

Contractor Release of Claims



Date:

Contractor Name &
Address:

Attention:

SUBJECT: Contractor Release of Claims

Contract/Order Number:

Project Title:

The Contractor's performance under the subject contract has been completed and the Contracting Office is currently in the process of closing the subject contract that ended on _____ (completion date).

Please complete this Contractor Release of Claims and return it to the Contracting Officer by _____.

All deliverables including all items, supplies, services and/or reports required under the terms of the contract () have been furnished, () have not been furnished, or () have not been furnished and, if applicable a list of exclusions is attached.

All Contractor badges granting access to Government facilities and equipment () have been returned to the COR/USDA Security Office, () have not been returned to the COR/USDA Security Office, () Not applicable for this contract. If Contractor badges have not been returned to the COR/USDA Security Office, the Contractor must immediately notify the COR and coordinate arrangement for the immediate return of badges.

1. Contract Number: _____
2. Last modification number: _____
3. Last call or order number, if applicable: _____
4. Contractor Name and Telephone: _____
5. Contractor Contact Name and Email: _____
6. Dollar amount of excess funds, if any applicable: _____
7. Final Invoice Number and Date: _____

