



UNITED STATES  
CIVILIAN BOARD OF CONTRACT APPEALS

\_\_\_\_\_ :  
 \_\_\_\_\_ :                   CBCA \_\_\_\_\_  
 \_\_\_\_\_ :  
 \_\_\_\_\_ :  
**Contract/Solicitation No.** :  
 \_\_\_\_\_ :

**GOVERNMENT CERTIFICATE OF FINALITY**

- A. Date claim(s) filed with the contracting officer:
- B. Amount to be paid: \$ \_\_\_\_\_.
- C. Agency address (regional office if other than central office):
- D. Agency Certification

\_\_\_\_\_ hereby certifies that:

- (1) it has not initiated and will not initiate any proceeding at the Board for the reconsideration of, or relief from, this award;
- (2) it has not initiated and will not initiate any appeal of this award to the United States Court of Appeals for the Federal Circuit.

**Government Agency**

\_\_\_\_\_  
**Date**

By \_\_\_\_\_  
**Signature and Title**

Note: This format shall be used only as a guide for individual preparation.