

NIH Policy Manual

6332-9 - Receipt, Processing and Payment of Invoice and Contract Financing Requests for Research Contracts

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Approving Official(s): DDM

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Transmittal Notice

1. **Explanation of Material Transmitted:** This Manual Chapter specifies payment clauses for contracts, and the procedures for processing invoices and contract financing requests for research contracts, and Station Support contracts in support of Research and Development, i.e., contracts (all N01, N43, N44, and most N02), which are not paid through the Administrative Database.
2. **Filing Instructions:**

Remove: DCG I&I 84-20 (Rev. 3), dated 6/22/89.
Insert: NIH Manual Chapter 6332-9
3. **Filing Instructions:** NIH Mailing Keys F-401, F-407

PLEASE NOTE: For information on:

- content of this chapter, contact the Division of Acquisition Policy and Evaluation, OCM, OA, on (301) 496-6014.
- NIH Manual Mailing Keys, contact the Division of Support Services, ORS, on (301) 496-4808.
- NIH Manual System, contact the Division of Management Support, OMA, on (301) 496-2832.
- on-line information, use: <http://oma.od.nih.gov/manualchapters/>

A. Purpose

This issuance replaces Instruction and Information Memorandum 84-20 (Revision 3, dated June 22, 1989). This chapter specifies payment clauses for contracts, and the procedures for processing invoices and contract financing requests for research contracts, and Station Support contracts in support of Research and Development, i.e., contracts (all N01, N43, N44, and most N02), which are not paid through the Administrative Database.

B. Background

The Prompt Payment Act and implementing regulations require that the Government make timely payments to vendors, but that such payments not be made earlier than seven (7) days prior to the due date. For most contracts this due date is 30 days after receipt of a proper payment request or the acceptance of the goods or services, whichever is later. If discount terms are favorable to the Government, processing of the invoice should be expedited so that the discount can be taken.

Late payments on invoices are subject to an automatic interest penalty. There is no interest penalty on late payments for contract financing requests (e.g., interim payments on cost-type contracts).

C. Policy

It is the NIH policy to ensure that all contracts are paid in accordance with the applicable Prompt Payment provisions, and that payment requests from small businesses are identified to ensure expedited processing. The procedures in this document are effective immediately for new awards. Existing contracts should be modified to incorporate the provisions of this document not later than January 1, 1998.

D. References

1. OMB Circular A-125, Prompt Payment
2. FAR 32.9, Contract Financing, Prompt Payment
3. FAR 32.11, Electronic Funds Transfer
4. HHSAR 332.9, Prompt Payment
5. HHSAR 342.70, Contract Monitoring
6. Treasury Fiscal Requirements Manual 6-8040.30, Cash Discounts

E. Definitions

1. Payment Request - includes invoices (vouchers), which are requests for payment for goods or services provided to the Government, and financing requests, which are requests for advance payments or "interim" payments on cost-type contracts. Progress payments may be either invoice payments or contract financing payments (see FAR 32.902).
2. Designated Billing Office - is the office designated in the contract where the contractor first submits invoices and contract financing requests.
3. Fiscal Office - is the Office of Financial Management (OFM), and is the "designated payment office" for NIH contracts that are not paid through the Payment Management System (PMS).

F. Responsibilities

1. Upon receipt, the contracting officer shall date stamp payment requests to establish the receipt date for prompt payment purposes.
2. The contracting officer shall promptly review payment requests.
3. The project officer shall promptly review payment requests to determine if the expenditure rate is commensurate with the technical progress.
4. The contracting officer shall certify whether payment is proper, and submit the payment request and any other necessary information (e.g., Form NIH-2522) to OFM.
5. The OFM shall make a certifying officer's review of all requests for payment and take appropriate steps to ensure timely payments.

G. Procedures

1. Contract Clauses and Billing Instructions:

a. Prompt Payment Clauses:

1. All contracts (except as provided in FAR 32.908) shall include the Clause at FAR 52.232-25, Prompt Payment.
2. The Clause at FAR 52.232-33, Mandatory Information for Electronic Funds Transfer Payment, shall be included except as provided in FAR 32.1101, e.g., contracts paid through use of the Government-wide commercial purchase card, contracts awarded outside the United States and Puerto Rico, and contracts denominated or paid in other than United States dollars.

b. Payment Clauses to be Included (based on contract type and method of payment).

1. Cost-Reimbursement Contracts Not Paid under the PMS:

- a. NIH(RC)-1(a), Invoice Submission/Contract Financing Request.
- b. NIH(RC)-1, Invoice/Financing Request Instructions for NIH Cost-Reimbursement Type Contracts.

2. Cost-Reimbursement Contracts Not Paid under the PMS, which Require Submission of Contract Financial Data (see [NIH Manual 6342-70](#)):

- a. NIH(RC)-4(a), Invoice Submission/Contract Financing Request and Contract Financial Report.
- b. NIH(RC)-4, Invoice/Financing Request and Contract Financial Reporting Instructions for NIH Cost-Reimbursement Type Contracts. NIH(RC)-4, combines the requirements of NIH(RC)-1 and Form NIH 2706.
- c. Alternatively, you may use NIH(RC)-1(a) and NIH(RC)-1 with Form NIH 2706, or with Advance Understandings, which

accomplish the same purpose.

3. Cost-Reimbursement Contracts Paid under the PMS (Letter of Credit):

- a. NIH(RC)-1, Invoice/Financing Request Instructions for NIH Cost-Reimbursement Type Contracts.
- b. NIH(RC)-3, Payment Management System Information.
- c. HHSAR 352.232-73, Method of Payment - Letter of Credit.

4. Fixed Price:

- a. NIH(RC)-2(a), Invoice Submission.
- b. NIH(RC)-2, Invoice Instructions for NIH Fixed-Price Contracts.

- c. The standard clauses above require the contractor to send an original and two copies of the payment request to the contracting officer. These clauses also may be modified to require the contractor to send copies of the payment request to the project officer. This modification should only be used with the concurrence of the contractor and such concurrence should be addressed in the Summary of Negotiations.
- d. The contractor may use Form NIH 2706 for submitting a claim under cost-reimbursement contracts, providing it incorporates all the details prescribed in the sample request shown in the Invoice/Contract Financing Request Instructions for the NIH Cost-Reimbursement Type Contracts.

2. Receipt, Processing and Payment of Invoices and Contract Financing Requests:

a. Contracting Officer:

- 1. Upon receipt of the request for payment from the contractor, the contracting officer shall:
 - a. Date stamp all copies of the payment request.
 - b. Promptly scan the payment request for obvious errors or defects. If the payment request is improper, the process under (2) below should be followed.
 - c. Send two copies of the payment request to the project officer, unless the contractor sends copies of the payment request directly to the project officer.
 - d. Make a detailed review of the payment request to determine whether it is proper. The detailed review shall include a review of all direct cost elements. If the costs billed are considered unreasonable and warrant suspension in part or in whole, the contracting officer should indicate the amount to be suspended on Form NIH-2522, following the procedures in (3) below. This review will include the following:

- Invoices/contract financing requests, which will be paid in accordance with the terms of the contract.
- Advance Understandings as they pertain to cost.
- Any other possibility of cost prohibitions.
- Prior approval requirements.
- Indirect costs.

Check calculations, proper base and proper rate.

If rates have expired, call the rate negotiator (name and number on bottom of the rate agreement). If the rate negotiator does not extend the rates for payment, the indirect costs should be suspended.

- Fixed fee.
 - Discounts, which may be economically advantageous to the Government.
2. If the payment request is improper (and partial payment is not appropriate), the contracting officer shall give the contractor written notice on Form NIH-2522 of the apparent error or defect within seven (7) calendar days from the date of receipt of the payment request.
 3. If the payment request is improper (yet partial payment is appropriate), the contracting officer shall:
 - a. Give the contractor written notice on Form NIH-2522 of the apparent error or defect within seven (7) calendar days from the date of receipt of the payment request, indicate the exception and approve the balance for payment.
 - b. Send one copy of Form NIH-2522 and one copy of the payment request to the fiscal office.
 4. If the payment request is proper, the contracting officer shall:
 - a. Sign and stamp the payment request "Approved" [NAME] and date on the face of the request in a place as to not obscure the payee's name and address or any of the accounting data.
 - b. Send one copy of the approved payment request to the fiscal office.
 5. The contracting officer must sign the copy of the payment request sent to the fiscal office. The project officer's signature is not required for payment.
 6. The contracting officer shall collect all payment requests and attach a cover memorandum (with one copy), which lists the attached payment requests. The cover memorandum shall be numbered with the contract office, fiscal year and a sequence number, e.g., NCI 97-1, and should list the contractor's name, contract number, and invoice number. The OFM will date stamp and

sign off on the copy of the memorandum, indicating receipt of the payment requests, and return the copy to the contract office.

7. The time between the date of the receipt of the payment request from the contractor by the contracting officer and the date the approved invoice/contract request is received in the fiscal office shall not exceed sixteen (16) calendar days. This will allow the fiscal office fourteen (14) calendar days to process the payment request. If a discount is advantageous to the Government, this process should be accelerated to allow the NIH to take the discount.

b. Project Officer:

Upon receipt of the payment request, the project officer shall:

- a. Review the payment request, within five (5) calendar days after receipt, to determine if the expenditure rate is commensurate with the technical progress.
- b. Sign and stamp both copies "Recommended for Approval" (Project Officer Signature) (Date) and send one copy to the contracting officer. If exceptions are noted, the recommendation should be appropriately qualified.

c. Fiscal Office:

1. Upon receipt of the approved payment request from the contracting officer, the OFM shall:

- a. Acknowledge receipt of payment requests (see (a)(6) above).
- b. Date stamp all copies of the payment request.
- c. Make a certifying officer's detailed review of the payment request to determine whether it is proper or improper. The fiscal office will review the following:

- Fixed fee (if any).

- Whether any offered discounts are economically advantageous to the Government.

- Whether interest is due on invoices for fixed-price contracts, or the final invoice for cost-reimbursement type contracts.

- Whether funds are available in the contract.

2. If the payment request is improper for other than cost reasons (and partial payment is not appropriate), the fiscal office shall:

- a. Telephone the contracting officer and advise him/her that the contractor is being sent written notice of an improper payment

request.

b. Send a copy of the notice to the contracting officer (the contracting officer has a copy of the payment request).

3. If the payment request is improper for cost reasons and suspensions are deemed appropriate, the fiscal office shall telephone the contracting officer to coordinate action.

4. If the payment request is proper, the fiscal office shall complete all internal processing steps necessary to ensure timely payment.

3. Discounts:

a. In all cases where discounts are offered in the terms of the contract and/or the invoice, coordination between the contract office and the fiscal office is necessary. If the discount is deemed economically justified, the review and approval process by the project officer and contracting officer shall be accelerated to take advantage of the discount.

b. When a contractor offers discount terms during the negotiation process, the contracting officer or contract specialist should evaluate whether such offers are, or are not, favorable to the Government.

c. The OMB Circular A-125, "Prompt Payment," prescribes that discounts should be taken only when they are economically advantageous to the Government. Discounts must be first converted to an effective annual interest rate and then compared with the "current value of funds" to the Treasury to determine whether they are economically advantageous.

d. This section provides information and guidance for determining whether discount terms on invoices/contract financing requests by contractors, when converted to an effective annual interest rate:

1. Should be taken because they are cost effective to the Government.

2. Should be considered as favorable to the Government if a contractor offers particular discounts terms during negotiations.

e. The "current value of funds" rate is updated quarterly by the Department of the Treasury and can be found in the Federal Register approximately two weeks prior to the beginning of a calendar quarter. The OFM will notify the chief contracting officers of such updated rates as soon as the rates are made available to the OFM.

f. The more common discount terms and their effective annual interest rates are as follows:

Discount Converted to Effective Rate Terms Annual Interest Rate

1% 10 days, net 30 18.18%

1% 20 days, net 30 36.36%

1/2% 10 days, net 30 9.05%

1/2% 20 days, net 30 18.09%

1/4% 10 days, net 30 4.51%

1/4% 20 days, net 30 9.02%

- g. The conversion formula (from the Treasury Fiscal Manual) for computing the effective annual interest rate on discount terms other than those listed above is as follows:

$$\frac{\text{Discount \%} \times 100 - \text{Discount}}{\text{Days in Year (360)} - \frac{\text{Number of days between due date and discount date}}{2}} = \text{Effective Annual Interest Rate}$$
$$\frac{2 \times 100 - 2}{360 - 10} = 36.73\%$$

4. Identification of Fiscal Office:

National Institutes of Health
Office of Financial Management
Chief, Commercial Accounts Section
Building 31, Room B1B39
9000 Rockville Pike
Bethesda, Maryland 20892-2045
Phone: (301) 496-6088

H. Records Retention and Disposal

Records pertaining to payments are retained and disposed of under the authority of [NIH Manual 1743](#), "Keeping and Destroying Records," Appendix 1, "NIH Records Control Schedule," Item 2600-A-4, Routine Procurement Files.

I. Copies of Forms

The NIH Form 2522, Notice of Improper Invoice/Suspension, can be obtained from the OFM by calling 496-6088. The various Research Contract Clauses (RC) can be obtained from the OCM by calling 496-6014.

Appendix 1. Invoice Submission/Contract Financing Request

INVOICE SUBMISSION/CONTRACT FINANCING REQUEST

Invoice/Financing Request Instructions for NIH Cost-Reimbursement Type Contracts, NIH(RC)-1, are attached and made part of this contract. The instructions and the following

directions for the submission of invoices/financing request must be followed to meet the requirements of a "proper" payment request, pursuant to FAR 32.9.

1. Invoices/financing requests shall be submitted as follows:

An original and two copies to the following designated billing office:

Name of Contracting Officer

Name of Institute, NIH

Building Room

City State Zip Code

2. Inquiries regarding payments should be directed to the designated billing office, (301) _____-_____.

Appendix 2. Invoice/Financing Request Instructions for NIH Cost-Reimbursement Type Contracts

NIH(RC)-I(a)

REV. 5/97INVOICE/FINANCING REQUEST INSTRUCTIONS FOR NIH COST-REIMBURSEMENT TYPE CONTRACTS

General: The contractor shall submit claims for reimbursement in the manner and format described herein and as illustrated in the sample invoice/financing request.

Format: Standard Form 1034, "Public Voucher for Purchases and Services Other Than Personal," and Standard Form 1035, "Public Voucher for Purchases and Services Other Than, Personal-- Continuation Sheet," or reproduced copies of such forms marked ORIGINAL should be used to submit claims for reimbursement. In lieu of SF-1034 and SF-1035, claims may be submitted on the payee's letter-head or self-designed form provided that it contains the information shown on the sample invoice/financing request.

Number of Copies: As indicated in the Invoice Submission Clause in the contract.

Frequency: Invoices/financing requests submitted in accordance with the Payment Clause shall be submitted monthly unless otherwise authorized by the contracting officer.

Cost Incurrence Period: Costs incurred must be within the contract performance period or covered by precontract cost provisions.

Billing of Costs Incurred: If billed costs include: (1) costs of a prior billing period, but not previously billed; or (2) costs incurred during the contract period and claimed after the contract period has expired, the amount and month(s) in which such costs were incurred shall

be cited.

Contractor's Fiscal Year: Invoices/financing requests shall be prepared in such a manner that costs claimed can be identified with the contractor's fiscal year.

Currency: All NIH contracts are expressed in United States dollars. When payments are made in a currency other than United States dollars, billings on the contract shall be expressed, and payment by the United States Government shall be made, in that other currency at amounts coincident with actual costs incurred. Currency fluctuations may not be a basis of gain or loss to the contractor. Notwithstanding the above, the total of all invoices paid under this contract may not exceed the United States dollars authorized.

Costs Requiring Prior Approval: Costs requiring the contracting officer's approval, which are not set forth in an Advance Understanding in the contract shall be so identified and reference the Contracting Officer's Authorization (COA) Number. In addition, any cost set forth in an Advance Understanding shall be shown as a separate line item on the request.

Invoice/Financing Request Identification: Each invoice/financing request shall be identified as either:

- a. **Interim Invoice/Contract Financing Request** These are interim payment requests submitted during the contract performance period.
- b. **Completion Invoice** The completion invoice is submitted promptly upon completion of the work; but no later than one year from the contract completion date, or within 120 days after settlement of the final indirect cost rates covering the year in which this contract is physically complete (whichever date is later). The completion invoice should be submitted when all costs have been assigned to the contract and all performance provisions have been completed.
- c. **Final Invoice** A final invoice may be required after the amounts owed have been settled between the Government and the contractor (e.g., resolution of all suspensions and audit exceptions).

Preparation and Itemization of the Invoice/Financing Request: The contractor shall furnish the information set forth in the explanatory notes below. These notes are keyed to the entries on the sample invoice/financing request.

- a. **Designated Billing Office Name and Address** Enter the designated billing office name and address, identified in the Invoice Submission Clause of the contract, on all copies of the invoice/financing request.
- b. **Invoice/Financing Request Number** Insert the appropriate serial number of the invoice/financing request.
- c. **Date Invoice/Financing Request Prepared** Insert the date the invoice/financing request is prepared.
- d. **Contract Number and Date** Insert the contract number and the effective date of the contract.

- e. Payee's Name and Address Show the contractor's name (as it appears in the contract), correct address, and the title and phone number of the responsible official to whom payment is to be sent. When an approved assignment has been made by the contractor, or a different payee has been designated, then insert the name and address of the payee instead of the contractor.
- f. Total Estimated Cost of Contract Insert the total estimated cost of the contract, exclusive of fixed-fee. For incrementally funded contracts, enter the amount currently obligated and available for payment.
- g. Total Fixed-Fee Insert the total fixed-fee (where applicable). For incrementally funded contracts, enter the amount currently obligated and available for payment.
- h. Billing Period Insert the beginning and ending dates (month, day, and year) of the period in which costs were incurred and for which reimbursement is claimed.
- i. Amount Billed for Current Period Insert the amount billed for the major cost elements, adjustments, and adjusted amounts for the period.
- j. Cumulative Amount from Inception Insert the cumulative amounts billed for the major cost elements and adjusted amounts claimed during this contract.
- k. Direct Costs Insert the major cost elements. For each element, consider the application of the paragraph entitled "Costs Requiring Prior Approval" on page 1 of these instructions.

- 1. Direct Labor Include salaries and wages paid (or accrued) for direct performance of the contract.
- 2. Fringe Benefits List any fringe benefits applicable to direct labor billed as a direct cost. Fringe benefits included in indirect costs should not be identified here.
- 3. Accountable Personal Property Include permanent research equipment and general purpose equipment having a unit acquisition cost of \$1,000 or more and having an expected service life of more than two years, and sensitive property regardless of cost (see the DHHS Contractor's Guide for Control of Government Property). Show permanent research equipment separate from general purpose equipment. Prepare and attach Form HHS-565, "Report of Accountable Property," in accordance with the following instructions:

List each item for which reimbursement is requested. A reference shall be made to the following (as applicable):

- The item number for the specific piece of equipment listed in the Property Schedule.
- The COA letter and number, if the equipment is not covered by the Property Schedule.
- Be preceded by an asterisk (*) if the equipment is below the approval level.

Further itemization of invoices/financing requests shall only be required for items having specific limitations set forth in the contract.

4. Materials and Supplies Include equipment with unit costs of less than \$1,000 or an expected service life of two years or less, and consumable material and supplies regardless of amount.
 5. Premium Pay List remuneration in excess of the basic hourly rate.
 6. Consultant Fee List fees paid to consultants. Identify consultant by name or category as set forth in the contract's Advance Understanding or in the COA letter, as well as the effort (i.e., number of hours, days, etc.) and rate being billed.
 7. Travel Include domestic and foreign travel. Foreign travel is travel outside of Canada, the United States and its territories and possessions. However, for an organization located outside Canada, the United States and its territories and possessions, foreign travel means travel outside that country. Foreign travel must be billed separately from domestic travel.
 8. Subcontract Costs List subcontractor(s) by name and amount billed.
 9. Other List all other direct costs in total unless exceeding \$1,000 in amount. If over \$1,000, list cost elements and dollar amounts separately. If the contract contains restrictions on any cost element, that cost element must be listed separately.
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- l. Cost of Money (COM) Cite the COM factor and base in effect during the time the cost was incurred and for which reimbursement is claimed.
 - m. Indirect Costs--Overhead Identify the cost base, indirect cost rate, and amount billed for each indirect cost category.
 - n. Fixed-Fee Earned Cite the formula or method of computation for the fixed-fee (if any). The fixed-fee must be claimed as provided for by the contract.
 - o. Total Amounts Claimed Insert the total amounts claimed for the current and cumulative periods.
 - p. Adjustments Include amounts conceded by the contractor, outstanding suspensions, and/or disapprovals subject to appeal.
 - q. Grand Totals

The contracting officer may require the contractor to submit detailed support for costs claimed on one or more interim invoices/financing requests.

Appendix 3. Sample Invoice/Financing Request

SAMPLE INVOICE/FINANCING REQUEST

(a) Billing Office Name and Address (b) Invoice/Financing Request

NATIONAL INSTITUTES OF HEALTH

No. _____

(c) Date Invoice Prepared _____

Bethesda, MD 20892- _____

(d) Contract No. and Effective Date _____

(e) Payee's Name and Address _____

ABC CORPORATION (f) Total Estimated Cost of Contract

100 Main Street

Anywhere, U.S.A. zip code _____

(g) Total Fixed Fee _____

Attention: Name, Title, and Phone

Number of Official to

Whom Payment is Sent

(h) This invoice/financing request represents reimbursable costs from
Aug. 1, 1982 through Aug. 31, 1982

(i) Amount Billed (j) Cumulative
for Current Amount From
Period Inception

(k) Direct Costs

(1) Direct Labor \$ 3,400 \$ 6,800

(2) Fringe Benefits 600 1,200

(3) Accountable Personal Property

(Attach Form HHS-565)

Permanent Research 3,000 6,000

General Purpose 2,000 2,000

(4) Materials and Supplies 2,000 4,000

(5) Premium Pay 100 150

(6) Consultant Fee-Dr. Jones 1 day @ 100 (COA #3) 100 100

(7) Travel (Domestic) 200 200

(Foreign) 200 200

(8) Subcontract Costs -0- -0-

(9) Other -0- -0-

Total Direct Costs \$11,600 \$20,650

(l) Cost of Money (Factor) of (Appropriate Base) 2,400 3,600

(m) Indirect Costs -- Overhead

_____% of Direct Labor or Other Base (Formula) 4,000 6,000

(n) Fixed-Fee Earned (Formula) 700 1,400

(o) Total Amount Claimed \$18,700 \$31,650

(p) Adjustments

Outstanding Suspensions (1,700)
(q) Grand Totals \$18,700 \$29,950

"I certify that all payments requested are for appropriate purposes and in accordance with the contract."

INVOICE SUBMISSION

Invoice Instruction for NIH Fixed-Price Type Contracts, NIH(RC)-2, are attached and made part of this contract. The invoice instructions and the following directions for the submission of invoices must be followed to meet the requirements of a "proper" invoice, pursuant to FAR 32.9.

1. Invoices shall be submitted as follows:

An original and two copies to the following designated billing office:

Name of Contracting Officer

Name of Institute, NIH

Building Room

City State Zip Code

2. Inquiries regarding payment of invoices should be directed to the designated billing office, (301) ____ - ____.

Appendix 4. Invoice Instructions for NIH-Fixed Price Contracts

NIH(RC)-2(a)

REV. 5/97 INVOICE INSTRUCTIONS FOR NIH FIXED-PRICE CONTRACTS

General The contractor shall submit vouchers or invoices as prescribed herein.

Format Standard Form 1034, Public Voucher for Purchases and Services Other Than Personal, and Standard Form 1035, Public Voucher for Purchases and Services Other than Personal--Continuation Sheet, or the payee's letterhead or self-designed form should be used to submit claims for reimbursement.

Number of Copies As indicated in the Invoice Submission Clause in the contract.

Frequency Invoices submitted in accordance with the Payment Clause shall be submitted upon delivery of goods or services unless otherwise authorized by the contracting officer.

Preparation and Itemization of the Invoice The invoice shall be prepared in ink or typewriter as follows:

- (a) Designated Billing Office and address
- (b) Invoice Number
- (c) Date of Invoice
- (d) Contract number and date
- (e) Payee's name and address. Show the contractor's name (as it appears in the contract), correct address, and the title and phone number of the responsible official to whom payment is to be sent. When an approved assignment has been made by the contractor, or a different payee has been designated, then insert the name and address of the payee instead of the contractor.
- (f) Description of goods or services, quantity, unit price, (where appropriate), and total amount.
- (g) Charges for freight or express shipments other than F.O.B. destination. (If shipped by freight or express and charges are more than \$25, attach prepaid bill.)
- (h) Equipment If there is a contract clause authorizing the purchase of any item of equipment, the final invoice must contain a statement indicating that no item of equipment was purchased or include a completed form HHS-565, Report of Capitalized Nonexpendable Equipment.

Currency All NIH contracts are expressed in United States dollars. Where payments are made in a currency other than United States dollars, billings on the contract shall be expressed, and payment by the United States Government shall be made, in that other currency at amounts coincident with actual costs incurred. Currency fluctuations may not be a basis of gain or loss to the contractor. Notwithstanding the above, the total of all invoices paid under this contract may not exceed the United States dollars authorized.

Appendix 5. Payment Management System Information

NIH(RC)-2

REV. 5/97

PAYMENT MANAGEMENT SYSTEM INFORMATION

Advance payments will be provided pursuant to the Clause HHSAR 352.232-73, Method of Payment - Letter of Credit, which is incorporated by reference. The PIN (letter-of-credit) number under HHSAR 352.232-73(a) is: _____.

1. Invoice/Financing Request Instructions for NIH Cost-Reimbursement Type Contracts, NIH(RC)-1, are attached and made a part of this contract for the submission of completion and/or final invoices. The invoice instructions and the following directions for the submission of invoices/financing requests must be followed to meet the requirements of a "proper" invoice, pursuant to FAR 32.9. The completion and/or final invoice shall be submitted as follows:

An original and two copies to the following office:

Name of Contracting Officer

Name of Institute, NIH

Building Room

City State Zip Code

2. The office administering advance payments designated in HHSAR 352.232-73(g)(2) is:

Department of Health and Human Services/OS
Federal Assistance Financing Branch
P.O. Box 6021
Rockville, Maryland 20852

Inquiries regarding payments should be directed to the above office.