National Aeronautics and Space Administration

Quarterly Contractor Financial Management Report

Form Approved
O.M.B. No. 2700-0003

PAGE ____ OF ____ PAGES

TO:

FROM:

2. REPORT FOR QUARTER BEGINNING

3. CONTRACT VALUE
a. COST $
b. FEE $

4. FUND LIMITATION $

5. BILLING
a. INVOICE AMTS. BILLED $
b. TOTAL PYTS. REC'D. $

1. DESCRIPTION OF CONTRACT
a. TYPE
b. CONTRACT NO. AND LATEST DEFINITIZED MODIFICATION NO.
c. SCOPE OF WORK
d. AUTHORIZED CONTRACTOR REPRESENTATIVE *(Signature)* DATE

6. REPORTING CATEGORY	7. COST INCURRED/ HOURS WORKED			8. ESTIMATED COST/HOURS TO COMPLETE										9. ESTIMATED FINAL COST/HOURS		10. ESTIMATED COMPLETION DATE	11. UNFILLED ORDERS OUTSTANDING
	CUMULATIVE ACTUAL THROUGH PRIOR MONTH a	CURRENT MONTH ESTIMATE b	CUMULATIVE ESTIMATE TO DATE c	MONTH a	MONTH b	MONTH c	QUARTER d	QUARTER e	QUARTER f	BALANCE OF FY- g	NEXT FY- h	BALANCE OF CONTRACT i	TOTAL TO COMPLETE j	CONTRACTOR ESTIMATE a	CONTRACT VALUE b		

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