National Institutes of Health FINANCIAL REPORT OF INDIVIDUAL PROJECT/CONTRACT, NIH FORM 2706 *Note: Complete this Form in Accordance with Accompanying Instructions.*	**Project Task:**	**Contract No.:**	**Date of Report:**	**0990-0134** **0990-0131**
	Reporting Period:	**Contractor Name and Address:**		

Expenditure Category	Percentage of Effort/Hours		Cumulative Incurred Cost at End of Prior Period	Incurred Cost-- Current Period	Cumulative Cost to Date (D + E)	Estimated Cost to Complete	Estimated Cost at Completion (F + G)	Funded Contract Amount	Variance (Over or Under) (I - H)
	Funded	Actual							
A	B	C	D	E	F	G	H	I	J