Transfers			3,200.66	44,150.94
					<u>\$16,874.90</u>	<u>\$304,918.38</u>
		<u>Material Not Subject to Handling Expense</u>				
		IBM Computer Charge			\$ 1,671.60	\$ 3,947.20
		Other Direct Charges			198.15	2,124.86
					<u>\$ 1,869.75</u>	<u>\$ 6,072.06</u>
		Total Material			\$18,744.65	\$310,990.44
		<u>Travel</u>			\$ 1,906.78	\$ 56,521.29
		Total Direct Charges			<u>\$45,258.47</u>	<u>\$819,960.53</u>

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 2

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT						VOUCHER NUMBER
U. S. GOVERNMENT						22
NUMBER 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	UNIT PRICE		AMOUNT
				COST	PER	
	5/15/67 thru 5/31/67	OVERHEAD				
		<u>Burden Center</u>			<u>Burden</u>	<u>To-Date</u>
		Salaries & Wages	Rate			
501		Engr. Support	\$ 6,350.10	.8072550	\$ 5,126.15	\$124,545.32
501		Akron Engr. Supt.	1,537.86	.6684809	1,028.03	2,906.52
503		Engineering	5,530.03	.7438621	4,113.58	85,645.83
503		Akron Engr.	1,235.00	1.0518381	1,299.02	10,878.98
507		Akron Shipping	18.36	1.6034858	29.44	202.23
509		Akron Squadron	-	-	-	3.75
511		Plant Engr.	219.76	.8877867	195.10	1,836.22
511		Akron Plant Engr.	1.82	.8736264	1.59	204.35
517		Metalcraft	2,328.59	1.9684358	4,583.68	90,934.29
517		Akron Metalcraft	165.20	1.7867483	295.17	3,580.28
519		Plastics	10.41	2.0605187	21.45	3,932.07
519		Akron Plastics	48.30	1.5708075	75.87	1,035.47
521		Elec. Assy.	1,974.83	1.3526177	2,671.19	52,921.22
521		Akron Elec. Assy.	518.07	1.1694752	605.87	4,024.17
531		Qual. Control	395.99	.8762848	347.00	4,896.00
531		Akron Qual. Control	113.46	.7975498	90.49	303.43
534		Engr. Field Service	-	-	-	53.78
545		Fabric Assy.	5.48	2.0182482	11.06	332.84
573		Off Site	3,920.64	.2443785	958.12	46,774.51
			\$24,373.90	-	\$21,452.81	\$135,011.26
		Material Handling Expense			\$ 2,164.17	\$ 42,973.98
		Total Overhead			\$23,616.98	\$477,985.24
		G & A Expense			\$ 6,336.55	\$115,557.76
		Fixed Fee @ 7.5%			\$ 5,640.90	\$106,012.75

Standard Form No. 1034
7 GAO 5000
1034-110-02

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION U.S. GOVERNMENT	DATE VOUCHER PREPARED June 22, 1967	VOUCHER NUMBER 23
	CONTRACT NUMBER AND DATE 11 PM 67	PAID BY
	REQUISITION NUMBER AND DATE	

PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION Akron, Ohio 44315	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER
	GOVERNMENT B/L NUMBER

SHIPPED FROM _____ TO _____ WEIGHT _____

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT (¹)
				COST	PER	
				Current		To-Date
	6/1/67 thru 6/18/67	Direct Charges Overhead G & A Expense Fixed Fee		\$57,247.17 ✓		\$ 877,207.70 ✓
				25,688.49 ✓		503,673.73 ✓
				7,630.08 ✓		123,187.84 ✓
				6,792.43 ✓		112,805.18 ✓
(M.O. 8146AR)		COST REIMBURSABLE PROVISIONAL PAYMENT		\$97,358.17		
TOTAL						\$1,616,874.45

(Use continuation sheet(s) if necessary) (Payee must NOT use the space below)

PAYMENT:	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
<input type="checkbox"/> COMPLETE	= \$	= \$ 1.00	✓
<input type="checkbox"/> PARTIAL	BY ²		
<input type="checkbox"/> FINAL			
<input type="checkbox"/> PROGRESS	TITLE		Amount verified; correct for
<input type="checkbox"/> ADVANCE			(Signature or initials)

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

(Date) _____ (Authorized Certifying Officer)² _____ (Title) _____

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

PAID BY	CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER	ON (Name of bank)
	CASH	DATE	PAYEE ³	

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

Standard Form No. 1035
7-63AO 5000
1035-107**PUBLIC VOUCHER FOR PURCHASES AND
SERVICES OTHER THAN PERSONAL**

CONTINUATION SHEET

SHEET NO. 1

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT				VOUCHER NUMBER		
U. S. GOVERNMENT				23		
NUMBER 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	UNIT PRICE		AMOUNT
				COST	PER	
	6/1/67 thru 6/18/67	DIRECT CHARGES		Current		To-Date
		<u>Salaries & Wages</u>				
		Regular		\$23,879.60		\$469,419.17
		Overtime Premium		472.56		7,381.79
				\$24,352.16		\$476,800.96
		<u>Material Subject to Mat'l. Handling Expense</u>				
		Purchases - Fixed Price		\$27,987.00		\$284,247.54
		Sub-Contract		-		342.90
		Paints & Solvents		-		1,122.74
		Stores Material		-		3,041.26
		Plant Engineering - Make Ready		-		-
		Material Transfers		-		44,150.94
				\$27,987.00		\$332,905.38
		<u>Material Not Subject to Handling Expense</u>				
		IBM Computer Charge		-		\$ 3,947.20
		Other Direct Charges		-		2,124.86
				-0-		\$ 6,072.06
		Total Material		\$27,987.00		\$338,977.44
		<u>Travel</u>		\$ 4,908.01		\$ 61,429.30
		TOTAL DIRECT CHARGES		\$57,247.17		\$877,207.70

Standard Form No. 1035
7 GAO 5000
1035-107**PUBLIC VOUCHER FOR PURCHASES AND
SERVICES OTHER THAN PERSONAL**

CONTINUATION SHEET

SHEET NO. 2

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT U. S. GOVERNMENT					VOUCHER NUMBER 23	
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN- TITY	UNIT PRICE		AMOUNT
				COST	PER	
	6/1/67 thru 6/18/67	OVERHEAD				
		<u>Burden Center</u>				
		<u>Salaries & Wages</u>	<u>Rate</u>	<u>Burden</u>	<u>To-Date</u>	
		501 Engr. Support	\$ 7,901.57	.8226606	\$ 6,500.31	\$131,045.63
		501 Akron Engr. Support	-	-	-	2,906.52
		503 Engineering	6,331.25	.7920000	5,014.35	90,660.18
		503 Akron Engr.	-	-	-	10,878.98
		507 Akron Shipping	-	-	-	202.23
		509 Akron Squadron	-	-	-	3.75
		511 Plant Engr.	234.91	.8343195	195.99	2,032.21
		511 Akron Plant Engr.	-	-	-	204.35
		517 Metalcraft	2,590.22	1.8875346	4,889.13	95,823.42
		517 Akron Metalcraft	-	-	-	3,580.28
		519 Plastics	23.86	1.5875943	37.88	3,969.95
		519 Akron Plastics	-	-	-	1,035.47
		521 Electronic Assy.	2,524.48	1.3291925	3,355.52	56,276.74
		521 Akron Elec. Assy.	-	-	-	4,024.17
		531 Quality Control	556.66	.8338124	464.15	5,360.15
		531 Akron Qual. Control	-	-	-	303.43
		534 Engr. Field Service	-	-	-	53.78
		545 Fabric Assy.	-	-	-	332.84
		573 Off Site	3,716.65	.4285714	1,592.85	48,367.36
			\$23,879.60	-	\$22,050.18	\$457,061.44
		Material Handling Expense			\$ 3,638.31	\$ 46,612.29
		TOTAL OVERHEAD			\$25,688.49	\$503,673.73
		G & A Expense				
		9.2% of Manufacturing Expense			\$ 7,630.08	\$123,187.84
		Fixed Fee @ 7.5%			\$ 6,792.43	\$112,805.18

SECRET
(When Filled In)

REQUEST FOR PAYMENT AND POSTING VOUCHER										VOUCHER NO. - DATE 2-12				
TO : Accounts Division (Room) Bldg.)					THROUGH: Monetary Division (Room) Bldg.)					DIVISION VOUCHER NO. <i>31 May 67 6932</i>				
Request payment be made and/or transaction be recorded as indicated below. Pertinent documentation in support of this transaction is on file in this office.														
SUBJECT								INVOICE NO(S). <i>20 and 21</i>						
PAYMENT TO <i>Goodyear Aerospace Corporation</i>								CONTRACT NO. <i>CW-6744</i>						
AMOUNT <i>\$ 148,206.85</i>								CHECK TO BE DATED						
CASH PAYMENT		<input checked="" type="checkbox"/> U.S. TREASURY CHECK		AGENT CASHIER CHECK		BANK CASHIER'S CHECK								
THE ATTACHED CHECKS AND/OR CASH IN THE AMOUNT OF \$ _____ SHOULD BE TAKEN INTO ACCOUNT AS INDICATED BELOW.														
I HEREBY AUTHORIZE MY AGENT, WHOSE SIGNATURE APPEARS BELOW, TO RECEIVE \$ _____ OF OFFICIAL FUNDS IN CURRENCY ON MY BEHALF.														
DATE	SIGNATURE OF PAYEE			DATE	SIGNATURE OF AGENT			DATE	SIGNATURE OF RECIPIENT					
DESCRIPTION - ALL OTHER ACCOUNTS 13 - 33		34 - 39 STATION CODE		40 - 41 E X C H A N G E	42 - 47 OBLIG. REF. NO.	48 - 49 PAY PER. LIG. CODE	50 CA OR C O S T YR.	51 - 54 GENERAL LEDGER ACCT. NO.	55 - 66 ALLOT. - COST - FAN ACCOUNT SYMBOL		67 - 70 OBJECT CLASS	71 - 80 AMOUNT		
DESCRIPTION - ADVANCE ACCOUNTS 13 - 27		SHIP. DOC. NO.	REC. RPT. NO.	P O E N D E	ADVANCE ACCT. NO.	EMP. NO.			F U N D S	61 - 66 CK. NO.	X REF. NO.	68 - 70 DUE DATE	DEBIT	CREDIT
<i>Goodyear</i>								<i>1601-077</i>		<i>61-1021</i>	<i>2540</i>	<i>148,206.85</i>	<i>148,206.85</i>	
<i>Goodyear</i>								<i>13k0</i>						<i>148,206.85</i>
<i>Original & 1 Address</i>														
<i>1 Conty CW-6744</i>														
<i>1 Voucher</i>														
TOTALS											<i>148,206.85</i>	<i>148,206.85</i>		
DATE	SIGNATURE OF PAYEE			DATE	REVIEWED BY			CERTIFIED FOR PAYMENT OR CREDIT						
<i>29 May 67</i>								DATE	SIGNATURE OF CERTIFYING OFFICER					
									<i>(Signed)</i>					
									25X1					
									25X1					

Standard 7 GAO 5000 1034-111
PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION	DATE VOUCHER PREPARED	SCHEDULE NO.	
	CONTRACT NUMBER AND DATE CW-6744		PAID BY
	REQUISITION NUMBER AND DATE		

PAYEE'S NAME AND ADDRESS Goodyear Aerospace Corp.	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER
	GOVERNMENT B/L NUMBER

SHIPPED FROM _____ TO _____ WEIGHT _____

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT (1)
				COST	PER	
		20 (Orig. Inv. Att.)				\$ 81,830.41
		21 " "				66,376.44

(Use continuation sheet(s) if necessary) **(Payee must NOT use the space below)** TOTAL \$148,206.85

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE = \$1.00	DIFFERENCES
	= \$		
	BY 2		
	TITLE		Amount verified: correct for \$148,206.85

Pursuant to authority vested in _____
 31 May 67 (Date)

ACCOUNTING CLASSIFICATION

PAID BY	CHECK NUMBER ON TREASURER OF THE UNITED STATES	CHECK NUMBER ON (Name of bank)
	CASH DATE	PAYEE 3

1 When stated in foreign currency, insert name of currency.
 2 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 in the space provided, over his official title.
 3 When a voucher is received 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.

55F-1-3214

3 pdgs

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Standard Form No. 1034
7 GAO 5000
1634-110-02

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION U. S. GOVERNMENT	DATE VOUCHER PREPARED May 23, 1967	VOUCHER NUMBER 20
	CONTRACT NUMBER AND DATE	PAID BY
	REQUISITION NUMBER AND DATE	

PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION Akron, Ohio 44315 CW-6744	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER
	GOVERNMENT B/L NUMBER

SHIPPED FROM	TO	WEIGHT	GOVERNMENT B/L NUMBER
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NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT (¹)
				COST	PER	
	4/17/67 thru 4/30/67	Direct Charges Overhead G & A Expense Fixed Fee		Current \$42,422.07 27,286.09 6,413.15 5,709.10		To-Date \$ 739,753.06 432,773.73 104,019.21 95,740.94
(M.O. 8146AR)		COST REIMBURSABLE PROVISIONAL PAYMENT		\$81,830.41		
TOTAL						\$1,372,286.94

(Use continuation sheet(s) if necessary) (Payee must NOT use the space below)

PAYMENT:	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
<input type="checkbox"/> COMPLETE	= \$	= \$1.00	
<input type="checkbox"/> PARTIAL	BY ²		
<input type="checkbox"/> FINAL	TITLE		Amount verified; correct for
<input type="checkbox"/> PROGRESS			(Signature or initials)
<input type="checkbox"/> ADVANCE			

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

(Date) _____ (Authorized Certifying Officer)² _____ (Title) _____

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

PAID BY	CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER	ON (Name of bank)
	CASH	DATE	PAYEE ³	

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 1

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT
U. S. GOVERNMENT

VOUCHER NUMBER
20

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
	4/17/67 thru 4/30/67	DIRECT CHARGES				
		Salaries & Wages				
		Regular		\$21,711.53		\$401,344.56
		Overtime Premium		258.64		6,475.31
				\$21,970.17		\$407,819.87
		<u>Material Subject to Mat'l Handling Expense</u>				
		Purchases - Fixed Price		\$16,995.75		\$231,382.76
		Sub-Contract		-0-		342.90
		Paints & Solvents		133.69		1,046.94
		Stores Material		288.12		2,994.60
		Plant Engineering Make Ready		-0-		-0-
		Material Transfers		2,105.81		40,950.28
				\$19,523.37		\$276,717.48
		<u>Material Not Subject to Handling Expense</u>				
		IBM Computer Charge		\$ 392.30		\$ 2,275.60
		Other Direct Charges		185.91		1,926.71
				\$ 578.21		\$ 4,202.31
		Total Material		\$20,101.58		\$280,919.79
		<u>Travel</u>		\$ 350.32		\$ 51,013.40
		TOTAL DIRECT CHARGES		\$42,422.07		\$739,753.06

Standard Form No. 1035
7 GAO 5000
1035-107

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

CONTINUATION SHEET

SHEET NO. 2

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT U. S. GOVERNMENT					VOUCHER NUMBER 20			
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>			QUAN- TITY	UNIT PRICE		AMOUNT
						COST	PER	
	4/17/67 thru 4/30/67	OVERHEAD						
		<u>Burden Center</u>	<u>Salaries & Wages</u>	<u>Rate</u>		<u>Burden</u>	<u>To-Date</u>	
501		Engr. Support	\$ 5,096.39	1.0713171		\$ 5,459.85	\$114,696.42	
501		Akron Engr. Support	577.23	.6280685		362.54	1,878.49	
503		Engineering	4,208.38	.7966581		3,352.64	76,785.53	
503		Akron Engr.	1,630.44	1.0490726		1,710.45	9,579.96	
507		Akron Shipping	32.04	1.3776529		44.14	172.79	
509		Akron Squadron	7.35	.5102041		3.75	3.75	
511		Plant Engineering	195.55	1.1072360		216.52	1,549.70	
511		Akron Plant Engr.	21.90	.8703196		19.06	202.76	
517		Metalcraft	2,469.27	1.8594281		4,591.43	82,570.90	
517		Akron Metalcraft	101.41	1.8020905		182.75	3,285.11	
519		Plastics	123.54	1.5053424		185.97	3,617.60	
519		Akron Plastics	83.46	1.6676252		139.18	959.60	
521		Elec. Assy.	3,141.67	1.4345237		4,506.80	46,355.39	
521		Akron Elec. Assy.	305.78	1.0983060		335.84	3,418.30	
531		Qual. Control	378.66	.7301273		276.47	4,356.86	
531		Akron Qual. Control	38.43	.6622430		25.45	212.94	
534		Engr. Field Service	-	-		-	53.78	
545		Fabric Assy.	-	-		-	321.78	
573		Off Site	3,300.03	.8854374		2,921.97	43,414.64	
			\$21,711.53	-		\$24,334.81	\$393,436.30	
		Material Handling Expense				\$ 2,951.28	\$ 39,337.43	
		TOTAL OVERHEAD				\$27,286.09	\$432,773.73	
		G & A Expense						
		9.2% of Manufacturing Expense				\$ 6,413.15	\$104,019.21	
		Fixed Fee @ 7.5%				\$ 5,709.10	\$ 95,740.94	

55F-2-3215
3 pages

Sanitized Copy Approved for Release 2010/12/09 : CIA-RDP72B00464R000800100001-6

Standard Form No. 1034
7 GAO 5000
1074-110-02

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION U. S. GOVERNMENT	DATE VOUCHER PREPARED May 23, 1967	VOUCHER NUMBER 21
	CONTRACT NUMBER AND DATE	PAID BY
	REQUISITION NUMBER AND DATE	
PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION Akron, Ohio 44315	<p style="font-size: 2em; font-weight: bold; transform: rotate(-15deg);">CW-6744</p>	DATE INVOICE RECEIVED
		DISCOUNT TERMS
		PAYEE'S ACCOUNT NUMBER

SHIPPED FROM	TO	WEIGHT	GOVERNMENT B/L NUMBER
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NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	(¹)
	5/1/67 thru 5/14/67	Direct Charges Overhead G & A Expense Fixed Fee		Current \$34,949.00 21,594.53 5,202.00 4,630.91		To-Date \$ 774,702.06 454,368.26 109,221.21 100,371.85
(M.O. 8L46AR)		COST REIMBURSABLE PROVISIONAL PAYMENT		\$66,376.44		
TOTAL						\$1,438,663.38

(Use continuation sheet(s) if necessary) **(Payee must NOT use the space below)**

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE = \$ 1.00	DIFFERENCES
	BY ²		
	TITLE		Amount verified; correct for
			(Signature or initials)

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

(Date) (Authorized Certifying Officer)² (Title)

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

PAID BY	CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER	ON (Name of bank)
	CASH	DATE	PAYEE ³	

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

Standard Form No. 1035
7 GAO 5000
1035-107**PUBLIC VOUCHER FOR PURCHASES AND
SERVICES OTHER THAN PERSONAL**

CONTINUATION SHEET

SHEET NO. 1

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT U. S. GOVERNMENT					VOUCHER NUMBER 21	
NUMBER 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	UNIT PRICE		AMOUNT
				COST	PER	
	5/1/67 thru 5/14/67	DIRECT CHARGES				<u>Current</u> <u>To-Date</u>
		Salaries & Wages				
		Regular		\$19,821.11		\$421,165.67
		Overtime Premium		200.78		6,676.09
				\$20,021.89		\$427,841.76
		<u>Material Subject to Mat'l Handling Expense</u>				
		Purchases - Fixed Price		\$11,326.00		\$242,708.76
		Sub-Contract		-0-		342.90
		Paints & Solvents		-0-		1,046.94
		Stores Material		-0-		2,994.60
		Plant Engineering Make Ready		-0-		-0-
		Material Transfers		-0-		40,950.28
				\$11,326.00		\$288,043.48
		<u>Material Not Subject to Handling Expense</u>				
		IBM Computer Charge		-0-		\$ 2,275.60
		Other Direct Charges		-0-		1,926.71
				-0-		\$ 4,202.31
		Total Material		\$11,326.00		\$292,245.79
		<u>Travel</u>		\$ 3,601.11		\$ 54,614.51
		TOTAL DIRECT CHARGES		\$34,949.00		\$774,702.06

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 2

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT U. S. GOVERNMENT					VOUCHER NUMBER 21	
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
	5/1/67 thru 5/14/67	OVERHEAD				
		Salaries & Wages	Rate	Burden		To-Date
		Burden Center				
		501 Engr. Support	\$ 5,331.29	.8858550	\$ 4,722.75	\$119,419.17
		501 Akron Engr. Support	-	-	-	1,878.49
		503 Engineering	5,591.78	.8488746	4,746.72	81,532.25
		503 Akron Engr.	-	-	-	9,579.96
		507 Akron Shipping	-	-	-	172.79
		509 Akron Squadron	-	-	-	3.75
		511 Plant Engr.	105.14	.8695073	91.42	1,641.12
		511 Akron Plant Engr.	-	-	-	202.76
		517 Metalcraft	2,025.73	1.8658508	3,779.71	86,350.61
		517 Akron Metalcraft	-	-	-	3,285.11
		519 Plastics	183.54	1.5964912	293.02	3,910.62
		519 Akron Plastics	-	-	-	959.60
		521 Electronic Assy	2,844.40	1.3692308	3,894.64	50,250.03
		521 Akron Elec. Assy.	-	-	-	3,418.30
		531 Qual. Control	228.98	.8391126	192.14	4,549.00
		531 Akron Qual. Control	-	-	-	212.94
		534 Engr. Field Service	-	-	-	53.78
		545 Fabric Assy.	-	-	-	321.78
		573 Off Site	3,510.25	.6842105	2,401.75	45,816.39
			\$19,821.11	-	\$20,122.15	\$413,558.45
		Material Handling Expense			\$ 1,472.38	\$ 40,809.81
		TOTAL OVERHEAD			\$21,594.53	\$454,368.26
		G & A Expense				
		9.2% of Manufacturing Expense			\$ 5,202.00	\$109,221.21
		Fixed Fee @ 7.5%			\$ 4,630.91	\$100,371.85

L-296 (6-65) 7243

CERTIFICATE OF SERVICE

CONTRACTOR Goodyear Aerospace Corporation Arizona Division Litchfield Park, Arizona				TO(MAJOR AIR COMMAND) ASD (ASZB - Col. Bellis) WPAFB, Ohio 20331							
CONTRACT AF33(600)				DATE OF CERTIFICATE 1, May 1967							
EXHIBIT NO.											
1. NAME OF CTSP (LAST, FIRST AND MIDDLE)			2. AF UNIT			3. PERIOD OF CERTIFICATE (INCLUSIVE DATES) 1, April 67 THRU 30, April 1967					
4. TOTAL DAYS COVERED THIS PERIOD 30		4A. LESS NONWORK DAYS 10		4B. LESS VACATION N/A THRU THRU		5. LESS SICK TIME N/A THRU THRU		6. LESS CONTRACT HOLIDAYS NONE		7. BILLABLE DAYS 20	
8. AUTHORIZED OVERTIME HOURS WORKED (NOT INCLUDED IN ITEM 7)											
DATE		TIME & ONE HALF		DOUBLE TIME		DATE		TIME & ONE HALF		DOUBLE TIME	
4 April		3				14 April		1			
5 April		2.5				18 April		6.5			
13 April		0.5				19 April		5			
9. DATES ON WHICH PREMIUM PAY SHIFTS WERE WORKED N/A											
10. TEMPORARY DUTY AWAY FROM HOME STATION (ENTER HOUR AND DATE OF DEPARTURE AND RETURN)											
DEPARTED		RETURNED		DEPARTED		RETURNED		DEPARTED		RETURNED	
N/A											
11. AUTHORIZED TRAVEL PERFORMED BY COMMERCIAL CARRIER (INCLUDING TAXICAB, ETC.)											
INCLUSIVE DATES		FROM -			TO -			MODE		COST	
N/A THRU											
THRU											
THRU											
12. AUTHORIZED PRIVATELY OWNED CONVEYANCE (EXCEPT ON-BASE MILEAGE)											
INCLUSIVE DATES		FROM -			TO -			TOLLS		MILES	
N/A THRU											
THRU											
THRU											
THRU											
13. AUTHORIZED ON-BASE MILEAGE BY PRIVATELY OWNED CONVEYANCE: N/A MILES											
14. GOVERNMENT TRANSPORTATION REQUESTS USED											
DATE ISSUED		ISSUING AGENCY			FROM -			TO -			
N/A											
15. GOVERNMENT QUARTERS WERE ASSIGNED ON THE FOLLOWING DATES: NONE											

16. IF THIS IS THE INITIAL CERTIFICATE SUBMITTED FROM THIS AF UNIT, STATE PLACE OF LAST ASSIGNMENT AND DATE OF DEPARTURE:	N/A
DEPARTED (PLACE)	ON (DATE)
17. IF THIS IS THE FINAL CERTIFICATE SUBMITTED FROM THIS AF UNIT, STATE DATE OF DEPARTURE:	N/A
18. DEPARTED THE UNITED STATES FOR OVERSEAS DUTY FROM:	N/A
(PORT)	ON (DATE)
19. ARRIVED THE UNITED STATES FROM OVERSEAS DUTY AT:	N/A
(PORT)	ON (DATE)
20. NAME OF COUNTRY WHERE OVERSEAS DUTY WAS PERFORMED DURING THIS PERIOD (UNLESS PROHIBITED FOR SECURITY REASONS)	N/A
21. ADDITIONAL INFORMATION AND REMARKS:	

ION IN ITEMS 1 THRU 21 ABOVE IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. STAT

OF MY KNOWLEDGE AND BELIEF, THE SERVICES REPORTED ABOVE WERE PERFORMED IN A SATISFACTORY MANNER, THAT ALL OVERTIME AND TRAVEL REPORTED WERE AUTHORIZED IN ADVANCE BY COMPETENT AUTHORITY, AND THAT APPROPRIATE WRITTEN ORDERS HAVE BEEN ISSUED OR REQUESTED, WITH THE FOLLOWING EXCEPTIONS:

(IF SERVICES WERE NOT SATISFACTORY, COMPLETE WRITTEN REPORT HAS BEEN PREPARED AND

NAME	GRADE	(FACSIMILE IS NOT ACCEPTABLE)
	Colonel	
AFBN	ORGANIZATION	
FR 51861	FTTAM	

INSTRUCTIONS FOR PREPARATION:

- ITEMS NOT APPLICABLE WILL BE INDICATED BY N/A (EXCEPT ITEM 15, ENTER NONE OR APPLICABLE DATES)
- THE PERIOD COVERED BY A CERTIFICATE WILL NOT INCLUDE MORE THAN ONE CALENDAR MONTH.
- ITEM 4.1. NON-WORK DAYS ARE THE 6TH AND 7TH DAY OF THE SCHEDULED WORK WEEK.
- ITEM 6. THE NUMBER OF CONTRACT HOLIDAYS IN THE PERIOD WILL BE ENTERED REGARDLESS OF WHETHER THEY WERE WORK DAYS. IF THEY WERE WORK DAYS, THEY WILL BE SHOWN IN ITEM 8 AS OVERTIME EVEN IF CONTRACT DOES NOT PROVIDE FOR OVERTIME PREMIUM PAY. REIMBURSEMENT WILL BE MADE FOR HOLIDAY WORK IN ACCORDANCE WITH APPLICABLE CONTRACT.
- ITEM 7. THE NUMBER OF BILLABLE DAYS IS THE TOTAL NUMBER OF DAYS IN THE PERIOD, LESS NON-WORK DAYS, VACATION DAYS, SICK DAYS, AND CONTRACT HOLIDAYS (OVERTIME NOT TO BE INCLUDED IN THIS ITEM.)
- TRAVEL DAYS: WORK DAYS UTILIZED FOR AUTHORIZED TRAVEL WILL BE INCLUDED IN THIS ITEM. ALL OTHER DAYS UTILIZED IN AUTHORIZED TRAVEL WILL BE INDICATED IN REMARKS SECTION, GIVING TYPE AND TIME OF TRAVEL.
- ENTRIES IN ITEMS 8, 10, 11, 12, AND 14 MAY BE DOUBLE-SPACED OR SINGLE-SPACED AS REQUIRED. IF ADDITIONAL SPACE IS NEEDED, ITEM 21 WILL BE USED.
- ITEMS 11 AND 12. THE POINT "FROM" AND "TO", IN ITEMS 11 AND 12, MUST BE THE ACTUAL LOCATIONS VISITED. (EXAMPLE: OFFUTT AFB, NEB DEMA, NEBRASKA.)
- MONTH AND YEAR MAY BE OMITTED WHEN ENTERING DATES, EXCEPT FOR DATE OF CERTIFICATE AND ITEM 3. ALL OTHER DATES MUST BE WITHIN THE PERIOD COVERED BY THE CERTIFICATE.
- ITEM 23. IF SERVICES WERE NOT SATISFACTORY, OR IF THERE IS DISAGREEMENT AS TO SERVICE PERFORMED, THE AF SUPERVISORY OFFICER MUST EXPLAIN IN ITEM 23.
- NOTE: ONE COPY OF TRAVEL ORDER WILL BE ATTACHED TO EACH COPY OF CERTIFICATE OF SERVICE ON WHICH TRAVEL OR TOY IS REPORTED.

L-296 (6-65) 7243

CERTIFICATE OF SERVICE

CONTRACTOR Goodyear Aerospace Corporation Arizona Division Litchfield Park, Arizona				TO(MAJOR AIR COMMAND) ASD (ASZB - Col. Bellis) WPAFB, Ohio 20331			
CONTRACT AF33(600)				DATE OF CERTIFICATE 1, May 1967			
EXHIBIT NO.							
1. NAME OF CTSP (LAST, FIRST AND MIDDLE)			2. AF UNIT			3. PERIOD OF CERTIFICATE (INCLUSIVE DATES)	
						1, April 67 THRU 30, April 1967	
4. TOTAL DAYS COVERED THIS PERIOD		5A. LESS NON-WORK DAYS		5B. LESS VACATION		5. LESS SICK TIME	6. LESS CONTRACT HOLIDAYS
30		10		N/A THRU THRU		N/A THRU THRU	NONE
7. BILLABLE DAYS 20							
8. AUTHORIZED OVERTIME HOURS WORKED (NOT INCLUDED IN ITEM 7)							
DATE		TIME & ONE HALF	DOUBLE TIME	DATE		TIME & ONE HALF	DOUBLE TIME
3 April		5.5		20 April		2.5	
4 April		6		24 April		3.5	
6 April		1.5		25 April		4.5	
7 April		1		27 April		1	
18 April		2					
19 April		4					
9. DATES ON WHICH PREMIUM PAY SHIFTS WERE WORKED N/A							
10. TEMPORARY DUTY AWAY FROM HOME STATION (ENTER HOUR AND DATE OF DEPARTURE AND RETURN)							
DEPARTED		RETURNED		DEPARTED		RETURNED	
N/A							
11. AUTHORIZED TRAVEL PERFORMED BY COMMERCIAL CARRIER (INCLUDING TAXICAB, ETC.)							
INCLUSIVE DATES		FROM -		TO -		MODE	COST
N/A THRU							
THRU							
THRU							
12. AUTHORIZED PRIVATELY OWNED CONVEYANCE (EXCEPT ON-BASE MILEAGE)							
INCLUSIVE DATES		FROM -		TO -		TOLLS	MILES
N/A THRU							
THRU							
THRU							
THRU							
13. AUTHORIZED ON-BASE MILEAGE BY PRIVATELY OWNED CONVEYANCE: N/A MILES							
14. GOVERNMENT TRANSPORTATION REQUESTS USED							
DATE ISSUED		ISSUING AGENCY		FROM -		TO -	
N/A							
15. GOVERNMENT QUARTERS WERE ASSIGNED ON THE FOLLOWING DATES: NONE							

16. IF THIS IS THE INITIAL CERTIFICATE SUBMITTED FROM THIS AF UNIT, STATE PLACE OF LAST ASSIGNMENT AND DATE OF DEPARTURE:	N/A
DEPARTED (PLACE) ON (DATE)	
17. IF THIS IS THE FINAL CERTIFICATE SUBMITTED FROM THIS AF UNIT, STATE DATE OF DEPARTURE:	N/A
18. DEPARTED THE UNITED STATES FOR OVERSEAS DUTY FROM:	N/A
(PORT) ON (DATE)	
19. ARRIVED THE UNITED STATES FROM OVERSEAS DUTY AT:	N/A
(PORT) ON (DATE)	
20. NAME OF COUNTRY WHERE OVERSEAS DUTY WAS PERFORMED DURING THIS PERIOD (UNLESS PROHIBITED FOR SECURITY REASONS)	N/A
21. ADDITIONAL INFORMATION AND REMARKS:	

22. CERTIFICATE: I CERTIFY THAT THE INFORMATION IN ITEMS 1 THROUGH 21 ABOVE IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

STAT

23. CERTIFICATION: I CERTIFY THAT, TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE SERVICES REPORTED ABOVE WERE PERFORMED IN A SATISFACTORY MANNER, THAT ALL OVERTIME AND TRAVEL REPORTED WERE AUTHORIZED IN ADVANCE BY COMPETENT AUTHORITY, AND THAT APPROPRIATE WRITTEN ORDERS HAVE BEEN ISSUED OR REQUESTED, WITH THE FOLLOWING EXCEPTIONS:

(IF SERVICES WERE NOT SATISFACTORY, COMPLETE WRITTEN REPORT HAS BEEN PREPARED AND)

NAME	GRADE	STAT
[Redacted]	Colonel	
AFSN	ORGANIZATION	STAT
FR 51861	FTTAM	

INSTRUCTIONS FOR PREPARATION:

ITEMS NOT APPLICABLE WILL BE INDICATED BY N/A (EXCEPT ITEM 15, ENTER NONE OR APPLICABLE DATES)

THE PERIOD COVERED BY A CERTIFICATE WILL NOT INCLUDE MORE THAN ONE CALENDAR MONTH.

ITEM 11. NON-WORK DAYS ARE THE 6TH AND 7TH DAY OF THE SCHEDULED WORK WEEK.

ITEM 6. THE NUMBER OF CONTRACT HOLIDAYS IN THE PERIOD WILL BE ENTERED REGARDLESS OF WHETHER THEY WERE WORK DAYS. IF THEY WERE WORK DAYS, THEY WILL BE SHOWN IN ITEM 8 AS OVERTIME EVEN IF CONTRACT DOES NOT PROVIDE FOR OVERTIME PREMIUM PAY. REIMBURSEMENT WILL BE MADE FOR HOLIDAY WORK IN ACCORDANCE WITH APPLICABLE CONTRACT.

ITEM 7. THE NUMBER OF BILLABLE DAYS IS THE TOTAL NUMBER OF DAYS IN THE PERIOD, LESS NON-WORK DAYS, VACATION DAYS, SICK DAYS, AND CONTRACT HOLIDAYS (OVERTIME NOT TO BE INCLUDED IN THIS ITEM.)

TRAVEL DAYS: WORK DAYS UTILIZED FOR AUTHORIZED TRAVEL WILL BE INCLUDED IN THIS ITEM. ALL OTHER DAYS UTILIZED IN AUTHORIZED TRAVEL WILL BE INDICATED IN REMARKS SECTION, GIVING TYPE AND TIME OF TRAVEL.

ENTRIES IN ITEMS 8, 10, 11, 12, AND 14 MAY BE DOUBLE-SPACED OR SINGLE-SPACED AS REQUIRED. IF ADDITIONAL SPACE IS NEEDED, ITEM 21 WILL BE USED.

ITEMS 11 AND 12. THE POINT "FROM" AND "TO", IN ITEMS 11 AND 12, MUST BE THE ACTUAL LOCATIONS VISITED. (EXAMPLE: OFFUTT AFB, NEB; OMAHA, NEBRASKA.)

MONTH AND YEAR MAY BE OMITTED WHEN ENTERING DATES, EXCEPT FOR DATE OF CERTIFICATE AND ITEM 3. ALL OTHER DATES MUST BE WITHIN THE PERIOD COVERED BY THE CERTIFICATE.

ITEM 23. IF SERVICES WERE NOT SATISFACTORY, OR IF THERE IS DISAGREEMENT AS TO SERVICE PERFORMED, THE AF SUPERVISORY OFFICER MUST EXPLAIN IN ITEM 23.

NOTE: ONE COPY OF TRAVEL ORDER WILL BE ATTACHED TO EACH COPY OF CERTIFICATE OF SERVICE ON WHICH TRAVEL OR TDY IS REPORTED.

L-296 (6-65) 7243

CERTIFICATE OF SERVICE

CONTRACTOR Goodyear Aerospace Corporation Arizona Division Litchfield Park, Arizona	TO(MAJOR AIR COMMAND) ASD (ASZB - Col. Bellis) WPAFB, Ohio 20331
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CONTRACT AF33(600)	DATE OF CERTIFICATE 1, May 1967
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1. NAME OF CTSP (LAST, FIRST AND MIDDLE) []	2. AF UNIT []	3. PERIOD OF CERTIFICATE (INCLUSIVE DATES) 1, April 67 THRU 30, April 67 STAT			
4. TOTAL DAYS COVERED THIS PERIOD 30	4A. LESS NONWORK DAYS 10	4B. LESS VACATION N/A THRU THRU	5. LESS SICK TIME N/A THRU THRU	6. LESS CONTRACT HOLIDAYS NONE	7. BILLABLE DAYS 20

8. AUTHORIZED OVERTIME HOURS WORKED (NOT INCLUDED IN ITEM 7)								
DATE	TIME & ONE HALF	DOUBLE TIME	DATE	TIME & ONE HALF	DOUBLE TIME	DATE	TIME & ONE HALF	DOUBLE TIME
3 April	4		19 April	4				
4 April	4		20 April	4				
5 April	4		24 April	4				
6 April	4		25 April	4				
13 April	4							
18 April	5.5							

9. DATES ON WHICH PREMIUM PAY SHIFTS WERE WORKED
 N/A

10. TEMPORARY DUTY AWAY FROM HOME STATION (ENTER HOUR AND DATE OF DEPARTURE AND RETURN)					
DEPARTED	RETURNED	DEPARTED	RETURNED	DEPARTED	RETURNED
N/A					

11. AUTHORIZED TRAVEL PERFORMED BY COMMERCIAL CARRIER (INCLUDING TAXICAB, ETC.)				
INCLUSIVE DATES	FROM -	TO -	MODE	COST
N/A THRU				
THRU				
THRU				

12. AUTHORIZED PRIVATELY OWNED CONVEYANCE (EXCEPT ON-BASE MILEAGE)				
INCLUSIVE DATES	FROM -	TO -	TOLLS	MILES
N/A THRU				
THRU				
THRU				
THRU				

13. AUTHORIZED ON-BASE MILEAGE BY PRIVATELY-OWNED CONVEYANCE:
 N/A MILES

14. GOVERNMENT TRANSPORTATION REQUESTS USED			
DATE ISSUED	ISSUING AGENCY	FROM -	TO -
N/A			

15. GOVERNMENT QUARTERS WERE ASSIGNED ON THE FOLLOWING DATES:
 NONE

16. IF THIS IS THE INITIAL CERTIFICATE SUBMITTED FROM THIS AF UNIT, STATE PLACE OF LAST ASSIGNMENT AND DATE OF DEPARTURE:			N/A
DEPARTED (PLACE)	ON (DATE)		
17. IF THIS IS THE FINAL CERTIFICATE SUBMITTED FROM THIS AF UNIT, STATE DATE OF DEPARTURE:			N/A
18. DEPARTED THE UNITED STATES FOR OVERSEAS DUTY FROM:			N/A
(PORT)	ON (DATE)		
19. ARRIVED THE UNITED STATES FROM OVERSEAS DUTY AT:			N/A
(PORT)	ON (DATE)		
20. NAME OF COUNTRY WHERE OVERSEAS DUTY WAS PERFORMED DURING THIS PERIOD (UNLESS PROHIBITED FOR SECURITY REASONS)			N/A
21. ADDITIONAL INFORMATION AND REMARKS:			
22. CERTIFICATION: I CERTIFY THAT THE INFORMATION IN ITEMS 1 THRU 21 ABOVE IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF			STAT
23. CERTIFICATION: I CERTIFY THAT, TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE SERVICES REPORTED ABOVE WERE PERFORMED IN A SATISFACTORY MANNER, THAT ALL OVERTIME AND TRAVEL REPORTED WERE AUTHORIZED IN ADVANCE BY COMPETENT AUTHORITY, AND THAT APPROPRIATE WRITTEN ORDERS HAVE BEEN ISSUED OR REQUESTED, WITH THE FOLLOWING EXCEPTIONS:			
(IF SERVICES WERE NOT SATISFACTORY, COMPLETE WRITTEN REPORT HAS BEEN PREPARED AND FORWARDED)			
NAME	GRADE	SIGNATURE (MANUAL SIGNATURE IS REQUIRED) (FACSIMILE IS NOT ACCEPTABLE)	
	Colonel	STAT	
AFBN	ORGANIZATION		
RR 51861	FTTAM		
INSTRUCTIONS FOR PREPARATION:			
ITEMS NOT APPLICABLE WILL BE INDICATED BY N/A (EXCEPT ITEM 15, ENTER NONE OR APPLICABLE DATES)			
THE PERIOD COVERED BY A CERTIFICATE WILL NOT INCLUDE MORE THAN ONE CALENDAR MONTH.			
ITEM 4, 1. NON-WORK DAYS ARE THE 6TH AND 7TH DAY OF THE SCHEDULED WORK WEEK.			
ITEM 6. THE NUMBER OF CONTRACT HOLIDAYS IN THE PERIOD WILL BE ENTERED REGARDLESS OF WHETHER THEY WERE WORK DAYS. IF THEY WERE WORK DAYS, THEY WILL BE SHOWN IN ITEM 8 AS OVERTIME EVEN IF CONTRACT DOES NOT PROVIDE FOR OVERTIME PREMIUM PAY. REIMBURSEMENT WILL BE MADE FOR HOLIDAY WORK IN ACCORDANCE WITH APPLICABLE CONTRACT.			
ITEM 7. THE NUMBER OF BILLABLE DAYS IS THE TOTAL NUMBER OF DAYS IN THE PERIOD, LESS NON-WORK DAYS, VACATION DAYS, SICK DAYS, AND CONTRACT HOLIDAYS (OVERTIME NOT TO BE INCLUDED IN THIS ITEM.)			
TRAVEL DAYS: WORK DAYS UTILIZED FOR AUTHORIZED TRAVEL WILL BE INCLUDED IN THIS ITEM. ALL OTHER DAYS UTILIZED IN AUTHORIZED TRAVEL WILL BE INDICATED IN REMARKS SECTION, GIVING TYPE AND TIME OF TRAVEL.			
ENTRIES IN ITEMS 8, 10, 11, 12, AND 14 MAY BE DOUBLE-SPACED OR SINGLE-SPACED AS REQUIRED. IF ADDITIONAL SPACE IS NEEDED, ITEM 21 WILL BE USED.			
ITEMS 11 AND 12. THE POINT "FROM" AND "TO", IN ITEMS 11 AND 12, MUST BE THE ACTUAL LOCATIONS VISITED. (EXAMPLE: OFFUTT AFB, NEB OMAHA, NEBRASKA.)			
MONTH AND YEAR MAY BE OMITTED WHEN ENTERING DATES, EXCEPT FOR DATE OF CERTIFICATE AND ITEM 3. ALL OTHER DATES MUST BE WITHIN THE PERIOD COVERED BY THE CERTIFICATE.			
ITEM 23: IF SERVICES WERE NOT SATISFACTORY, OR IF THERE IS DISAGREEMENT AS TO SERVICE PERFORMED, THE AF SUPERVISORY OFFICER MUST EXPLAIN IN ITEM 23.			
NOTE: ONE COPY OF TRAVEL ORDER WILL BE ATTACHED TO EACH COPY OF CERTIFICATE OF SERVICE ON WHICH TRAVEL OR TOY IS REPORTED.			

L-296 (6-65) 7243

CERTIFICATE OF SERVICE

CONTRACTOR				TO (MAJOR AIR COMMAND)				
SECRET RESTRICTED CW671A EXHIBIT				DATE OF CERTIFICATE 30 April 1967				
1. NAME OF CTSP (LAST, FIRST AND MIDDLE)		2. AF UNIT 9th SW		3. PERIOD OF CERTIFICATE (INCLUSIVE DATES) 1 April 67 THRU 30 April STAT				
THIS PERIOD 30	NON-WORK DAYS 10	4. LESS VACATION 12 THRU 12 THRU 24	5. LESS SICK TIME 0 THRU 0 THRU	6. LESS CONTRACT HOLIDAYS 0	7. BILLABLE DAYS 19			
8. AUTHORIZED OVERTIME HOURS WORKED (NOT INCLUDED IN ITEM 7)								
DATE	TIME & ONE HALF	DOUBLE TIME	DATE	TIME & ONE HALF	DOUBLE TIME	DATE	TIME & ONE HALF	DOUBLE TIME
None								
9. DATES ON WHICH PREMIUM PAY SHIFTS WERE WORKED N/A								
10. TEMPORARY DUTY AWAY FROM HOME STATION (ENTER HOUR AND DATE OF DEPARTURE AND RETURN) N/A								
DEPARTED	RETURNED	DEPARTED	RETURNED	DEPARTED	RETURNED			
11. AUTHORIZED TRAVEL PERFORMED BY COMMERCIAL CARRIER (INCLUDING TAXICAB, ETC.) N/A								
INCLUSIVE DATES	FROM -	TO -	MODE	COST				
THRU								
THRU								
THRU								
12. AUTHORIZED PRIVATELY OWNED CONVEYANCE (EXCEPT ON-BASE MILEAGE) N/A								
INCLUSIVE DATES	FROM -	TO -	TOLLS	MILES				
THRU								
THRU								
THRU								
THRU								
13. AUTHORIZED ON-BASE MILEAGE BY PRIVATELY-OWNED CONVEYANCE: MILES 315								
14. GOVERNMENT TRANSPORTATION REQUESTS USED								
DATE ISSUED	ISSUING AGENCY	FROM -	TO -					
15. GOVERNMENT QUARTERS WERE ASSIGNED ON THE FOLLOWING DATES: None								

16. IF THIS IS THE INITIAL CERTIFICATE SUBMITTED FROM THIS AF UNIT, STATE PLACE OF LAST ASSIGNMENT AND DATE OF DEPARTURE:
 DEPARTED (PLACE) N/A ON (DATE)

17. IF THIS IS THE FINAL CERTIFICATE SUBMITTED FROM THIS AF UNIT, STATE DATE OF DEPARTURE:
N/A

18. DEPARTED THE UNITED STATES FOR OVERSEAS DUTY FROM:
 (PORT) N/A ON (DATE)

19. ARRIVED THE UNITED STATES FROM OVERSEAS DUTY AT:
 (PORT) N/A ON (DATE)

20. NAME OF COUNTRY WHERE OVERSEAS DUTY WAS PERFORMED DURING THIS PERIOD (UNLESS PROHIBITED FOR SECURITY REASONS)
N/A

21. ADDITIONAL INFORMATION AND REMARKS:

22. I CERTIFY THAT THE INFORMATION IN ITEMS 1 THRU 21 ABOVE IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.
 STAT

23. I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE SERVICES REPORTED ABOVE WERE PERFORMED IN A SATISFACTORY MANNER, THAT ALL OVERTIME AND TRAVEL REPORTED WERE AUTHORIZED IN ADVANCE BY COMPETENT AUTHORITY, AND THAT APPROPRIATE WRITTEN ORDERS HAVE BEEN ISSUED OR REQUESTED, WITH THE FOLLOWING EXCEPTIONS:

(IF SERVICES WERE NOT SATISFACTORY, COMPLETE WRITTEN REPORT HAS BEEN PREPARED AND FORWARDED)

NAME	GRADE	SIGNATURE (MANUAL SIGNATURE IS REQUIRED)
	Captain	STAT
AFSC	ORGANIZATION	
EV3087952	9th Strat. Recon. Wg. Beale AFB	

INSTRUCTIONS FOR PREPARATION:

ITEMS NOT APPLICABLE WILL BE INDICATED BY N/A (EXCEPT ITEM 15, ENTER NONE OR APPLICABLE DATES)

THE PERIOD COVERED BY A CERTIFICATE WILL NOT INCLUDE MORE THAN ONE CALENDAR MONTH.

ITEM 4.1. NON-WORK DAYS ARE THE 6TH AND 7TH DAY OF THE SCHEDULED WORK WEEK.

ITEM 6. THE NUMBER OF CONTRACT HOLIDAYS IN THE PERIOD WILL BE ENTERED REGARDLESS OF WHETHER THEY WERE WORK DAYS. IF THEY WERE WORK DAYS, THEY WILL BE SHOWN IN ITEM 8 AS OVERTIME EVEN IF CONTRACT DOES NOT PROVIDE FOR OVERTIME PREMIUM PAY. REIMBURSEMENT WILL BE MADE FOR HOLIDAY WORK IN ACCORDANCE WITH APPLICABLE CONTRACT.

ITEM 7. THE NUMBER OF BILLABLE DAYS IS THE TOTAL NUMBER OF DAYS IN THE PERIOD, LESS NON-WORK DAYS, VACATION DAYS, SICK DAYS, AND CONTRACT HOLIDAYS (OVERTIME NOT TO BE INCLUDED IN THIS ITEM.)

TRAVEL DAYS: WORK DAYS UTILIZED FOR AUTHORIZED TRAVEL WILL BE INCLUDED IN THIS ITEM. ALL OTHER DAYS UTILIZED IN AUTHORIZED TRAVEL WILL BE INDICATED IN REMARKS SECTION, GIVING TYPE AND TIME OF TRAVEL.

ENTRIES IN ITEMS 8, 10, 11, 12, AND 14 MAY BE DOUBLE-SPACED OR SINGLE-SPACED AS REQUIRED. IF ADDITIONAL SPACE IS NEEDED, ITEM 21 WILL BE USED.

ITEMS 11 AND 12. THE POINT "FROM" AND "TO", IN ITEMS 11 AND 12, MUST BE THE ACTUAL LOCATIONS VISITED. (EXAMPLE: OFFUTT AFB, NEB; OMAHA, NEBRASKA.)

MONTH AND YEAR MAY BE OMITTED WHEN ENTERING DATES, EXCEPT FOR DATE OF CERTIFICATE AND ITEM 3. ALL OTHER DATES MUST BE WITHIN THE PERIOD COVERED BY THE CERTIFICATE.

ITEM 23. IF SERVICES WERE NOT SATISFACTORY, OR IF THERE IS DISAGREEMENT AS TO SERVICE PERFORMED, THE AF SUPERVISORY OFFICER MUST EXPLAIN IN ITEM 23.

NOTE: ONE COPY OF TRAVEL ORDER WILL BE ATTACHED TO EACH COPY OF CERTIFICATE OF SERVICE ON WHICH TRAVEL OR TDY IS REPORTED.

L-296 (6-65) 7243

CERTIFICATE OF SERVICE

CONTRACTOR				TO (MAJOR AIR COMMAND)					
CONTRACT XXXXXXXX CW6744 XXXXXXXX				DATE OF CERTIFICATE 1 May 1967					
1. NAME OF CTSP (LAST, FIRST AND MIDDLE) H [REDACTED]		2. AF UNIT 9th SRW		3. PERIOD OF CERTIFICATE (INCLUSIVE DATES) 1 April 67 THRU 30 April 67 STAT					
4. TOTAL THIS PERIOD 30		K DAYS 10	4B. LESS VACATION 0 THRU THRU	5. LESS SICK TIME 0 THRU THRU	6. LESS CONTRACT HOLIDAYS 0		7. BILLABLE DAYS 20		
8. AUTHORIZED OVERTIME HOURS WORKED (NOT INCLUDED IN ITEM 7)							N/A		
DATE	TIME & ONE HALF	DOUBLE TIME	DATE	TIME & ONE HALF	DOUBLE TIME	DATE	TIME & ONE HALF	DOUBLE TIME	
9. DATES ON WHICH PREMIUM PAY SHIFTS WERE WORKED								N/A	
10. TEMPORARY DUTY AWAY FROM HOME STATION (ENTER HOUR AND DATE OF DEPARTURE AND RETURN)							N/A		
DEPARTED		RETURNED		DEPARTED		RETURNED		DEPARTED	RETURNED
11. AUTHORIZED TRAVEL PERFORMED BY COMMERCIAL CARRIER (INCLUDING TAXICAB, ETC.)							N/A		
INCLUSIVE DATES		FROM -		TO -		MODE	COST		
THRU									
THRU									
THRU									
12. AUTHORIZED PRIVATELY OWNED CONVEYANCE (EXCEPT ON-BASE MILEAGE)									
INCLUSIVE DATES		FROM -		TO -		TOLLS	MILES		
13 THRU 13		Rocklin, California Sacramento Airport		Sacramento Airport Rocklin, California			60		
THRU									
THRU									
THRU									
13. AUTHORIZED ON-BASE MILEAGE BY PRIVATELY OWNED CONVEYANCE:							MILES 560		
14. GOVERNMENT TRANSPORTATION REQUESTS USED							N/A		
DATE ISSUED		ISSUING AGENCY		FROM -		TO -			
15. GOVERNMENT QUARTERS WERE ASSIGNED ON THE FOLLOWING DATES:									
None									

16. IF THIS IS THE INITIAL CERTIFICATE SUBMITTED FROM THIS AF UNIT, STATE PLACE OF LAST ASSIGNMENT AND DATE OF DEPARTURE:		
DEPARTED (PLACE):	N/A	ON (DATE)
17. IF THIS IS THE FINAL CERTIFICATE SUBMITTED FROM THIS AF UNIT, STATE DATE OF DEPARTURE:		
N/A		
18. DEPARTED THE UNITED STATES FOR OVERSEAS DUTY FROM:		
(PORT)	N/A	ON (DATE)
19. ARRIVED THE UNITED STATES FROM OVERSEAS DUTY AT:		
(PORT)	N/A	ON (DATE)
20. NAME OF COUNTRY WHERE OVERSEAS DUTY WAS PERFORMED DURING THIS PERIOD (UNLESS PROHIBITED FOR SECURITY REASONS)		
N/A		
21. ADDITIONAL INFORMATION AND REMARKS:		
None		
22. CERTIFICATION: I CERTIFY THAT THE INFORMATION IN ITEMS 1 THRU 21 ABOVE IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.		
		STAT
23. CERTIFICATION: I CERTIFY THAT, TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE SERVICES REPORTED ABOVE WERE PERFORMED IN A SATISFACTORY MANNER, THAT ALL OVERTIME AND TRAVEL REPORTED WERE AUTHORIZED IN ADVANCE BY COMPETENT AUTHORITY, AND THAT APPROPRIATE WRITTEN ORDERS HAVE BEEN ISSUED OR REQUESTED, WITH THE FOLLOWING EXCEPTIONS:		
(IF SERVICES WERE NOT SATISFACTORY, COMPLETE WRITTEN REPORT HAS BEEN PREPARED AND FORWARDED)		
NAME	GRADE	SIGNATURE (MANUAL SIGNATURE IS REQUIRED)
	Captain	
AFBN	ORGANIZATION	
FV3087952	9th Strat Recon Wg., Beale AFB	SSTAT
<p>INSTRUCTIONS FOR PREPARATION:</p> <p>ITEMS NOT APPLICABLE WILL BE INDICATED BY N/A (EXCEPT ITEM 15, ENTER NONE OR APPLICABLE DATES)</p> <p>THE PERIOD COVERED BY A CERTIFICATE WILL NOT INCLUDE MORE THAN ONE CALENDAR MONTH.</p> <p>ITEM 4.1. NON-WORK DAYS ARE THE 6TH AND 7TH DAY OF THE SCHEDULED WORK WEEK.</p> <p>ITEM 6. THE NUMBER OF CONTRACT HOLIDAYS IN THE PERIOD WILL BE ENTERED REGARDLESS OF WHETHER THEY WERE WORK DAYS. IF THEY WERE WORK DAYS, THEY WILL BE SHOWN IN ITEM 8 AS OVERTIME EVEN IF CONTRACT DOES NOT PROVIDE FOR OVERTIME PREMIUM PAY. REIMBURSEMENT WILL BE MADE FOR HOLIDAY WORK IN ACCORDANCE WITH APPLICABLE CONTRACT.</p> <p>ITEM 7. THE NUMBER OF BILLABLE DAYS IS THE TOTAL NUMBER OF DAYS IN THE PERIOD, LESS NON-WORK DAYS, VACATION DAYS, SICK DAYS, AND CONTRACT HOLIDAYS (OVERTIME NOT TO BE INCLUDED IN THIS ITEM.)</p> <p>TRAVEL DAYS: WORK DAYS UTILIZED FOR AUTHORIZED TRAVEL WILL BE INCLUDED IN THIS ITEM. ALL OTHER DAYS UTILIZED IN AUTHORIZED TRAVEL WILL BE INDICATED IN REMARKS SECTION, GIVING TYPE AND TIME OF TRAVEL.</p> <p>ENTRIES IN ITEMS 8, 10, 11, 12, AND 14 MAY BE DOUBLE-SPACED OR SINGLE-SPACED AS REQUIRED. IF ADDITIONAL SPACE IS NEEDED, ITEM 21 WILL BE USED.</p> <p>ITEMS 11 AND 12. THE POINT "FROM" AND "TO", IN ITEMS 11 AND 12, MUST BE THE ACTUAL LOCATIONS VISITED. (EXAMPLE: OFFUTT AFB, NEB OMAHA, NEBRASKA.)</p> <p>MONTH AND YEAR MAY BE OMITTED WHEN ENTERING DATES, EXCEPT FOR DATE OF CERTIFICATE AND ITEM 3. ALL OTHER DATES MUST BE WITHIN THE PERIOD COVERED BY THE CERTIFICATE.</p> <p>ITEM 23, IF SERVICES WERE NOT SATISFACTORY, OR IF THERE IS DISAGREEMENT AS TO SERVICE PERFORMED, THE AF SUPERVISORY OFFICER MUST EXPLAIN IN ITEM 23.</p> <p>NOTE: ONE COPY OF TRAVEL ORDER WILL BE ATTACHED TO EACH COPY OF CERTIFICATE OF SERVICE ON WHICH TRAVEL OR TDY IS REPORTED.</p>		

L-296 (6-65) 7243

CERTIFICATE OF SERVICE

CONTRACTOR				TO (MAJOR AIR COMMAND)				
CONTRACT SECRET CW6744 SECRET				DATE OF CERTIFICATE 1 May 1967				
1. NAME OF CTSP (LAST, FIRST AND MIDDLE)		2. AF UNIT 9th SRW		3. PERIOD OF CERTIFICATE (INCLUSIVE DATES) 1 April 67 ^{THRU} 30 April ^{STAT}				
4. THIS PERIOD 30	10	8. LESS VACATION 0 THRU THRU	5. LESS SICK TIME 0 THRU THRU	6. LESS CONTRACT HOLIDAYS 0	7. BILLABLE DAYS 20			
8. AUTHORIZED OVERTIME HOURS WORKED (NOT INCLUDED IN ITEM 7) N/A								
DATE	TIME & ONE HALF	DOUBLE TIME	DATE	TIME & ONE HALF	DOUBLE TIME	DATE	TIME & ONE HALF	DOUBLE TIME
9. DATES ON WHICH PREMIUM PAY SHIFTS WERE WORKED N/A								
10. TEMPORARY DUTY AWAY FROM HOME STATION (ENTER HOUR AND DATE OF DEPARTURE AND RETURN) N/A								
DEPARTED	RETURNED	DEPARTED	RETURNED	DEPARTED	RETURNED			
11. AUTHORIZED TRAVEL PERFORMED BY COMMERCIAL CARRIER (INCLUDING TAXICAB, ETC.) N/A								
INCLUSIVE DATES	FROM -	TO -	MODE	COST				
THRU								
THRU								
THRU								
12. AUTHORIZED PRIVATELY OWNED CONVEYANCE (EXCEPT ON-BASE MILEAGE) N/A								
INCLUSIVE DATES	FROM -	TO -	TOLLS	MILES				
THRU								
THRU								
THRU								
THRU								
13. AUTHORIZED ON-BASE MILEAGE BY PRIVATELY OWNED CONVEYANCE: MILES 412								
14. GOVERNMENT TRANSPORTATION REQUESTS USED N/A								
DATE ISSUED	ISSUING AGENCY	FROM -	TO -					
15. GOVERNMENT QUARTERS WERE ASSIGNED ON THE FOLLOWING DATES: None								

16. IF THIS IS THE INITIAL CERTIFICATE SUBMITTED FROM THIS AF UNIT, STATE PLACE OF LAST ASSIGNMENT AND DATE OF DEPARTURE:		
DEPARTED (PLACE)	N/A	ON (DATE)
17. IF THIS IS THE FINAL CERTIFICATE SUBMITTED FROM THIS AF UNIT, STATE DATE OF DEPARTURE:		
	N/A	
18. DEPARTED THE UNITED STATES FOR OVERSEAS DUTY FROM:		
(PORT)	N/A	ON (DATE)
19. ARRIVED THE UNITED STATES FROM OVERSEAS DUTY AT:		
(PORT)	N/A	ON (DATE)
20. NAME OF COUNTRY WHERE OVERSEAS DUTY WAS PERFORMED DURING THIS PERIOD (UNLESS PROHIBITED FOR SECURITY REASONS)		
	N/A	
21. ADDITIONAL INFORMATION AND REMARKS:		
None		
22. I HEREBY CERTIFY THAT THE INFORMATION IN ITEMS 1 THRU 21 ABOVE IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.		
		STAT
23. CERTIFICATION: I CERTIFY THAT, TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE SERVICES REPORTED ABOVE WERE PERFORMED IN A SATISFACTORY MANNER, THAT ALL OVERTIME AND TRAVEL REPORTED WERE AUTHORIZED IN ADVANCE BY COMPETENT AUTHORITY, AND THAT APPROPRIATE WRITTEN ORDERS HAVE BEEN ISSUED OR REQUESTED, WITH THE FOLLOWING EXCEPTIONS:		
(IF SERVICES WERE NOT SATISFACTORY, COMPLETE WRITTEN REPORT HAS BEEN PREPARED AND FORWARDED)		
NAME	GRADE	SIGNATURE (MANUAL SIGNATURE IS REQUIRED)
	Captain	
AFSN	ORGANIZATION	STAT
FV3087952	9th Strat Recon Wg., Beale AFB	
<p>INSTRUCTIONS FOR PREPARATION:</p> <p>ITEMS NOT APPLICABLE WILL BE INDICATED BY N/A (EXCEPT ITEM 15, ENTER NONE OR APPLICABLE DATES)</p> <p>THE PERIOD COVERED BY A CERTIFICATE WILL NOT INCLUDE MORE THAN ONE CALENDAR MONTH.</p> <p>ITEM 4.1. NON-WORK DAYS ARE THE 6TH AND 7TH DAY OF THE SCHEDULED WORK WEEK.</p> <p>ITEM 6. THE NUMBER OF CONTRACT HOLIDAYS IN THE PERIOD WILL BE ENTERED REGARDLESS OF WHETHER THEY WERE WORK DAYS. IF THEY WERE WORK DAYS, THEY WILL BE SHOWN IN ITEM 8 AS OVERTIME EVEN IF CONTRACT DOES NOT PROVIDE FOR OVERTIME PREMIUM PAY. REIMBURSEMENT WILL BE MADE FOR HOLIDAY WORK IN ACCORDANCE WITH APPLICABLE CONTRACT.</p> <p>ITEM 7. THE NUMBER OF BILLABLE DAYS IS THE TOTAL NUMBER OF DAYS IN THE PERIOD, LESS NON-WORK DAYS, VACATION DAYS, SICK DAYS, AND CONTRACT HOLIDAYS (OVERTIME NOT TO BE INCLUDED IN THIS ITEM.)</p> <p>TRAVEL DAYS: WORK DAYS UTILIZED FOR AUTHORIZED TRAVEL WILL BE INCLUDED IN THIS ITEM. ALL OTHER DAYS UTILIZED IN AUTHORIZED TRAVEL WILL BE INDICATED IN REMARKS SECTION, GIVING TYPE AND TIME OF TRAVEL.</p> <p>ENTRIES IN ITEMS 8, 10, 11, 12, AND 14 MAY BE DOUBLE-SPACED OR SINGLE-SPACED AS REQUIRED. IF ADDITIONAL SPACE IS NEEDED, ITEM 21 WILL BE USED.</p> <p>ITEMS 11 AND 12. THE POINT "FROM" AND "TO", IN ITEMS 11 AND 12, MUST BE THE ACTUAL LOCATIONS VISITED. (EXAMPLE: OFFUTT AFB, NOT OMAHA, NEBRASKA.)</p> <p>MONTH AND YEAR MAY BE OMITTED WHEN ENTERING DATES, EXCEPT FOR DATE OF CERTIFICATE AND ITEM 3. ALL OTHER DATES MUST BE WITHIN THE PERIOD COVERED BY THE CERTIFICATE.</p> <p>ITEM 23, IF SERVICES WERE NOT SATISFACTORY, OR IF THERE IS DISAGREEMENT AS TO SERVICE PERFORMED, THE AF SUPERVISORY OFFICER MUST EXPLAIN IN ITEM 23.</p> <p>NOTE: ONE COPY OF TRAVEL ORDER WILL BE ATTACHED TO EACH COPY OF CERTIFICATE OF SERVICE ON WHICH TRAVEL OR TDY IS REPORTED.</p>		

L-296 (6-65) 7243

CERTIFICATE OF SERVICE

CONTRACTOR				TO (MAJOR AIR COMMAND)			
CONTRACT AF 67(61X) CW 6744 X909X90X				DATE OF CERTIFICATE 2 May 1967			
1. NAME OF CTSP (LAST, FIRST AND MIDDLE)		2. AF UNIT 9th SRW		3. PERIOD OF CERTIFICATE (INCLUSIVE DATES) 1 Apr 67 THRU 30 Apr 67 STAT			
THIS PERIOD 30		NON-WORK DAYS 10		4. LESS VACATION 0 THRU THRU		5. LESS SICK TIME 0 THRU THRU	
6. LESS CONTRACT HOLIDAYS 0				7. BILLABLE DAYS 20			
8. AUTHORIZED OVERTIME HOURS WORKED (NOT INCLUDED IN ITEM 7)							
DATE	TIME & ONE HALF	DOUBLE TIME	DATE	TIME & ONE HALF	DOUBLE TIME	DATE	TIME & ONE HALF
9. DATES ON WHICH PREMIUM PAY SHIFTS WERE WORKED N/A							
10. TEMPORARY DUTY AWAY FROM HOME STATION (ENTER HOUR AND DATE OF DEPARTURE AND RETURN) N/A							
DEPARTED		RETURNED		DEPARTED		RETURNED	
11. AUTHORIZED TRAVEL PERFORMED BY COMMERCIAL CARRIER (INCLUDING TAXICAB, ETC.) N/A							
INCLUSIVE DATES	FROM -		TO -		MODE	COST	
THRU							
THRU							
THRU							
12. AUTHORIZED PRIVATELY OWNED CONVEYANCE (EXCEPT ON-BASE MILEAGE) N/A							
INCLUSIVE DATES	FROM -		TO -		TOLLS	MILES	
THRU							
THRU							
THRU							
THRU							
13. AUTHORIZED ON-BASE MILEAGE BY PRIVATELY-OWNED CONVEYANCE: MILES 580							
14. GOVERNMENT TRANSPORTATION REQUESTS USED N/A							
DATE ISSUED	ISSUING AGENCY		FROM -		TO -		
15. GOVERNMENT QUARTERS WERE ASSIGNED ON THE FOLLOWING DATES: None							

16. IF THIS IS THE INITIAL CERTIFICATE SUBMITTED FROM THIS AF UNIT, STATE PLACE OF LAST ASSIGNMENT AND DATE OF DEPARTURE:
 DEPARTED (PLACE) N/A ON (DATE)

17. IF THIS IS THE FINAL CERTIFICATE SUBMITTED FROM THIS AF UNIT, STATE DATE OF DEPARTURE:
N/A

18. DEPARTED THE UNITED STATES FOR OVERSEAS DUTY FROM:
 (PORT) N/A ON (DATE)

19. ARRIVED THE UNITED STATES FROM OVERSEAS DUTY AT:
 (PORT) N/A ON (DATE)

20. NAME OF COUNTRY WHERE OVERSEAS DUTY WAS PERFORMED DURING THIS PERIOD (UNLESS PROHIBITED FOR SECURITY REASONS)
N/A

21. ADDITIONAL INFORMATION AND REMARKS:
 None

22. CERTIFICATE ID NO: I CERTIFY THAT THE INFORMATION IN ITEMS 1 THRU 21 ABOVE IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.
 STAT

23. CERTIFICATE SERVICES REPORTED ABOVE WERE PERFORMED IN A SATISFACTORY MANNER, THAT ALL OVERTIME AND TRAVEL REPORTED WERE AUTHORIZED IN ADVANCE BY COMPETENT AUTHORITY, AND THAT APPROPRIATE WRITTEN ORDERS HAVE BEEN ISSUED OR REQUESTED WITH THE FOLLOWING EXCEPTIONS:

(IF SERVICES WERE NOT SATISFACTORY, COMPLETE WRITTEN REPORT HAS BEEN PREPARED AND FORWARDED)

NAME	GRADE	SIGNATURE (MANUAL SIGNATURE IS REQUIRED)
	Captain	STAT
AFPSN	ORGANIZATION	
FV 3087952	9th Strat. Recon. Wg., Beale AFB	

INSTRUCTIONS FOR PREPARATION:

ITEMS NOT APPLICABLE WILL BE INDICATED BY N/A (EXCEPT ITEM 15, ENTER NONE OR APPLICABLE DATES)

THE PERIOD COVERED BY A CERTIFICATE WILL NOT INCLUDE MORE THAN ONE CALENDAR MONTH.

ITEM 4, 1. NON-WORK DAYS ARE THE 5TH AND 7TH DAY OF THE SCHEDULED WORK WEEK.

ITEM 6. THE NUMBER OF CONTRACT HOLIDAYS IN THE PERIOD WILL BE ENTERED REGARDLESS OF WHETHER THEY WERE WORK DAYS. IF THEY WERE WORK DAYS, THEY WILL BE SHOWN IN ITEM 8 AS OVERTIME EVEN IF CONTRACTY DOES NOT PROVIDE FOR OVERTIME PREMIUM PAY. REIMBURSEMENT WILL BE MADE FOR HOLIDAY WORK IN ACCORDANCE WITH APPLICABLE CONTRACT.

ITEM 7. THE NUMBER OF BILLABLE DAYS IS THE TOTAL NUMBER OF DAYS IN THE PERIOD, LESS NON-WORK DAYS, VACATION DAYS, SICK DAYS, AND CONTRACT HOLIDAYS (OVERTIME NOT TO BE INCLUDED IN THIS ITEM.)

TRAVEL DAYS: WORK DAYS UTILIZED FOR AUTHORIZED TRAVEL WILL BE INCLUDED IN THIS ITEM. ALL OTHER DAYS UTILIZED IN AUTHORIZED TRAVEL WILL BE INDICATED IN REMARKS SECTION, GIVING TYPE AND TIME OF TRAVEL.

ENTRIES IN ITEMS 8, 10, 11, 12, AND 14 MAY BE DOUBLE-SPACED OR SINGLE-SPACED AS REQUIRED. IF ADDITIONAL SPACE IS NEEDED, ITEM 21 WILL BE USED.

ITEMS 11 AND 12. THE POINT "FROM" AND "TO", IN ITEMS 11 AND 12, MUST BE THE ACTUAL LOCATIONS VISITED. (EXAMPLE: OFFUTT AFB, NEB OMAHA, NEBRASKA.)

MONTH AND YEAR MAY BE OMITTED WHEN ENTERING DATES, EXCEPT FOR DATE OF CERTIFICATE AND ITEM 3. ALL OTHER DATES MUST BE WITHIN THE PERIOD COVERED BY THE CERTIFICATE.

ITEM 23, IF SERVICES WERE NOT SATISFACTORY, OR IF THERE IS DISAGREEMENT AS TO SERVICE PERFORMED, THE AF SUPERVISORY OFFICER MUST EXPLAIN IN ITEM 23.

NOTE: ONE COPY OF TRAVEL ORDER WILL BE ATTACHED TO EACH COPY OF CERTIFICATE OF SERVICE ON WHICH TRAVEL OR TDY IS REPORTED.

L-296 (6-65) 7243

CERTIFICATE OF SERVICE

CONTRACTOR				TO (MAJOR AIR COMMAND)			
CONTRACT XXXXXXXX CW 6744 XXXXXXXX				DATE OF CERTIFICATE 2 May 67			
1. NAME OF STATION (LAST, FIRST, AND MIDDLE)		2. AF UNIT 9th SRW		3. PERIOD OF CERTIFICATE (INCLUSIVE DATES) 1 Apr 67 THRU 30 Apr 67 STAT			
4. THIS PERIOD 30		5. NON-WORK DAYS 10	6. LESS VACATION 0 THRU THRU	7. LESS SICK TIME 10th THRU 11th THRU	8. LESS CONTRACT HOLIDAYS 0	9. BILLABLE DAYS 18	
8. AUTHORIZED OVERTIME HOURS WORKED (NOT INCLUDED IN ITEM 7)							N/A
DATE	TIME & ONE HALF	DOUBLE TIME	DATE	TIME & ONE HALF	DOUBLE TIME	DATE	TIME & ONE HALF
9. DATES ON WHICH PREMIUM PAY SHIFTS WERE WORKED N/A							
10. TEMPORARY DUTY AWAY FROM HOME STATION (ENTER HOUR AND DATE OF DEPARTURE AND RETURN)							N/A
DEPARTED	RETURNED	DEPARTED	RETURNED	DEPARTED	RETURNED	DEPARTED	RETURNED
11. AUTHORIZED TRAVEL PERFORMED BY COMMERCIAL CARRIER (INCLUDING TAXICAB, ETC.)							N/A
INCLUSIVE DATES	FROM -	TO -	MODE	COST			
THRU							
THRU							
THRU							
12. AUTHORIZED PRIVATELY OWNED CONVEYANCE (EXCEPT ON-BASE MILEAGE)							N/A
INCLUSIVE DATES	FROM -	TO -	TOLLS	MILES			
THRU							
THRU							
THRU							
THRU							
13. AUTHORIZED ON-BASE MILEAGE BY PRIVATELY-OWNED CONVEYANCE:							MILES 550
14. GOVERNMENT TRANSPORTATION REQUESTS USED							N/A
DATE ISSUED	ISSUING AGENCY	FROM -	TO -				
15. GOVERNMENT QUARTERS WERE ASSIGNED ON THE FOLLOWING DATES:							None

16. IF THIS IS THE INITIAL CERTIFICATE SUBMITTED FROM THIS AF UNIT, STATE PLACE OF LAST ASSIGNMENT AND DATE OF DEPARTURE:		
DEPARTED (PLACE)	N/A	ON (DATE)
17. IF THIS IS THE FINAL CERTIFICATE SUBMITTED FROM THIS AF UNIT, STATE DATE OF DEPARTURE:		
N/A		
18. DEPARTED THE UNITED STATES FOR OVERSEAS DUTY FROM:		
(PORT)	N/A	ON (DATE)
19. ARRIVED THE UNITED STATES FROM OVERSEAS DUTY AT:		
(PORT)	N/A	ON (DATE)
20. NAME OF COUNTRY WHERE OVERSEAS DUTY WAS PERFORMED DURING THIS PERIOD (UNLESS PROHIBITED FOR SECURITY REASONS)		
N/A		
21. ADDITIONAL INFORMATION AND REMARKS:		
None		
22. CERTIFICATION IN ITEMS 1 THRU 21 ABOVE IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF		STAT
23. CERTIFICATION: I CERTIFY THAT, TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE SERVICES REPORTED ABOVE WERE PERFORMED IN A SATISFACTORY MANNER, THAT ALL OVERTIME AND TRAVEL REPORTED WERE AUTHORIZED IN ADVANCE BY COMPETENT AUTHORITY, AND THAT APPROPRIATE WRITTEN ORDERS HAVE BEEN ISSUED OR REQUESTED, WITH THE FOLLOWING EXCEPTIONS:		
(IF SERVICES WERE NOT SATISFACTORY, COMPLETE WRITTEN REPORT HAS BEEN PREPARED AND FORWARDED)		
NAME	GRADE	SIGNATURE (MANUAL SIGNATURE IS REQUIRED)
	Captain	
AFSN	ORGANIZATION	
FV 3087952	9th Strat. Recon. Wg., Beale AFB	SSTAT
<p>INSTRUCTIONS FOR PREPARATION:</p> <p>ITEMS NOT APPLICABLE WILL BE INDICATED BY N/A (EXCEPT ITEM 15, ENTER NONE OR APPLICABLE DATES)</p> <p>THE PERIOD COVERED BY A CERTIFICATE WILL <u>NOT</u> INCLUDE MORE THAN ONE CALENDAR MONTH.</p> <p>ITEM 4.1. NON-WORK DAYS ARE THE 6TH AND 7TH DAY OF THE <u>SCHEDULED WORK WEEK</u>.</p> <p>ITEM 6. THE NUMBER OF CONTRACT HOLIDAYS IN THE PERIOD WILL BE ENTERED REGARDLESS OF WHETHER THEY WERE WORK DAYS. IF THEY WERE WORK DAYS, THEY WILL BE SHOWN IN ITEM 8 AS OVERTIME EVEN IF CONTRACT DOES NOT PROVIDE FOR OVERTIME PREMIUM PAY. REIMBURSEMENT WILL BE MADE FOR HOLIDAY WORK IN ACCORDANCE WITH APPLICABLE CONTRACT.</p> <p>ITEM 7. THE NUMBER OF BILLABLE DAYS IS THE TOTAL NUMBER OF DAYS IN THE PERIOD, LESS NON-WORK DAYS, VACATION DAYS, SICK DAYS, AND CONTRACT HOLIDAYS (OVERTIME NOT TO BE INCLUDED IN THIS ITEM.)</p> <p>TRAVEL DAYS: WORK DAYS UTILIZED FOR AUTHORIZED TRAVEL WILL BE INCLUDED IN THIS ITEM. ALL OTHER DAYS UTILIZED IN AUTHORIZED TRAVEL WILL BE INDICATED IN REMARKS SECTION, GIVING TYPE AND TIME OF TRAVEL.</p> <p>ENTRIES IN ITEMS 8, 10, 11, 12, AND 14 MAY BE DOUBLE-SPACED OR SINGLE-SPACED AS REQUIRED. IF ADDITIONAL SPACE IS NEEDED, ITEM 21 WILL BE USED.</p> <p>ITEMS 11 AND 12. THE POINT "FROM" AND "TO", IN ITEMS 11 AND 12, MUST BE THE ACTUAL LOCATIONS VISITED. (EXAMPLE: OFFUTT AFB, NEB. OMAHA, NEBRASKA.)</p> <p>MONTH AND YEAR MAY BE OMITTED WHEN ENTERING DATES, EXCEPT FOR DATE OF CERTIFICATE AND ITEM 5. ALL OTHER DATES MUST BE WITHIN THE PERIOD COVERED BY THE CERTIFICATE.</p> <p>ITEM 23, IF SERVICES WERE NOT SATISFACTORY, OR IF THERE IS DISAGREEMENT AS TO SERVICE PERFORMED, THE AF SUPERVISORY OFFICER MUST EXPLAIN IN ITEM 23.</p> <p>NOTE: ONE COPY OF TRAVEL ORDER WILL BE ATTACHED TO EACH COPY OF CERTIFICATE OF SERVICE ON WHICH TRAVEL OR TDY IS REPORTED.</p>		

L-296 (6-65) 7243

CERTIFICATE OF SERVICE

CONTRACTOR Goodyear Aerospace Corporation Arizona Division Litchfield Park, Arizona				TO(MAJOR AIR COMMAND) ASD (ASZB - Col. Bellis) WPAFB, Ohio 20331						
CONTRACT AF33(600)			EXHIBIT NO.			DATE OF CERTIFICATE 1, May 1967				
1. NAME OF CREW (LAST, FIRST AND MIDDLE)			2. AF UNIT			3. PERIOD OF CERTIFICATE (INCLUSIVE DATES) 1, April 67 THRU 30, April 67 STAT				
4. TOTAL DAYS COVERED THIS PERIOD 30		4A. LESS NON-WORK DAYS 10		4B. LESS VACATION 10 THRU 14 17 THRU 21		5. LESS SICK TIME N/A THRU THRU		6. LESS CONTRACT HOLIDAYS NONE		7. BILLABLE DAYS 10
8. AUTHORIZED OVERTIME HOURS WORKED (NOT INCLUDED IN ITEM 7)										
DATE	TIME & ONE HALF	DOUBLE TIME	DATE	TIME & ONE HALF	DOUBLE TIME	DATE	TIME & ONE HALF	DOUBLE TIME		
24 April	4									
9. DATES ON WHICH PREMIUM PAY SHIFTS WERE WORKED N/A										
10. TEMPORARY DUTY AWAY FROM HOME STATION (ENTER HOUR AND DATE OF DEPARTURE AND RETURN)										
DEPARTED		RETURNED		DEPARTED		RETURNED		DEPARTED	RETURNED	
N/A										
11. AUTHORIZED TRAVEL PERFORMED BY COMMERCIAL CARRIER (INCLUDING TAXICAB, ETC.)										
INCLUSIVE DATES		FROM -			TO -		MODE		COST	
N/A THRU										
THRU										
THRU										
12. AUTHORIZED PRIVATELY OWNED CONVEYANCE (EXCEPT ON-BASE MILEAGE)										
INCLUSIVE DATES		FROM -			TO -		TOLLS		MILES	
N/A THRU										
THRU										
THRU										
THRU										
13. AUTHORIZED ON-BASE MILEAGE BY PRIVATELY-OWNED CONVEYANCE: <div style="text-align: right;">180 MILES</div>										
14. GOVERNMENT TRANSPORTATION REQUESTS USED										
DATE ISSUED		ISSUING AGENCY			FROM -		TO -			
N/A										
15. GOVERNMENT QUARTERS WERE ASSIGNED ON THE FOLLOWING DATES: NONE										

16. IF THIS IS THE INITIAL CERTIFICATE SUBMITTED FROM THIS AF UNIT, STATE PLACE OF LAST ASSIGNMENT AND DATE OF DEPARTURE:			
2000	DEPARTED (PLACE)	ON (DATE)	N/A
17. IF THIS IS THE FINAL CERTIFICATE SUBMITTED FROM THIS AF UNIT, STATE DATE OF DEPARTURE:			
			N/A
18. DEPARTED THE UNITED STATES FOR OVERSEAS DUTY FROM:			
2000	(PORT)	ON (DATE)	N/A
19. ARRIVED THE UNITED STATES FROM OVERSEAS DUTY AT:			
	(PORT)	ON (DATE)	N/A
20. NAME OF COUNTRY WHERE OVERSEAS DUTY WAS PERFORMED DURING THIS PERIOD (UNLESS PROHIBITED FOR SECURITY REASONS)			
			N/A
21. ADDITIONAL INFORMATION AND REMARKS:			

22. CERTIFICATION: I CERTIFY THAT THE INFORMATION IN ITEMS 1 THRU 21 ABOVE IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. STAT

23. CERTIFICATION: I CERTIFY THAT, TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE SERVICES REPORTED ABOVE WERE PERFORMED IN A SATISFACTORY MANNER, THAT ALL OVERTIME AND TRAVEL REPORTED WERE AUTHORIZED IN ADVANCE BY COMPETENT AUTHORITY, AND THAT APPROPRIATE WRITTEN ORDERS HAVE BEEN ISSUED OR REQUESTED, WITH THE FOLLOWING EXCEPTIONS:

STAT

(IF SERVICES WERE NOT SATISFACTORY, COMPLETE WRITTEN REPORT HAS BEEN PREPARED AND

NAME	GRADE	STAT
	Colonel	
AFBN	ORGANIZATION	STAT
FR 51861	FTTAM	STAT

INSTRUCTIONS FOR PREPARATION:

ITEMS NOT APPLICABLE WILL BE INDICATED BY N/A (EXCEPT ITEM 15, ENTER NONE OR APPLICABLE DATES)

THE PERIOD COVERED BY A CERTIFICATE WILL NOT INCLUDE MORE THAN ONE CALENDAR MONTH.

ITEM 3. NON-WORK DAYS ARE THE 6TH AND 7TH DAY OF THE SCHEDULED WORK WEEK.

ITEM 6. THE NUMBER OF CONTRACT HOLIDAYS IN THE PERIOD WILL BE ENTERED REGARDLESS OF WHETHER THEY WERE WORK DAYS. IF THEY WERE WORK DAYS, THEY WILL BE SHOWN IN ITEM 8 AS OVERTIME EVEN IF CONTRACT DOES NOT PROVIDE FOR OVERTIME PREMIUM PAY. REIMBURSEMENT WILL BE MADE FOR HOLIDAY WORK IN ACCORDANCE WITH APPLICABLE CONTRACT.

ITEM 7. THE NUMBER OF BILLABLE DAYS IS THE TOTAL NUMBER OF DAYS IN THE PERIOD, LESS NON-WORK DAYS, VACATION DAYS, SICK DAYS, AND CONTRACT HOLIDAYS (OVERTIME NOT TO BE INCLUDED IN THIS ITEM.)

TRAVEL DAYS: WORK DAYS UTILIZED FOR AUTHORIZED TRAVEL WILL BE INCLUDED IN THIS ITEM. ALL OTHER DAYS UTILIZED IN AUTHORIZED TRAVEL WILL BE INDICATED IN REMARKS SECTION, GIVING TYPE AND TIME OF TRAVEL.

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ITEMS 11 AND 12. THE POINT "FROM" AND "TO", IN ITEMS 11 AND 12, MUST BE THE ACTUAL LOCATIONS VISITED. (EXAMPLE: OFFUTT AFB, NEB; OMAHA, NEBRASKA.)

MONTH AND YEAR MAY BE OMITTED WHEN ENTERING DATES, EXCEPT FOR DATE OF CERTIFICATE AND ITEM 3. ALL OTHER DATES MUST BE WITHIN THE PERIOD COVERED BY THE CERTIFICATE.

ITEM 23. IF SERVICES WERE NOT SATISFACTORY, OR IF THERE IS DISAGREEMENT AS TO SERVICE PERFORMED, THE AF SUPERVISORY OFFICER MUST EXPLAIN IN ITEM 23.

NOTE: ONE COPY OF TRAVEL ORDER WILL BE ATTACHED TO EACH COPY OF CERTIFICATE OF SERVICE ON WHICH TRAVEL OR TOY IS REPORTED.

SECRET
(When Filled In)

REQUEST FOR PAYMENT AND POSTING VOUCHER										VOUCHER NO. - DATE 2-12									
TO : Accounts Division (Room)					Bldg.)					DIVISION VOUCHER NO.									
THROUGH: Monetary Division (Room)					Bldg.)					3 May 67 6271									
Request payment be made and/or transaction be recorded as indicated below. Pertinent documentation in support of this transaction is on file in this office.																			
SUBJECT								INVOICE NO(S).											
PAYMENT TO <i>Goodyear Aerospace Corporation</i>								18 and 19											
AMOUNT <i>\$159,470.64</i>								CONTRACT NO. <i>CW-6747</i>											
CHECK TO BE DATED																			
CASH PAYMENT <input checked="" type="checkbox"/>			U.S. TREASURY CHECK			AGENT CASHIER CHECK			BANK CASHIER'S CHECK										
THE ATTACHED CHECKS AND/OR CASH IN THE AMOUNT OF \$ SHOULD BE TAKEN INTO ACCOUNT AS INDICATED BELOW.																			
I HEREBY AUTHORIZE MY AGENT, WHOSE SIGNATURE APPEARS BELOW, TO RECEIVE \$ OF OFFICIAL FUNDS IN CURRENCY ON MY BEHALF.																			
DATE		SIGNATURE OF PAYEE				DATE		SIGNATURE OF AGENT				DATE		SIGNATURE OF RECIPIENT					
DESCRIPTION - ALL OTHER ACCOUNTS 13 - 33		34 - 39 STATION CODE		40 - 41		42 - 47 OBLIG. REF. NO.		48 - 49		50 CA OR COST YR.		51 - 54 GENERAL LEDGER ACCT. NO.		55 - 66 ALLOT. - COST - FAN ACCOUNT SYMBOL		67 - 70 OBJECT CLASS		71 - 80 AMOUNT	
ADVANCE ACCOUNTS 13 - 27		SHIP. DOC. NO.		REC. RPT. NO.		ADVANCE ACCT. NO.		PAY PER. LIQ. CODE		F U N D S		61 - 66 CK. NO.		68 - 70 DUE DATE		DEBIT		CREDIT	
<i>Goodyear</i>						<i>53 006747</i>				<i>1601077</i>		<i>61-1021</i>		<i>2540</i>		<i>159,470.64</i>		<i>159,470.64</i>	
<i>Goodyear</i>										<i>1380</i>								<i>159,470.64</i>	
TOTALS												<i>159,470.64</i>		<i>159,470.64</i>					
DATE		PREPARED BY				DATE		REVIEWED BY				CERTIFIED FOR PAYMENT OR CREDIT		SIGNATURE OF CERTIFYING OFFICER					
<i>2 May 67</i>												<i>(Signature)</i>							

Standard Form No. 1034
7 GAO 5000
1034-111

Sanitized Copy Approved for Release 2010/12/09 : CIA-RDP72B00464R000800100001-6

PUBLIC VOUCHER FOR PURCHASES AND SERVICES - OTHER THAN PERSONAL

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION		DATE VOUCHER PREPARED		SCHEDULE NO.			
		CONTRACT NUMBER AND DATE CW-6744		PAID BY			
		REQUISITION NUMBER AND DATE					
PAYEE'S NAME AND ADDRESS Goodyear Aerospace Corp.		DATE INVOICE RECEIVED		DISCOUNT TERMS			
		PAYEE'S ACCOUNT NUMBER					
		SHIPPED FROM		TO		WEIGHT	
						GOVERNMENT B/L NUMBER	
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <small>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</small>	QUAN-TITY	UNIT PRICE		AMOUNT <small>(¹)</small>	
				COST	PER		
		18 (Orig. Inv. Att.)				\$ 82,647.87	
		19 : :				76,822.77	
(Use continuation sheet(s) if necessary) (Payee must NOT use the space below)						TOTAL \$159,470.64	
PAYMENT:		APPROVED FOR		EXCHANGE RATE		DIFFERENCES	
<input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE		= \$		= \$1.00			
		BY :					
		TITLE					
				Amount verified; correct for		159,470.64	
				<small>(Signature or initials)</small>			
Pursuant to authority vested in me as STAT							
3 May 67 <small>(Type)</small>		<small>(Authorized Certifying Officer)</small>		<small>(Contracting Officer)</small>			
ACCOUNTING CLASSIFICATION							
PAID BY	CHECK NUMBER ON TREASURER OF THE UNITED STATES			CHECK NUMBER ON <small>(Name of bank)</small>			
	CASH	DATE		PAYEE ³			
\$							
¹ When stated in foreign currency, insert name of currency. ² 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 in the space provided, over his official title. ³ When a voucher is received 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.						PER TITLE	

5.554 3175

3 pages

Standard Form No. 1034
7 GAO 5000
1034-110-02

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION <p style="text-align: center;">U. S. GOVERNMENT</p>		DATE VOUCHER PREPARED <p style="text-align: center;">April 26, 1967</p>		VOUCHER NUMBER <p style="text-align: center;">18</p>		
PAYEE'S NAME AND ADDRESS <p style="text-align: center;">GOODYEAR AEROSPACE CORPORATION Akron, Ohio 44315</p>		CONTRACT NUMBER AND DATE		PAID BY DATE INVOICE RECEIVED DISCOUNT TERMS PAYEE'S ACCOUNT NUMBER		
		REQUISITION NUMBER AND DATE				
		SHIPPED FROM TO WEIGHT GOVERNMENT B/L NUMBER				
		GOODYEAR AEROSPACE CORPORATION Akron, Ohio 44315 <i>CW 6744</i>				
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUANTITY	UNIT PRICE		AMOUNT (1)
				COST	PER	
(M.C. 8146AII)	3/20/67 thru 3/31/67	Direct Charges Overhead G & A Expense Fixed Fee		Current		To-Date
				\$45,632.15 ✓		\$ 655,698.04
				24,772.38 ✓		381,678.25
				6,477.21 ✓		91,585.36
				5,766.13 ✓		84,672.11
COST REIMBURSABLE PROVISIONAL PAYMENT				\$82,647.87		
(Use continuation sheet(s) if necessary) (Payee must NOT use the space below) TOTAL \$1,213,633.76						
PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE		APPROVED FOR _____ = \$ _____ BY ² _____ TITLE _____		EXCHANGE RATE = \$1.00 DIFFERENCES _____ Amount verified; correct for _____ (Signature or initials) _____		
Pursuant to authority vested in me, I certify that this voucher is correct and proper for payment.						
(Date)		(Authorized Certifying Officer) ²		(Title)		
ACCOUNTING CLASSIFICATION <i>(Appropriation symbol must be shown; other classification optional)</i>						
PAID BY	CHECK NUMBER ON TREASURER OF THE UNITED STATES		CHECK NUMBER ON (Name of bank)			
	CASH DATE		PAYEE ³			
				PER		
				TITLE		

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

Standard Form No. 1035
7 GAO 5000
1035-107

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

CONTINUATION SHEET

SHEET NO.1

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT

U. S. GOVERNMENT

VOUCHER NUMBER

18

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
	3/20/67 thru 3/31/67	DIRECT CHARGES				
		Salaries & Wages				
		Regular		\$24,954.70		\$358,841.22
		Overtime Premium		166.16		6,033.87
				<u>\$25,120.86</u>		<u>\$364,875.09</u>
		<u>Material Subject to Mat'l. Handling Expense</u>				
		Purchases - Fixed Price		\$16,026.09		\$197,243.01
		Sub-Contract		-		342.90
		Paints & Solvents		173.82		913.25
		Stores Material		247.03		2,706.48
		Plant Engineering Make Ready		-		-
		Material Transfers		2,880.28		38,844.47
				<u>\$19,327.22</u>		<u>\$240,050.11</u>
		<u>Material Not Subject to Handling Expense</u>				
		IBM Computer Charge		\$ 238.33		\$ 1,883.30
		Other Direct Charges		207.94		1,740.80
				<u>\$ 446.27</u>		<u>\$ 3,624.10</u>
		Total Material		\$19,773.49		\$243,674.21
		<u>Travel</u>		\$ 737.80		\$ 47,148.74
		TOTAL DIRECT CHARGES		<u>\$45,632.15</u>		<u>\$655,698.04</u>

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 2

U.S. DEPARTMENT, BUREAU OR ESTABLISHMENT
U. S. GOVERNMENT

VOUCHER NUMBER
18

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>			QUAN-TITY	UNIT PRICE		AMOUNT
						COST	PER	
	3/20/67 thru 3/31/67	OVERHEAD						
		<u>Burden Center</u>	<u>Salaries & Wages</u>	<u>Rate</u>		<u>Burden</u>	<u>To-Date</u>	
		501 Engineering Supt.	\$ 6,360.64	.6722594		\$ 4,276.00	\$104,843.34	
		501 Akron Engr. Support	396.68	.7821922		310.28	1,515.95	
		503 Engineering	4,731.28	.6654330		3,118.35	69,736.89	
		503 Akron Engr.	1,816.08	1.0135402		1,840.67	7,869.51	
		507 Akron Shipping	19.83	1.2919818		25.62	128.65	
		511 Plant Engr.	176.07	.8134265		143.22	1,115.63	
		511 Akron Plant Engr.	74.83	.9085928		67.99	183.70	
		517 Metalcraft	2,734.69	1.8966245		5,186.68	71,914.33	
		517 Akron Metalcraft	301.83	1.8030680		544.22	3,102.36	
		519 Plastics	148.10	1.5151924		224.40	3,269.73	
		519 Akron Plastics	113.60	1.7607394		200.02	820.42	
		521 Elec. Assy.	3,798.61	1.2509207		4,751.76	36,741.26	
		521 Akron Elec. Assy.	171.93	1.1359274		195.30	3,082.46	
		531 Qual. Control	407.57	.7697819		313.74	3,745.12	
		531 Akron Qual. Control	45.15	.7326689		33.08	187.49	
		534 Engr. Field Service	-	-		-	53.78	
		545 Fabric Assy.	.45	-		(53.41)	321.78	
		573 Off Site	3,657.36	.1561810		571.21	38,888.42	
			\$24,954.70	-		\$21,779.13	\$347,520.82	
		Material Handling Expense				\$ 2,993.25	\$ 34,157.43	
		TOTAL OVERHEAD				\$24,772.38	\$381,678.25	
		G & A Expense						
		9.2% of Manufacturing Expense				\$ 6,477.21	\$ 91,585.36	
		Fixed Fee @ 7.5%				\$ 5,766.13	\$ 84,672.11	

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

55F-3176
3 pages

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION U. S. GOVERNMENT	DATE VOUCHER PREPARED April 26, 1967	VOUCHER NUMBER 19
	CONTRACT NUMBER AND DATE	PAID BY
	REQUISITION NUMBER AND DATE	
PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION Akron, Ohio 44315	DATE INVOICE RECEIVED	
	DISCOUNT TERMS	
	PAYEE'S ACCOUNT NUMBER	
	GOVERNMENT B/L NUMBER	

CW-6744

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT (¹)
				COST	PER	
				Current	To-Date	
	4/1/67 thru 4/16/67	Direct Charges		\$41,632.95	\$	697,330.99
		Overhead		23,809.39	-	405,487.64
		G & A Expense		6,020.70	-	97,606.06
		Fixed Fee		5,359.73	-	90,031.84
(M.O. 8146AR)		COST REIMBURSABLE PROVISIONAL PAYMENT		\$76,822.77		
TOTAL						\$1,290,456.53

(Use continuation sheet(s) if necessary) (Payee must NOT use the space below)

PAYMENT:	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
<input type="checkbox"/> COMPLETE	= \$	= \$1.00	
<input type="checkbox"/> PARTIAL	BY ²		
<input type="checkbox"/> FINAL	TITLE		Amount verified; correct for
<input type="checkbox"/> PROGRESS			(Signature or initials)
<input type="checkbox"/> ADVANCE			

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

(Date) _____ (Authorized Certifying Officer)² _____ (Title) _____

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

PAID BY	CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER	ON (Name of bank)
	CASH	DATE	PAYEE ³	
	\$			

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

Standard Form No. 1035
7 GAO 5000
1035-107

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

CONTINUATION SHEET

SHEET NO. 1

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT					VOUCHER NUMBER	
U. S. GOVERNMENT					19	
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
	4/1/67 thru 4/16/67	DIRECT CHARGES		Current		To-Date
		Salaries & Wages				
		Regular		\$20,791.81		\$379,633.03
		Overtime Premium		182.80		6,216.67
				\$20,974.61		\$385,849.70
		<u>Material Subject to Mat'l Handling Expense</u>				
		Purchases - Fixed Price		\$17,144.00		\$214,387.01
		Sub-Contract		-		342.90
		Paints & Solvents		-		913.25
		Stores Materials		-		2,706.48
		Plant Engineering Make Ready		-		-
		Material Transfers		-		38,844.47
				\$17,144.00		\$257,194.11
		<u>Material Not Subject to Handling Expense</u>				
		IBM Computer Charge		-		1,883.30
		Other Direct Charges		-		1,740.80
				-0-		\$ 3,624.10
		Total Material		\$17,144.00		\$260,818.21
		<u>Travel</u>		\$ 3,514.34		\$ 50,663.08
		TOTAL DIRECT CHARGES		\$41,632.95		\$697,330.99

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 2

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT
U. S. GOVERNMENT

VOUCHER NUMBER
19

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
	4/1/67 thru 4/16/67	OVERHEAD				
		<u>Burden Center</u>				
		<u>Salaries & Wages</u>				
		<u>Rate</u>				
		<u>Burden</u>				
		<u>To-Date</u>				
501		Engr. Support	\$ 5,384.39	.8159197	\$ 4,393.23	\$109,236.57
501		Akron Engr. Support	-	-	-	1,515.95
503		Engineering	4,354.00	.8488746	3,696.00	73,432.89
503		Akron Engr.	-	-	-	7,869.51
507		Akron Shipping	-	-	-	128.65
511		Plant Engr.	256.20	.8491413	217.55	1,333.18
511		Akron Plant Engr.	-	-	-	183.70
517		Metalcraft	3,190.10	1.9012382	6,065.14	77,979.47
517		Akron Metalcraft	-	-	-	3,102.36
519		Plastics	94.98	1.7045694	161.90	3,431.63
519		Akron Plastics	-	-	-	820.42
521		Electronic Assy.	3,749.98	1.3619619	5,107.33	41,848.59
521		Akron Elec. Assy.	-	-	-	3,082.46
531		Qual. Control	375.41	.8930769	335.27	4,080.39
531		Akron Qual. Control	-	-	-	187.49
534		Engr. Field Service	-	-	-	53.78
545		Fabric Assy.	-	-	-	321.78
573		Off Site	3,386.75	.4736842	1,604.25	40,492.67
			20,791.81		21,580.67	369,101.49
		Material Handling Expense			\$ 2,228.72	\$ 36,386.15
		TOTAL OVERHEAD			\$23,809.39	\$405,487.64
		G & A Expense				
		9.2% of Manufacturing Expense			\$ 6,020.70	\$ 97,606.06
		Fixed Fee @ 7.5%			\$ 5,359.73	\$ 90,031.84

SECRET
(When Filled In)

REQUEST FOR PAYMENT AND POSTING VOUCHER										VOUCHER NO. - DATE 2-12			
TO : Accounts Division (Room) Bldg.)					THROUGH: Monetary Division (Room) Bldg.)					DIVISION VOUCHER NO. 5 April 67 5558			
Request payment be made and/or transaction be recorded as indicated below. Pertinent documentation in support of this transaction is on file in this office.													
SUBJECT							INVOICE NO(S). 16417						
PAYMENT TO Goodyear Aerospace Corp.							CONTRACT NO. CW-6744						
AMOUNT \$231,381.38							CHECK TO BE DATED						
CASH PAYMENT		<input checked="" type="checkbox"/> U.S. TREASURY CHECK		AGENT CASHIER CHECK		BANK CASHIER'S CHECK							
THE ATTACHED CHECKS AND/OR CASH IN THE AMOUNT OF \$ SHOULD BE TAKEN INTO ACCOUNT AS INDICATED BELOW.													
I HEREBY AUTHORIZE MY AGENT, WHOSE SIGNATURE APPEARS BELOW, TO RECEIVE \$						OF OFFICIAL FUNDS IN CURRENCY ON MY BEHALF.							
DATE	SIGNATURE OF PAYEE			DATE	SIGNATURE OF AGENT			DATE	SIGNATURE OF RECIPIENT				
DESCRIPTION - ALL OTHER ACCOUNTS 13 - 33		34 - 39 STATION CODE		40 - 41	42 - 47 OBLIG. REF. NO.	48 - 49	50 CA OR C O S T YR.	51 - 54 GENERAL LEDGER ACCT. NO.	55 - 66 ALLOT. - COST - FAN ACCOUNT SYMBOL		67 - 70 OBJECT CLASS	71 - 80 AMOUNT	
ADVANCE ACCOUNTS 13 - 27		28 - 33 T/A NO.	SHIP. DOC. NO.	REC. RPT. NO.	ADVANCE ACCT. NO.	PAY PER. LIO. CODE			61 - 66 CK. NO.	X REF. NO.	68 - 70 DUE DATE	DEBIT	CREDIT
Goodyear					88006744			1601.0776	61-1021	2540		231,381.38	
Goodyear								138.0					231,381.38
[Signature: Greg + Redhouse] [Signature: 1 Centrod CW-6744] [Signature: 1 Voucher]													
TOTALS											231,381.38	231,381.38	
DATE	SIGNATURE OF PAYEE			DATE	SIGNATURE OF AGENT			DATE	SIGNATURE OF RECIPIENT				
4 April 67													
				REVIEWED BY				CERTIFIED FOR PAYMENT OR CREDIT			25X1		
								SIGNATURE OF CERTIFYING OFFICER			25X1		

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7 GAO 5000-
1034-110

SERVICES OTHER THAN PERSONAL

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION	DATE VOUCHER PREPARED	VOUCHER NUMBER
	CONTRACT NUMBER AND DATE CW-6744	PAID BY
	REQUISITION NUMBER AND DATE	
	PAYEE'S NAME AND ADDRESS Goodyear Aerospace Corp.	
DISCOUNT TERMS		
PAYEE'S ACCOUNT NUMBER		
SHIPPED FROM		GOVERNMENT B/L NUMBER

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT ⁽¹⁾
				COST	PER	
		16 (Orig. Inv. Att.)				\$111,921.02
		17 " "				119,460.36

(Use continuation sheet(s) if necessary) **(Payee must NOT use the space below)** **TOTAL \$231,381.38**

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR _____ BY ² _____ TITLE _____	EXCHANGE RATE = \$1.00	DIFFERENCES _____	Amount verified; correct for 231,381.38
----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------	------------------------	-------------------	------------------------------------------------

Pursuant to authority vested in me as _____ (Contracting Officer) on 5 Apr 67 (Date)

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

PAID BY	CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER	ON (Name of bank)
	CASH	DATE	PAYEE ³	

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is received 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.

55F-T-3135
Copy 1. 3 pages

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 Standard Form 64
 7 GAO 5000
 1034-110-06
 PURCHASE VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION DEPARTMENT OF THE NAVY U. S. GOVERNMENT	DATE VOUCHER PREPARED March 28, 1967	VOUCHER NUMBER 16
	CONTRACT NUMBER AND DATE	PAID BY
	REQUISITION NUMBER AND DATE MAR 24 2 16 PM '67	

PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION Akron, Ohio 44315	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER
	GOVERNMENT B/L NUMBER

CW-6744

SHIPPED FROM	TO	WEIGHT	GOVERNMENT B/L NUMBER
--------------	----	--------	-----------------------

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUANTITY	UNIT PRICE		AMOUNT (1)
				COST	PER	
	2/13/67 thru 2/28/67	Direct Charges Overhead G & A Expense Fixed Fee		Current \$ 64,007.42 31,333.77 8,771.39 7,808.44	To-Date \$ 539,230.53 325,977.57 75,745.89 70,571.54	
(M.O. 8146AR)		COST REIMBURSABLE PROVISIONAL PAYMENT		\$111,921.02		
(Use continuation sheet(s) if necessary)				TOTAL		\$1,011,525.53

PAYMENT:	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
<input type="checkbox"/> COMPLETE	= \$	= \$1.00	
<input type="checkbox"/> PARTIAL	BY ?		
<input type="checkbox"/> FINAL	TITLE		
<input type="checkbox"/> PROGRESS			Amount verified; correct for
<input type="checkbox"/> ADVANCE			(Signature or initials)

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

(Date) _____ (Authorized Certifying Officer)² _____ (Title)

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)								
Appropriation Symbol and Subhead	Object Class	Expenditure Account	Chargeable Activity	Bureau Cont. or Subauth'n Activity	Bureau Control No.	Sub-auth'n No.	Identification No.	Amount

I.R. No's	CHECK NUMBER ON TREASURER OF THE UNITED STATES	CHECK NUMBER ON (Name of bank)
PAID BY	CASH DATE	PAYEE'S
	\$	

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

Standard Form No. 1035
7 GAO 5000
1035-107

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

CONTINUATION SHEET

SHEET NO. 1

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT

U. S. GOVERNMENT

VOUCHER NUMBER

16

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN- TITY	UNIT PRICE		AMOUNT
				COST	PER	
	2/13/67 thru 2/28/67	DIRECT CHARGES				
		Salaries & Wages				
		Regular		\$26,451.28		\$307,277.59
		Overtime Premium		386.18		5,505.74
				<u>\$26,837.46</u>		<u>\$312,783.33</u>
		<u>Material Subject to Mat'l Handling Expense</u>				
		Purchases - Fixed Price		\$13,506.80		\$141,707.92
		Sub-Contract		-		342.90
		Paints & Solvents		83.05		739.43
		Stores Material		23.61		2,459.45
		Plant Engineering - Make Ready		-		-
		Material Transfers		20,782.99		35,964.19
				<u>\$34,396.45</u>		<u>\$181,213.89</u>
		<u>Material Not Subject to Handling Expense</u>				
		IBM Computer Charge		\$ 607.90		\$ 1,644.97
		Other Direct Charges		404.22		1,532.86
				<u>\$ 1,012.12</u>		<u>\$ 3,177.83</u>
		TOTAL MATERIAL		\$35,408.57		\$184,391.72
		<u>Travel</u>		\$ 1,761.39		\$ 42,055.48
		TOTAL DIRECT CHARGES		\$64,007.42		\$539,230.53

Standard Form No. 1035
7 GAO 5000
1035-107

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

CONTINUATION SHEET

SHEET NO. 2

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT						VOUCHER NUMBER	
U. S. GOVERNMENT						16	
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT	
				COST	PER		
	2/13/67 thru 2/28/67	OVERHEAD					
		<u>Burden Center</u>			<u>Burden</u>	<u>To-Date</u>	
		Salaries & Wages	Rate				
501		Engr. Support	\$ 8,149.58	.8919588	\$ 7,269.09	\$ 93,718.86	
501		Akron Engr. Support	337.60	.7692536	259.70	1,205.67	
503		Engineering	7,190.85	.7842800	5,639.64	60,345.42	
503		Akron Engr.	914.48	.9740399	890.74	6,028.84	
507		Akron Shipping	6.08	1.3733553	8.35	103.03	
511		Plant Engr.	55.75	.9302242	51.86	856.09	
511		Akron Plant Engr.	3.64	.9340659	3.40	115.71	
517		Metalcraft	2,133.67	1.8771506	4,005.22	63,375.80	
517		Akron Metalcraft	107.67	1.6668524	179.47	2,558.14	
519		Plastics	93.95	1.7563598	165.01	2,625.71	
519		Akron Plastics	-	-	-	620.40	
521		Electronic Assy.	3,089.43	1.4580392	4,504.51	26,557.95	
521		Akron Elec. Assy.	49.61	1.2362427	61.33	2,887.16	
531		Qual. Control	287.81	1.0333206	297.40	3,039.14	
531		Akron Qual. Control	13.92	.6997126	9.74	154.41	
534		Engr. Field Service	-	-	-	53.78	
545		Fabric Assy.	-	-	-	228.99	
573		Off Site	4,017.24	.6211230	2,495.20	35,474.46	
			<u>\$26,451.28</u>	-	<u>\$25,840.66</u>	<u>\$299,949.56</u>	
		Material Handling Expense			\$ 5,493.11	\$ 26,028.01	
		TOTAL OVERHEAD			\$31,333.77	\$325,977.57	
		G & A Expense					
		9.2% of Manufacturing Expense			\$ 8,771.39	\$ 75,745.89	
		Fixed Fee @ 7.5%			\$ 7,808.44	\$ 70,571.54	

501-T-3136

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION DEPARTMENT OF THE NAVY U. S. GOVERNMENT	DATE VOUCHER PREPARED March 28, 1967	VOUCHER NUMBER 17
MAR 34 2 16 PM '67	CONTRACT NUMBER AND DATE	PAID BY
	REQUISITION NUMBER AND DATE	

PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION Akron, Ohio 44315 <i>CW 16744</i>	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER
	GOVERNMENT B/L NUMBER

SHIPPED FROM _____ TO _____ WEIGHT _____

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT (¹)
				COST	PER	
(M.O. 8146AR)	3/1/67 thru 3/19/67	Direct Charges Overhead G & A Expense Fixed Fee COST REIMBURSABLE PROVISIONAL PAYMENT		Current	To-Date	
				\$ 70,885.36	\$ 610,065.89	
				30,928.30	356,905.87	
				9,362.26	85,108.15	
				8,334.44	78,905.98	
				TOTAL	\$119,460.36	\$1,130,985.89

(Use continuation sheet(s) if necessary) (Payee must NOT use the space below)

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
	= \$	= \$1.00	
	BY ²		
	TITLE	Amount verified; correct for	
		(Signature or initials)	

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

 (Date) (Authorized Certifying Officer)² (Title)

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

Appropriation Symbol and Subhead	Object Class	Expenditure Account	Chargeable Activity	Bureau Cont. or Subauth'n Activity	Bureau Control No.	Sub-auth'n No.	Identifi-cation No.	Amount

I.R. No's _____

PAID BY	CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER	ON (Name of bank)
	CASH	DATE	PAYEE ³	
	\$			

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

Standard Form No. 1035
7 GAO 5000
1035-107**PUBLIC VOUCHER FOR PURCHASES AND
SERVICES OTHER THAN PERSONAL**

CONTINUATION SHEET

SHEET NO. 1

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT				VOUCHER NUMBER		
U. S. GOVERNMENT				17		
NUMBER 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	UNIT PRICE		AMOUNT
				COST	PER	
	3/1/67 thru 3/19/67	DIRECT CHARGES		Current		To-Date
		Salaries & Wages				
		Regular		\$26,608.93		\$333,886.52
		Overtime Premium		361.97		5,867.71
				\$26,970.90		\$339,754.23
		<u>Material Subject to Mat'l Handling Expense</u>				
		Purchases - Fixed Price		\$39,509.00		\$181,216.92
		Sub-Contract		-		342.90
		Paints & Solvents		-		739.43
		Stores Material		-		2,459.45
		Plant Engineering make Ready		-		-
		Material Transfers		-		35,964.19
				\$39,509.00		\$220,722.89
		<u>Material Not Subject to Handling Expense</u>				
		IBM Computer Charges		-		\$ 1,644.97
		Other Direct Charges		-		1,532.86
				-0-		\$ 3,177.83
		Total Material		\$39,509.00		\$223,900.72
		<u>Travel</u>		\$ 4,355.46		\$ 46,410.94
		TOTAL DIRECT CHARGES		\$70,835.36		\$610,065.89

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 2

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT					VOUCHER NUMBER	
U. S. GOVERNMENT					17	
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
	3/1/67 thru 3/19/67	OVERHEAD				
		<u>Burden Center</u>				<u>To-Date</u>
		Salaries & Wages	Rate			
		501 Engr. Support	\$ 8,101.00	.8453870	\$ 6,848.48	\$100,567.34
		501 Akron Engr. Support	-	-	-	1,205.67
		503 Engineering	7,391.28	.8446602	6,243.12	66,588.54
		503 Akron Engr.	-	-	-	6,028.84
		507 Akron Shipping	-	-	-	103.03
		511 Plant Engr.	133.79	.8694222	116.32	972.41
		511 Akron Plant Engr.	-	-	-	115.71
		517 Metalcraft	1,783.61	1.8792505	3,351.85	66,727.65
		517 Akron Metalcraft	-	-	-	2,558.14
		519 Plastics	236.03	1.7778249	419.62	3,045.33
		519 Akron Plastics	-	-	-	620.40
		521 Electronic Assy.	3,822.65	1.4208860	5,431.55	31,989.50
		521 Akron Elec. Assy.	-	-	-	2,887.16
		531 Qual. Control	407.64	.9622216	392.24	3,431.38
		531 Akron Qual. Control	-	-	-	154.41
		534 Engr. Field Service	-	-	-	53.78
		545 Fabric Assy.	53.80	2.7174721	146.20	375.19
		573 Off Site	4,679.13	.6075382	2,842.75	38,317.21
			\$26,608.93	-	\$25,792.13	\$325,741.69
		Material Handling Expense			\$ 5,136.17	\$ 31,164.18
		TOTAL OVERHEAD			\$30,928.30	\$356,905.87
		G & A Expense				
		9.2% of Manufacturing Expense			\$ 9,362.26	\$ 85,108.15
		Fixed Fee @ 7.5%			\$ 8,334.44	\$ 78,905.98

SECRET
(When Filled In)

REQUEST FOR PAYMENT AND POSTING VOUCHER										VOUCHER NO. - DATE 2-12	
TO : Accounts Division (Room Bldg.) THROUGH: Monetary Division (Room Bldg.)								DIVISION VOUCHER NO. <i>2 Mar. 67 4797</i>			
Request payment be made and/or transaction be recorded as indicated below. Pertinent documentation in support of this transaction is on file in this office.											
SUBJECT						INVOICE NO(S). <i>14915</i>					
PAYMENT TO <i>Goodyear Aerospace Corp.</i>						CONTRACT NO. <i>QW-6744</i>					
AMOUNT <i>\$162,686.43</i>						CHECK TO BE DATED					
CASH PAYMENT			<input checked="" type="checkbox"/> U.S. TREASURY CHECK			AGENT CASHIER CHECK			BANK CASHIER'S CHECK		
THE ATTACHED CHECKS AND/OR CASH IN THE AMOUNT OF \$ SHOULD BE TAKEN INTO ACCOUNT AS INDICATED BELOW.											
I HEREBY AUTHORIZE MY AGENT, WHOSE SIGNATURE APPEARS BELOW, TO RECEIVE \$						OF OFFICIAL FUNDS IN CURRENCY ON MY BEHALF.					
DATE		SIGNATURE OF PAYEE		DATE		SIGNATURE OF AGENT		DATE		SIGNATURE OF RECIPIENT	
DESCRIPTION - ALL OTHER ACCOUNTS 13 - 33		34 - 39 STATION CODE		40 - 41 E X C O P E N D		42 - 47 OBLIG. REF. NO.		48 - 49 PAY PER. LIO. CODE		50 CA OR C O S T YR.	
DESCRIPTION - ADVANCE ACCOUNTS 13 - 27		SHIP. DOC. NO.		REC. RPT. NO.		ADVANCE ACCT. NO.		GENERAL LEDGER ACCT. NO.		71 - 80 AMOUNT	
		32-33 DIV.		PROJECT NO.		EMP. NO.		55 - 66 ALLOT. - COST - FAN ACCOUNT SYMBOL		67 - 70 OBJECT CLASS	
								61 - 66 CK. NO.		68 - 70 DUE DATE	
								X REF. NO.		DEBIT CREDIT	
<i>Goodyear</i>				<i>88 006744</i>		<i>1 601.077</i>		<i>61-1021 2540</i>		<i>162,686.43</i>	
<i>Goodyear</i>						<i>138.0</i>				<i>162,686.43</i>	
TOTALS <i>162,686.43 162,25X143</i>											
DATE <i>2 Mar 67</i>		SIGNATURE OF PAYEE		DATE		REVIEWED BY		CERTIFIED FOR PAYMENT OR CREDIT DATE <i>2 MAR 67</i> SIGNATURE OF CERTIFYING OFFICER <i>[Signature]</i>			

Standard 7 GAO 5000 1034-110 Sanitized Copy Approved for Release 2010/12/09 : CIA-RDP72B00464R000800100001-6

SERVICES OTHER THAN PERSONAL

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION	DATE VOUCHER PREPARED	VOUCHER NUMBER
	CONTRACT NUMBER AND DATE CW-6744	PAID BY
	REQUISITION NUMBER AND DATE	
PAYEE'S NAME AND ADDRESS Goodyear Aerospace Corp.	DATE INVOICE RECEIVED	
	DISCOUNT TERMS	
	PAYEE'S ACCOUNT NUMBER	
	GOVERNMENT B/L NUMBER	

SHIPPED FROM	TO	WEIGHT	GOVERNMENT B/L NUMBER
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NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT (¹)
				COST	PER	
		14 (Orig. Inv. Att.)				\$ 99,269.01
		15 " "				63,417.42

(Use continuation sheet(s) if necessary) **(Payee must NOT use the space below)** **TOTAL \$162,686.43**

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
	= \$	= \$1.00	
	BY :		
	TITLE	Amount verified; correct for \$162,686.43 <i>(Signature or initials)</i>	

Pursuant to authority _____ **STAT**

*(Authorized Certifying Officer)*² _____ **(Contracting Officer)**

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

Blank space for additional information or notes.

PAID BY	CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER	ON (Name of bank)
	CASH	DATE	PAYEE ³	

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is received 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.

555-T-3019
3 pages

Standard Form No. 1034
7 GAO 5000
1034-110-06

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION DEPARTMENT OF THE NAVY U. S. GOVERNMENT MAR 1 1 22 PM '67		DATE VOUCHER PREPARED February 23, 1967	VOUCHER NUMBER 14
PAYEE'S NAME GOODYEAR AEROSPACE CORPORATION AND ADDRESS Akron Ohio 44315 C.W. 6744		CONTRACT NUMBER AND DATE	PAID BY
		REQUISITION NUMBER AND DATE	
		DATE INVOICE RECEIVED	DISCOUNT TERMS
SHIPPED FROM		TO	WEIGHT
			GOVERNMENT B/L NUMBER

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT (1)
				COST	PER	
	1/16/67 thru 1/31/67	Direct Charges Overhead G & A Expense Fixed Fee		Current \$55,418.04 28,629.00 8,296.23 6,925.74	To-Date \$441,177.38 274,666.68 62,004.40 58,338.63	
(M.O. 8146AR)		COST REIMBURSABLE PROVISIONAL PAYMENT		\$99,269.01		
(Use continuation sheet(s) if necessary)				TOTAL		\$836,187.09

(Payee must NOT use the space below)

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
	= \$	= \$1.00	
	BY?		
	TITLE	Amount verified; correct for <i>(Signature or initials)</i>	

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

(Date) _____ (Authorized Certifying Officer) _____ (Title) _____

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

Appropriation Symbol and Subhead	Object Class	Expenditure Account	Chargeable Activity	Bureau Cont. or Subauth'n Activity	Bureau Control No.	Sub-auth'n No.	Identifi-cation No.	Amount

I.R. No's

PAID BY	CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER	ON (Name of bank)
	CASH	DATE	PAYEE'S	

1 When stated in foreign currency, insert name of currency.
 2 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 in the space provided, over his official title.
 3 When a voucher is 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.

Standard Form No. 1035
7 GAO 5000
1035-107

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

CONTINUATION SHEET

SHEET NO. 1

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT					VOUCHER NUMBER	
U. S. GOVERNMENT					14	
NUMBER 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	UNIT PRICE		AMOUNT
				COST	PER	
	1/16/67 thru 1/31/67	DIRECT CHARGES				
		Salaries & Wages				
		Regular		\$28,721.34		\$262,556.31
		Overtime Premium		269.15		4,867.29
				<u>\$28,990.49</u>		<u>\$267,423.60</u>
		<u>Material Subject to Mat'l Handling Expense</u>				
		Purchases - Fixed Price		\$16,060.75		\$114,461.12
		Sub-Contract		-0-		342.90
		Paints & Solvents		214.49		656.38
		Stores Material		69.17		2,435.84
		Plant Engineering Make Ready		-0-		-0-
		Material Transfers		5,842.51		15,181.20
				<u>\$22,186.92</u>		<u>\$133,077.44</u>
		<u>Material Not Subject to Handling Expense</u>				
		IBM Computer Charge		\$ 159.00		\$ 1,037.07
		Other Direct Charges		403.04		1,128.64
				<u>\$ 562.04</u>		<u>\$ 2,165.71</u>
		Total Material		\$22,748.96		\$135,243.15
		<u>Travel</u>		\$ 3,678.59		\$ 38,510.63
		TOTAL DIRECT CHARGES		\$55,418.04		\$441,177.38

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 2

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT					VOUCHER NUMBER	
U. S. GOVERNMENT					14	
NUMBER 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)	QUANTITY	UNIT PRICE		AMOUNT
				COST	PER	
	1/16/67 thru 1/31/67	OVERHEAD				
		<u>Salaries & Wages</u>	<u>Rate</u>	<u>Burden</u>	<u>To-Date</u>	
		<u>Burden Center</u>				
		501 Engr. Support	\$10,016.41	.7809175	\$ 7,821.99	\$ 81,020.61
		501 Akron Engr. Suppt.	725.84	.6742946	489.43	945.97
		503 Engineering	6,333.38	.6892118	4,365.04	50,704.29
		503 Akron Engineering	1,558.48	.9374519	1,461.00	5,138.10
		507 Akron Shipping	21.28	1.3768797	29.30	94.68
		511 Plant. Engr.	155.17	.8497777	131.86	701.68
		511 Akron Plant Engr.	29.12	.8739698	25.45	112.31
		517 Metalcraft	1,789.37	1.7249144	3,086.51	56,016.84
		517 Akron Metalcraft	103.99	1.6244831	168.93	2,378.67
		519 Plastics	109.16	1.8972151	207.10	2,278.94
		519 Akron Plastics	.96	1.4270833	1.37	620.40
		521 Electronic Assy.	2,795.86	1.4118661	3,947.38	19,025.39
		521 Akron Elec. Assy.	87.88	1.3570778	119.26	2,825.83
		531 Quality Control	270.59	.8691009	235.17	2,540.89
		531 Akron Qual. Control	27.98	.6012009	19.06	144.67
		534 Engr. Field Service	-	-	-	53.78
		545 Fabric Assy.	(.12)	-	2.25	228.99
		573 Off Site	4,695.99	.5614428	2,636.53	31,085.94
			<u>\$28,721.34</u>	<u>-</u>	<u>\$24,747.63</u>	<u>\$255,917.98</u>
		Material Handling Expense			\$ 3,881.37	\$ 18,748.70
		Total Overhead			\$28,629.00	\$274,666.68
		G & A Expense			\$ 8,296.23	\$ 62,004.40
		Fixed Fee @ 7.5%			\$ 6,925.74	\$ 58,338.63

55F-I-3080
3 pages

Standard Form No. 1034
7 GAO 5000
1034-110'06

Sanitized Copy Approved for Release 2010/12/09 : CIA-RDP72B00464R000800100001-6
PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION DEPARTMENT OF THE NAVY U. S. GOVERNMENT	DATE VOUCHER PREPARED February 23, 1967	VOUCHER NUMBER 15
MAR 1 1 22 PM '67	CONTRACT NUMBER AND DATE	PAID BY
	REQUISITION NUMBER AND DATE	

PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION Akron, Ohio 44315	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER
	GOVERNMENT B/L NUMBER

OW 6744

SHIPPED FROM	TO	WEIGHT
--------------	----	--------

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUANTITY	UNIT PRICE		AMOUNT (1)
				COST	PER	
(M.O. 8146AR)	2/1/67 thru 2/12/67	Direct Charges Overhead G & A Expense Fixed Fee		Current		To-Date
				\$34,045.73		\$475,223.11
				19,977.12		294,643.80
				4,970.10		66,974.50
				4,424.47		62,763.10
		COST REIMBURSABLE PROVISIONAL PAYMENT		\$63,417.42		

(Use continuation sheet(s) if necessary) (Payee must NOT use the space below) TOTAL \$899,604.51

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
	= \$	= \$1.00	
	BY?		
	TITLE		Amount verified; correct for
			(Signature or initials)

Pursuant to authority vested in me, I certify that this voucher is correct and proper for payment.
 (Date) (Authorized Certifying Officer)² (Title)

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)								
Appropriation Symbol and Subhead	Object Class	Expenditure Account	Chargeable Activity	Bureau Cont. or Subauth'n Activity	Bureau Control No.	Sub-auth'n No.	Identification No.	Amount

PAID BY	CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER	ON (Name of bank)
	CASH	DATE	PAYEE'S	
	\$			

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 1

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT					VOUCHER NUMBER	
U. S. GOVERNMENT					15	
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
	2/1/67 thru 2/12/67	DIRECT CHARGES				
		Salaries & Wages				
		Regular		\$18,270.00		\$280,826.31
		Overtime Premium		252.27		5,119.56
				\$18,522.27		\$285,945.87
		<u>Material Subject to Mat'l Handling Expense</u>				
		Purchases - Fixed Price		\$13,740.00		\$128,201.12
		Sub-Contract		-0-		342.90
		Paints & Solvents		-0-		656.38
		Stores Material		-0-		2,435.84
		Plant Engineering Make Ready		-0-		-0-
		Material Transfers		-0-		15,181.20
				\$13,740.00		\$146,817.44
		<u>Material Not Subject to Handling Expense</u>				
		IBM Computer Charge		\$ -0-		\$ 1,037.07
		Other Direct Charges		-0-		1,128.64
				-0-		\$ 2,165.71
		Total Material		\$13,740.00		\$148,983.15
		<u>TRAVEL</u>		\$ 1,783.46		\$ 40,294.09
		TOTAL DIRECT CHARGES		\$34,045.73		\$475,223.11

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 2

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT

U. S. GOVERNMENT

VOUCHER NUMBER

15

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
	2/1/67 thru 2/12/67	OVERHEAD				
		<u>Burden Center</u>				
		<u>Salaries & Wages</u>	<u>Rate</u>		<u>Burden</u>	<u>To-Date</u>
501		Engr. Support	6,064.32	.8952628	5,429.16	86,449.77
501		Akron Engr. Suppt.	-	-	-	945.97
503		Engineering	4,787.91	.8357488	4,001.49	54,705.78
503		Akron Engr.	-	-	-	5,138.10
507		Akron Shipping	-	-	-	94.68
511		Plant Engr.	117.95	.8694362	102.55	804.23
511		Akron Plant Engr.	-	-	-	112.31
517		Metalcraft	1,739.18	1.9283455	3,353.74	59,370.58
517		Akron Metalcraft	-	-	-	2,378.67
519		Plastics	98.69	1.8417266	181.76	2,460.70
519		Akron Plastics	-	-	-	620.40
521		Electronic Assy.	2,119.64	1.4285681	3,028.05	22,053.44
521		Akron Elec. Assy.	-	-	-	2,825.83
531		Qual. Control	204.43	.9824879	200.85	2,741.74
531		Akron Qual. Control	-	-	-	144.67
534		Engr. Field Service	-	-	-	53.78
545		Fabric Assy.	-	-	-	228.99
573		Off Site	3,137.88	.6033755	1,893.32	32,979.26
			<u>\$18,270.00</u>		<u>\$18,190.92</u>	<u>\$274,108.90</u>
		Material Handling Expense			\$ 1,786.20	\$ 20,534.90
		Total Overhead			\$19,977.12	\$294,643.80
		G&A Expense				
		9.2% of Manufacturing Expense			\$ 4,970.10	\$ 66,974.50
		Fixed Fee @ 7.5%			\$ 4,424.47	\$ 62,763.10

SECRET
(When Filled In)

REQUEST FOR PAYMENT AND POSTING VOUCHER

VOUCHER NO. - DATE 2-12

TO : Accounts Division (Room Bldg.)
THROUGH: Monetary Division (Room Bldg.)

DIVISION VOUCHER NO.
3 Feb 67 4228

Request payment be made and/or transaction be recorded as indicated below. Pertinent documentation in support of this transaction is on file in this office.

SUBJECT INVOICE NO(S) 12 and 13
PAYMENT TO *Goodman Aerospace Corporation* CONTRACT NO. CW-6744
AMOUNT \$ 139,711.36 CHECK TO BE DATED
CASH PAYMENT U.S. TREASURY CHECK AGENT CASHIER CHECK BANK CASHIER'S CHECK

THE ATTACHED CHECKS AND/OR CASH IN THE AMOUNT OF \$ SHOULD BE TAKEN INTO ACCOUNT AS INDICATED BELOW.

I HEREBY AUTHORIZE MY AGENT, WHOSE SIGNATURE APPEARS BELOW, TO RECEIVE \$ OF OFFICIAL FUNDS IN CURRENCY ON MY BEHALF.
DATE SIGNATURE OF PAYEE DATE SIGNATURE OF AGENT DATE SIGNATURE OF RECIPIENT

DESCRIPTION - ALL OTHER ACCOUNTS 13 - 33	28 - 33 T/A NO.	34 - 39 STATION CODE	40 - 41 E X C P O D E N E	42 - 47 OBLIG. REF. NO.	48 - 49 PAY PER. LIQ. CODE	50 CA OR C O S T Y R.	51 - 54 GENERAL LEDGER ACCT. NO.	55 - 66 ALLOT. COST - FAN ACCOUNT SYMBOL		67 - 70 OBJECT CLASS	71 - 80 AMOUNT	
								61 - 66 CK. NO.	68 - 70 DUE DATE		DEBIT	CREDIT
<i>Goodman</i>				88 006744		1	601.0 77	61-1021	2540		139,711.36	
<i>Goodman</i>							1360					139,711.36
<i>Original Addresser Content CW-6744 Vouch</i>												
TOTALS											139,711.36	139,711.36

DATE 3 Feb 67 DATE REVIEWED BY CERTIFIED FOR PAYMENT OR CREDIT 25X1
DATE 3 FEB 1967 SIGNATURE OF CERTIFYING OFFICER 25X1 on

Standard Sanitized Copy Approved for Release 2010/12/09 : CIA-RDP72B00464R000800100001-6
 GAO 5000
 1034-110
 FEDERAL GOVERNMENT VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION	DATE VOUCHER PREPARED	VOUCHER NUMBER	
	CONTRACT NUMBER AND DATE CW-6744		PAID BY
	REQUISITION NUMBER AND DATE		
PAYEE'S NAME AND ADDRESS Goodyear Aerospace Corp.	DATE INVOICE RECEIVED		
	DISCOUNT TERMS		
	PAYEE'S ACCOUNT NUMBER		
	GOVERNMENT B/L NUMBER		
SHIPPED FROM	TO	WEIGHT	

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUANTITY	UNIT PRICE		AMOUNT <small>(1)</small>
				COST	PER	
		12 (Orig. Inv. Att.)				\$ 74,121.08
		13 " "				65,590.28

(Use continuation sheet(s) if necessary) **(Payee must NOT use the space below)** TOTAL **\$139,711.36**

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
	= \$	= \$1.00	
	BY		
	TITLE		Amount verified; correct for \$139,711.36

Pursuant to authority vested in  (Contracting Officer) STAT

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

PAID BY	CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER	ON (Name of bank)
	CASH	DATE	PAYEE'S	
	\$			

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

531-2997
3 pages

Sanitized Copy Approved for Release 2010/12/09 : CIA-RDP72B00464R000800100001-6
Standard Form No. 1034
7 GAO 5000
1034-110-06

PUE VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION DEPARTMENT OF THE NAVY	DATE VOUCHER PREPARED January 26, 1967	VOUCHER NUMBER 12
U. S. GOVERNMENT FEB 2 12 13 PM '67	CONTRACT NUMBER AND DATE	PAID BY
	REQUISITION NUMBER AND DATE	

PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION Akron, Ohio 44315	CW-6744	DATE INVOICE RECEIVED
		DISCOUNT TERMS
		PAYEE'S ACCOUNT NUMBER
		GOVERNMENT B/L NUMBER

SHIPPED FROM	TO	WEIGHT	GOVERNMENT B/L NUMBER
--------------	----	--------	-----------------------

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUANTITY	UNIT PRICE		AMOUNT (¹)
				COST	PER	
(M.O. 8146AR)	12/19/66 thru 12/31/66	Direct Charges		Current		To-Date
		Overhead		\$38,304.74		\$351,621.99
		G & A Expense		25,125.97		223,784.82
		Fixed Fee		5,519.13		49,084.17
				5,171.24		46,836.82
		COST REIMBURSABLE PROVISIONAL PAYMENT		\$74,121.08		

(Use continuation sheet(s) if necessary) **(Payee must NOT use the space below)** **TOTAL** \$671,327.80

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
	= \$	= \$1.00	
	BY ?		
	TITLE	Amount verified; correct for <i>(Signature or initials)</i>	

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

 (Date) (Authorized Certifying Officer)? (Title)

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

Appropriation Symbol and Subhead	Object Class	Expenditure Account	Chargeable Activity	Bureau Cont. or Subauth'n Activity	Bureau Control No.	Sub-auth'n No.	Identification No.	Amount

PAID BY	CHECK NUMBER ON TREASURER OF THE UNITED STATES	CHECK NUMBER ON (Name of bank)
	CASH DATE	PAYEE'S
\$		

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

Standard Form No. 1035
7 GAO 5000
1035-107**PUBLIC VOUCHER FOR PURCHASES AND
SERVICES OTHER THAN PERSONAL**

CONTINUATION SHEET

SHEET NO. 1

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT				VOUCHER NUMBER		
U. S. GOVERNMENT				12		
NUMBER 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	UNIT PRICE		AMOUNT
				COST	PER	
	12/19/66 thru 12/31/66	DIRECT CHARGES		<u>Current</u>	<u>To-Date</u>	
		Salaries & Wages				
		Regular		\$21,702.47		\$214,066.87
		Overtime Premium		76.89		4,360.88
				<u>\$21,779.36</u>		<u>\$218,427.75</u>
		<u>Material Subject to Material Handling Expense</u>				
		Purchases - Fixed Price		\$10,740.30		\$ 86,324.37
		Sub-Contract		-0-		342.90
		Paints & Solvents		99.86		441.89
		Stores Material		2,150.39		2,366.67
		Plant Engineering Make Ready		-0-		-0-
		Material Transfers		2,627.22		9,338.69
				<u>\$15,617.77</u>		<u>\$ 98,814.52</u>
		<u>Material Not Subject to Handling Expense</u>				
		IBM Computer Charge		\$ 159.00		\$ 878.07
		Other Direct Charges		365.15		725.60
				<u>\$ 524.15</u>		<u>\$ 1,603.67</u>
		Total Material		<u>\$16,141.92</u>		<u>\$100,418.19</u>
		<u>Travel</u>		\$ 383.46		\$ 32,776.05
		TOTAL DIRECT CHARGES		<u>\$38,304.74</u>		<u>\$351,621.99</u>

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 2

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT					VOUCHER NUMBER	
U. S. GOVERNMENT					12	
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
	12/19/66 thru 12/31/66	OVERHEAD				
		<u>Burden Center</u>			<u>Burden</u>	<u>To-Date</u>
		Salaries & Wages	Rate			
		501 Engr. Support	\$ 6,443.45	1.0783261	\$ 6,948.14	\$ 65,625.82
		501 Akron Engr. Support	255.22	.7650263	195.25	456.54
		503 Engineering	3,212.89	.7847203	2,521.22	41,862.42
		503 Akron Engr.	2,383.13	1.0696563	2,549.13	3,677.10
		507 Akron Shipping	41.01	1.0436479	42.80	65.38
		511 Plant Engr.	13.36	.9565868	12.78	282.25
		511 Akron Plant Engr.	54.75	.8991781	49.23	86.86
		517 Metalcraft	2,558.26	1.7786699	4,550.30	49,370.62
		517 Akron Metalcraft	264.63	1.7108038	452.73	2,209.74
		519 Plastics	107.86	1.6587243	178.91	1,847.69
		519 Akron Plastics	76.80	1.6834635	125.45	619.03
		521 Electronic Assy.	1,385.32	1.4456515	2,002.69	12,864.13
		521 Akron Elec. Assy.	1,092.19	1.3439695	1,467.87	2,706.57
		531 Qual. Control	184.96	1.5203287	281.20	1,957.03
		531 Akron Qual. Control	75.30	.6686587	50.35	125.61
		534 Engr. Field Service	-	-	-	53.78
		545 Fabric Assy.	18.94	2.7838965	51.78	51.78
		573 Off Site	3,534.40	.4922137	1,739.68	26,625.02
			<u>\$21,702.47</u>	-	<u>\$23,219.51</u>	<u>\$210,487.37</u>
		Material Handling Expense			\$ 1,906.46	\$ 13,297.45
		TOTAL OVERHEAD			\$25,125.97	\$223,784.82
		G & A Expense			\$ 5,519.13	\$ 49,084.17
		Fixed Fee			\$ 5,171.24	\$ 46,836.82

55-1-2998
U-7 1 3/4

Standard Form No. 1034 7 GAO 5000 1034-110-06		PUB VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL						
U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION DEPARTMENT OF THE NAVY U.S. GOVERNMENT				DATE VOUCHER PREPARED January 26, 1967		VOUCHER NUMBER 13		
				CONTRACT NUMBER AND DATE		PAID BY		
				REQUISITION NUMBER AND DATE				
PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION Akron, Ohio 44315				<i>CW-6744</i>		DATE INVOICE RECEIVED		
						DISCOUNT TERMS		
						PAYEE'S ACCOUNT NUMBER		
						GOVERNMENT B/L NUMBER		
SHIPPED FROM		TO		WEIGHT				
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <small>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</small>	QUAN- TITY	UNIT PRICE		AMOUNT		
				COST	PER	(1)		
	1/1/67 thru 1/15/67	Direct Charges Overhead G & A Expense Fixed Fee		Current \$34,137.35 22,252.86 4,624.00 4,576.07		To-Date \$385,759.34 246,037.68 53,708.17 51,412.89		
(M.O. 8146AR)		COST REIMBURSABLE PROVISIONAL PAYMENT		\$65,590.28				
(Use continuation sheet(s) if necessary)				(Payee must NOT use the space below)		TOTAL		
PAYMENT:		APPROVED FOR		EXCHANGE RATE		\$736,918.08		
<input type="checkbox"/> COMPLETE		= \$		= \$1.00		DIFFERENCES		
<input type="checkbox"/> PARTIAL		BY ?						
<input type="checkbox"/> FINAL		TITLE		Amount verified; correct for				
<input type="checkbox"/> PROGRESS				(Signature or initials)				
<input type="checkbox"/> ADVANCE								
Pursuant to authority vested in me, I certify that this voucher is correct and proper for payment.								
(Date)		(Authorized Certifying Officer) ²			(Title)			
ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)								
Appropriation Symbol and Subhead	Object Class	Expenditure Account	Chargeable Activity	Bureau Cont. or Subauth'n Activity	Bureau Control No.	Sub-auth'n No.	Identifi- cation No.	Amount
I.R. No's								
PAID BY	CHECK NUMBER ON TREASURER OF THE UNITED STATES			CHECK NUMBER ON (Name of bank)				
	CASH DATE			PAYEE'S				
						PER		
						TITLE		

Standard Form No. 1035
7 GAO 5000
1035-107**PUBLIC VOUCHER FOR PURCHASES AND
SERVICES OTHER THAN PERSONAL**

CONTINUATION SHEET

SHEET NO. 1

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT

U. S. GOVERNMENT

VOUCHER NUMBER

13

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN- TITY	UNIT PRICE		AMOUNT
				COST	PER	
	1/1/67 thru 1/15/67	DIRECT CHARGES				
		Salaries & Wages				
		Regular		\$19,768.10		\$233,834.97
		Overtime Premium		237.26		4,598.14
				\$20,005.36		\$238,433.11
		<u>Material Subject to Material Handling Expense</u>				
		Purchases - Fixed Price		\$12,076.00		\$ 98,400.37
		Sub-Contract		-0-		342.90
		Paints & Solvents		-0-		441.89
		Stores Material		-0-		2,366.67
		Plant Engineering Make Ready		-0-		-0-
		Material Transfers		-0-		9,338.69
				\$12,076.00		\$110,890.52
		<u>Material Not Subject to Handling Expense</u>				
		IBM Computer Charge		-0-		\$ 878.07
		Other Direct Charges		-0-		725.60
				-0-		\$ 1,603.67
		Total Material		\$12,076.00		\$112,494.19
		<u>Travel</u>		\$ 2,055.99		\$ 34,832.04
		TOTAL DIRECT CHARGES		\$34,137.35		\$385,759.34

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 2

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT

U. S. GOVERNMENT

VOUCHER NUMBER

13

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
	1/1/67 thru 1/15/67	OVERHEAD				
		<u>Burden Center</u>			<u>Burden</u>	<u>To-Date</u>
		Salaries & Wages	Rate			
501		Engr. Support	1.0000000	\$ 7,572.80	\$ 7,572.80	\$ 73,198.62
501		Akron Engr. Support	-	-	-	456.54
503		Engineering	.9547678	4,688.92	4,476.83	46,339.25
503		Akron Engr.	-	-	-	3,677.10
507		Akron Shipping	-	-	-	65.38
511		Plant Engr.	.8842594	325.21	287.57	569.82
511		Akron Plant Engr.	-	-	-	86.86
517		Metalcraft	1.9559813	1,819.91	3,559.71	52,930.33
517		Akron Metalcraft	-	-	-	2,209.74
519		Plastics	1.7877652	125.38	224.15	2,071.84
519		Akron Plastics	-	-	-	619.03
521		Electronic Assy.	1.4522293	1,524.47	2,213.88	15,078.01
521		Akron Elec. Assy.	-	-	-	2,706.57
531		Qual. Control	1.0467713	333.11	348.69	2,305.72
531		Akron Qual. Control	-	-	-	125.61
534		Engr. Field Service	-	-	-	53.78
545		Fabric Assy.	2.6900369	65.04	174.96	226.74
573		Off Site	.5506329	3,313.26	1,824.39	28,449.41
				\$19,768.10	\$20,682.98	\$231,170.35
		Material Handling Expense			\$ 1,569.88	\$ 14,867.33
		TOTAL OVERHEAD			\$22,252.86	\$246,037.68
		G & A Expense				
		8.2% of Manufacturing Expense			\$ 4,624.00	\$ 53,708.17
		Fixed Fee @ 7.5%			\$ 4,576.07	\$ 51,412.89

SECRET
(When Filled In)

REQUEST FOR PAYMENT AND POSTING VOUCHER

VOUCHER NO. - DATE 2-12

TO : Accounts Division (Room Bldg.)
 THROUGH: Monetary Division (Room Bldg.)

DIVISION VOUCHER NO.
 9 Jan. 67 3647

Request payment be made and/or transaction be recorded as indicated below. Pertinent documentation in support of this transaction is on file in this office.

SUBJECT: *Goodyear Aerospace Corporation*
 PAYMENT TO: *Goodyear Aerospace Corporation*
 AMOUNT: *\$ 161,185.05*
 INVOICE NO(S): *10 411*
 CONTRACT NO.: *64-6744*
 CHECK TO BE DATED

CASH PAYMENT U.S. TREASURY CHECK AGENT CASHIER CHECK BANK CASHIER'S CHECK

THE ATTACHED CHECKS AND/OR CASH IN THE AMOUNT OF \$ SHOULD BE TAKEN INTO ACCOUNT AS INDICATED BELOW.

I HEREBY AUTHORIZE MY AGENT, WHOSE SIGNATURE APPEARS BELOW, TO RECEIVE \$ OF OFFICIAL FUNDS IN CURRENCY ON MY BEHALF.

DATE SIGNATURE OF PAYEE DATE SIGNATURE OF AGENT DATE SIGNATURE OF RECIPIENT

DESCRIPTION - ALL OTHER ACCOUNTS 13 - 33		34 - 39 STATION CODE	40 - 41 E X C P O N E D	42 - 47 OBLIG. REF. NO. ADVANCE ACCT. NO. EMP. NO.	48 - 49 PAY PER. LIQ. CODE	50 CA OR C O S T YR.	51 - 54 GENERAL LEDGER ACCT. NO.	55 - 66 ALLOT. - COST - FAN ACCOUNT SYMBOL	61 - 66 CK. NO. X REF. NO.	67 - 70 OBJECT CLASS	68 - 70 DUE DATE	71 - 80 AMOUNT	
DESCRIPTION - ADVANCE ACCOUNTS 13 - 27	SHIP. DOC. NO. 28 - 33 T/A NO. 7/A NO.	REC. RPT. NO. PROJECT NO.										DEBIT CREDIT	
<i>Goodyear</i>				<i>88 006744</i>			<i>1 601.0 77</i>	<i>61- 1021</i>	<i>2540</i>			<i>161,185.05</i>	
<i>Goodyear</i>							<i>138.0</i>					<i>161,185.05</i>	
<i>Original of Address Contact CW-6744 Voucher</i>													
TOTALS											<i>161,185.05</i>	<i>161,185.05</i>	

DATE *Jan 67* DATE REVIEWED BY DATE

SECRET

EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

FEDERAL GOVERNMENT VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

VOUCHER NO. _____

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION	DATE VOUCHER PREPARED	SCHEDULE NO.	
	CONTRACT NUMBER AND DATE CW-6744		PAID BY
	REQUISITION NUMBER AND DATE		

PAYEE'S NAME AND ADDRESS Goodyear Aerospace Corp.	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER
	GOVERNMENT B/L NUMBER

SHIPPED FROM _____ TO _____ WEIGHT _____

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUANTITY	UNIT PRICE		AMOUNT
				COST	PER	
		10 (Orig. Inv. Att.)				\$ 69,108.39
		11 " "				92,076.66

(Use continuation sheet(s) if necessary) **(Payee must NOT use the space below)**

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE = \$1.00	TOTAL	\$161,185.05
	BY:		DIFFERENCES	
	TITLE		Amount verified; correct for	161,185.05
			(Signature or initials)	

Pursuant to authority vested in _____ (Contracting Officer) STAT

9 JAN 1967

ACCOUNTING CLASSIFICATION

PAID BY	CHECK NUMBER ON TREASURER OF THE UNITED STATES	CHECK NUMBER ON (Name of bank)
	CASH DATE	PAYEE

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

USFI 2910
3 pages

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 7 GAO 5000
 1034-110-06
 FEDERAL VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION DEPARTMENT FOR THE ARMY U.S. GOVERNMENT	DATE VOUCHER PREPARED December 28, 1966	VOUCHER NUMBER 10
	CONTRACT NUMBER AND DATE JAN 2 11 42 AM '67	PAID BY
REQUISITION NUMBER AND DATE		

PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION Akron, Ohio 44315	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER
	GOVERNMENT B/L NUMBER

CA-6744

SHIPPED FROM	TO	WEIGHT
--------------	----	--------

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUANTITY	UNIT PRICE		AMOUNT (1)
				COST	PER	
	11/14/66 thru 11/30/66	Direct Charges Overhead G & A Expense Fixed Fee		Current		To-Date
				\$35,439.86	/	\$264,192.51
				24,691.64	/	168,328.39
				4,155.38	/	37,367.53
				4,821.51	/	35,241.63
(MO 8116AR)		COST REIMBURSABLE PROVISIONAL PAYMENT		\$69,108.39	→	

(Use continuation sheet(s) if necessary) (Payee must NOT use the space below) TOTAL \$505,130.06

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
	= \$	= \$1.00	
	BY ?		
	TITLE		Amount verified; correct for <i>(Signature or initials)</i>

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

 (Date) (Authorized Certifying Officer)² (Title)

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)								
Appropriation Symbol and Subhead	Object Class	Expenditure Account	Chargeable Activity	Bureau Cont. or Subauth'n Activity	Bureau Control No.	Sub-auth'n No.	Identification No.	Amount

PAID BY	CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER	ON (Name of bank)
	CASH	DATE	PAYEE'S	
	\$			

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

Standard Form No. 1035
7 GAO 5000
1035-107

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

CONTINUATION SHEET

SHEET NO. 1

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT U.S. GOVERNMENT		VOUCHER NUMBER 10				
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN- TITY	UNIT PRICE		AMOUNT
				COST	PER	
	11/14/66 thru 11/30/66	DIRECT CHARGES		Current		To-Date
		Salaries & Wages				
		Regular		\$21,951.87		\$165,914.16
		Overtime Premium		318.92		3,886.82
				\$22,300.79		\$169,800.98
		<u>Material Subject to Material Handling Expense</u>				
		Purchases - Fixed Price		\$ 9,233.97		\$ 57,251.07
		Sub-Contract		342.90		342.90
		Paints & Solvents		142.35		342.03
		Stores Material		64.17		216.28
		Plant Engineering Make Ready		-		-
		Material Transfers		1,186.66		6,711.47
				\$10,970.05		\$ 64,863.75
		<u>Material Not Subject to Handling Expense</u>				
		IBM Computer Charge		\$ 242.07		\$ 719.07
		Other Direct Charges		106.54		360.45
				\$ 348.61		\$ 1,079.52
		Total Material		\$11,318.66		\$ 65,943.27
		<u>Travel</u>		\$ 1,820.41		\$ 28,448.26
		TOTAL DIRECT CHARGES		\$35,439.86		\$264,192.51

Standard Form No. 1035
7 GAO 5000
1035-107

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

CONTINUATION SHEET

SHEET NO. 2

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT					VOUCHER NUMBER	
U.S. GOVERNMENT					10	
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
	11/14/66 thru 11/30/66	OVERHEAD				
		<u>Burden Center</u>	<u>Salaries & Wages</u>	<u>Rate</u>	<u>Burden</u>	<u>To-Date</u>
	501	Engr. Support	\$ 7,270.22	.8291248	\$ 6,027.92	\$ 49,225.16
	501	Akron Engr. Support	-	-	-	261.29
	503	Engr.	4,634.69	.9491897	4,399.20	32,193.12
	503	Akron Engr.	-	-	-	1,127.97
	507	Akron Shipping	-	-	-	22.58
	511	Plant Engr.	60.61	.8445801	51.19	209.40
	511	Akron Plant Engr.	-	-	-	37.63
	517	Metalcraft	3,729.13	1.9960795	7,443.64	38,046.10
	517	Akron Metalcraft	-	-	-	1,757.01
	519	Plastics	175.21	1.8205582	318.98	1,331.46
	519	Akron Plastics	-	-	-	493.58
	521	Electronic Assy.	1,639.67	1.4381613	2,358.11	9,569.37
	521	Akron Elec. Assy.	-	-	-	1,238.70
	531	Qual. Control	383.41	.7906680	303.15	1,258.77
	531	Akron Qual. Control	-	-	-	75.26
	534	Engineering Field Service-	-	-	-	53.78
	573	Off Site	4,058.93	.5866965	2,381.36	22,419.51
			\$21,951.87		\$23,283.55	\$159,320.69
		<u>Material Handling Expense</u>			\$ 1,408.09	\$ 9,007.70
		TOTAL OVERHEAD			\$24,691.64	\$168,328.39
		<u>G & A Expense</u>			\$ 4,155.38	\$ 37,367.53
		Fixed Fee @ 7.5%			\$ 4,821.51	\$ 35,241.63

55 F-1-2911
3 pages

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION DEPARTMENT OF THE NAVY U.S. GOVERNMENT		DATE VOUCHER PREPARED December 28, 1966	VOUCHER NUMBER 11
JAN 6		CONTRACT NUMBER AND DATE 11-10-66	PAID BY
		REQUISITION NUMBER AND DATE	

PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION Akron, Ohio 44315	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER
	GOVERNMENT B/L NUMBER

CW-6744

SHIPPED FROM _____ TO _____ WEIGHT _____

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUANTITY	UNIT PRICE		AMOUNT (?)
				COST	PER	
	12/1/66 thru 12/18/66	Direct Charges Overhead G & A Expense Fixed Fee		Current		To-Date
				\$49,124.74 /		\$313,317.25
				30,330.46 /		198,658.85
				6,197.51 /		43,565.04
				6,423.95 /		41,665.58
		(MO 8146AR) COST REIMBURSABLE PROVISIONAL PAYMENT				
					\$92,076.66	

(Use continuation sheet(s) if necessary) (Payee must NOT use the space below) TOTAL \$597,206.72

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE = \$1.00	DIFFERENCES
	= \$		
	BY ²		
	TITLE		Amount verified; correct for
			(Signature or initials)

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

(Date) _____ (Authorized Certifying Officer)² _____ (Title) _____

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)								
Appropriation Symbol and Subhead	Object Class	Expenditure Account	Chargeable Activity	Bureau Cont. or Subauth'n Activity	Bureau Control No.	Sub-auth'n No.	Identification No.	Amount

PAID BY	CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER	ON (Name of bank)
	CASH	DATE	PAYEE ³	

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

Standard Form No. 1035
7 GAO 5000
1035-107**PUBLIC VOUCHER FOR PURCHASES AND
SERVICES OTHER THAN PERSONAL**

CONTINUATION SHEET

SHEET NO. 1

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT

U.S. GOVERNMENT

VOUCHER NUMBER

11

NUMBER 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	UNIT PRICE		AMOUNT
				COST	PER	
	12/1/66 thru 12/18/66	DIRECT CHARGES		Current		To-Date
		Salaries & Wages				
		Regular		\$26,450.24		\$192,364.40
		Overtime Premium		397.17		4,283.99
				\$26,847.41		\$196,648.39
		<u>Material Subject to Material Handling Expense</u>				
		Purchases - Fixed Price		\$18,333.00		\$ 75,584.07
		Sub-Contract		-0-		342.90
		Paints & Solvents		-0-		342.03
		Stores Material		-0-		216.28
		Plant Engineering Make Ready		-0-		-0-
		Material Transfers		-0-		6,711.47
				\$18,333.00		\$ 83,196.75
		<u>Material Not Subject to Handling Expense</u>				
		IBM Computer Charge		-0-		\$ 719.07
		Other Direct Charges		-0-		360.45
				\$ -0-		\$ 1,079.52
		Total Material		\$18,333.00		\$ 84,276.27
		<u>Travel</u>		\$ 3,944.33		\$ 32,392.59
		TOTAL DIRECT CHARGES		\$49,124.74		\$313,317.25

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 2

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT
U.S. GOVERNMENT

VOUCHER NUMBER
11

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUANTITY	UNIT PRICE		AMOUNT
				COST	PER	
	12/1/66 thru 12/18/66	OVERHEAD				
		<u>Burden Center</u>	<u>Rate</u>	<u>Burden</u>	<u>To-Date</u>	
		Salaries & Wages				
		501 Engr. Support	\$10,113.18	.9346734	\$ 9,452.52	\$ 58,677.68
		501 Akron Engr. Support	-	-	-	261.29
		503 Engineering	7,266.23	.9837398	7,148.08	39,341.20
		503 Akron Engr.	-	-	-	1,127.97
		507 Akron Shipping	-	-	-	22.58
		511 Plant Engr.	69.09	.8694457	60.07	269.47
		511 Akron Plant Engr.	-	-	-	37.63
		517 Metalcraft	3,288.56	2.0599350	6,774.22	44,820.32
		517 Akron Metalcraft	-	-	-	1,757.01
		519 Plastics	186.58	1.8079108	337.32	1,668.78
		519 Akron Plastics	-	-	-	493.58
		521 Electronic Assy.	901.17	1.4337694	1,292.07	10,861.44
		521 Akron Elec. Assy.	-	-	-	1,238.70
		531 Qual. Control	484.70	.8604498	417.06	1,675.83
		531 Akron Qual. Control	-	-	-	75.26
		534 Engineering Field Service-	-	-	-	53.78
		573 Off Site	4,140.73	.5955061	2,465.83	24,885.34
			\$26,450.24		\$27,947.17	\$187,267.86
		<u>Material Handling Expense</u>			\$ 2,383.29	\$ 11,390.99
		TOTAL OVERHEAD			\$30,330.46	\$198,658.85
		<u>G & A Expense</u>			\$ 6,197.51	\$ 43,565.04
		7.8% of Manufacturing Expense			\$ 6,423.95	\$ 41,665.58
		Fixed Fee @ 7.5%				

SECRET
(When Filled In)

REQUEST FOR PAYMENT AND POSTING VOUCHER										VOUCHER NO. - DATE 2-12	
TO : Accounts Division (Room Bldg.)		THROUGH: Monetary Division (Room Bldg.)								DIVISION VOUCHER NO. 1 Dec. 66 2934	
Request payment be made and/or transaction be recorded as indicated below. Pertinent documentation in support of this transaction is on file in this office.											
SUBJECT								INVOICE NO(S). 8 and 9			
PAYMENT TO <i>Goodman Aerospace Corporation</i>								CONTRACT NO. CW-6744			
AMOUNT \$135,394.74								CHECK TO BE DATED			
CASH PAYMENT <input type="checkbox"/>		U.S. TREASURY CHECK <input checked="" type="checkbox"/>		AGENT CASHIER CHECK <input type="checkbox"/>		BANK CASHIER'S CHECK <input type="checkbox"/>					
THE ATTACHED CHECKS AND/OR CASH IN THE AMOUNT OF \$ SHOULD BE TAKEN INTO ACCOUNT AS INDICATED BELOW.											
I HEREBY AUTHORIZE MY AGENT, WHOSE SIGNATURE APPEARS BELOW, TO RECEIVE \$ OF OFFICIAL FUNDS IN CURRENCY ON MY BEHALF.											
DATE		SIGNATURE OF PAYEE		DATE		SIGNATURE OF AGENT		DATE		SIGNATURE OF RECIPIENT	
DESCRIPTION - ALL OTHER ACCOUNTS 13 - 33		34 - 39 STATION CODE		40 - 41 E X C O D E		42 - 47 OBLIG. REF. NO.		48 - 49 PAY PER. LIO. CODE		50 - 54 CA OR C O S T YR.	
DESCRIPTION - ADVANCE ACCOUNTS 13 - 27		SHIP. DOC. NO.		REC. RPT. NO.		ADVANCE ACCT. NO.		GENERAL LEDGER ACCT. NO.		55 - 66 ALLOT. - COST - FAN ACCOUNT SYMBOL	
		32-33 DIV.		PROJECT NO.		EMP. NO.				61 - 66 CK. NO.	
										68 - 70 DUE DATE	
										DEBIT	
										CREDIT	
<i>Goodman</i>				88		006744		16610		77 61-1021 2546	
<i>Goodman</i>								1380		135,394.74	
										135,394.74	
<i>Original of 1 Addresser Contract CW-6744 Voucher</i>											
TOTALS										135,394.74	
DATE		DATE		REVIEWED BY		CERTIFIED FOR PAYMENT OR CREDIT		DATE		SIGNATURE OF CERTIFYING OFFICER	
<i>12 Dec 66</i>						25X1		<i>(Signed)</i>		25X1	

Standard Form No. 1034 7 C 5000 1034-111		PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL			VOUCHER NO.
U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION		DATE VOUCHER PREPARED		SCHEDULE NO.	
		CONTRACT NUMBER AND DATE CW-6744		PAID BY	
		REQUISITION NUMBER AND DATE			
PAYEE'S NAME AND ADDRESS	Goodyear Aerospace Corporation				DATE INVOICE RECEIVED
	Goodyear, Arizona				DISCOUNT TERMS
					PAYEE'S ACCOUNT NUMBER
					GOVERNMENT B/L NUMBER
SHIPPED FROM		TO		WEIGHT	
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE	
				COST	PER
		Invoice Numbers			
		8 (Orig Inv attached)			72,835.95
		9 " " "			62,558.79
(Payee must NOT use the space below)					TOTAL
					135,394.74
PAYMENT:		APPROVED FOR		EXCHANGE RATE	
<input type="checkbox"/> COMPLETE		= \$		= \$1.00	
<input type="checkbox"/> PARTIAL		BY ²		DIFFERENCES	
<input type="checkbox"/> FINAL				Amount verified; correct for <i>(Signature or initials)</i> <i>[Signature]</i>	
<input type="checkbox"/> PROGRESS					
<input type="checkbox"/> ADVANCE					
		TITLE		\$135,394.74	
Pursuant to authority vested in me as STAT					
DEC 1966		<i>(Authorized Certifying Officer)</i>		CONTRACTING OFFICER <i>(Title)</i>	
ACCOUNTING CLASSIFICATION					
PAID BY	CHECK NUMBER ON TREASURER OF THE UNITED STATES			CHECK NUMBER ON <i>(Name of bank)</i>	
	CASH DATE			PAYEE ³	
	\$				
¹ When stated in foreign currency, insert name of currency. ² 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 in the space provided, over his official title. ³ When a voucher is 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.				PER	
				TITLE	

Sanitized Copy Approved for Release 2010/12/09 : CIA-RDP72B00464R000800100001-6
Standard Form 100-1007
7 GAO 5000
1034-10-04
PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION DEPARTMENT OF THE NAVY U.S. GOVERNMENT	DATE VOUCHER PREPARED November 23, 1966	VOUCHER NUMBER 8
	CONTRACT NUMBER AND DATE	PAID BY
	REQUISITION NUMBER AND DATE	

PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION Akron, Ohio 44315 <i>CW-6744</i>	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER
	GOVERNMENT B/L NUMBER

SHIPPED FROM _____ TO _____ WEIGHT _____

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUANTITY	UNIT PRICE		AMOUNT (1)
				COST	PER	
(MO 8146AR)	10/17/66 thru 10/31/66	Direct Charges Overhead G & A Expense Fixed Fee COST REIMBURSABLE PROVISIONAL PAYMENT →		Current		To-Date
				\$38,151.11	\$196,576.21	
				24,220.34	122,325.86	
				5,382.92	28,505.26	
				5,081.58	26,055.55	
				\$72,835.95		

(Use continuation sheet(s) if necessary) (Payee must NOT use the space below) TOTAL \$373,462.88

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
	= \$	= \$1.00	
	BY ?		
	TITLE	Amount verified; correct for	
		(Signature or initials)	

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

(Date) (Authorized Certifying Officer) 2 (Title)

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

Appropriation Symbol and Subhead	Object Class	Expenditure Account	Chargeable Activity	Bureau Cont. or Subauth'n Activity	Bureau Control No.	Sub-auth'n No.	Identification No.	Amount

PAID BY	CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER	ON (Name of bank)
	CASH	DATE	PAYEE 3	
	\$			

1 When stated in foreign currency, insert name of currency.
 2 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 in the space provided, over his official title.
 3 When a voucher is 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.

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 1

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT
U.S. GOVERNMENT

VOUCHER NUMBER
8

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN- TITY	UNIT PRICE		AMOUNT
				COST	PER	
	10/17/66 thru 10/31/66	DIRECT CHARGES				
				<u>Current</u>		<u>To-Date</u>
		Salaries & Wages				
		Regular		\$23,636.49		\$125,936.50
		Overtime Premium		435.31		3,059.69
				\$24,071.80		\$128,996.19
		<u>Material Subject to Material Handling Expense</u>				
		Purchases - Fixed Price		\$ 8,806.83		\$ 38,929.10
		Sub-Contract		-		-
		Paints & Solvents		127.18		199.68
		Stores Material		30.85		152.11
		Plant Engineering Make Ready		-		-
		Material Transfers		1,315.14		5,524.81
				\$10,280.00		\$ 44,805.70
		<u>Material Not Subject to Handling Expense</u>				
		IBM Computer Charge		\$ 159.00		\$ 477.00
		Other Direct Charges		79.33		253.91
				\$ 238.33		\$ 730.91
		Total Material		\$10,518.33		\$ 45,536.61
		<u>Travel</u>		\$ 3,560.98		\$ 22,043.41
		TOTAL DIRECT CHARGES		\$38,151.11		\$196,576.21

Standard Form No: 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 2

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT
U.S. GOVERNMENT

VOUCHER NUMBER
8

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
	10/17/66 thru 10/31/66	OVERHEAD				
		<u>Burden Center</u>				
		<u>Salaries & Wages</u>	<u>Rate</u>	<u>Burden</u>	<u>To-Date</u>	
501		Engr. Support	\$ 7,679.51	.8827647	\$ 6,779.20	\$ 37,386.17
501		Akron Engr. Support	125.10	.7684253	96.13	261.29
503		Engineering	4,917.75	.8449553	4,155.28	23,574.66
503		Akron Engr.	681.59	1.0721548	730.77	1,127.97
507		Akron Shipping	12.16	1.1603618	14.11	22.58
511		Plant Engr.	113.14	.8666254	98.05	136.93
511		Akron Plant Engr.	37.24	.8861439	33.00	37.63
517		Metalcraft	2,763.59	1.6256102	4,492.52	24,566.15
517		Akron Metalcraft	463.12	1.7776602	823.27	1,757.01
519		Plastics	159.21	2.0001884	318.45	813.04
519		Akron Plastics	89.60	1.4262277	127.79	493.58
521		Electronic Assy.	1,306.06	1.3660858	1,784.19	5,270.48
521		Akron Elec. Assy.	551.12	1.5082378	831.22	1,238.70
531		Qual. Control	216.26	.9119116	197.21	688.32
531		Akron Qual. Control	66.96	.7048984	47.20	75.26
534		Engr. Field Service	-	-	-	53.78
573		Off Site	4,454.08	.4937765	2,199.32	18,404.14
			\$23,636.49	-	\$22,727.71	\$115,907.69
		<u>Material Handling Expense</u>			\$ 1,492.63	\$ 6,418.17
		TOTAL OVERHEAD			\$24,220.34	\$122,325.86
		<u>G & A Expense</u>			\$ 5,382.92	\$ 28,505.26
		Fixed Fee @ 7.5%			\$ 5,081.58	\$ 26,055.55

SP-1-0101
COOP 1

Sanitized Copy Approved for Release 2010/12/09 : CIA-RDP72B00464R000800100001-6
PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

Standard Form No. 1097
 GAO 3000
 108-10-04

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION DEPARTMENT OF THE NAVY U.S. GOVERNMENT	DATE VOUCHER PREPARED November 23, 1966	VOUCHER NUMBER 9
	CONTRACT NUMBER AND DATE	PAID BY
	REQUISITION NUMBER AND DATE	

PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION Akron, Ohio 44315	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER
	GOVERNMENT B/L NUMBER

Ch-6744

SHIPPED FROM	TO	WEIGHT
--------------	----	--------

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT (1)	
				COST	PER		
	11/1/66 thru 11/13/66	Direct Charges Overhead G & A Expense Fixed Fee		<u>Current</u>		<u>To-Date</u>	
				\$32,176.44		\$228,752.65	
				21,310.89		143,636.75	
				4,706.89		33,212.15	
				4,364.57		30,420.12	
(M) 3146AR)		COST REIMBURSABLE PROVISIONAL PAYMENT →		\$62,558.79			
(Use continuation sheet(s) if necessary) (Payee must NOT use the space below)						TOTAL	\$436,021.67

PAYMENT:	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
<input type="checkbox"/> COMPLETE	= \$	= \$1.00	
<input type="checkbox"/> PARTIAL	BY 2		
<input type="checkbox"/> FINAL			
<input type="checkbox"/> PROGRESS	TITLE	Amount verified; correct for	
<input type="checkbox"/> ADVANCE		(Signature or initials)	

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

(Date) _____ (Authorized Certifying Officer) _____ (Title) _____

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

Appropriation Symbol and Subhead	Object Class	Expenditure Account	Chargeable Activity	Bureau Cont. or Subauth'n Activity	Bureau Control No.	Sub-auth'n No.	Identifi-cation No.	Amount

PAID BY	CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER	ON (Name of bank)
	CASH	DATE	PAYEE 3	
	\$			

1 When stated in foreign currency, insert name of currency.
 2 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 in the space provided, over his official title.
 3 When a voucher is 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.

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 1

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT					VOUCHER NUMBER	
U.S. GOVERNMENT					9	
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
	11/1/66 thru 11/13/66	DIRECT CHARGES				
				<u>Current</u>	<u>To-Date</u>	
		Salaries & Wages				
		Regular		\$18,025.79		\$143,962.29
		Overtime Premium		478.21		3,537.90
				\$18,504.00		\$147,500.19
		<u>Material Subject to Material Handling Expense</u>				
		Purchases - Fixed Price		\$ 9,088.00		\$ 48,017.10
		Sub-Contract		-		-
		Paints & Solvents		-		199.68
		Stores Material		-		152.11
		Plant Engineering Make Ready		-		-
		Material Transfers		-		5,524.81
				\$ 9,088.00		\$ 53,893.70
		<u>Material Not Subject to Handling Expense</u>				
		IBM Computer Charge		\$ -		\$ 477.00
		Other Direct Charges		-		253.91
				-0-		\$ 730.91
		Total Material		\$ 9,088.00		\$ 54,624.61
		<u>Travel</u>		\$ 4,584.44		\$ 26,627.85
		TOTAL DIRECT CHARGES		\$32,176.44		\$228,752.65

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 2

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT					VOUCHER NUMBER	
U.S. GOVERNMENT					9	
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
	11/1/66 thru 11/13/66	OVERHEAD				
		<u>Burden Center</u>				
		Salaries & Wages	Rate	Burden	To Date	
501		Engr. Support	\$ 5,992.67	.9696963	\$ 5,811.07	\$ 43,197.24
501		Akron Engr. Support	-	-	-	261.29
503		Engineering	4,260.96	.9902135	4,219.26	27,793.92
503		Akron Engr.	-	-	-	1,127.97
507		Akron Shipping	-	-	-	22.58
511		Plant Engr.	23.52	.9047619	21.28	158.21
511		Akron Plant Engr.	-	-	-	37.63
517		Metalcraft	3,008.64	2.0063251	6,036.31	30,602.46
517		Akron Metalcraft	-	-	-	1,757.01
519		Plastics	114.81	1.7371309	199.44	1,012.48
519		Akron Plastics	-	-	-	493.58
521		Electronic Assy.	1,393.50	1.3927377	1,940.78	7,211.26
521		Akron Elec. Assy.	-	-	-	1,238.70
531		Qual. Control	308.70	.8658892	267.30	955.62
531		Akron Qual. Control	-	-	-	75.26
534		Engr. Field Service	-	-	-	53.78
573		Off Site	2,922.99	.5590200	1,634.01	20,038.15
			\$18,025.79	-	\$20,129.45	\$136,037.14
		<u>Material Handling Expense</u>			\$ 1,181.44	\$ 7,599.61
		TOTAL OVERHEAD			\$21,310.89	\$143,636.75
		<u>G & A Expense</u>				
		8.8% of Manufacturing Expense			\$ 4,706.89	\$ 33,212.15
		Fixed Fee @ 7.5%			\$ 4,364.57	\$ 30,420.12

SECRET
(When Filled In)

REQUEST FOR PAYMENT AND POSTING VOUCHER										VOUCHER NO. - DATE 2-12													
TO : Accounts Division (Room) Bldg.)		THROUGH: Monetary Division (Room) Bldg.)								DIVISION VOUCHER NO. 3 Nov. 66 2442													
Request payment be made and/or transaction be recorded as indicated below. Pertinent documentation in support of this transaction is on file in this office.																							
SUBJECT								INVOICE NO(S). <i>6 and 7</i>															
PAYMENT TO <i>Goodyear Aerospace Corp.</i>								CONTRACT NO. <i>CW-6744</i>															
AMOUNT <i>\$135,923.71</i>								CHECK TO BE DATED															
CASH PAYMENT <input checked="" type="checkbox"/>			U.S. TREASURY CHECK			AGENT CASHIER CHECK			BANK CASHIER'S CHECK														
THE ATTACHED CHECKS AND/OR CASH IN THE AMOUNT OF \$ SHOULD BE TAKEN INTO ACCOUNT AS INDICATED BELOW.																							
I HEREBY AUTHORIZE MY AGENT, WHOSE SIGNATURE APPEARS BELOW, TO RECEIVE \$						OF OFFICIAL FUNDS IN CURRENCY ON MY BEHALF.																	
DATE	SIGNATURE OF PAYEE			DATE	SIGNATURE OF AGENT			DATE	SIGNATURE OF RECIPIENT														
DESCRIPTION - ALL OTHER ACCOUNTS 13 - 33		28 - 33 7/A NO.		34 - 39 STATION CODE		40 - 41 E C X P O S E D N E		42 - 47 OBLIG. REF. NO.		48 - 49 PAY PER. LIQ. CODE		50 CA OR C O S T Y R.		51 - 54 GENERAL LEDGER ACCT. NO.		55 - 66 ALLOT. - COST - FAN ACCOUNT SYMBOL		67 - 70 OBJECT CLASS		71 - 80 AMOUNT			
ADVANCE ACCOUNTS 13 - 27		SHIP. DOC. NO.		REC. RPT. NO.		PROJECT NO.		ADVANCE ACCT. NO.		EMP. NO.						61 - 66 CK. NO.		68 - 70 DUE DATE		DEBIT		CRED. T	
<i>Goodyear</i>						<i>88</i>		<i>006744</i>				<i>1601.077</i>		<i>61-1021</i>		<i>2540</i>		<i>135,923.71</i>					
<i>Goodyear</i>												<i>138.0</i>										<i>135,923.71</i>	
										TOTALS		<i>135,923.71</i>		<i>135,923.71</i>									
DATE <i>3 Nov 66</i>		REVIEWED BY			CERTIFIED FOR PAYMENT OR CREDIT			DATE <i>3 NOV 1966</i>		SIGNATURE OF CERTIFYING OFFICER <i>(Signed)</i>													

Stand... 7 GAO 5000 1034-111	PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL	VOUCHER NO. 1
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U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION	DATE VOUCHER PREPARED CONTRACT NUMBER AND DATE CW-6744 REQUISITION NUMBER AND DATE	SCHEDULE NO. PAID BY
--------------------------------------------------------	------------------------------------------------------------------------------------------------------------	-----------------------------

PAYEE'S NAME AND ADDRESS <div style="border: 1px solid black; padding: 10px; text-align: center;"> Goodyear Aerospace Corp. </div>	DATE INVOICE RECEIVED DISCOUNT TERMS PAYEE'S ACCOUNT NUMBER
-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------

SHIPPED FROM	TO	WEIGHT	GOVERNMENT B/L NUMBER
--------------	----	--------	-----------------------

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT <small>(1)</small>
				COST	PER	
		6 (Orig. Inv. Att.)				\$ 73,957.07
		7 " "				61,966.64

(Use continuation sheet(s) if necessary) (Payee must NOT use the space below) **TOTAL \$135,923.71**

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR _____ BY " _____ TITLE _____	EXCHANGE RATE = \$1.00	DIFFERENCES _____	Amount verified; correct for 135,923.71 (Signature or initials) <i>[Signature]</i>
----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------------------------------------	------------------------	-------------------	----------------------------------------------------------------------------------------------

Pursuant to authority of 2 NOV 1965 STAT _____
 _____ (Contracting Officer)

ACCOUNTING CLASSIFICATION

PAID BY	CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER	ON (Name of bank)
	CASH	DATE	PAYEE'S	

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

52F-4-2681
 Page 6

Sanitized Copy Approved for Release 2010/12/09 : CIA-RDP72B00464R000800100001-6
 Standard Form No. 1054
 7 GAO 5800
 1034-111
PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL
 VOUCHER NO. 6

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION U.S. GOVERNMENT	DATE VOUCHER PREPARED October 26, 1966	SCHEDULE NO. 6
NOV 2 1 44 PM '66	CONTRACT NUMBER AND DATE	PAID BY
	REQUISITION NUMBER AND DATE	

PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION Akron, Ohio 44315 CW 16744	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER
	GOVERNMENT B/L NUMBER

SHIPPED FROM _____ TO _____ WEIGHT _____

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUANTITY	UNIT PRICE		AMOUNT <i>(1)</i>
				COST	PER	
	9/19/66 thru 9/30/66	Direct Charges		Current		To-Date
		Overhead		\$39,017.83		\$26,749.48
		G & A Expense		24,098.94		76,897.30
		Fixed Fee		5,680.51		18,362.79
				5,159.79		16,650.72
(MO 8146AR)		COST REIMBURSABLE PROVISIONAL PAYMENT		\$72,957.07		

(Use continuation sheet(s) if necessary) **(Payee must NOT use the space below)** TOTAL \$238,660.29

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
	= \$	= \$1.00	
	BY :		
	TITLE		Amount verified; correct for <i>(Signature or initials)</i>

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

 (Date) (Authorized Certifying Officer)² (Title)

ACCOUNTING CLASSIFICATION

PAID BY	CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER	ON (Name of bank)
	CASH	DATE	PAYEE ³	
	\$			

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

Standard Form No. 1035
7 GAO 5000
1035-107

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

CONTINUATION SHEET

SHEET NO. 1

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT
U.S. GOVERNMENT

VOUCHER NUMBER
6

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
	9/19/66 thru 9/30/66	DIRECT CHARGES				
				Current		To-Date
		Salaries & Wages				
		Regular		\$19,854.81		\$83,107.32
		Overtime Premium		280.22		1,949.72
				<u>\$20,135.03</u>		<u>\$85,057.04</u>
		<u>Material Subject to Material Handling Expense</u>				
		Purchases - Fixed Price		\$13,254.10		\$21,027.27
		Sub-Contract		-		-
		Paints & Solvents		22.32		72.50
		Stores Material		119.43		121.26
		Plant Engineering Make Ready		-		-
		Material Transfers		2,606.29		4,209.67
				<u>\$16,015.14</u>		<u>\$25,430.70</u>
		<u>Material Not Subject to Handling Expense</u>				
		IBM Computer Charge		\$159.00		\$318.00
		Other Direct Charges		(38.43)		174.58
				<u>\$120.57</u>		<u>\$492.58</u>
		Total Material		\$16,135.71		\$25,923.28
		<u>Travel</u>		\$2,747.09		\$15,769.16
		TOTAL DIRECT CHARGES		\$39,017.83		\$126,749.48

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 2

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT
U.S. GOVERNMENT

VOUCHER NUMBER
6

NUMBER 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	UNIT PRICE		AMOUNT
				COST	PER	
	9/19/66 thru 9/30/66	OVERHEAD				
		<u>Burden Center</u>				
		<u>Salaries & Wages</u>	<u>Rate</u>		<u>Burden</u>	<u>To-Date</u>
010		Akron Wheel & Brake	-	-	-	-
501		Engr. Support	\$ 6,044.76	.9106118	\$ 5,504.43	\$23,842.08
501		Akron Engr. Support	202.25	.8166131	165.16	165.16
503		Engineering	4,223.03	.7092538	2,995.20	15,088.78
503		Akron Engr.	381.00	1.0425197	397.20	397.20
505		Akron Tooling	-	-	-	-
507		Akron Shipping	7.59	1.1159420	8.47	8.47
509		Akron Squadron	-	-	-	-
511		Plant Engr.	2.40	1.7125000	4.11	27.24
511		Akron Plant Engr.	4.76	.9726891	4.63	4.63
515		Akron Parts Mfg.	-	-	-	-
517		Metal Craft	2,785.99	2.4583864	6,849.04	14,562.98
517		Akron Metal Craft	570.55	1.6327228	931.55	933.74
519		Plastics	49.58	1.5437676	76.54	269.46
519		Akron Plastics	172.26	1.5742482	271.18	365.79
521		Electronic Assy.	428.10	1.2898622	552.19	2,390.24
521		Akron Elec. Assy.	280.44	1.2906147	361.94	407.48
523		Akron Missile & Rocket	-	-	-	-
531		Qual. Control	140.22	.7201114	100.96	263.50
531		Akron Qual. Control	37.20	.6849462	25.48	28.06
534		Engr. Field Service	160.14	.3358311	53.78	53.78
545		Fabric Assy.	-	-	-	-
573		Off Site	4,364.54	.7058865	3,080.87	14,163.62
670		Akron Off Site	-	-	-	-
			\$19,854.81	-	\$21,382.73	\$72,972.21
		<u>Material Handling Expense</u>			\$ 2,716.21	\$ 3,925.09
		TOTAL OVERHEAD			\$24,098.94	\$76,897.30
		G & A Expense			\$ 5,680.51	\$18,362.79
		9.0% of Manufacturing Expense				
		Fixed Fee @ 7.5%			\$ 5,159.79	\$16,650.72

551-2682
 100001-6
 3 pages

Sanitized Copy Approved for Release 2010/12/09 : CIA-RDP72B00464R000800100001-6
 Standard Form 1034
 7 GAO 5800
 1034-111
PURCHASE VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL
 VOUCHER NO. 7

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION U.S. GOVERNMENT	DATE VOUCHER PREPARED October 26, 1966	SCHEDULE NO. 7
	CONTRACT NUMBER AND DATE 14112N 66	
NOV 2	REQUISITION NUMBER AND DATE	

PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION Akron, Ohio 44315 <i>EW 6744</i>	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER
	GOVERNMENT B/L NUMBER

SHIPPED FROM _____ TO _____ WEIGHT _____

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT (1)
				COST	PER	
	10/1/66 thru 10/16/66	Direct Charges Overhead G & A Expense Fixed Fee		Current	/	To-Date
				\$31,675.62	/	\$158,425.10
				21,208.22	/	98,105.52
				4,759.55	/	23,122.34
				4,823.25	/	20,973.97
(MO 8146AR)		COST REIMBURSABLE PROVISIONAL PAYMENT →		\$61,966.64	/	

(Use continuation sheet(s) if necessary) **(Payee must NOT use the space below)** TOTAL \$300,626.93

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
	= \$	= \$1.00	
	BY 2		
	TITLE		Amount verified; correct for <i>(Signature or initials)</i>

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

 (Date) (Authorized Certifying Officer) 2 (Title)

ACCOUNTING CLASSIFICATION

PAID BY	CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER	ON (Name of bank)
	CASH	DATE	PAYEE 3	

1 When stated in foreign currency, insert name of currency.
 2 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 in the space provided, over his official title.
 3 When a voucher is 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.

Standard Form No. 1035
7 GAO 5000
1035-107

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

CONTINUATION SHEET

SHEET NO. 1

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT
U.S. GOVERNMENT

VOUCHER NUMBER
7

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
	10/1/66 thru 10/16/66	DIRECT CHARGES		<u>Current</u>		<u>To-Date</u>
		Salaries & Wages				
		Regular		\$19,192.69		\$102,300.01
		Overtime Premium		674.66		2,624.38
				\$19,867.35		\$104,924.39
		<u>Material Subject to Material Handling Expense</u>				
		Purchases - Fixed Price		\$ 9,095.00		\$ 30,122.27
		Sub-Contract		-		-
		Paints & Solvents		-		72.50
		Stores Material		-		121.26
		Plant Engineering Make Ready		-		-
		Material Transfers		-		4,209.67
				\$ 9,095.00		\$ 34,525.70
		<u>Material Not Subject to Handling Expense</u>				
		IBM Computer Charge		-		\$ 318.00
		Other Direct Charges		-		174.58
				-0-		\$ 492.58
		Total Material		\$ 9,095.00		\$ 35,018.28
		<u>Travel</u>		\$ 2,713.27		\$ 18,482.43
		TOTAL DIRECT CHARGES		\$31,675.62		\$158,425.10

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 2

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT U.S. GOVERNMENT						VOUCHER NUMBER 7	
NUMBER 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	UNIT PRICE		AMOUNT	
				COST	PER		
	10/1/66 thru 10/16/66	OVERHEAD					
		<u>Burden Center</u>		<u>Salaries & Wages</u>	<u>Rate</u>	<u>Burden</u>	<u>To-Date</u>
010		Akron Wheel & Brake	-	-	-	-	-
501		Engineering Support	\$ 7,608.11	.8891683	\$ 6,764.89	30,606.97	
501		Akron Engr. Support	-	-	-	165.16	
503		Engineering	4,477.40	.9672131	4,330.60	19,419.38	
503		Akron Engineering	-	-	-	397.20	
505		Akron Tooling	-	-	-	-	
507		Akron Shipping	-	-	-	8.47	
509		Akron Squadron	-	-	-	-	
511		Plant Engineering	13.36	.8712575	11.64	38.88	
511		Akron Plant Engr.	-	-	-	4.63	
515		Akron Parts Mfg.	-	-	-	-	
517		Metal Craft	2,581.35	2.1347938	5,510.65	20,073.63	
517		Akron Metal Craft	-	-	-	933.74	
519		Plastics	160.97	1.3985836	225.13	494.59	
519		Akron Plastics	-	-	-	365.79	
521		Electronic Assy.	816.61	1.3421952	1,096.05	3,486.29	
521		Akron Elec. Assy.	-	-	-	407.48	
523		Akron Missile & Rocket	-	-	-	-	
531		Quality Control	290.84	.7825952	227.61	491.11	
531		Akron Quality Control	-	-	-	28.06	
534		Engr. Field Service	-	-	-	53.78	
545		Fabric Assy.	-	-	-	-	
573		Off Site	3,244.05	.6292135	2,041.20	16,204.82	
670		Akron Off Site	-	-	-	-	
			\$19,192.69	-	\$20,207.77	\$93,179.98	
		<u>Material Handling Expense</u>			\$ 1,000.45	\$ 4,925.54	
		TOTAL OVERHEAD			\$21,208.22	\$98,105.52	
		<u>G & A Expense</u>					
		9.0% of Manufacturing Expense			\$ 4,759.55	\$23,122.34	
		Fixed Fee @ 7.5%			\$ 4,323.25	\$20,973.97	

SECRET
(When Filled In)

REQUEST FOR PAYMENT AND POSTING VOUCHER										VOUCHER NO. - DATE 2-12	
TO : Accounts Division (Room) Bldg.)		THROUGH: Monetary Division (Room) Bldg.)								DIVISION VOUCHER NO. 11 Oct 66 1842	
Request payment be made and/or transaction be recorded as indicated below. Pertinent documentation in support of this transaction is on file in this office.											
SUBJECT								INVOICE NO(S). 4 and 5			
PAYMENT TO Goodyear Aerospace Corp.								CONTRACT NO. CW-6744			
AMOUNT #95,348.33								CHECK TO BE DATED			
CASH PAYMENT		<input checked="" type="checkbox"/> U.S. TREASURY CHECK		AGENT CASHIER CHECK		BANK CASHIER'S CHECK					
THE ATTACHED CHECKS AND/OR CASH IN THE AMOUNT OF \$ SHOULD BE TAKEN INTO ACCOUNT AS INDICATED BELOW.											
I HEREBY AUTHORIZE MY AGENT, WHOSE SIGNATURE APPEARS BELOW, TO RECEIVE \$ OF OFFICIAL FUNDS IN CURRENCY ON MY BEHALF.											
DATE		SIGNATURE OF PAYEE		DATE		SIGNATURE OF AGENT		DATE		SIGNATURE OF RECIPIENT	
DESCRIPTION - ALL OTHER ACCOUNTS 13 - 33		34 - 39 STATION CODE		40 - 41		42 - 47 OBLIG. REF. NO.		48 - 49 PAY PER. LIO. CODE		50 CA OR C O S T YR.	
DESCRIPTION - ADVANCE ACCOUNTS 13 - 27		SHIP. DOC. NO.		REC. RPT. NO.		ADVANCE ACCT. NO.		GENERAL LEDGER ACCT. NO.		55 - 66 ALLOT. - COST - FAN ACCOUNT SYMBOL	
28 - 33 T/A NO.		32 - 33 DIV.		PROJECT NO.		EMP. NO.		61 - 66 CK. NO.		67 - 70 OBJECT CLASS	
								68 - 70 DUE DATE		71 - 80 AMOUNT	
										DEBIT	
										CREDIT	
Goodyear				88		006744		1601.077		61-1021 2540	
Goodyear								138.0		95,348.33	
										95,348.33	
TOTALS										95,348.33	
25X1											
DATE		REVIEWED BY		DATE							
10-10-66				11 OCT 1966							

Original
1 Address
1 Contract CW 6744
1 Voucher

Sanitized Copy Approved for Release 2010/12/09 : CIA-RDP72B00464R000800100001-6
 7 GAO 5000
 1034-111
PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION	DATE VOUCHER PREPARED	SCHEDULE NO.	
	CONTRACT NUMBER AND DATE CW-6744		PAID BY
	REQUISITION NUMBER AND DATE		

PAYEE'S NAME AND ADDRESS Goodyear Aerospace Corp.	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER
	GOVERNMENT B/L NUMBER

SHIPPED FROM _____ TO _____ WEIGHT _____

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT (1)
				COST	PER	
		4 (Orig. Inv. Att.)				\$50,739.88
		5 " "				44,608.45

(Use continuation sheet(s) if necessary) **(Payee must NOT use the space below)** **TOTAL \$95,348.33**

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE = \$1.00	DIFFERENCES
	BY :		
	TITLE		Amount verified; correct for \$95,348.33
	Pursuant to author 11 OCT 1966 (Date) _____ (Authorized Certifying Officer) _____ (Contracting Officer)		

ACCOUNTING CLASSIFICATION _____

PAID BY	CHECK NUMBER ON TREASURER OF THE UNITED STATES	CHECK NUMBER ON (Name of bank)
	CASH DATE	PAYEE ³

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

557-2616
241

Standard Form No. 1054
7 GAO 5000
1024-111

Sanitized Copy Approved for Release 2010/12/09 : CIA-RDP72B00464R000800100001-6

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

VOUCHER NO. 4

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION U.S. GOVERNMENT	DATE VOUCHER PREPARED September 30, 1966	SCHEDULE NO.
	CONTRACT NUMBER AND DATE Oct 6 12 05	PAID BY
REQUISITION NUMBER AND DATE		

PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION Akron, Ohio 44315	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER
	GOVERNMENT B/L NUMBER

ew 6744

SHIPPED FROM _____ TO _____ WEIGHT _____

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUANTITY	UNIT PRICE		AMOUNT (1)
				COST	PER	
	8/15/66 thru 8/31/66	Direct Charges Overhead G & A Expense Fixed Fee		Current		To-Date
				\$26,593.16		\$ 65,091.94
				16,732.02		37,368.13
				3,874.71		9,255.99
				3,539.99		8,378.71
		COST REIMBURSABLE PROVISIONAL PAYMENT		\$50,739.88		

(Use continuation sheet(s) if necessary) **(Payee must NOT use the space below)** TOTAL \$120,094.77

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
	= \$	= \$1.00	
	BY:		
	TITLE	Amount verified; correct for <i>(Signature or initials)</i>	

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

(Date) _____ (Authorized Certifying Officer) ² _____ (Title) _____

ACCOUNTING CLASSIFICATION

PAID BY	CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER	ON (Name of bank)
	CASH	DATE	PAYEE ³	
	\$			

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

Standard Form No. 1035
7 GAO 5000
1035-107

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

CONTINUATION SHEET

SHEET NO. 1

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT		U.S. GOVERNMENT			VOUCHER NUMBER	
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
	8/15/66 thru 8/31/66	DIRECT CHARGES		<u>Current</u>		<u>To-Date</u>
		Salaries & Wages				
		Regular		\$16,257.38		\$16,392.39
		Overtime Premium		429.44		1,278.57
				\$16,686.82		\$17,670.96
		<u>Material-Subject to Material Handling Expense</u>				
		Purchases - Fixed Price		\$ 5,831.52		\$ 6,094.17
		Paints & Solvents		24.78		37.18
		Stores Material		1.83		1.83
		Material Transfers		1,603.38		1,603.38
				\$ 7,461.51		\$ 7,736.56
		<u>Material-Not Subject to Material Handling Expense</u>				
		IBM Computer Charge		\$ 159.00		\$ 159.00
		Other Direct Charges		153.16		213.01
				\$ 312.16		\$ 372.01
		Total Material		\$ 7,773.67		\$ 8,108.57
		<u>Travel</u>		\$ 2,132.67		\$ 9,312.41
		TOTAL DIRECT CHARGES		\$26,593.16		\$65,091.94

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 2

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT
U.S. GOVERNMENT

VOUCHER NUMBER
4

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
	8/15/66 thru 8/31/66	OVERHEAD				
		<u>Burden Center</u>	<u>Salaries & Wages</u>	<u>Rate</u>	<u>Burden</u>	<u>To-Date</u>
501		Engineering Support	\$ 5,890.97	.8867029	\$ 5,223.54	\$13,221.98
503		Engineering	2,274.32	1.0297847	2,342.06	7,961.51
511		Plant Engineering	5.07	.6844181	3.47	11.56
517		Metalcraft	1,216.01	1.9250088	2,340.83	5,037.69
517		Akron Metalcraft	1.34	1.6343284	2.19	2.19
519		Plastics	102.09	1.2575179	128.38	192.92
519		Akron Plastics	61.18	1.5464204	94.61	94.61
521		Electronic Assembly	489.37	1.4666203	717.72	1,431.76
521		Akron Elec.Assembly	40.43	1.1263913	45.54	45.54
531		Quality Control	50.91	.8159497	41.54	85.53
531		Akron Qual. Control	3.61	.7146814	2.58	2.58
573		Off-Site	6,122.08	.7810483	4,781.64	8,256.07
			\$16,257.38		\$15,724.10	\$36,343.94
		<u>Material Handling Expense</u>			\$ 1,007.92	\$ 1,024.19
		TOTAL OVERHEAD			\$16,732.02	\$37,368.13
		<u>G & A Expense</u>			\$ 3,874.71	\$ 9,255.99
		Fixed Fee @ 7.5%			\$ 3,539.99	\$ 8,378.71

JSF-I-2617
Copy 1

Stand: Sanitized Copy Approved for Release 2010/12/09 : CIA-RDP72B00464R000800100001-6
 7 GAO 5000
 1034-111
PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL
 VOUCHER NO. 5

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION
 U.S. GOVERNMENT
 DATE VOUCHER PREPARED
 September 30, 1966
 CONTRACT NUMBER AND DATE
 REQUISITION NUMBER AND DATE
 Oct 6 12 05 11 66

PAYEE'S NAME AND ADDRESS
 GOODYEAR AEROSPACE CORPORATION
 Akron, Ohio 44315
 DATE INVOICE RECEIVED
 DISCOUNT TERMS
 PAYEE'S ACCOUNT NUMBER

EW 6744

SHIPPED FROM TO WEIGHT GOVERNMENT B/L NUMBER

NUMBER 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	UNIT PRICE		AMOUNT (1)
				COST	PER	
	9/1/66 thru 9/18/66	Direct Charges Overhead G & A Expense Fixed Fee		Current		To-Date
				\$22,639.71		\$ 87,731.65
				15,430.23		52,798.36
				3,426.29		12,682.28
				3,112.22		11,490.93
(MO 8146AR)		COST REIMBURSABLE PROVISIONAL PAYMENT		\$44,608.45		

(Use continuation sheet(s) if necessary) (Payee must NOT use the space below) TOTAL \$164,703.22

PAYMENT: APPROVED FOR EXCHANGE RATE DIFFERENCES
 COMPLETE = \$ = \$1.00
 PARTIAL BY 2
 FINAL TITLE
 PROGRESS Amount verified; correct for
 ADVANCE (Signature or initials)

Pursuant to authority vested in me, I certify that this voucher is correct and proper for payment.
 (Date) (Authorized Certifying Officer) 2 (Title)

ACCOUNTING CLASSIFICATION

PAID BY CHECK NUMBER ON TREASURER OF THE UNITED STATES CHECK NUMBER ON (Name of bank)
 CASH DATE PAYEE 3
 \$

1 When stated in foreign currency, insert name of currency.
 2 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 in the space provided, over his official title.
 3 When a voucher is received 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.
 PER
 TITLE

Standard Form No. 1035
7 GAO 5800
1035-107

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

CONTINUATION SHEET

SHEET NO. 1

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT U.S. GOVERNMENT					VOUCHER NUMBER 5	
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN- TITY	UNIT PRICE		AMOUNT
				COST	PER	
	9/1/66 thru 9/18/66	DIRECT CHARGES		<u>Current</u>		<u>To-Date</u>
		Salaries & Wages				
		Regular		\$16,860.12		\$63,252.51
		Overtime Premium		390.93		1,669.50
				<u>\$17,251.05</u>		<u>\$64,922.01</u>
		<u>Material-Subject to Material Handling Expense</u>				
		Purchases - Fixed Price		\$ 1,679.00		\$ 7,773.17
		Paints & Solvents		-		37.18
		Stores Material		-		1.83
		Material Transfers		-		1,603.38
				<u>\$ 1,679.00</u>		<u>\$ 9,415.56</u>
		<u>Material-Not Subject to Material Handling Expense</u>				
		IBM Computer Charge		-		\$ 159.00
		Other Direct Charges		-		213.01
				<u>-0-</u>		<u>\$ 372.01</u>
		Total Material		\$1,679.00		\$ 9,787.57
		<u>Travel</u>		\$3,709.66		\$13,022.07
		TOTAL DIRECT CHARGES		\$22,639.71		\$87,731.65

Standard Form No. 1035
7 GAO 5600
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 2

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT U.S. GOVERNMENT					VOUCHER NUMBER 5	
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
	9/1/66 thru 9/18/66	OVERHEAD				
		<u>Burden Center</u>				
		Salaries & Wages	Rate	Burden	To-Date	
501		Engineering Support	\$ 5,990.85	.8539139	\$ 5,115.67	\$18,337.65
503		Engineering	4,145.64	.9967267	4,132.07	12,093.58
511		Plant Engineering	14.99	.7718479	11.57	23.13
517		Metalcraft	1,391.65	1.9230769	2,676.25	7,713.94
517		Akron Metalcraft	-	-	-	2.19
519		Plastics	-	-	-	192.92
519		Akron Plastics	-	-	-	94.61
521		Electronic Assembly	288.81	1.4067726	406.29	1,838.05
521		Akron Elec.Assembly	-	-	-	45.54
531		Quality Control	95.35	.8076560	77.01	162.54
531		Akron Quality Control	-	-	-	2.58
573		Off-Site	4,932.83	.5730341	2,826.68	11,082.75
			<u>\$16,860.12</u>		<u>\$15,245.54</u>	<u>\$51,589.48</u>
		<u>Material Handling Expense</u>			\$ 184.69	\$ 1,208.88
		TOTAL OVERHEAD			\$15,430.23	\$52,798.36
		G & A Expense				
		9.0% of Manufacturing Expense			\$ 3,426.29	\$12,682.28
		Fixed Fee @ 7.5%			\$ 3,112.22	\$11,490.93

L-296 (6-65) 7243

CERTIFICATE OF SERVICE

CONTRACTOR				TO (MAJOR AIR COMMAND)				
CONTRACT XXXXXXXX CW6744 XXXXXXXX				DATE OF CERTIFICATE 8 September 1966				
1. NAME OF CTSP (LAST, FIRST AND MIDDLE)		2. AF UNIT 9th SRW		3. PERIOD OF CERTIFICATE (INCLUSIVE DATES) 1 Aug 1966 THRU 31 Aug 1966 STAT				
4. TOTAL DAYS COVERED THIS PERIOD 31	5a. LESS NON-WORK DAYS 8	4b. LESS VACATION 0 THRU THRU	5. LESS SICK TIME 0 THRU THRU	6. LESS CONTRACT HOLIDAYS 0	7. BILLABLE DAYS 23			
8. AUTHORIZED OVERTIME HOURS WORKED (NOT INCLUDED IN ITEM 7)								
DATE	TIME & ONE HALF	DOUBLE TIME	DATE	TIME & ONE HALF	DOUBLE TIME	DATE	TIME & ONE HALF	DOUBLE TIME
3 Aug. 66	2 Hrs.		17 Aug. 66	3 Hrs.				
4 Aug. 66	2 Hrs.		18 Aug. 66	2 Hrs.				
5 Aug. 66	2 Hrs.		19 Aug. 66	3 Hrs.				
12 Aug. 66	3 Hrs.		22 Aug. 66	2 Hrs.				
15 Aug. 66	2 Hrs.		24 Aug. 66	1 Hr.				
16 Aug. 66	6 Hrs.		26 Aug. 66	8 Hrs.				
9. DATES ON WHICH PREMIUM PAY SHIFTS WERE WORKED N/A								
10. TEMPORARY DUTY AWAY FROM HOME STATION (ENTER HOUR AND DATE OF DEPARTURE AND RETURN) N/A								
DEPARTED	RETURNED	DEPARTED	RETURNED	DEPARTED	RETURNED			
11. AUTHORIZED TRAVEL PERFORMED BY COMMERCIAL CARRIER (INCLUDING TAXICAB, ETC.) N/A								
INCLUSIVE DATES	FROM -	TO -	MODE	COST				
THRU								
THRU								
THRU								
12. AUTHORIZED PRIVATELY OWNED CONVEYANCE (EXCEPT ON-BASE MILEAGE)								
INCLUSIVE DATES	FROM -	TO -	TOLLS	MILES				
THRU								
THRU								
THRU								
THRU								
13. AUTHORIZED ON-BASE MILEAGE BY PRIVATELY-OWNED CONVEYANCE: MILES 529								
14. GOVERNMENT TRANSPORTATION REQUESTS USED N/A								
DATE ISSUED	ISSUING AGENCY	FROM -	TO -					
15. GOVERNMENT QUARTERS WERE ASSIGNED ON THE FOLLOWING DATES: None								

16. IF THIS IS THE INITIAL CERTIFICATE SUBMITTED FROM THIS AF UNIT, STATE PLACE OF LAST ASSIGNMENT AND DATE OF DEPARTURE:
 DEPARTED (PLACE) ON (DATE) N/A

17. IF THIS IS THE FINAL CERTIFICATE SUBMITTED FROM THIS AF UNIT, STATE DATE OF DEPARTURE:
N/A

18. DEPARTED THE UNITED STATES FOR OVERSEAS DUTY FROM:
 (PORT) N/A ON (DATE)

19. ARRIVED THE UNITED STATES FROM OVERSEAS DUTY AT:
 (PORT) N/A ON (DATE)

20. NAME OF COUNTRY WHERE OVERSEAS DUTY WAS PERFORMED DURING THIS PERIOD (UNLESS PROHIBITED FOR SECURITY REASONS)
N/A

21. ADDITIONAL INFORMATION AND REMARKS:

22. CERTIFICATE HOLDER I CERTIFY THAT THE INFORMATION IN ITEMS 1 THROUGH 21 ABOVE IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF

STAT

23. CERTIFICATION: I CERTIFY THAT, TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE SERVICES REPORTED ABOVE WERE PERFORMED IN A SATISFACTORY MANNER, THAT ALL OVERTIME AND TRAVEL REPORTED WERE AUTHORIZED IN ADVANCE BY COMPETENT AUTHORITY, AND THAT APPROPRIATE WRITTEN ORDERS HAVE BEEN ISSUED OR REQUESTED, WITH THE FOLLOWING EXCEPTIONS:

(IF SERVICES WERE NOT SATISFACTORY, COMPLETE WRITTEN REPORT HAS BEEN PREPARED AND FORWARDED)

	GRADE Captain	SIGNATURE (MANUAL SIGNATURE IS REQUIRED)
AFBN FV3087952	ORGANIZATION 9th Strat Recon Wg. Beale AFB	

STAT

INSTRUCTIONS FOR PREPARATION:

ITEMS NOT APPLICABLE WILL BE INDICATED BY N/A (EXCEPT ITEM 15, ENTER NONE OR APPLICABLE DATES)

THE PERIOD COVERED BY A CERTIFICATE WILL NOT INCLUDE MORE THAN ONE CALENDAR MONTH.

ITEM 4.1. NON-WORK DAYS ARE THE 6TH AND 7TH DAY OF THE SCHEDULED WORK WEEK.

ITEM 6. THE NUMBER OF CONTRACT HOLIDAYS IN THE PERIOD WILL BE ENTERED REGARDLESS OF WHETHER THEY WERE WORK DAYS. IF THEY WERE WORK DAYS, THEY WILL BE SHOWN IN ITEM 8 AS OVERTIME EVEN IF CONTRACT DOES NOT PROVIDE FOR OVERTIME PREMIUM PAY. REIMBURSEMENT WILL BE MADE FOR HOLIDAY WORK IN ACCORDANCE WITH APPLICABLE CONTRACT.

ITEM 7. THE NUMBER OF BILLABLE DAYS IS THE TOTAL NUMBER OF DAYS IN THE PERIOD, LESS NON-WORK DAYS, VACATION DAYS, SICK DAYS, AND CONTRACT HOLIDAYS (OVERTIME NOT TO BE INCLUDED IN THIS ITEM.)

TRAVEL DAYS: WORK DAYS UTILIZED FOR AUTHORIZED TRAVEL WILL BE INCLUDED IN THIS ITEM. ALL OTHER DAYS UTILIZED IN AUTHORIZED TRAVEL WILL BE INDICATED IN REMARKS SECTION, GIVING TYPE AND TIME OF TRAVEL.

ENTRIES IN ITEMS 8, 10, 11, 12, AND 14 MAY BE DOUBLE-SPACED OR SINGLE-SPACED AS REQUIRED. IF ADDITIONAL SPACE IS NEEDED, ITEM 21 WILL BE USED.

ITEMS 11 AND 12. THE POINT "FROM" AND "TO", IN ITEMS 11 AND 12, MUST BE THE ACTUAL LOCATIONS VISITED. (EXAMPLE: OFFUTT AFB, NOT OMAHA, NEBRASKA.)

MONTH AND YEAR MAY BE OMITTED WHEN ENTERING DATES, EXCEPT FOR DATE OF CERTIFICATE AND ITEM 3. ALL OTHER DATES MUST BE WITHIN THE PERIOD COVERED BY THE CERTIFICATE.

ITEM 23, IF SERVICES WERE NOT SATISFACTORY, OR IF THERE IS DISAGREEMENT AS TO SERVICE PERFORMED, THE AF SUPERVISORY OFFICER MUST EXPLAIN IN ITEM 23.

NOTE: ONE COPY OF TRAVEL ORDER WILL BE ATTACHED TO EACH COPY OF CERTIFICATE OF SERVICE ON WHICH TRAVEL OR TDY IS REPORTED.

L-296 (6-65) 7243

CERTIFICATE OF SERVICE

CONTRACTOR				TO (MAJOR AIR COMMAND)				
XXXXXX CW6744				DATE OF CERTIFICATE 6 Sept. 1966				
1. NAME OF CTSP (LAST, FIRST AND MIDDLE)		2. AF UNIT 9th SRW		3. PERIOD OF CERTIFICATE (INCLUSIVE DATES) 1 Aug. 1966 THRU 31 Aug. 1966 STAT				
4. TOTAL DAYS COVERED THIS PERIOD 31	4A. LESS NON-WORK DAYS 8	4B. LESS VACATION 29 Aug. THRU 30 Aug. THRU	5. LESS SICK TIME 0 THRU THRU	6. LESS CONTRACT HOLIDAYS 0	7. BILLABLE DAYS 21			
8. AUTHORIZED OVERTIME HOURS WORKED (NOT INCLUDED IN ITEM 7)								
DATE	TIME & ONE HALF	DOUBLE TIME	DATE	TIME & ONE HALF	DOUBLE TIME	DATE	TIME & ONE HALF	DOUBLE TIME
1 Aug. 66	4 hrs.		24 Aug. 66	1 hrs.				
3 " "	4 "		25 " "	1.5 "				
11 " "	4 "		26 " "	4 "				
17 " "	4 "							
18 " "	4 "							
22 " "	4 "							
9. DATES ON WHICH PREMIUM PAY SHIFTS WERE WORKED N/A								
10. TEMPORARY DUTY AWAY FROM HOME STATION (ENTER HOUR AND DATE OF DEPARTURE AND RETURN) N/A								
DEPARTED	RETURNED	DEPARTED	RETURNED	DEPARTED	RETURNED			
11. AUTHORIZED TRAVEL PERFORMED BY COMMERCIAL CARRIER (INCLUDING TAXICAB, ETC.) N/A								
INCLUSIVE DATES	FROM -	TO -	MODE	COST				
THRU								
THRU								
THRU								
12. AUTHORIZED PRIVATELY OWNED CONVEYANCE (EXCEPT ON-BASE MILEAGE) N/A								
INCLUSIVE DATES	FROM -	TO -	TOLLS	MILES				
THRU								
THRU								
THRU								
THRU								
13. AUTHORIZED ON-BASE MILEAGE BY PRIVATELY-OWNED CONVEYANCE: MILES 630								
14. GOVERNMENT TRANSPORTATION REQUESTS USED								
DATE ISSUED	ISSUING AGENCY	FROM -	TO -					
15. GOVERNMENT QUARTERS WERE ASSIGNED ON THE FOLLOWING DATES: None								

16. IF THIS IS THE INITIAL CERTIFICATE SUBMITTED FROM THIS AF UNIT, STATE PLACE OF LAST ASSIGNMENT AND DATE OF DEPARTURE:
 DEPARTED (PLACE) N/A ON (DATE)

17. IF THIS IS THE FINAL CERTIFICATE SUBMITTED FROM THIS AF UNIT, STATE DATE OF DEPARTURE:
N/A

18. DEPARTED THE UNITED STATES FOR OVERSEAS DUTY FROM:
 (PORT) N/A ON (DATE)

19. ARRIVED THE UNITED STATES FROM OVERSEAS DUTY AT:
 (PORT) N/A ON (DATE)

20. NAME OF COUNTRY WHERE OVERSEAS DUTY WAS PERFORMED DURING THIS PERIOD (UNLESS PROHIBITED FOR SECURITY REASONS)
N/A

21. ADDITIONAL INFORMATION AND REMARKS:

22. CERTIFICATION: I CERTIFY THAT THE INFORMATION IN ITEMS 1 THRU 21 ABOVE IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

[Redacted Signature]

STAT

23. CERTIFICATION: I CERTIFY THAT, TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE SERVICES REPORTED ABOVE WERE PERFORMED IN A SATISFACTORY MANNER, THAT ALL OVERTIME AND TRAVEL REPORTED WERE AUTHORIZED IN ADVANCE BY COMPETENT AUTHORITY, AND THAT APPROPRIATE WRITTEN ORDERS HAVE BEEN ISSUED OR REQUESTED, WITH THE FOLLOWING EXCEPTIONS:

(IF SERVICES WERE NOT SATISFACTORY, COMPLETE WRITTEN REPORT HAS BEEN PREPARED AND FORWARDED)

NAME	GRADE	SIGNATURE (MANUAL SIGNATURE IS REQUIRED) (FACSIMILE IS NOT ACCEPTABLE)
[Redacted]	Captain	[Redacted]
AFSN	ORGANIZATION	
TV3087952	9th Strat. Recon. Gr. Doolle AFB	

STAT

INSTRUCTIONS FOR PREPARATION:

- ITEMS NOT APPLICABLE WILL BE INDICATED BY N/A (EXCEPT ITEM 15, ENTER NONE OR APPLICABLE DATES)
- THE PERIOD COVERED BY A CERTIFICATE WILL NOT INCLUDE MORE THAN ONE CALENDAR MONTH.
- ITEM 4.1. NON-WORK DAYS ARE THE 6TH AND 7TH DAY OF THE SCHEDULED WORK WEEK.
- ITEM 6. THE NUMBER OF CONTRACT HOLIDAYS IN THE PERIOD WILL BE ENTERED REGARDLESS OF WHETHER THEY WERE WORK DAYS. IF THEY WERE WORK DAYS, THEY WILL BE SHOWN IN ITEM 8 AS OVERTIME EVEN IF CONTRACT DOES NOT PROVIDE FOR OVERTIME PREMIUM PAY. REIMBURSEMENT WILL BE MADE FOR HOLIDAY WORK IN ACCORDANCE WITH APPLICABLE CONTRACT.
- ITEM 7. THE NUMBER OF BILLABLE DAYS IS THE TOTAL NUMBER OF DAYS IN THE PERIOD, LESS NON-WORK DAYS, VACATION DAYS, SICK DAYS, AND CONTRACT HOLIDAYS (OVERTIME NOT TO BE INCLUDED IN THIS ITEM.)
- TRAVEL DAYS: WORK DAYS UTILIZED FOR AUTHORIZED TRAVEL WILL BE INCLUDED IN THIS ITEM. ALL OTHER DAYS UTILIZED IN AUTHORIZED TRAVEL WILL BE INDICATED IN REMARKS SECTION, GIVING TYPE AND TIME OF TRAVEL.
- ENTRIES IN ITEMS 8, 10, 11, 12, AND 14 MAY BE DOUBLE-SPACED OR SINGLE-SPACED AS REQUIRED. IF ADDITIONAL SPACE IS NEEDED, ITEM 21 WILL BE USED.
- ITEMS 11 AND 12. THE POINT "FROM" AND "TO", IN ITEMS 11 AND 12, MUST BE THE ACTUAL LOCATIONS VISITED. (EXAMPLE: OFFUTT AFB, NOT OMAHA, NEBRASKA.)
- MONTH AND YEAR MAY BE OMITTED WHEN ENTERING DATES, EXCEPT FOR DATE OF CERTIFICATE AND ITEM 3. ALL OTHER DATES MUST BE WITHIN THE PERIOD COVERED BY THE CERTIFICATE.
- ITEM 23. IF SERVICES WERE NOT SATISFACTORY, OR IF THERE IS DISAGREEMENT AS TO SERVICE PERFORMED, THE AF SUPERVISORY OFFICER MUST EXPLAIN IN ITEM 23.
- NOTE: ONE COPY OF TRAVEL ORDER WILL BE ATTACHED TO EACH COPY OF CERTIFICATE OF SERVICE ON WHICH TRAVEL OR TDY IS REPORTED.

L-296 (6-65) 71243

CERTIFICATE OF SERVICE

CONTRACTOR				TO (MAJOR AIR COMMAND)				
CONTRACT				DATE OF CERTIFICATE				
XXXXXX CW6744 XXXXXXXX				6 September 1966				
1. NAME OF CREW (LAST, FIRST, AND MIDDLE)		2. AF UNIT		3. PERIOD OF CERTIFICATE (INCLUSIVE DATES)				
		9th SRW		1 Aug. 1966 THRU 31 Aug. 1966 STAT				
4. TOTAL DAYS COVERED THIS PERIOD	4A. LESS NON-WORK DAYS	4B. LESS VACATION	5. LESS SICK TIME	6. LESS CONTRACT HOLIDAYS	7. BILLABLE DAYS			
31	8	15 THRU 31 THRU	0 THRU THRU	0	10			
8. AUTHORIZED OVERTIME HOURS WORKED (NOT INCLUDED IN ITEM 7)								
DATE	TIME & ONE HALF	DOUBLE TIME	DATE	TIME & ONE HALF	DOUBLE TIME	DATE	TIME & ONE HALF	DOUBLE TIME
11 Aug. 66	4 Hrs.							
12 Aug. 66	4 Hrs.							
9. DATES ON WHICH PREMIUM PAY SHIFTS WERE WORKED								
N/A								
10. TEMPORARY DUTY AWAY FROM HOME STATION (ENTER HOUR AND DATE OF DEPARTURE AND RETURN)								
N/A								
DEPARTED	RETURNED	DEPARTED	RETURNED	DEPARTED	RETURNED			
11. AUTHORIZED TRAVEL PERFORMED BY COMMERCIAL CARRIER (INCLUDING TAXICAB, ETC.)								
N/A								
INCLUSIVE DATES	FROM --		TO --		MODE	COST		
THRU								
THRU								
THRU								
12. AUTHORIZED PRIVATELY OWNED CONVEYANCE (EXCEPT ON-BASE MILEAGE)								
N/A								
INCLUSIVE DATES	FROM --		TO --		TOLLS	MILES		
THRU								
THRU								
THRU								
THRU								
13. AUTHORIZED ON-BASE MILEAGE BY PRIVATELY-OWNED CONVEYANCE:								
MILES 220								
14. GOVERNMENT TRANSPORTATION REQUESTS USED								
N/A								
DATE ISSUED	ISSUING AGENCY		FROM --		TO --			
15. GOVERNMENT QUARTERS WERE ASSIGNED ON THE FOLLOWING DATES:								
None								

16. IF THIS IS THE INITIAL CERTIFICATE SUBMITTED FROM THIS AF UNIT, STATE PLACE OF LAST ASSIGNMENT AND DATE OF DEPARTURE:		
DEPARTED (PLACE)	ON (DATE)	N/A
17. IF THIS IS THE FINAL CERTIFICATE SUBMITTED FROM THIS AF UNIT, STATE DATE OF DEPARTURE:		
N/A		
18. DEPARTED THE UNITED STATES FOR OVERSEAS DUTY FROM:		
(PORT)	N/A	ON (DATE)
19. ARRIVED THE UNITED STATES FROM OVERSEAS DUTY AT:		
(PORT)	N/A	ON (DATE)
20. NAME OF COUNTRY WHERE OVERSEAS DUTY WAS PERFORMED DURING THIS PERIOD (UNLESS PROHIBITED FOR SECURITY REASONS)		
N/A		
21. ADDITIONAL INFORMATION AND REMARKS:		
22. C E R T I F I C A T I O N : I CERTIFY THAT THE INFORMATION IN ITEMS 1 THRU 21 ABOVE IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.		
23. C E R T I F I C A T I O N : I CERTIFY THAT, TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE SERVICES REPORTED ABOVE WERE PERFORMED IN A SATISFACTORY MANNER, THAT ALL OVERTIME AND TRAVEL REPORTED WERE AUTHORIZED IN ADVANCE BY COMPETENT AUTHORITY, AND THAT APPROPRIATE WRITTEN ORDERS HAVE BEEN ISSUED OR REQUESTED, WITH THE FOLLOWING EXCEPTIONS:		
(IF SERVICES WERE NOT SATISFACTORY, COMPLETE WRITTEN REPORT HAS BEEN PREPARED AND FORWARDED)		
	GRADE Captain	SIGNATURE (MANUAL SIGNATURE IS REQUIRED) (SIGNATURE IS NOT ACCEPTABLE)
AFBN RV3087952	ORGANIZATION 9th Strat Recon Wg. Beale AFB	STAT STAT
INSTRUCTIONS FOR PREPARATION:		
ITEMS NOT APPLICABLE WILL BE INDICATED BY N/A (EXCEPT ITEM 15, ENTER NONE OR APPLICABLE DATES)		
THE PERIOD COVERED BY A CERTIFICATE WILL NOT INCLUDE MORE THAN ONE CALENDAR MONTH.		
ITEM 4.1. NON-WORK DAYS ARE THE 6TH AND 7TH DAY OF THE SCHEDULED WORK WEEK.		
ITEM 6. THE NUMBER OF CONTRACT HOLIDAYS IN THE PERIOD WILL BE ENTERED REGARDLESS OF WHETHER THEY WERE WORK DAYS. IF THEY WERE WORK DAYS, THEY WILL BE SHOWN IN ITEM 8 AS OVERTIME EVEN IF CONTRACT DOES NOT PROVIDE FOR OVERTIME PREMIUM PAY. REIMBURSEMENT WILL BE MADE FOR HOLIDAY WORK IN ACCORDANCE WITH APPLICABLE CONTRACT.		
ITEM 7. THE NUMBER OF BILLABLE DAYS IS THE TOTAL NUMBER OF DAYS IN THE PERIOD, LESS NON-WORK DAYS, VACATION DAYS, SICK DAYS, AND CONTRACT HOLIDAYS (OVERTIME NOT TO BE INCLUDED IN THIS ITEM.)		
TRAVEL DAYS: WORK DAYS UTILIZED FOR AUTHORIZED TRAVEL WILL BE INCLUDED IN THIS ITEM. ALL OTHER DAYS UTILIZED IN AUTHORIZED TRAVEL WILL BE INDICATED IN REMARKS SECTION, GIVING TYPE AND TIME OF TRAVEL.		
ENTRIES IN ITEMS 8, 10, 11, 12, AND 14 MAY BE DOUBLE-SPACED OR SINGLE-SPACED AS REQUIRED. IF ADDITIONAL SPACE IS NEEDED, ITEM 21 WILL BE USED.		
ITEMS 11 AND 12. THE POINT "FROM" AND "TO", IN ITEMS 11 AND 12, MUST BE THE ACTUAL LOCATIONS VISITED. (EXAMPLE: OFFUTT AFB, NOT OMAHA, NEBRASKA.)		
MONTH AND YEAR MAY BE OMITTED WHEN ENTERING DATES, EXCEPT FOR DATE OF CERTIFICATE AND ITEM 3. ALL OTHER DATES MUST BE WITHIN THE PERIOD COVERED BY THE CERTIFICATE.		
ITEM 23, IF SERVICES WERE NOT SATISFACTORY, OR IF THERE IS DISAGREEMENT AS TO SERVICE PERFORMED, THE AF SUPERVISORY OFFICER MUST EXPLAIN IN ITEM 23.		
NOTE: ONE COPY OF TRAVEL ORDER WILL BE ATTACHED TO EACH COPY OF CERTIFICATE OF SERVICE ON WHICH TRAVEL OR TDY IS REPORTED.		

L-296 (6-65) 71243

CERTIFICATE OF SERVICE

CONTRACTOR	TO (MAJOR AIR COMMAND)
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CONTRACT NO. AW500076) CW6744	DATE OF CERTIFICATE 6 Sept. 1966
-----------------------------------------	--------------------------------------------

1. NAME OF STATION (LAST, FIRST AND MIDDLE)	2. AF UNIT 9th SRW	3. PERIOD OF CERTIFICATE (INCLUSIVE DATES) 1 Aug. 1966 THRU 31 Aug. 1966 STAT
4. TOTAL DAYS COVERED THIS PERIOD 31	4A. LESS NON-WORK DAYS 8	4B. LESS VACATION 0 THRU THRU
5. LESS SICK TIME 0 THRU THRU		6. LESS CONTRACT HOLIDAYS 0
7. BILLABLE DAYS 23		

8. AUTHORIZED OVERTIME HOURS WORKED (NOT INCLUDED IN ITEM 7)								
DATE	TIME & ONE HALF	DOUBLE TIME	DATE	TIME & ONE HALF	DOUBLE TIME	DATE	TIME & ONE HALF	DOUBLE TIME
1 Aug 66	7 hrs.		13 Aug 66	8 hrs		24 Aug 66	1 hrs	
3 " "	1 "		15 " "	4 "		26 " "	4 "	
5 " "	1.5 "		17 " "	2 "		31 " "	3 "	
9 " "	3 "		18 " "	2 "				
10 " "	3 "		21 " "		4 hrs			
12 " "	1 "		22 " "	1 "				

9. DATES ON WHICH PREMIUM PAY SHIFTS WERE WORKED
N/A

10. TEMPORARY DUTY AWAY FROM HOME STATION (ENTER HOUR AND DATE OF DEPARTURE AND RETURN)					
DEPARTED	RETURNED	DEPARTED	RETURNED	DEPARTED	RETURNED

11. AUTHORIZED TRAVEL PERFORMED BY COMMERCIAL CARRIER (INCLUDING TAXICAB, ETC.)				
INCLUSIVE DATES	FROM -	TO -	MODE	COST
THRU				
THRU				
THRU				

12. AUTHORIZED PRIVATELY OWNED CONVEYANCE (EXCEPT ON-BASE MILEAGE)				
INCLUSIVE DATES	FROM -	TO -	TOLLS	MILES
THRU				
THRU				
THRU				
THRU				

13. AUTHORIZED ON-BASE MILEAGE BY PRIVATELY-OWNED CONVEYANCE:
MILES **480**

14. GOVERNMENT TRANSPORTATION REQUESTS USED			
DATE ISSUED	ISSUING AGENCY	FROM -	TO -

15. GOVERNMENT QUARTERS WERE ASSIGNED ON THE FOLLOWING DATES:
None

16. IF THIS IS THE INITIAL CERTIFICATE SUBMITTED FROM THIS AF UNIT, STATE PLACE OF LAST ASSIGNMENT AND DATE OF DEPARTURE:
 DEPARTED (PLACE) N/A ON (DATE) _____

17. IF THIS IS THE FINAL CERTIFICATE SUBMITTED FROM THIS AF UNIT, STATE DATE OF DEPARTURE:
N/A

18. DEPARTED THE UNITED STATES FOR OVERSEAS DUTY FROM:
 (PORT) N/A ON (DATE) _____

19. ARRIVED THE UNITED STATES FROM OVERSEAS DUTY AT:
 (PORT) N/A ON (DATE) _____

20. NAME OF COUNTRY WHERE OVERSEAS DUTY WAS PERFORMED DURING THIS PERIOD (UNLESS PROHIBITED FOR SECURITY REASONS)
N/A

21. ADDITIONAL INFORMATION AND REMARKS:

22. C E R T I F I C A T I O N : I CERTIFY THAT THE INFORMATION IN ITEMS 1 THRU 21 ABOVE IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF

STAT

23. C E R T I F I C A T I O N : I CERTIFY THAT, TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE SERVICES REPORTED ABOVE WERE PERFORMED IN A SATISFACTORY MANNER, THAT ALL OVERTIME AND TRAVEL REPORTED WERE AUTHORIZED IN ADVANCE BY COMPETENT AUTHORITY, AND THAT APPROPRIATE WRITTEN ORDERS HAVE BEEN ISSUED OR REQUESTED, WITH THE FOLLOWING EXCEPTIONS:

(IF SERVICES WERE NOT SATISFACTORY, COMPLETE WRITTEN REPORT HAS BEEN PREPARED AND FORWARDED)

NAME	GRADE	SIGNATURE (MANUAL SIGNATURE IS REQUIRED)
	Captain	
AFSN	ORGANIZATION	
FV3087952	9th Strat. Recon. Wg. Beale AFB	

STAT

INSTRUCTIONS FOR PREPARATION:

ITEMS NOT APPLICABLE WILL BE INDICATED BY N/A (EXCEPT ITEM 15, ENTER NONE OR APPLICABLE DATES)

THE PERIOD COVERED BY A CERTIFICATE WILL NOT INCLUDE MORE THAN ONE CALENDAR MONTH.

ITEM 4.1. NON-WORK DAYS ARE THE 6TH AND 7TH DAY OF THE SCHEDULED WORK WEEK.

ITEM 6. THE NUMBER OF CONTRACT HOLIDAYS IN THE PERIOD WILL BE ENTERED REGARDLESS OF WHETHER THEY WERE WORK DAYS. IF THEY WERE WORK DAYS, THEY WILL BE SHOWN IN ITEM 8 AS OVERTIME EVEN IF CONTRACT DOES NOT PROVIDE FOR OVERTIME PREMIUM PAY. REIMBURSEMENT WILL BE MADE FOR HOLIDAY WORK IN ACCORDANCE WITH APPLICABLE CONTRACT.

ITEM 7. THE NUMBER OF BILLABLE DAYS IS THE TOTAL NUMBER OF DAYS IN THE PERIOD, LESS NON-WORK DAYS, VACATION DAYS, SICK DAYS, AND CONTRACT HOLIDAYS (OVERTIME NOT TO BE INCLUDED IN THIS ITEM.)

TRAVEL DAYS: WORK DAYS UTILIZED FOR AUTHORIZED TRAVEL WILL BE INCLUDED IN THIS ITEM. ALL OTHER DAYS UTILIZED IN AUTHORIZED TRAVEL WILL BE INDICATED IN REMARKS SECTION, GIVING TYPE AND TIME OF TRAVEL.

ENTRIES IN ITEMS 8, 10, 11, 12, AND 14 MAY BE DOUBLE-SPACED OR SINGLE-SPACED AS REQUIRED. IF ADDITIONAL SPACE IS NEEDED, ITEM 21 WILL BE USED.

ITEMS 11 AND 12. THE POINT "FROM" AND "TO", IN ITEMS 11 AND 12, MUST BE THE ACTUAL LOCATIONS VISITED. (EXAMPLE: OFFUTT AFB, NOT OMAHA, NEBRASKA.)

MONTH AND YEAR MAY BE OMITTED WHEN ENTERING DATES, EXCEPT FOR DATE OF CERTIFICATE AND ITEM 3. ALL OTHER DATES MUST BE WITHIN THE PERIOD COVERED BY THE CERTIFICATE.

ITEM 23, IF SERVICES WERE NOT SATISFACTORY, OR IF THERE IS DISAGREEMENT AS TO SERVICE PERFORMED, THE AF SUPERVISORY OFFICER MUST EXPLAIN IN ITEM 23.

NOTE: ONE COPY OF TRAVEL ORDER WILL BE ATTACHED TO EACH COPY OF CERTIFICATE OF SERVICE ON WHICH TRAVEL OR TOY IS REPORTED.

L-296 (6-65) 7243

CERTIFICATE OF SERVICE

CONTRACTOR Goodyear Aerospace Corporation Arizona Division Litchfield Park, Arizona	TO (MAJOR AIR COMMAND) ASD (ASZB - Col. Bellis) WPAFB, Ohio 20331
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CONTRACT AF33(600)	DATE OF CERTIFICATE 31, August 1966
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1. NAME OF CREW (LAST, FIRST AND MIDDLE) [REDACTED]	2. AF UNIT [REDACTED]	3. PERIOD OF CERTIFICATE (INCLUSIVE DATES) 1 August '66 THRU 31 August '66 STAT 5
4. TOTAL DAYS COVERED THIS PERIOD 31	4A. LESS NON-WORK DAYS 8	4B. LESS VACATION N/A THRU THRU
		5. LESS SICK TIME N/A THRU THRU
		6. LESS CONTRACT HOLIDAYS NONE
		7. BILLABLE DAYS 23

8. AUTHORIZED OVERTIME HOURS WORKED (NOT INCLUDED IN ITEM 7)								
DATE	TIME & ONE HALF	DOUBLE TIME	DATE	TIME & ONE HALF	DOUBLE TIME	DATE	TIME & ONE HALF	DOUBLE TIME
1 Aug.	6.5		8 Aug.	4		17 Aug.	6.5	
2 Aug.	6.5		9 Aug.	4.5				
6 Aug.	10		15 Aug.	8				

9. DATES ON WHICH PREMIUM PAY SHIFTS WERE WORKED
 N/A

10. TEMPORARY DUTY AWAY FROM HOME STATION (ENTER HOUR AND DATE OF DEPARTURE AND RETURN)					
DEPARTED	RETURNED	DEPARTED	RETURNED	DEPARTED	RETURNED
N/A					

11. AUTHORIZED TRAVEL PERFORMED BY COMMERCIAL CARRIER (INCLUDING TAXICAB, ETC.)				
INCLUSIVE DATES	FROM -	TO -	MODE	COST
N/A THRU				
THRU				
THRU				

12. AUTHORIZED PRIVATELY OWNED CONVEYANCE (EXCEPT ON-BASE MILEAGE)				
INCLUSIVE DATES	FROM -	TO -	TOLLS	MILES
N/A THRU				
THRU				
THRU				
THRU				

13. AUTHORIZED ON-BASE MILEAGE BY PRIVATELY OWNED CONVEYANCE: 120 MILES

14. GOVERNMENT TRANSPORTATION REQUESTS USED			
DATE ISSUED	ISSUING AGENCY	FROM -	TO -
N/A			

15. GOVERNMENT QUARTERS WERE ASSIGNED ON THE FOLLOWING DATES:
 NONE

16. IF THIS IS THE INITIAL CERTIFICATE SUBMITTED FROM THIS AF UNIT, STATE PLACE OF LAST ASSIGNMENT AND DATE OF DEPARTURE:			N/A
DEPARTED (PLACE)	ON (DATE)		
17. IF THIS IS THE FINAL CERTIFICATE SUBMITTED FROM THIS AF UNIT, STATE DATE OF DEPARTURE:			N/A
18. DEPARTED THE UNITED STATES FOR OVERSEAS DUTY FROM:			N/A
(PORT)	ON (DATE)		
19. ARRIVED THE UNITED STATES FROM OVERSEAS DUTY AT:			N/A
(PORT)	ON (DATE)		
20. NAME OF COUNTRY WHERE OVERSEAS DUTY WAS PERFORMED DURING THIS PERIOD (UNLESS PROHIBITED FOR SECURITY REASONS)			
			N/A
21. ADDITIONAL INFORMATION AND REMARKS:			
22. CERTIFICATION: I CERTIFY THAT THE INFORMATION IN ITEMS 1 THRU 21 ABOVE IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.			
			STAT
23. CERTIFICATION: I CERTIFY THAT, TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE SERVICES REPORTED ABOVE WERE PERFORMED IN A SATISFACTORY MANNER, THAT ALL OVERTIME AND TRAVEL REPORTED WERE AUTHORIZED IN ADVANCE BY COMPETENT AUTHORITY, AND THAT APPROPRIATE WRITTEN ORDERS HAVE BEEN ISSUED OR REQUESTED, WITH THE FOLLOWING EXCEPTIONS:			
			STAT
(IF SERVICES WERE NOT SATISFACTORY, COMPLETE WRITTEN REPORT HAS BEEN PREPARED AND F			
NAME	GRADE	SIGNATURE (MANUAL SIGNATURE IS REQUIRED) (FACSIMILE IS NOT ACCEPTABLE)	
	Colonel		
AFBN	ORGANIZATION		
FR 51861	PTTAM		
INSTRUCTIONS FOR PREPARATION:			
ITEMS NOT APPLICABLE WILL BE INDICATED BY N/A (EXCEPT ITEM 15, ENTER NONE OR APPLICABLE DATES)			
THE PERIOD COVERED BY A CERTIFICATE WILL NOT INCLUDE MORE THAN ONE CALENDAR MONTH.			
ITEM 4.1. NON-WORK DAYS ARE THE 6TH AND 7TH DAY OF THE SCHEDULED WORK WEEK.			
ITEM 6. THE NUMBER OF CONTRACT HOLIDAYS IN THE PERIOD WILL BE ENTERED REGARDLESS OF WHETHER THEY WERE WORK DAYS. IF THEY WERE WORK DAYS, THEY WILL BE SHOWN IN ITEM 8 AS OVERTIME EVEN IF CONTRACT DOES NOT PROVIDE FOR OVERTIME PREMIUM PAY. REIMBURSEMENT WILL BE MADE FOR HOLIDAY WORK IN ACCORDANCE WITH APPLICABLE CONTRACT.			
ITEM 7. THE NUMBER OF BILLABLE DAYS IS THE TOTAL NUMBER OF DAYS IN THE PERIOD, LESS NON-WORK DAYS, VACATION DAYS, SICK DAYS, AND CONTRACT HOLIDAYS (OVERTIME NOT TO BE INCLUDED IN THIS ITEM.)			
TRAVEL DAYS: WORK DAYS UTILIZED FOR AUTHORIZED TRAVEL WILL BE INCLUDED IN THIS ITEM. ALL OTHER DAYS UTILIZED IN AUTHORIZED TRAVEL WILL BE INDICATED IN REMARKS SECTION, GIVING TYPE AND TIME OF TRAVEL.			
ENTRIES IN ITEMS 8, 10, 11, 12, AND 14 MAY BE DOUBLE-SPACED OR SINGLE-SPACED AS REQUIRED. IF ADDITIONAL SPACE IS NEEDED, ITEM 21 WILL BE USED.			
ITEMS 11 AND 12. THE POINT "FROM" AND "TO", IN ITEMS 11 AND 12, MUST BE THE ACTUAL LOCATIONS VISITED. (EXAMPLE: OFFUTT AFB, NEB; OMAHA, NEBRASKA.)			
MONTH AND YEAR MAY BE OMITTED WHEN ENTERING DATES, EXCEPT FOR DATE OF CERTIFICATE AND ITEM 3. ALL OTHER DATES MUST BE WITHIN THE PERIOD COVERED BY THE CERTIFICATE.			
ITEM 23. IF SERVICES WERE NOT SATISFACTORY, OR IF THERE IS DISAGREEMENT AS TO SERVICE PERFORMED, THE AF SUPERVISORY OFFICER MUST EXPLAIN IN ITEM 23.			
NOTE: ONE COPY OF TRAVEL ORDER WILL BE ATTACHED TO EACH COPY OF CERTIFICATE OF SERVICE ON WHICH TRAVEL OR TOY IS REPORTED.			

L-296 (6-65) 7243

CERTIFICATE OF SERVICE

CONTRACTOR Goodyear Aerospace Corporation Arizona Division Itchfield Park, Arizona				TO (MAJOR AIR COMMAND) ASD (ASZB - Col. Bellis) WPAFB 20331					
CONTRACT AF33(600)			EXHIBIT NO.			DATE OF CERTIFICATE 31, August 1966			
1. NAME OF CREW (LAST, FIRST AND MIDDLE)		2. AF UNIT		3. PERIOD OF CERTIFICATE (INCLUSIVE DATES) 1 August 1966 THRU 31 August 1966 STAT					
4. TOTAL DAYS COVERED THIS PERIOD 31	5A. LESS NON-WORK DAYS 8	5B. LESS VACATION N/A THRU THRU	5. LESS SICK TIME N/A THRU THRU	6. LESS CONTRACT HOLIDAYS NONE	7. BILLABLE DAYS 23				
8. AUTHORIZED OVERTIME HOURS WORKED (NOT INCLUDED IN ITEM 7)									
DATE	TIME & ONE HALF	DOUBLE TIME	DATE	TIME & ONE HALF	DOUBLE TIME	DATE	TIME & ONE HALF	DOUBLE TIME	
31 Aug.	4								
9. DATES ON WHICH PREMIUM PAY SHIFTS WERE WORKED N/A									
10. TEMPORARY DUTY AWAY FROM HOME STATION (ENTER HOUR AND DATE OF DEPARTURE AND RETURN)									
DEPARTED		RETURNED		DEPARTED		RETURNED		DEPARTED	RETURNED
N/A									
11. AUTHORIZED TRAVEL PERFORMED BY COMMERCIAL CARRIER (INCLUDING TAXICAB, ETC.)									
INCLUSIVE DATES		FROM -		TO -		MODE		COST	
N/A THRU									
THRU									
THRU									
12. AUTHORIZED PRIVATELY OWNED CONVEYANCE (EXCEPT ON-BASE MILEAGE)									
INCLUSIVE DATES		FROM -		TO -		TOLLS		MILES	
N/A THRU									
THRU									
THRU									
THRU									
13. AUTHORIZED ON-BASE MILEAGE BY PRIVATELY-OWNED CONVEYANCE: N/A MILES									
14. GOVERNMENT TRANSPORTATION REQUESTS USED									
DATE ISSUED		ISSUING AGENCY		FROM -		TO -			
N/A									
15. GOVERNMENT QUARTERS WERE ASSIGNED ON THE FOLLOWING DATES: NONE									

16. IF THIS IS THE INITIAL CERTIFICATE SUBMITTED FROM THIS AF UNIT, STATE PLACE OF LAST ASSIGNMENT AND DATE OF DEPARTURE:			N/A
DEPARTED (PLACE)		ON (DATE)	
17. IF THIS IS THE FINAL CERTIFICATE SUBMITTED FROM THIS AF UNIT, STATE DATE OF DEPARTURE:			N/A
18. DEPARTED THE UNITED STATES FOR OVERSEAS DUTY FROM:			N/A
(PORT)		ON (DATE)	
19. ARRIVED THE UNITED STATES FROM OVERSEAS DUTY AT:			N/A
(PORT)		ON (DATE)	
20. NAME OF COUNTRY WHERE OVERSEAS DUTY WAS PERFORMED DURING THIS PERIOD (UNLESS PROHIBITED FOR SECURITY REASONS)			N/A
21. ADDITIONAL INFORMATION AND REMARKS:			

22. CERTIFICATE HOLDER MUST CERTIFY THAT THE INFORMATION IN ITEMS 4 THRU 21 ABOVE IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

[Redacted Signature Area] STAT

23. CERTIFICATION: I CERTIFY THAT, TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE SERVICES REPORTED ABOVE WERE PERFORMED IN A SATISFACTORY MANNER, THAT ALL OVERTIME AND TRAVEL REPORTED WERE AUTHORIZED IN ADVANCE BY COMPETENT AUTHORITY, AND THAT APPROPRIATE WRITTEN ORDERS HAVE BEEN ISSUED OR REQUESTED, WITH THE FOLLOWING EXCEPTIONS:

[Redacted Exception Area]

(IF SERVICES WERE NOT SATISFACTORY, COMPLETE WRITTEN REPORT HAS BEEN PREPARED AND FORWARDED TO THE SUPERVISORY OFFICER.)

NAME	GRADE	[Redacted]
[Redacted]	Colonel	
AFSN	ORGANIZATION	
FR 51861	FTTAM	

INSTRUCTIONS FOR PREPARATION:

ITEMS NOT APPLICABLE WILL BE INDICATED BY N/A (EXCEPT ITEM 15, ENTER NONE OR APPLICABLE DATES)

THE PERIOD COVERED BY A CERTIFICATE WILL NOT INCLUDE MORE THAN ONE CALENDAR MONTH.

ITEM 4, 1. NON-WORK DAYS ARE THE 6TH AND 7TH DAY OF THE SCHEDULED WORK WEEK.

ITEM 6. THE NUMBER OF CONTRACT HOLIDAYS IN THE PERIOD WILL BE ENTERED REGARDLESS OF WHETHER THEY WERE WORK DAYS. IF THEY WERE WORK DAYS, THEY WILL BE SHOWN IN ITEM 8 AS OVERTIME EVEN IF CONTRACT DOES NOT PROVIDE FOR OVERTIME PREMIUM PAY. REIMBURSEMENT WILL BE MADE FOR HOLIDAY WORK IN ACCORDANCE WITH APPLICABLE CONTRACT.

ITEM 7. THE NUMBER OF BILLABLE DAYS IS THE TOTAL NUMBER OF DAYS IN THE PERIOD, LESS NON-WORK DAYS, VACATION DAYS, SICK DAYS, AND CONTRACT HOLIDAYS (OVERTIME NOT TO BE INCLUDED IN THIS ITEM.)

TRAVEL DAYS: WORK DAYS UTILIZED FOR AUTHORIZED TRAVEL WILL BE INCLUDED IN THIS ITEM. ALL OTHER DAYS UTILIZED IN AUTHORIZED TRAVEL WILL BE INDICATED IN REMARKS SECTION, GIVING TYPE AND TIME OF TRAVEL.

ENTRIES IN ITEMS 8, 10, 11, 12, AND 14 MAY BE DOUBLE-SPACED OR SINGLE-SPACED AS REQUIRED. IF ADDITIONAL SPACE IS NEEDED, ITEM 21 WILL BE USED.

ITEMS 11 AND 12. THE POINT "FROM" AND "TO", IN ITEMS 11 AND 12, MUST BE THE ACTUAL LOCATIONS VISITED. (EXAMPLE: OFFUTT AFB, NEB OMAMA, NEBRASKA.)

MONTH AND YEAR MAY BE OMITTED WHEN ENTERING DATES, EXCEPT FOR DATE OF CERTIFICATE AND ITEM 3. ALL OTHER DATES MUST BE WITHIN THE PERIOD COVERED BY THE CERTIFICATE.

ITEM 23. IF SERVICES WERE NOT SATISFACTORY, OR IF THERE IS DISAGREEMENT AS TO SERVICE PERFORMED, THE AF SUPERVISORY OFFICER MUST EXPLAIN IN ITEM 23.

NOTE: ONE COPY OF TRAVEL ORDER WILL BE ATTACHED TO EACH COPY OF CERTIFICATE OF SERVICE ON WHICH TRAVEL OR TOY IS REPORTED.

L-296 (6-65) 7243

CERTIFICATE OF SERVICE

CONTRACTOR Goodyear Aerospace Corporation Arizona Division Litchfield Park, Arizona				TO (MAJOR AIR COMMAND) ASD (ASZB - Col. Bellis) WPAFB 20331				
CONTRACT AF33(600)				DATE OF CERTIFICATE 31, August 1966				
1. NAME OF CTSP (LAST, FIRST AND MIDDLE) [REDACTED]		2. AF UNIT		3. PERIOD OF CERTIFICATE (INCLUSIVE DATES) 1 August '66 ^{HRU} 31 August ^{STAT}				
4. TOTAL DAYS COVERED THIS PERIOD 31	4A. LESS NONWORK DAYS 8	4B. LESS VACATION N/A ^{THRU} THRU	5. LESS SICK TIME N/A ^{THRU} THRU	6. LESS CONTRACT HOLIDAYS NONE	7. BILLABLE DAYS 23			
8. AUTHORIZED OVERTIME HOURS WORKED (NOT INCLUDED IN ITEM 7)								
DATE	TIME & ONE HALF	DOUBLE TIME	DATE	TIME & ONE HALF	DOUBLE TIME	DATE	TIME & ONE HALF	DOUBLE TIME
4 Aug.	5.5		16 Aug.	4		23 Aug.	4	
8 Aug.	4.5							
9 Aug.	4		17 Aug.	8		24 Aug.	7	
10 Aug.	7					26 Aug.	6.5	
11 Aug.	4		18 Aug.	4.5		30 Aug.	7	
15 Aug.	4					31 Aug.	4.5	
9. DATES ON WHICH PREMIUM PAY SHIFTS WERE WORKED N/A								
10. TEMPORARY DUTY AWAY FROM HOME STATION (ENTER HOUR AND DATE OF DEPARTURE AND RETURN)								
DEPARTED	RETURNED	DEPARTED	RETURNED	DEPARTED	RETURNED			
N/A								
11. AUTHORIZED TRAVEL PERFORMED BY COMMERCIAL CARRIER (INCLUDING TAXICAB, ETC.)								
INCLUSIVE DATES	FROM -	TO -	MODE	COST				
N/A ^{THRU}								
THRU								
THRU								
12. AUTHORIZED PRIVATELY OWNED CONVEYANCE (EXCEPT ON-BASE MILEAGE)								
INCLUSIVE DATES	FROM -	TO -	TOLLS	MILES				
N/A ^{THRU}								
THRU								
THRU								
THRU								
13. AUTHORIZED ON-BASE MILEAGE BY PRIVATELY OWNED CONVEYANCE: N/A MILES								
14. GOVERNMENT TRANSPORTATION REQUESTS USED								
DATE ISSUED	ISSUING AGENCY	FROM -	TO -					
N/A								
15. GOVERNMENT QUARTERS WERE ASSIGNED ON THE FOLLOWING DATES: NONE								

16. IF THIS IS THE INITIAL CERTIFICATE SUBMITTED FROM THIS AF UNIT, STATE PLACE OF LAST ASSIGNMENT AND DATE OF DEPARTURE:		N/A
DEPARTED (PLACE)	ON (DATE)	
17. IF THIS IS THE FINAL CERTIFICATE SUBMITTED FROM THIS AF UNIT, STATE DATE OF DEPARTURE:		N/A
18. DEPARTED THE UNITED STATES FOR OVERSEAS DUTY FROM:		N/A
(PORT)	ON (DATE)	
19. ARRIVED THE UNITED STATES FROM OVERSEAS DUTY AT:		N/A
(PORT)	ON (DATE)	
20. NAME OF COUNTRY WHERE OVERSEAS DUTY WAS PERFORMED DURING THIS PERIOD (UNLESS PROHIBITED FOR SECURITY REASONS)		N/A
21. ADDITIONAL INFORMATION AND REMARKS:		

22. C E R T I F I C A T E I THRU 21 ABOVE IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. STAT

23. C E R T I F I C A T E I F THE SERVICES REPORTED ABOVE WERE PERFORMED IN A SATISFACTORY MANNER, THAT ALL OVERTIME AND TRAVEL REPORTED WERE AUTHORIZED IN ADVANCE BY COMPETENT AUTHORITY, AND THAT APPROPRIATE WRITTEN ORDERS HAVE BEEN ISSUED OR REQUESTED, WITH THE FOLLOWING EXCEPTIONS:

(IF SERVICES WERE NOT SATISFACTORY, COMPLETE WRITTEN REPORT HAS BEEN PREPARED)

NAME	GRADE	STAT
	* Colonel	
AFSN	ORGANIZATION	STAT
FR 51861	FTTAM	

INSTRUCTIONS FOR PREPARATION:

ITEMS NOT APPLICABLE WILL BE INDICATED BY N/A (EXCEPT ITEM 15, ENTER NONE OR APPLICABLE DATES)

THE PERIOD COVERED BY A CERTIFICATE WILL NOT INCLUDE MORE THAN ONE CALENDAR MONTH.

ITEM 11. NON-WORK DAYS ARE THE 6TH AND 7TH DAY OF THE SCHEDULED WORK WEEK.

ITEM 6. THE NUMBER OF CONTRACT HOLIDAYS IN THE PERIOD WILL BE ENTERED REGARDLESS OF WHETHER THEY WERE WORK DAYS. IF THEY WERE WORK DAYS, THEY WILL BE SHOWN IN ITEM 8 AS OVERTIME EVEN IF CONTRACT DOES NOT PROVIDE FOR OVERTIME PREMIUM PAY. REIMBURSEMENT WILL BE MADE FOR HOLIDAY WORK IN ACCORDANCE WITH APPLICABLE CONTRACT.

ITEM 7. THE NUMBER OF BILLABLE DAYS IS THE TOTAL NUMBER OF DAYS IN THE PERIOD, LESS NON-WORK DAYS, VACATION DAYS, SICK DAYS, AND CONTRACT HOLIDAYS (OVERTIME NOT TO BE INCLUDED IN THIS ITEM.)

TRAVEL DAYS: WORK DAYS UTILIZED FOR AUTHORIZED TRAVEL WILL BE INCLUDED IN THIS ITEM. ALL OTHER DAYS UTILIZED IN AUTHORIZED TRAVEL WILL BE INDICATED IN REMARKS SECTION, GIVING TYPE AND TIME OF TRAVEL.

ENTRIES IN ITEMS 8, 10, 11, 12, AND 14 MAY BE DOUBLE-SPACED OR SINGLE-SPACED AS REQUIRED. IF ADDITIONAL SPACE IS NEEDED, ITEM 24 WILL BE USED.

ITEMS 11 AND 12. THE POINT "FROM" AND "TO", IN ITEMS 11 AND 12, MUST BE THE ACTUAL LOCATIONS VISITED. (EXAMPLE: OFFUTT AFB, NEB; OMAHA, NEBRASKA.)

MONTH AND YEAR MAY BE OMITTED WHEN ENTERING DATES, EXCEPT FOR DATE OF CERTIFICATE AND ITEM 3. ALL OTHER DATES MUST BE WITHIN THE PERIOD COVERED BY THE CERTIFICATE.

ITEM 23. IF SERVICES WERE NOT SATISFACTORY, OR IF THERE IS DISAGREEMENT AS TO SERVICE PERFORMED, THE AF SUPERVISORY OFFICER MUST EXPLAIN IN ITEM 23.

NOTE: ONE COPY OF TRAVEL ORDER WILL BE ATTACHED TO EACH COPY OF CERTIFICATE OF SERVICE ON WHICH TRAVEL OR TOY IS REPORTED.

L-296 (6-65) 7243

CERTIFICATE OF SERVICE

CONTRACTOR Goodyear Aerospace Corporation Arizona Division Litchfield Park, Arizona				TO(MAJOR AIR COMMAND) ASD (ASZB - Col. Bellis) WPAFB 2033L				
CONTRACT AF33(600)				DATE OF CERTIFICATE 31 August 1966				
1. NAME OF CTSP (LAST, FIRST AND MIDDLE) (NMI)		2. AF UNIT		3. PERIOD OF CERTIFICATE (INCLUSIVE DATES) 1 August '66 THRU 31 August STAT				
4. TOTAL DAYS COVERED THIS PERIOD 31	4A. LESS NONWORK DAYS 8	4B. LESS VACATION 1 THRU 6 THRU	5. LESS SICK TIME N/A THRU THRU	6. LESS CONTRACT HOLIDAYS NONE	7. BILLABLE DAYS 18			
8. AUTHORIZED OVERTIME HOURS WORKED (NOT INCLUDED IN ITEM 7)								
DATE	TIME & ONE HALF	DOUBLE TIME	DATE	TIME & ONE HALF	DOUBLE TIME	DATE	TIME & ONE HALF	DOUBLE TIME
9 Aug.	7		23 Aug.	4.5		30 Aug.	7	
10 Aug.	7		24 Aug.	8				
11 Aug.	4.5		25 Aug.	5.5		31 Aug.	6.5	
12 Aug.	4							
17 Aug.	8		29 Aug.	8				
18 Aug.	7.5							
9. DATES ON WHICH PREMIUM PAY SHIFTS WERE WORKED N/A								
10. TEMPORARY DUTY AWAY FROM HOME STATION (ENTER HOUR AND DATE OF DEPARTURE AND RETURN)								
DEPARTED	RETURNED	DEPARTED	RETURNED	DEPARTED	RETURNED	DEPARTED	RETURNED	
N/A								
11. AUTHORIZED TRAVEL PERFORMED BY COMMERCIAL CARRIER (INCLUDING TAXICAB, ETC.)								
INCLUSIVE DATES	FROM -	TO -	MODE	COST				
N/A THRU								
THRU								
THRU								
12. AUTHORIZED PRIVATELY OWNED CONVEYANCE (EXCEPT ON-BASE MILEAGE)								
INCLUSIVE DATES	FROM -	TO -	TOLLS	MILES				
N/A THRU								
THRU								
THRU								
THRU								
13. AUTHORIZED ON-BASE MILEAGE BY PRIVATELY OWNED CONVEYANCE: N/A MILES								
14. GOVERNMENT TRANSPORTATION REQUESTS USED								
DATE ISSUED	ISSUING AGENCY	FROM -	TO -					
N/A								
15. GOVERNMENT QUARTERS WERE ASSIGNED ON THE FOLLOWING DATES: NONE								

16. IF THIS IS THE INITIAL CERTIFICATE SUBMITTED FROM THIS AF UNIT, STATE PLACE OF LAST ASSIGNMENT AND DATE OF DEPARTURE:			N/A
DEPARTED (PLACE)	ON (DATE)		
17. IF THIS IS THE FINAL CERTIFICATE SUBMITTED FROM THIS AF UNIT, STATE DATE OF DEPARTURE:			N/A
18. DEPARTED THE UNITED STATES FOR OVERSEAS DUTY FROM:			N/A
(PORT)	ON (DATE)		
19. ARRIVED THE UNITED STATES FROM OVERSEAS DUTY AT:			N/A
(PORT)	ON (DATE)		
20. NAME OF COUNTRY WHERE OVERSEAS DUTY WAS PERFORMED DURING THIS PERIOD (UNLESS PROHIBITED FOR SECURITY REASONS)			N/A
21. ADDITIONAL INFORMATION AND REMARKS:			

22. INFORMATION IN ITEMS 1 THRU 21 ABOVE IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. STAT

23. CERTIFICATION: I CERTIFY THAT, TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE SERVICES REPORTED ABOVE WERE PERFORMED IN A SATISFACTORY MANNER, THAT ALL OVERTIME AND TRAVEL REPORTED WERE AUTHORIZED IN ADVANCE BY COMPETENT AUTHORITY, AND THAT APPROPRIATE WRITTEN ORDERS HAVE BEEN ISSUED OR REQUESTED, WITH THE FOLLOWING EXCEPTIONS:

STAT

(IF SERVICES WERE NOT SATISFACTORY, COMPLETE WRITTEN REPORT HAS BEEN PREPARED)

NAME	GRADE	SIGNATURE (MANUAL SIGNATURE IS REQUIRED) (FACSIMILE IS NOT ACCEPTABLE)
	Colonel	
AFSB#	ORGANIZATION	
FR 51861	FTTAM	

STAT

INSTRUCTIONS FOR PREPARATION:

ITEMS NOT APPLICABLE WILL BE INDICATED BY N/A (EXCEPT ITEM 15, ENTER NONE OR APPLICABLE DATES)

THE PERIOD COVERED BY A CERTIFICATE WILL NOT INCLUDE MORE THAN ONE CALENDAR MONTH.

ITEM 4.1. NON-WORK DAYS ARE THE 6TH AND 7TH DAY OF THE SCHEDULED WORK WEEK.

ITEM 6. THE NUMBER OF CONTRACT HOLIDAYS IN THE PERIOD WILL BE ENTERED REGARDLESS OF WHETHER THEY WERE WORK DAYS. IF THEY WERE WORK DAYS, THEY WILL BE SHOWN IN ITEM 8 AS OVERTIME EVEN IF CONTRACT DOES NOT PROVIDE FOR OVERTIME PREMIUM PAY. REIMBURSEMENT WILL BE MADE FOR HOLIDAY WORK IN ACCORDANCE WITH APPLICABLE CONTRACT.

ITEM 7. THE NUMBER OF BILLABLE DAYS IS THE TOTAL NUMBER OF DAYS IN THE PERIOD, LESS NON-WORK DAYS, VACATION DAYS, SICK DAYS, AND CONTRACT HOLIDAYS (OVERTIME NOT TO BE INCLUDED IN THIS ITEM.)

TRAVEL DAYS: WORK DAYS UTILIZED FOR AUTHORIZED TRAVEL WILL BE INCLUDED IN THIS ITEM. ALL OTHER DAYS UTILIZED IN AUTHORIZED TRAVEL WILL BE INDICATED IN REMARKS SECTION, GIVING TYPE AND TIME OF TRAVEL.

ENTRIES IN ITEMS 8, 10, 11, 12, AND 14 MAY BE DOUBLE-SPACED OR SINGLE-SPACED AS REQUIRED. IF ADDITIONAL SPACE IS NEEDED, ITEM 21 WILL BE USED.

ITEMS 11 AND 12. THE POINT "FROM" AND "TO", IN ITEMS 11 AND 12, MUST BE THE ACTUAL LOCATIONS VISITED. (EXAMPLE: OFFUTT AFB, NEB; OMAHA, NEBRASKA.)

MONTH AND YEAR MAY BE OMITTED WHEN ENTERING DATES, EXCEPT FOR DATE OF CERTIFICATE AND ITEM 3. ALL OTHER DATES MUST BE WITHIN THE PERIOD COVERED BY THE CERTIFICATE.

ITEM 23. IF SERVICES WERE NOT SATISFACTORY, OR IF THERE IS DISAGREEMENT AS TO SERVICE PERFORMED, THE AF SUPERVISORY OFFICER MUST EXPLAIN IN ITEM 23.

NOTE: ONE COPY OF TRAVEL ORDER WILL BE ATTACHED TO EACH COPY OF CERTIFICATE OF SERVICE ON WHICH TRAVEL OR TOY IS REPORTED.

L-296 (6-65) 7243

CERTIFICATE OF SERVICE

CONTRACTOR Goodyear Aerospace Corporation Arizona Division Litchfield Park, Arizona	TO (MAJOR AIR COMMAND) ASD (ASZB - Col. Bellis) WPAFB, Ohio 20331
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CONTRACT AP33(600)	DATE OF CERTIFICATE 31, August 1966
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1. TOTAL DAYS COVERED THIS PERIOD 31	2. AF UNIT	3. PERIOD OF CERTIFICATE (INCLUSIVE DATES) 1 August '66 THRU 31 August '66	4. LESS NON-WORK DAYS	5. LESS VACATION N/A THRU THRU	6. LESS SICK TIME N/A THRU THRU	7. LESS CONTRACT HOLIDAYS	8. BILLABLE DAYS 23
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8. AUTHORIZED OVERTIME HOURS WORKED (NOT INCLUDED IN ITEM 7)								
DATE	TIME & ONE HALF	DOUBLE TIME	DATE	TIME & ONE HALF	DOUBLE TIME	DATE	TIME & ONE HALF	DOUBLE TIME
1 Aug.	7.5		18 Aug.	6		29 Aug.	8	
2 Aug.	4.5		24 Aug.	8		30 Aug.	7	
3 Aug.	6		25 Aug.	6.5		31 Aug.	6.5	
4 Aug.	5							
9 Aug.	4.5							
17 Aug.	8							

9. DATES ON WHICH PREMIUM PAY SHIFTS WERE WORKED
N/A

10. TEMPORARY DUTY AWAY FROM HOME STATION (ENTER HOUR AND DATE OF DEPARTURE AND RETURN)					
DEPARTED	RETURNED	DEPARTED	RETURNED	DEPARTED	RETURNED
N/A					

11. AUTHORIZED TRAVEL PERFORMED BY COMMERCIAL CARRIER (INCLUDING TAXICAB, ETC.)				
INCLUSIVE DATES	FROM -	TO -	MODE	COST
N/A THRU				
THRU				
THRU				

12. AUTHORIZED PRIVATELY OWNED CONVEYANCE (EXCEPT ON-BASE MILEAGE)				
INCLUSIVE DATES	FROM -	TO -	TOLLS	MILES
N/A THRU				
THRU				
THRU				
THRU				

13. AUTHORIZED ON-BASE MILEAGE BY PRIVATELY OWNED CONVEYANCE:
N/A MILES

14. GOVERNMENT TRANSPORTATION REQUESTS USED			
DATE ISSUED	ISSUING AGENCY	FROM -	TO -
N/A			

15. GOVERNMENT QUARTERS WERE ASSIGNED ON THE FOLLOWING DATES:
NONE

16. IF THIS IS THE INITIAL CERTIFICATE SUBMITTED FROM THIS AF UNIT, STATE PLACE OF LAST ASSIGNMENT AND DATE OF DEPARTURE:		
DEPARTED (PLACE)	ON (DATE)	N/A
17. IF THIS IS THE FINAL CERTIFICATE SUBMITTED FROM THIS AF UNIT, STATE DATE OF DEPARTURE:		
		N/A
18. DEPARTED THE UNITED STATES FOR OVERSEAS DUTY FROM:		
(PORT)	ON (DATE)	N/A
19. ARRIVED THE UNITED STATES FROM OVERSEAS DUTY AT:		
(PORT)	ON (DATE)	N/A
20. NAME OF COUNTRY WHERE OVERSEAS DUTY WAS PERFORMED DURING THIS PERIOD (UNLESS PROHIBITED FOR SECURITY REASONS)		
		N/A
21. ADDITIONAL INFORMATION AND REMARKS:		

22. CERTIFICATION: I CERTIFY THAT THE INFORMATION IN ITEMS 1 THRU 21 ABOVE IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

STAT

23. CERTIFICATION: I CERTIFY THAT, TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE SERVICES REPORTED ABOVE WERE PERFORMED IN A SATISFACTORY MANNER, THAT ALL OVERTIME AND TRAVEL REPORTED WERE AUTHORIZED IN ADVANCE BY COMPETENT AUTHORITY, AND THAT APPROPRIATE WRITTEN ORDERS HAVE BEEN ISSUED OR REQUESTED, WITH THE FOLLOWING EXCEPTIONS:

STAT

(IF SERVICES WERE NOT SATISFACTORY, COMPLETE WRITTEN REPORT HAS BEEN PREPARED AND

NAME	GRADE	STAT
	* Colonel	
AFSN	ORGANIZATION	STAT
FR 51861	FTTAM	

INSTRUCTIONS FOR PREPARATION:

ITEMS NOT APPLICABLE WILL BE INDICATED BY N/A (EXCEPT ITEM 15, ENTER NONE OR APPLICABLE DATES)

THE PERIOD COVERED BY A CERTIFICATE WILL NOT INCLUDE MORE THAN ONE CALENDAR MONTH.

ITEM 4.1. NON-WORK DAYS ARE THE 6TH AND 7TH DAY OF THE SCHEDULED WORK WEEK.

ITEM 6. THE NUMBER OF CONTRACT HOLIDAYS IN THE PERIOD WILL BE ENTERED REGARDLESS OF WHETHER THEY WERE WORK DAYS. IF THEY WERE WORK DAYS, THEY WILL BE SHOWN IN ITEM 8 AS OVERTIME EVEN IF CONTRACT DOES NOT PROVIDE FOR OVERTIME PREMIUM PAY. REIMBURSEMENT WILL BE MADE FOR HOLIDAY WORK IN ACCORDANCE WITH APPLICABLE CONTRACT.

ITEM 7. THE NUMBER OF BILLABLE DAYS IS THE TOTAL NUMBER OF DAYS IN THE PERIOD, LESS NON-WORK DAYS, VACATION DAYS, SICK DAYS, AND CONTRACT HOLIDAYS (OVERTIME NOT TO BE INCLUDED IN THIS ITEM.)

TRAVEL DAYS: WORK DAYS UTILIZED FOR AUTHORIZED TRAVEL WILL BE INCLUDED IN THIS ITEM. ALL OTHER DAYS UTILIZED IN AUTHORIZED TRAVEL WILL BE INDICATED IN REMARKS SECTION, GIVING TYPE AND TIME OF TRAVEL.

ENTRIES IN ITEMS 8, 10, 11, 12, AND 14 MAY BE DOUBLE-SPACED OR SINGLE-SPACED AS REQUIRED. IF ADDITIONAL SPACE IS NEEDED, ITEM 21 WILL BE USED.

ITEMS 11 AND 12. THE POINT "FROM" AND "TO", IN ITEMS 11 AND 12, MUST BE THE ACTUAL LOCATIONS VISITED. (EXAMPLE: OFFUTT AFB, NEB; OMAHA, NEBRASKA.)

MONTH AND YEAR MAY BE OMITTED WHEN ENTERING DATES, EXCEPT FOR DATE OF CERTIFICATE AND ITEM 3. ALL OTHER DATES MUST BE WITHIN THE PERIOD COVERED BY THE CERTIFICATE.

ITEM 23. IF SERVICES WERE NOT SATISFACTORY, OR IF THERE IS DISAGREEMENT AS TO SERVICE PERFORMED, THE AF SUPERVISORY OFFICER MUST EXPLAIN IN ITEM 23.

NOTE: ONE COPY OF TRAVEL ORDER WILL BE ATTACHED TO EACH COPY OF CERTIFICATE OF SERVICE ON WHICH TRAVEL OR TDY IS REPORTED.

L-296 (6-65) 7243

CERTIFICATE OF SERVICE

CONTRACTOR Goodyear Aerospace Corporation Arizona Division Hitchfield Park, Arizona				TO (MAJOR AIR COMMAND) ASD (ASZB - Col. Bellis) WPAFB, Ohio 20331						
CONTRACT AF33(600)			EXHIBIT NO.			DATE OF CERTIFICATE 31, August 1966				
1. NAME OF CTSP (LAST, FIRST AND MIDDLE) _____			2. AF UNIT			3. PERIOD OF CERTIFICATE (INCLUSIVE DATES) 1 August '66 THRU 31 August STAT				
4. TOTAL DAYS COVERED THIS PERIOD <p style="text-align: center;">31</p>		4A. LESS NONWORK DAYS <p style="text-align: center;">8</p>		4B. LESS VACATION 1 THRU 5 8 THRU 12		5. LESS SICK TIME N/A THRU THRU		6. LESS CONTRACT HOLIDAYS <p style="text-align: center;">NONE</p>		7. BILLABLE DAYS <p style="text-align: center;">13</p>
8. AUTHORIZED OVERTIME HOURS WORKED (NOT INCLUDED IN ITEM 7)										
DATE	TIME & ONE HALF		DOUBLE TIME		DATE	TIME & ONE HALF		DOUBLE TIME		
15 Aug.	6				25 Aug.	4				
17 Aug.	8				30 Aug.	7				
18 Aug.	4.5				27 Aug.	8				
19 Aug.	2				31 Aug.	6.5				
23 Aug.	5									
24 Aug.	7									
9. DATES ON WHICH PREMIUM PAY SHIFTS WERE WORKED <p style="text-align: center;">N/A</p>										
10. TEMPORARY DUTY AWAY FROM HOME STATION (ENTER HOUR AND DATE OF DEPARTURE AND RETURN)										
DEPARTED		RETURNED		DEPARTED		RETURNED		DEPARTED		RETURNED
N/A										
11. AUTHORIZED TRAVEL PERFORMED BY COMMERCIAL CARRIER (INCLUDING TAXICAB, ETC.)										
INCLUSIVE DATES		FROM -			TO -			MODE	COST	
N/A THRU										
THRU										
THRU										
12. AUTHORIZED PRIVATELY OWNED CONVEYANCE (EXCEPT ON-BASE MILEAGE)										
INCLUSIVE DATES		FROM -			TO -			TOLLS	MILES	
N/A THRU										
THRU										
THRU										
THRU										
13. AUTHORIZED ON-BASE MILEAGE BY PRIVATELY-OWNED CONVEYANCE: N/A MILES										
14. GOVERNMENT TRANSPORTATION REQUESTS USED										
DATE ISSUED		ISSUING AGENCY			FROM -			TO -		
N/A										
15. GOVERNMENT QUARTERS WERE ASSIGNED ON THE FOLLOWING DATES: <p style="text-align: center;">NONE</p>										

16. IF THIS IS THE INITIAL CERTIFICATE SUBMITTED FROM THIS AF UNIT, STATE PLACE OF LAST ASSIGNMENT AND DATE OF DEPARTURE:		N/A
DEPARTED (PLACE)	ON (DATE)	
17. IF THIS IS THE FINAL CERTIFICATE SUBMITTED FROM THIS AF UNIT, STATE DATE OF DEPARTURE:		N/A
18. DEPARTED THE UNITED STATES FOR OVERSEAS DUTY FROM:		N/A
(PORT)	ON (DATE)	
19. ARRIVED THE UNITED STATES FROM OVERSEAS DUTY AT:		N/A
(PORT)	ON (DATE)	
20. NAME OF COUNTRY WHERE OVERSEAS DUTY WAS PERFORMED DURING THIS PERIOD (UNLESS PROHIBITED FOR SECURITY REASONS)		N/A
21. ADDITIONAL INFORMATION AND REMARKS:		
22. CERTIFICATION: I CERTIFY THAT THE INFORMATION IN ITEMS 7 THRU 21 ABOVE IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.		STAT
23. CERTIFICATION: I CERTIFY THAT, TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE SERVICES REPORTED ABOVE WERE PERFORMED IN A SATISFACTORY MANNER, THAT ALL OVERTIME AND TRAVEL REPORTED WERE AUTHORIZED IN ADVANCE BY COMPETENT AUTHORITY, AND THAT APPROPRIATE WRITTEN ORDERS HAVE BEEN ISSUED OR REQUESTED, WITH THE FOLLOWING EXCEPTIONS:		
(IF SERVICES WERE NOT SATISFACTORY, COMPLETE WRITTEN REPORT HAS BEEN PREPARED)		
NAME	GRADE	
	* Colonel	
AFBN	ORGANIZATION	
FR 51861	FTEAM	
<p>INSTRUCTIONS FOR PREPARATION:</p> <p>ITEMS NOT APPLICABLE WILL BE INDICATED BY N/A (EXCEPT ITEM 15, ENTER NONE OR APPLICABLE DATES)</p> <p>THE PERIOD COVERED BY A CERTIFICATE WILL NOT INCLUDE MORE THAN ONE CALENDAR MONTH.</p> <p>ITEM 4.1. NON-WORK DAYS ARE THE 6TH AND 7TH DAY OF THE SCHEDULED WORK WEEK.</p> <p>ITEM 6. THE NUMBER OF CONTRACT HOLIDAYS IN THE PERIOD WILL BE ENTERED REGARDLESS OF WHETHER THEY WERE WORK DAYS. IF THEY WERE WORK DAYS, THEY WILL BE SHOWN IN ITEM 8 AS OVERTIME EVEN IF CONTRACT DOES NOT PROVIDE FOR OVERTIME PREMIUM PAY. REIMBURSEMENT WILL BE MADE FOR HOLIDAY WORK IN ACCORDANCE WITH APPLICABLE CONTRACT.</p> <p>ITEM 7. THE NUMBER OF BILLABLE DAYS IS THE TOTAL NUMBER OF DAYS IN THE PERIOD, LESS NON-WORK DAYS, VACATION DAYS, SICK DAYS, AND CONTRACT HOLIDAYS (OVERTIME NOT TO BE INCLUDED IN THIS ITEM.)</p> <p>TRAVEL DAYS: WORK DAYS UTILIZED FOR AUTHORIZED TRAVEL WILL BE INCLUDED IN THIS ITEM. ALL OTHER DAYS UTILIZED IN AUTHORIZED TRAVEL WILL BE INDICATED IN REMARKS SECTION, GIVING TYPE AND TIME OF TRAVEL.</p> <p>ENTRIES IN ITEMS 8, 10, 11, 12, AND 14 MAY BE DOUBLE-SPACED OR SINGLE-SPACED AS REQUIRED. IF ADDITIONAL SPACE IS NEEDED, ITEM 21 WILL BE USED.</p> <p>ITEMS 11 AND 12. THE POINT "FROM" AND "TO", IN ITEMS 11 AND 12, MUST BE THE ACTUAL LOCATIONS VISITED. (EXAMPLE: OFFUTT AFB, NEB; OMAHA, NEBRASKA.)</p> <p>MONTH AND YEAR MAY BE OMITTED WHEN ENTERING DATES, EXCEPT FOR DATE OF CERTIFICATE AND ITEM 3. ALL OTHER DATES MUST BE WITHIN THE PERIOD COVERED BY THE CERTIFICATE.</p> <p>ITEM 23. IF SERVICES WERE NOT SATISFACTORY, OR IF THERE IS DISAGREEMENT AS TO SERVICE PERFORMED, THE AF SUPERVISORY OFFICER MUST EXPLAIN IN ITEM 23.</p> <p>NOTE: ONE COPY OF TRAVEL ORDER WILL BE ATTACHED TO EACH COPY OF CERTIFICATE OF SERVICE ON WHICH TRAVEL OR TDY IS REPORTED.</p>		

11/20/66

CERTIFICATE OF SERVICE

CONTRACTOR Goodyear Aerospace Corporation Arizona Division Litchfield Park, Arizona	TO (MAJOR AIR COMMAND) ASD (ASZB - Col. Bellis) WPAFB, Ohio 20331
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CONTRACT AF33(600)	DATE OF CERTIFICATE 31, August 1966
------------------------------	-----------------------------------------------

1. NAME OF CTSP (LAST, FIRST AND MIDDLE) _____	2. AF UNIT _____	3. PERIOD OF CERTIFICATE (INCLUSIVE DATES) 1 August '66 THRU 31 August STAT			
4. TOTAL DAYS COVERED THIS PERIOD 31	4A. LESS NON-WORK DAYS 8	4B. LESS VACATION N/A THRU THRU	5. LESS SICK TIME N/A THRU THRU	6. LESS CONTRACT HOLIDAYS NONE	7. BILLABLE DAYS 23

8. AUTHORIZED OVERTIME HOURS WORKED (NOT INCLUDED IN ITEM 7)								
DATE	TIME & ONE HALF	DOUBLE TIME	DATE	TIME & ONE HALF	DOUBLE TIME	DATE	TIME & ONE HALF	DOUBLE TIME
1 Aug.	4		15 Aug.	6		25 Aug.	4.5	
2 Aug.	4		16 Aug.	5		27 Aug.	8	
4 Aug.	5.5		17 Aug.	8		29 Aug.	8	
9 Aug.	7		18 Aug.	5		30 Aug.	7	
10 Aug.	7		23 Aug.	4		31 Aug.	6.5	
11 Aug.	4.5		24 Aug.	8				

9. DATES ON WHICH PREMIUM PAY SHIFTS WERE WORKED
 N/A

10. TEMPORARY DUTY AWAY FROM HOME STATION (ENTER HOUR AND DATE OF DEPARTURE AND RETURN)					
DEPARTED	RETURNED	DEPARTED	RETURNED	DEPARTED	RETURNED
N/A					

11. AUTHORIZED TRAVEL PERFORMED BY COMMERCIAL CARRIER (INCLUDING TAXICAB, ETC.)				
INCLUSIVE DATES	FROM -	TO -	MODE	COST
N/A THRU				
THRU				
THRU				

12. AUTHORIZED PRIVATELY OWNED CONVEYANCE (EXCEPT ON-BASE MILEAGE)				
INCLUSIVE DATES	FROM -	TO -	TOLLS	MILES
N/A THRU				
THRU				
THRU				
THRU				

13. AUTHORIZED ON-BASE MILEAGE BY PRIVATELY-OWNED CONVEYANCE:
 N/A MILES

14. GOVERNMENT TRANSPORTATION REQUESTS USED			
DATE ISSUED	ISSUING AGENCY	FROM -	TO -
N/A			

15. GOVERNMENT QUARTERS WERE ASSIGNED ON THE FOLLOWING DATES:
 NONE

16. IF THIS IS THE INITIAL CERTIFICATE SUBMITTED FROM THIS AF UNIT, STATE PLACE OF LAST ASSIGNMENT AND DATE OF DEPARTURE:		
DEPARTED (PLACE)	ON (DATE)	N/A
17. IF THIS IS THE FINAL CERTIFICATE SUBMITTED FROM THIS AF UNIT, STATE DATE OF DEPARTURE:		
		N/A
18. DEPARTED THE UNITED STATES FOR OVERSEAS DUTY FROM:		
(PORT)	ON (DATE)	N/A
19. ARRIVED THE UNITED STATES FROM OVERSEAS DUTY AT:		
(PORT)	ON (DATE)	N/A
20. NAME OF COUNTRY WHERE OVERSEAS DUTY WAS PERFORMED DURING THIS PERIOD (UNLESS PROHIBITED FOR SECURITY REASONS)		
		N/A
21. ADDITIONAL INFORMATION AND REMARKS:		
22. CERTIFICATION: I CERTIFY THAT THE INFORMATION IN ITEMS 1 THRU 21 ABOVE IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.		
<div style="border: 1px solid black; width: 150px; height: 20px; margin: 0 auto;"></div>		STAT
23. CERTIFICATION: I CERTIFY THAT, TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE SERVICES REPORTED ABOVE WERE PERFORMED IN A SATISFACTORY MANNER, THAT ALL OVERTIME AND TRAVEL REPORTED WERE AUTHORIZED IN ADVANCE BY COMPETENT AUTHORITY, AND THAT APPROPRIATE WRITTEN ORDERS HAVE BEEN ISSUED OR REQUESTED, WITH THE FOLLOWING EXCEPTIONS:		
(IF SERVICES WERE NOT SATISFACTORY, COMPLETE WRITTEN REPORT HAS BEEN PREPARED AND		
NAME	GRADE	
	* Colonel	
AFSN	ORGANIZATION	
FR 51861	FTTAM	
<p>INSTRUCTIONS FOR PREPARATION:</p> <p>ITEMS NOT APPLICABLE WILL BE INDICATED BY N/A (EXCEPT ITEM 15, ENTER NONE OR APPLICABLE DATES)</p> <p>THE PERIOD COVERED BY A CERTIFICATE WILL NOT INCLUDE MORE THAN ONE CALENDAR MONTH.</p> <p>ITEM 11. NON-WORK DAYS ARE THE 6TH AND 7TH DAY OF THE SCHEDULED WORK WEEK.</p> <p>ITEM 6. THE NUMBER OF CONTRACT HOLIDAYS IN THE PERIOD WILL BE ENTERED REGARDLESS OF WHETHER THEY WERE WORK DAYS. IF THEY WERE WORK DAYS, THEY WILL BE SHOWN IN ITEM 8 AS OVERTIME EVEN IF CONTRACT DOES NOT PROVIDE FOR OVERTIME PREMIUM PAY. REIMBURSEMENT WILL BE MADE FOR HOLIDAY WORK IN ACCORDANCE WITH APPLICABLE CONTRACT.</p> <p>ITEM 7. THE NUMBER OF BILLABLE DAYS IS THE TOTAL NUMBER OF DAYS IN THE PERIOD, LESS NON-WORK DAYS, VACATION DAYS, SICK DAYS, AND CONTRACT HOLIDAYS (OVERTIME NOT TO BE INCLUDED IN THIS ITEM.)</p> <p>TRAVEL DAYS: WORK DAYS UTILIZED FOR AUTHORIZED TRAVEL WILL BE INCLUDED IN THIS ITEM. ALL OTHER DAYS UTILIZED IN AUTHORIZED TRAVEL WILL BE INDICATED IN REMARKS SECTION, GIVING TYPE AND TIME OF TRAVEL.</p> <p>ENTRIES IN ITEMS 8, 10, 11, 12, AND 14 MAY BE DOUBLE-SPACED OR SINGLE-SPACED AS REQUIRED. IF ADDITIONAL SPACE IS NEEDED, ITEM 21 WILL BE USED.</p> <p>ITEMS 11 AND 12. THE POINT "FROM" AND "TO", IN ITEMS 11 AND 12, MUST BE THE ACTUAL LOCATIONS VISITED. (EXAMPLE: OFFUTT AFB, NEB; OMAHA, NEBRASKA.)</p> <p>MONTH AND YEAR MAY BE OMITTED WHEN ENTERING DATES, EXCEPT FOR DATE OF CERTIFICATE AND ITEM 3. ALL OTHER DATES MUST BE WITHIN THE PERIOD COVERED BY THE CERTIFICATE.</p> <p>ITEM 23. IF SERVICES WERE NOT SATISFACTORY, OR IF THERE IS DISAGREEMENT AS TO SERVICE PERFORMED, THE AF SUPERVISORY OFFICER MUST EXPLAIN IN ITEM 23.</p> <p>NOTE: ONE COPY OF TRAVEL ORDER WILL BE ATTACHED TO EACH COPY OF CERTIFICATE OF SERVICE ON WHICH TRAVEL OR TDY IS REPORTED.</p>		

SECRET
(When Filled In)

File

REQUEST FOR PAYMENT AND POSTING VOUCHER										VOUCHER NO. - DATE 2-12		
TO : Accounts Division (Room)		Bldg.)								DIVISION VOUCHER NO.		
THROUGH: Monetary Division (Room)		Bldg.)								7 Sept. 66 1134		
Request payment be made and/or transaction be recorded as indicated below. Pertinent documentation in support of this transaction is on file in this office.												
SUBJECT								INVOICE NO(S). <i>2 and 3</i>				
PAYMENT TO <i>Goodyear Aerospace Corp.</i>								CONTRACT NO. <i>CW-6744</i>				
AMOUNT <i>\$56,639.28</i>								CHECK TO BE DATED				
CASH PAYMENT <input checked="" type="checkbox"/>			U.S. TREASURY CHECK			AGENT CASHIER CHECK			BANK CASHIER'S CHECK			
THE ATTACHED CHECKS AND/OR CASH IN THE AMOUNT OF \$ SHOULD BE TAKEN INTO ACCOUNT AS INDICATED BELOW.												
I HEREBY AUTHORIZE MY AGENT, WHOSE SIGNATURE APPEARS BELOW, TO RECEIVE \$ OF OFFICIAL FUNDS IN CURRENCY ON MY BEHALF.												
DATE	SIGNATURE OF PAYEE			DATE	SIGNATURE OF AGENT			DATE	SIGNATURE OF RECIPIENT			
DESCRIPTION - ALL OTHER ACCOUNTS 13 - 33		34 - 39 STATION CODE		40 - 41	42 - 47 OBLIG. REF. NO.	48 - 49	50 CA OR C O T YR.	51 - 54 GENERAL LEDGER ACCT. NO.	55 - 66 ALLOT. - COST - FAN ACCOUNT SYMBOL		67 - 70 OBJECT CLASS	71 - 80 AMOUNT
ADVANCE ACCOUNTS 13 - 27		28 - 33 T/A NO.	REC. RPT. NO.	ADVANCE ACCT. NO.	PAY PER. LIO. CODE				61 - 66 CK. NO. X REF. NO.	68 - 70 DUE DATE	DEBIT	CREDIT
		32-33 DIV.	PROJECT NO.	EMP. NO.								
<i>Goodyear</i>				<i>88</i>	<i>006744</i>		<i>1</i>	<i>601.077</i>	<i>61-1021</i>	<i>2540</i>	<i>56,639.28</i>	
<i>Goodyear</i>								<i>138.0</i>				<i>56,639.28</i>
<i>Original</i>										<i>1 Advance</i>		
<i>Contract - CW-6744</i>										<i>1 Voucher</i>		
TOTALS										<i>56,639.28</i>	<i>56,639.28</i>	
DATE	PREPARED BY	DATE	REVIEWED BY	CERTIFIED FOR PAYMENT OR CREDIT								
<i>7 Sept 66</i>				DATE	SIGNATURE OF CERTIFYING OFFICER			25X1				
				<i>7 SEP 1966</i>	<i>(Signed)</i>			25X1				

Sanitized Copy Approved for Release 2010/12/09 : CIA-RDP72B00464R000800100001-6
 7 GAO 5000
 1034-111
FEDERAL GOVERNMENT VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION	DATE VOUCHER PREPARED	SCHEDULE NO.	
	CONTRACT NUMBER AND DATE CW-6744		PAID BY
	REQUISITION NUMBER AND DATE		

PAYEE'S NAME AND ADDRESS Goodyear Aerospace Corp.	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER
	GOVERNMENT B/L NUMBER

SHIPPED FROM _____ TO _____ WEIGHT _____

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT (¹)
				COST	PER	
		<u>Invoice Numbers</u>				
		2 (Orig. Inv. Att.)				\$27,845.67
		3 " "				28,793.61

(Use continuation sheet(s) if necessary) **(Payee must NOT use the space below)** **TOTAL \$56,639.28**

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
	= \$	= \$1.00	
	BY		
	TITLE		Amount verified; correct for \$56,639.28

Pursuant to authority vested in me as _____ (Date) _____ (Contracting Officer) STAT

ACCOUNTING CLASSIFICATION

PAID BY	CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER	ON (Name of bank)
	CASH	DATE	PAYEE ³	
	\$			

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

501 y 27 11
original
page

Standard Form No. 1034
 7 GAO 5000
 1034-110-02

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

U.S. DEPARTMENT, BUREAU OR ESTABLISHMENT AND LOCATION U. S. GOVERNMENT	DATE VOUCHER PREPARED August 24, 1966	VOUCHER NUMBER 2
	CONTRACT NUMBER AND DATE	PAID BY
	REQUISITION NUMBER AND DATE	

PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION Akron, Ohio 44315	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER
	GOVERNMENT B/L NUMBER

EW 6744

SHIPPED FROM	TO	WEIGHT	GOVERNMENT B/L NUMBER
--------------	----	--------	-----------------------

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUANTITY	UNIT PRICE		AMOUNT (¹)
				COST	PER	
	7/18/66 thru 7/31/66	Direct Charges Overhead G & A Expense Fixed Fee				
			Current		To-Date	
			\$14,840.95		\$22,076.11	
			8,911.37		12,508.14	
			2,150.63		3,147.17	
			1,942.72		2,829.86	
(MO 8146AR)		COST REIMBURSABLE PROVISIONAL PAYMENT	\$27,845.67			
(Use continuation sheet(s) if necessary) (Payee must NOT use the space below)						TOTAL \$40,561.28

PAYMENT:	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
<input type="checkbox"/> COMPLETE	= \$	= \$ 1.00	
<input type="checkbox"/> PARTIAL	BY ²		
<input type="checkbox"/> FINAL			
<input type="checkbox"/> PROGRESS	TITLE		Amount verified; correct for
<input type="checkbox"/> ADVANCE			(Signature or initials)

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

(Date) _____ (Authorized Certifying Officer)² _____ (Title) _____
 ACCOUNTING CLASSIFICATION (Appropriation symbol must be shown; other classification optional)

CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER	ON (Name of bank)
CASH	DATE	PAYEE ³	
\$			

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

Standard Form No. 1035
7 GAO 8000
1035-107

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

CONTINUATION SHEET

SHEET NO. 1

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT

U. S. GOVERNMENT

VOUCHER NUMBER

2

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN- TITY	UNIT PRICE		AMOUNT
				COST	PER	
	7/18/66 thru 7/31/66	<u>DIRECT CHARGES</u>				<u>To-Date</u>
		Salaries & Wages				
		Regular		\$13,012.87		\$19,318.33
		Overtime Premium		382.11		601.81
				\$13,394.98		\$19,920.14
		<u>Material Subject to Mat'l. Handling Expense</u>				
		Purchases - Fixed Price		\$ 131.65		\$ 131.65
		Paints & Solvents		12.40		12.40
				\$ 144.05		\$ 144.05
		<u>Material Not Subject to Handling Expense</u>				
		Other Direct Charges		\$ 59.85		\$ 59.85
				\$ 59.85		\$ 59.85
		Total Material		\$ 203.90		\$ 203.90
		<u>Travel</u>		\$ 1,242.07		\$ 1,952.07
		TOTAL DIRECT CHARGES		\$14,840.95		\$22,076.11

Standard Form No. 1035
7 GAO 5000
1035-107

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

CONTINUATION SHEET

SHEET NO. 2

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT

U. S. GOVERNMENT

VOUCHER NUMBER
2

NUMBER 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	UNIT PRICE		AMOUNT
				COST	PER	
	7/18/66 thru 7/31/66	<u>OVERHEAD</u>				
		<u>Burden Center</u>				
		<u>Salaries & Wages</u>	<u>Rate</u>		<u>Burden</u>	<u>To-Date</u>
		501 Engineering Support	\$ 3,989.79	.9929069	\$3,961.49	\$ 5,134.61
		503 Engineering	2,291.89	1.0223571	2,343.13	3,169.75
		511 Plant Engineering	6.49	.8382126	5.44	5.44
		517 Metalcraft	489.31	2.2260326	1,089.22	1,381.15
		521 Electronic Assy.	167.76	1.3581307	227.84	227.84
		531 Quality Control	6.70	.8298507	5.56	5.56
		573 Off-Site	6,060.93	.2106657	1,276.83	2,581.93
			<u>\$13,012.87</u>		<u>\$8,909.51</u>	<u>\$12,506.28</u>
		Material Handling Expense			\$ 1.86	\$ 1.86
		Total Overhead			\$8,911.37	\$12,508.14
		G & A Expense			\$2,150.63	\$ 3,147.17
		Fixed Fee @ (7.5%)			\$1,942.72	\$ 2,829.86

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U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION U. S. GOVERNMENT	DATE VOUCHER PREPARED August 24, 1966	VOUCHER NUMBER 3
	CONTRACT NUMBER AND DATE	PAID BY
	REQUISITION NUMBER AND DATE	

PAYEE'S NAME AND ADDRESS GOODYEAR AEROSPACE CORPORATION Akron, Ohio 44315	CW 6744	DATE INVOICE RECEIVED
		DISCOUNT TERMS
		PAYEE'S ACCOUNT NUMBER
		GOVERNMENT B/L NUMBER

SHIPPED FROM	TO	WEIGHT	GOVERNMENT B/L NUMBER
--------------	----	--------	-----------------------

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUANTITY	UNIT PRICE		AMOUNT (¹)
				COST	PER	
	8/1/66 thru 8/14/66	Direct Charges Overhead G & A Expense Fixed Fee		Current		To-Date
				\$16,422.67 ✓		\$38,498.78
				8,127.97		20,636.11
				2,234.11		5,381.28
				2,008.86		4,838.72
(MO 8146AR)		COST REIMBURSABLE PROVISIONAL PAYMENT →		\$28,793.61 ✓		
(Payee must NOT use the space below)						TOTAL \$69,354.89

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE	DIFFERENCES
	= \$	= \$ 1.00	
	BY ²		
	TITLE	Amount verified; correct for <i>(Signature or initials)</i>	

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

(Date) _____ (Authorized Certifying Officer)² _____ (Title) _____

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

PAID BY	CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER	ON (Name of bank)
	CASH	DATE	PAYEE ³	
\$				

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

Standard Form No. 1035
7 GAO 5000
1035-107

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

CONTINUATION SHEET

SHEET NO. 1

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT

U. S. GOVERNMENT

VOUCHER NUMBER

3

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN- TITY	UNIT PRICE		AMOUNT
				COST	PER	
	8/1/66 thru 8/14/66	<u>DIRECT CHARGES</u>				
						<u>Current</u> <u>To-Date</u>
		Salaries & Wages				
		Regular		\$10,816.68		\$30,135.01
		Overtime Premium		247.32		849.13
				\$11,064.00		\$30,984.14
		<u>Material Subject to Mat'l. Handling Expense</u>				
		Purchases - Fixed Price		\$ 131.00		\$ 262.65
		Paints & Solvents		-0-		12.40
				\$ 131.00		\$ 275.05
		<u>Material Not Subject to Handling Expense</u>				
		Other Direct Charges		\$ -0-		\$ 59.85
				\$ -0-		\$ 59.85
		Total Material		\$ 131.00		\$ 334.90
		<u>Travel</u>		\$ 5,227.67		\$ 7,179.74
		TOTAL DIRECT CHARGES		\$16,422.67		\$38,498.78

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 2

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT					VOUCHER NUMBER	
U. S. GOVERNMENT					3	
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
	8/1/66 thru 8/14/66	<u>Overhead</u>				
		<u>Burden Center</u>			<u>Burden</u>	<u>To-Date</u>
		Salaries & Wages	Rate			
		501 Engineering Support	\$ 3,390.02	.8447826	\$2,863.83	\$ 7,998.44
		503 Engineering	2,482.86	.9866444	2,449.70	5,619.45
		511 Plant Engineering	3.25	.8153846	2.65	8.09
		517 Metalcraft	685.99	1.9179726	1,315.71	2,696.86
		519 Plastics	47.06	1.3714407	64.54	64.54
		521 Electronic Assy.	376.42	1.2916423	486.20	714.04
		531 Quality Control	48.58	.7910663	38.43	43.99
		573 Off-Site	3,782.50	.2359551	892.50	3,474.43
			<u>\$10,816.68</u>		<u>\$8,113.56</u>	<u>\$20,619.84</u>
		Material Handling Expense			\$ 14.41	\$ 16.27
		Total Overhead			\$8,127.97	\$20,636.11
		<u>G & A Expense</u>				
		9.1% of Manufacturing Expense			\$2,234.11	\$ 5,381.28
		Fixed Fee @ 7.5%			\$2,008.86	\$ 4,838.72

SECRET
(When Filled In)

REQUEST FOR PAYMENT AND POSTING VOUCHER										VOUCHER NO. - DATE 2-12			
TO : Accounts Division (Room Bldg.)					THROUGH: Monetary Division (Room Bldg.)					DIVISION VOUCHER NO. 8 Aug 66 0606			
Request payment be made and/or transaction be recorded as indicated below. Pertinent documentation in support of this transaction is on file in this office.													
SUBJECT							INVOICE NO(S) 1						
PAYMENT TO GOODYEAR AEROSPACE CORP							CONTRACT NO. CW-1744						
AMOUNT \$12,715.61							CHECK TO BE DATED						
CASH PAYMENT		<input checked="" type="checkbox"/> U.S. TREASURY CHECK		AGENT CASHIER CHECK		BANK CASHIER'S CHECK							
THE ATTACHED CHECKS AND/OR CASH IN THE AMOUNT OF \$ SHOULD BE TAKEN INTO ACCOUNT AS INDICATED BELOW.													
I HEREBY AUTHORIZE MY AGENT, WHOSE SIGNATURE APPEARS BELOW, TO RECEIVE \$ OF OFFICIAL FUNDS IN CURRENCY ON MY BEHALF.													
DATE	SIGNATURE OF PAYEE			DATE	SIGNATURE OF AGENT			DATE	SIGNATURE OF RECIPIENT				
DESCRIPTION - ALL OTHER ACCOUNTS 13 - 33	28 - 33 T/A NO.		34 - 39 STATION CODE	40 - 41 E X C P O S E D N E	42 - 47 OBLIG. REF. NO.	48 - 49 PAY PER. L/O. CODE	50 CA OR C O S T Y R.	51 - 54 GENERAL LEDGER ACCT. NO.	55 - 66 ALLOT. - COST - FAN ACCOUNT SYMBOL		67 - 70 OBJECT CLASS	71 - 80 AMOUNT	
	DESCRIPTION - ADVANCE ACCOUNTS 13 - 27	SHIP. DOC. NO.							REC. RPT. NO.	ADVANCE ACCT. NO.		F I N D S	61 - 66 CK. NO.
Goodyear					88 006744			16010	7711-1021	2540		12,715.61	
Goodyear								1780					12,715.61
Orig + 1 - Address 1 - CW-6744 1 - Voucher													
TOTALS											12,715.61	12,715.61	
DATE	PREPARED BY			DATE	REVIEWED BY			CERTIFIED FOR PAYMENT OR CREDIT					
8 Aug 66								DATE	SIGNATURE OF CERTIFYING OFFICER		25X1 25A1		
								8 AUG 1966	(Signed)				

55F-1-2434
(3 pages)

Standard Form 767A @ 5000
1034-111

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

VOUCHER NO. 1

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION

DATE VOUCHER PREPARED
July 27, 1966

SCHEDULE NO.

U. S. GOVERNMENT

CONTRACT NUMBER AND DATE
MO 8146AR 12 08 PM '66

PAID BY

REQUISITION NUMBER AND DATE

PAYEE'S NAME AND ADDRESS
GOODYEAR AEROSPACE CORPORATION
Akron, Ohio 44315

CW-6744

DATE INVOICE RECEIVED

DISCOUNT TERMS

PAYEE'S ACCOUNT NUMBER

SHIPPED FROM

TO

WEIGHT

GOVERNMENT B/L NUMBER

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN- TITY	UNIT PRICE		AMOUNT (¹)
				COST	PER	
(MO 8146AR)	7/1/66 thru 7/17/66	Direct Charges Overhead G & A Expense Fixed Fee COST REIMBURSABLE PROVISIONAL PAYMENT	Current			To-Date
			\$ 7,235.16			\$ 7,235.16
			3,596.77			3,596.77
			996.54			996.54
			887.14			887.14
			\$12,715.61			

(Use continuation sheet(s) if necessary) **(Payee must NOT use the space below)**

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE	TOTAL	\$12,715.61
	BY:	= \$	= \$1.00	DIFFERENCES
	TITLE			
				Amount verified; correct for
				(Signature or initials)

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

(Date) _____ (Authorized Certifying Officer)² _____ (Title)

ACCOUNTING CLASSIFICATION

(Date) _____ CONTRACTING OFFICER
8 AUG 1966
(Date)

STAT
STAT

PAID BY	CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER	ON (Name of bank)
	CASH	DATE	PAYEE ³	
	\$			

¹ When stated in foreign currency, insert name of currency.
² 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 in the space provided, over his official title.
³ When a voucher is 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.

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 1

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT U. S. GOVERNMENT					VOUCHER NUMBER 1	
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
	7/1/66 thru 7/17/66	<u>DIRECT CHARGES</u>				<u>To-Date</u>
		Salaries & Wages				
		Regular		\$6,305.46		\$6,305.46
		Overtime Premium		219.70		219.70
				\$6,525.16		\$6,525.16
		<u>Material Subject to Material Handling Expense</u>				
			\$	-0-		\$ -0-
		<u>Material Not Subject to Handling Expense</u>				
			\$	-0-		\$ -0-
		Total Material	\$	-0-		\$ -0-
		<u>Travel</u>	\$	710.00		\$ 710.00
		TOTAL DIRECT CHARGES		\$7,235.16		\$7,235.16

Standard Form No. 1035
7 GAO 5000
1035-107

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CONTINUATION SHEET

SHEET NO. 2

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT U. S. GOVERNMENT						VOUCHER NUMBER 1
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
	7/1/66 thru 7/17/66	<u>OVERHEAD</u>				
		<u>Burden Center</u>			<u>Burden</u>	<u>To-Date</u>
		Salaries & Wages	Rate			
		501 Engineering Support	\$1,485.20	.7898734	\$1,173.12	\$1,173.12
		503 Engineering	839.04	.9851974	826.62	826.62
		517 Metalcraft	175.38	1.6645570	291.93	291.93
		573 Off-Site	<u>3,805.84</u>	.3429204	<u>1,305.10</u>	<u>1,305.10</u>
			\$6,305.46		\$3,596.77	\$3,596.77
		<u>Material Handling Expense</u>			\$ -0-	\$ -0-
		TOTAL OVERHEAD			\$3,596.77	\$3,596.77
		<u>G & A Expense</u>				
		9.2% of Manufacturing Expense			\$ 996.54	\$ 996.54
		Fixed Fee @ 7.5%			\$ 887.14	\$ 887.14