National Institutes of Health				Project Task:				ontract No.:		Date of Report:	0990-0134
FINANCIAL REPORT OF INDIVIDUAL PROJECT/CONTRACT, NIH FORM 2706											0990-0131
Note: Complete this Form in Accordance with Accompanying Instructions.				Reporting Period:			Contractor Name and Address:				
Expenditure Category	Percen Effort/	Incu at En	nulative rred Cost d of Prior Period	Incurred Cost Current Period	Cumulative Cost to Date (D + E)		Estimated Cost to Complete	Estimated Cost Completion (F + G)	at Funded Contract Amount	Variance (Over or Under) (I - H)	
	Funded	Actual									
Α	В	с	D		E	F		G	н	I	J