SECRET

MEMORANDIM FOR: Chief, Finance Division

ATTEMPTOR

Monetary Branch

SIRJECT

: Clabursement by Treasury Check

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

a. Check drawn in favory Edgerton, Germenhausen and Grier, Inc.

- Amount \$ 13,921.96 (Contract No. 18-2191
 Invalce No. Bu. Voc. No. 8 and 9
- e. Check to be dated 13 Bovenber 1957
- 2. Pertinent documentation in connection with this classified transaction which has not been included in comptrollers instruction No. 32 (Notice 20-56), after approval by the DCI 15 December 1956, is on file in the Office of the Project Comptroller.
- 3. The payment requested is based on progress made by the contractor to date and should be processed against General Ledger Account No. 138, titled "Disbursements of Appropriated Funds Chargeable to Confidential Funds Allotments - Awaiting DCI Certification." The Allotment Symbol applicable to this request is 7-1004-10-001 (07.9) , and the amount is chargeable to General Ledger Account No.
- 4. The check should be dated as stated in paragraph 1 and mailed in the attached self-addressed envelope. If no envelope is attached, the undersigned should be contacted on extension when payment is ready for disposition..

Matribution:

25X1

25X1

25X1

0 & 2- Addressee

- Contract TE-2191 (Fin) Master

HEB/bas 11/12/57

Authorized Certifying Officer Project Comptroller

SECRET

Sanitized Copy Approved for Release 2010/06/08: CIA-RDP65-00523R000100180016-6 D. O. Vou. No. Standard Form No. 1034—Revised
Form prescribed by
Comptroller General, U. S.
September 7, 1950
(Gen. Reg. No. 51, Supp. No. 11)
(Amended February 20, 1952) BLIC VOUCHER FOR PURCHASES AN Bu. Vou. No. -----PAID BY *U. S.* _____ (Department, bureau, or establishment) Voucher prepared at (Give place and date) Payee's Account No. THE UNITED STATES, Dr., EDGERTON, GERMESHAUSEN AND GRIER, INC., LAS VEGAS, NEVADA (City) (Address) ARTICLES OR SERVICES
(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary) AMOUNT UNIT PRICE Date of Delivery QUANTITY No. and Date of Order Dollars Discount Terms 12,080.75 Bu Vo. #8 1,241,21 Bu Vo. # 9 PAYMENT: Complete Partial Final Use continuation sheet(s) if necessary Total Government B/L No. Shipped from (Payee must NOT use this space) I certify that the above bill is correct and just and that payment has not been received. (Sign original only) Amount verified; correct for _____ (Signature or initials) ... Invoice Rec'd. TE 2191 Reg. No. Pursuant to authority vested in me, I certify that this account is correct and proper for pa STAT ORIGINAL В APPROVING OFFICER THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional) Check No. _____ dated _____, 19___, for \$_____ on Treasurer of the United States in favor of payee named above. Payee _____ *When a voucher is signed or receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear. For example: "John Doe Company, per John Smith, Secretary", or "Treasurer", as the case may be.

If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$______", and over his official title"

Sanitized Copy Approved for Release 2010/06/08: CIA-RDP65-00523R000100180016-6

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			Direct Labor (Omitted from previous vouchers) Materials & Services					l l	1,396	
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	THE REVERSE OF T	THIS FORM MUST BE EXECUT	ED WHEN PURCHASES ARE MADE	OR SERVICES SEC	URED WITHO	JT WRITTEN .	AGREEMENT	IN ANY FORM	l	
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CONTINUATION SHEET

1	(Department, bureau, or establishment)	ICES		UNIT PRICE		AMOUN	r
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	Direct Labor						
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Sanitized Copy Approved for Release 2010/06/08 : CIA-RDP65-00523R000100180016-6

Standard Form No. 1035—Revised
Form prescribed by
Comptroller General, U. S.
September 7, 1980
(Gen. Reg. No. 51, Supp. No. 11)

Bublic Voucher for Purchase and Services Other Than Personal

CONTINUATION SHEET

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(Add	(Enter description schedule, and Discount Terms	(City) ARTICLES OR SERVICAL S	(Sta CES ract or Federal sur emed necessary)	ate)	UNIT PRICE	AMOUNT
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te of Delivery	(Enter description schedule, and Discount Terms	ARTICLES OR SERVIC I, item number of contr d other information dec	CES ract or Federal sur emed necessary)		·	
	(Enter description schedule, and Discount Terms Perio	, item number of contr d other information de	ract or Federal sur emed necessary)	QUANTITY		Dollars C
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		****	†	(Autho	orized Certifying Officer)
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ACCO	JNTING CLASSIFICA	TION (Appropriation S	Symbol must be sl	hown; other classifi	cation optional)	
	THE REVERSE OF 1	to ove bill is correct and just and that pa (Sign original only)	to Weight ove bill is correct and just and that payment has not been reco (Sign original only) shausen & Gr controller 1,/26/57 Req. N t is correct and proper ORIGINAL ONLY THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE M	Sign original only) shausen & Grier, Inc. ce certificate is made by payer on attached bill or bills) Controller 1/26/57 Req. No. It is correct and proper for payment. SIGN ORIGINAL ONLY Date THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SEC	to Weight Government B/L No. (Payee must Now bill is correct and just and that payment has not been received. (Sign original only) Shausen & Grier, Inc. Shausen & Grier, Inc. Shausen & Grier, Inc. Controller (Signature or in the state of the stat	to Weight Government B/L No. Total (Payee must NOT use this space) (Sign original only) Shausen & Grier, Inc. see oertificate is made by payee on attached bill or bills) Controller (Signature or initials) 14/26/57 Req. No. Date Invoice Reserved at its correct and proper for payment. SIGN ORIGINAL ONLY Title

Sanitized Copy Approved for Release 2010/06/08: CIA-RDP65-00523R000100180016-6 Form prescribed by Comptroller General, U. S. September 7, 1950 Gen. Reg. No. 51, Supp. No. 11) Services Other Than Personal SANC Zo972

COTY 1 C

CONTINUATION SHEET

No. and Date of Delivery		ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule	QUAN- TITY	UNIT PRICE		AMOUNT	
	or Service	(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	TITY	Cost	Per	Dollars	Cta
		Total Costs billed through 30 September including Bu. Voucher No. 8 Fixed Fee Earned (10% of Above)	957			\$ 87,212 8,721	
		Fixed Fee Previously Billed				7,480	
		Amount of this Voucher				\$ 1,241	
ΑΤ		"I certify that the Fixed Fee claimed is a that it is proportionate to the progress ER, INC.	orrect	and on the	just; Contra	and act."	
		troller					