

**DEPARTMENT OF HEALTH & HUMAN SERVICES**

**Indian Health Service  
Division of Engineering Services**

**RELEASE OF CLAIMS**

Contract No. \_\_\_\_\_

Task Order No. \_\_\_\_\_

**Name and Address of Contractor:**

**Number, Name and Location of Project:**

Project No. \_\_\_\_\_

Pursuant to the terms of the above numbered contract, but subject to any claims as may be specifically excepted below, the Government of the United States, its officers, agents and employees, are hereby released and discharged from all liabilities, demand, obligations, and claims arising under or by virtue of said contract.

EXCEPTED CLAIMS\*

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
TITLE

\_\_\_\_\_  
DATE

\* Write NONE or (a) state the dollar amount of each excepted claim, (b) describe specifically the nature of each excepted claim, and (c) describe the claim in the same manner in which a "claim" is defined in FAR Clause 52.233-1, Disputes. (Attach additional pages if necessary.)