Payment Register

U.S. Department of Housing and Urban Development Office of Administration

Instrument Number			Appropriation(s)		Administrator			
DU								
Name and Payment Addr	rose of Contractor or Dr	noiniont				ad Coat		Thresholds
Name and Payment Addi	ress of Contractor of Re	ecipieni		Estimated Cost				
						Fixed Fee		50% =
						ee		75% =
								95% =
						ward Amount		Withhold Fee
Special Provisions		C	Overhead Rates					
				Obligated Amoun				
Voucher	Voucher Date Date Forwa		ded		_	Fixed Fee		Notes
Number	umber Received to Finance		Payments	Payments Balance		Payments	Balance	Notes
·								