

FORM MPTC 32

[See Subsidiary Rule 298]

Register of Contingent charges of the Department of the District.....

for 20

Left hand page.																			
	To Whom Paid	No. of																	
	Appropriation for each head	Sub-	Contain-																
Date	for each head	vouch	gent																
		er	Abstract																

Right hand page.

OF BUDGET								UNUSUAL	Total eac		Total of each	Date of dispatch	Date of recovery of disallowance	Remarks, Amount		
						contingent abstract		month's bill	detailed of bill	or No. and date of countersigning officer's letter admitting a disallowed item	disallowed, etc.					
								Description	Amour	nt						