Ministry of Defence

RELEVANT FORM DETAILS FOR DEFCON 522 PAYMENT CONDITION

This form must be completed and attached to each contract containing DEFCON 522.

Contract Number: FTS/DE/SACC/03

Line Item plus further description if necessary	Relevant Form	Representative of the Authority[1]
Lines 1 & 2	P2P	**[redacted]**

With regard to paragraph 3 of DEFCON 522, the Contractor shall submit all claims for payment to the Bill Paying Branch using a properly completed DAB Form 10.[2]