



National  
Aeronautics and  
Space  
Administration

## Voucher for Payment of Employee's Personal Property Claim

BU VOUCHER NO.

National Aeronautics and Space Administration

CLAIM NO.

VOUCHER PREPARED AT *(Place and Date)*

**PAID BY**  
*(For use of Paying Office)*

**THE UNITED STATES, Dr.,**

**TO (Payee)**

ADDRESS

AMOUNT CLAIMED

DATE CLAIM ACCRUED

AMOUNT OF AWARD, COMPROMISE, OR SETTLEMENT

\$

\$

BRIEF DESCRIPTION OF CLAIM *(See attachments for further explanation in detail.)*

### ACCEPTANCE BY CLAIMANT

I, the claimant, do hereby accept the within-stated award, compromise, or settlement as final and conclusive on me, and agree that said acceptance constitutes a complete release by me of any claim against the United States and against any employee of the Government whose act or omission gave rise to the claim, by reason of the same subject matter.

*(SIGN ORIGINAL ONLY)*

DATE

TYPED NAME OF CLAIMANT

SIGNATURE OF CLAIMANT

This claim has been fully examined and is approved for payment in accordance with the provisions of the Military Personnel and Civilian Employees' Claims Act of 1964, as amended (31 U.S.C. 3721, et seq.) in the

AMOUNT OF

DATE

SIGNATURE AND TITLE OF AUTHORIZED SETTLEMENT OFFICER

\$

*(SIGN ORIGINAL ONLY)*

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

AMOUNT OF

DATE

SIGNATURE AND TITLE OF AUTHORIZED CERTIFYING OFFICER

\$

*(SIGN ORIGINAL ONLY)*

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