

**UNITED STATES GOVERNMENT
INTERAGENCY AGREEMENT
BETWEEN FEDERAL AGENCIES ORDER
REQUIREMENTS AND FUNDING
INFORMATION (ORDER) SECTION
INSTRUCTIONS for FS Form 7600B**



The 7600B Order (or project funding document) is the funding section that creates a fiscal obligation when the Requesting Agency demonstrates a bona fide need and provides the necessary product(s)/service(s) requirements; funding information is provided for both trading partners; and all required points of contact sign to authorize the Order.

The Order identifies the specific Requesting Agency requirements for the expected delivery of products and/or services by the Servicing Agency (NTIS). This section identifies the roles and responsibilities for both trading partners to ensure effective management of the Order and use of the related funds.

An IAA must contain one GT&C and at least one Order, but may contain many Orders to one GT&C. A copy of the GT&C must be kept with the Orders that it supports.

Agency/Trading Partners should refer to the following document to develop standard Governmentwide business practices for their reimbursable activity: the Treasury Financial Manual (TFM) Volume 1, Part 2, Chapter 4700: Appendix 10 - Intragovernmental Business Rules — IAA Implementation Guidance
https://www.fiscal.treasury.gov/fsreports/ref/fincMgmtStdzn/fincMgmtStdzn_home.htm .

| NEW OR MODIFIED GT&C | | |
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| IAA Number (Header) | General Terms and Conditions (GT&C) Number | The unique agreement number that must be established between the Requesting and Servicing Agency which will track each GT&C from the origination through the completion or termination. |
| | Order Number | The unique number that identifies the order to the GT&C. For initial GT&Cs, the Order Number is '01'. |
| | Amendment / Modification Number | The unique number that identifies an amendment or modification to the GT&C. The amendment or modification number is added to the end of the GT&C number after the decimal. This incrementally increases after each amendment or modification. Note: For a new GT&C, the modification number will be 0. Modification to the GT&C requires approvals by both the Requesting and Servicing Agencies. |
| | Servicing Agency's Agreement Tracking Number | This number is generated and maintained by NTIS's internal tracking system. Servicing Agency Tracking Number: NTIS-XXXX Note: If the 7600B is modified, NTIS will added a number to the four-digit coded to identify the modification. NTIS-XXXX-XX |

PRIMARY ORGANIZATION / OFFICE INFORMATION

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| 24. | Primary Organization/Office Name | Enter the name of the primary organization /office within both the Requesting Agency and Servicing Agency that is directly responsible for requesting the product(s)/service(s) for this Order. |
| | Responsible Organization/Office Address | Enter the address of the primary office/organization within both the Requesting Agency and Servicing Agency that is directly responsible for this order. U.S. Dept. of Commerce National Technical Information Service 5301 Shawnee Road Alexandria, VA 22312 |

ORDER/REQUIREMENTS INFORMATION

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| 25. | Order Action (Check One) | |
| | New | Check if this is a new Order (or project funding document). |
| | Modification (Mod) | Check if this Order is being modified. List the affected Order blocks being changed and explain the changes being made. For Example: For a performance period mod, state new performance period for this Order in Block 27. Fill out the Funding Modification Summary by Line (Block 26) if the Mod involves adding, deleting, or changing funding for an Order Line. A Mod number must be entered in the IAA Number schema. |
| | Cancellation | Check if this Order is being canceled and provide a brief explanation. Fill in the Performance Period End date for the effective cancellation date. |
| 26. | Funding Modification Summary by Line | Complete this block for modifications that add, delete or change funding information ONLY for an Order Line(s). |
| | Line # | Fill in the line number that needs a funding modification. |
| | Original Line Funding | Fill in the line amount obligated on the original order. |
| | Cumulative Funding Changes from Prior Mods [addition (+) or reduction (-)] | Fill in the sum [all additions and reductions] of all prior approved funding modifications. Do NOT include the current funding Mod. |
| | Funding Change for This Mod | Fill in the change to funding [addition or reduction] for this Mod |
| | TOTAL Modified Obligation | Enter the sum of: + Original Line Funding +(-) Cumulative Funding Changes from Prior Mods +(-) Funding Change for This Mod = Total Modified Obligation ===== |

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| 26. (cont.) | Total Advance Amount (-) | Enter the total Advance Amount from Block 28 for the Line # being modified. Note: If there is a Mod to an advance, enter the new advance amount in Block 28. |
| | Net Modified Amount Due | Enter the sum of: + Total Modified Obligation (-) Total Advance Amount = Net Modified Amount Due ===== |
| | Total All Other Lines (attach funding details) | If there are mods to additional lines, attach the detail and include the sum of: Original Line Funding, Cumulative funding changes from prior Mods [addition + or reduction (-)], Funding Change for this Mod, Total Modified Obligation, Total Advance Amount (-) and Net Modified Amount Due for all of the additional line mods captured in the attachment. |
| | Total | Enter the Total of all line mods including Total All Other Lines for: Funding Change for this Mod, Total Modified Obligation, Total Advance Amount (-) and Net Modified Amount Due. |
| 27. | Performance Period | The Performance Period identifies the dates between which the products and/or services for the Order will be provided. The Performance Period could include the Servicing Agency's activities to prepare for and closeout the delivery of the requested products/services. The Performance Period will be defined depending on the business needs for each IAA. For a performance period mod, insert the start and end dates that reflect the new performance period. |
| | Start Date (MM-DD-YYYY) | Enter the date (Month, Day, Year) that the Order will begin or enter "When Signed". By default, NTIS will use "When Signed" unless otherwise requested. |
| | End Date (MM-DD-YYYY) | Enter the date (Month, Day, Year) that the Order will end. By default, NTIS will list all Orders to expire approximately 12 months from the anticipated start date. |
| 28. | Order Line/Funding Information | |
| | Line Number | Enter the line number for this Order. If there are 10 lines, this Order will have line numbers 1 through 10. Additional lines may be added by copying the page with Block 28. |
| | ALC | Enter the Requesting Agency's and Servicing Agency's Location Code (See http://www.fms.treas.gov/TFM/vol1/v1p2c330.html). |
| | Treasury Account Symbol (TAS) | Agency must enter the Component TAS for each Order Line for the Requesting Agency and Servicing Agency. http://www.fiscal.treasury.gov/fsservices/gov/acctg/cars/factsheet_tas.htm |

| 28. (cont.) | Component TAS | Acronym/ Field Length | Definition |
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| | 1. Sub-level Prefix Code | SP/2 | A programmatic breakdown of the account for Treasury publication purposes |
| | 2. Allocation Transfer Agency Identifier | ATA/3 | The Agency Identifier of the agency receiving funds through an allocation transfer |
| | 3. Agency Identifier | AID/3 | Represents the department, agency or establishment of the U.S. Government that is responsible for the TAS. Used in conjunction with the main account code |
| | 4. Beginning Period of Availability | BPOA/4 | In annual and multi-year funds, identifies the first year of availability under law that an appropriation account may incur new obligations |
| | 5. Ending Period of Availability | EPOA/4 | In annual and multi-year funds, identifies the last year of funds availability under law that an appropriation account may incur new obligations |
| | 6. Availability Type Code | A/1 | Identifies no-year accounts “X,” clearing/suspense accounts “F,” Treasury’s central summary general ledger accounts “A,” and merged-surplus accounts “M” |
| | 7. Main Account Code | MAIN/4 | Identifies the type and purpose of the fund |
| | 8. Sub-Account Code | SUB/3 | Identifies an available receipt or other Treasury-defined subdivision of the main account |
| | Current TAS Format Agency must enter one TAS in the current format – if the component TAS has not been entered - for each Order Line for the Requesting Agency and Servicing Agency. | | |
| | Business Event Type Code (BETC) Enter one BETC for each line for the Requesting Agency and Servicing Agency. The BETC must be related to the TAS (see http://www.fiscal.treasury.gov/fsservices/gov/acctg/cars/factsheet_betc.htm). | | |
| | Object Class Code (Optional) For each line, enter the Object Class Code. | | |
| | BPN Enter the Requesting Agency’s and Servicing Agency’s Business Partner Number (BPN) (see http://www.sam.gov). Note: BPN is the standard name for this data element; however, this may be a trading partner’s DUNS or the Department of Defense Activity Address Code (DoDAAC). | | |
| | BPN + 4 (Optional) Enter the Requesting Agency’s and Servicing Agency’s BPN + 4. Note: BPN + 4 is the standard name for this data element, however, this may be a trading partner’s DUNS + 4 or the Department of Defense Activity Address Code (DoDAAC) + 4. | | |
| | Additional Accounting Classification/Information (Optional) Enter additional important accounting information used for internal tracking for the Requesting Agency and/or Servicing Agency. | | |

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| 28. (cont.) | Requesting Agency Funding Expiration Date MM-DD-YYYY | For each line, enter the date (Month, Day, Year) when the Requesting Agency's funds for this Order Line expire (the last date an obligation can occur). This date will usually fall on the last day of the fiscal year that coincides with the year entered in the EPOA TAS field. For example, 9/30/20XX. For No-Year Funds, NTIS will enter "No-Year". |
| | Requesting Agency Funding Cancellation Date MM-DD-YYYY | For each line, enter the date (Month, Day, Year) that the Requesting Agency's funds will cancel for this Order Line. The cancellation date is the fifth year from the expiration date (the last date the payment must be disbursed). For example, if "09-30-2009" is the last year the funds will be available for obligation, then the Requesting Agency will have a cancellation date of "09-30-2014." For No-Year Funds, NTIS will enter "No-Year". |
| | Project Number & Title | Enter the Requesting Agency's project number and title using the following format: NTIS-XXX-X <Client Agency> <Project Name> |
| | Description of Products and/or Services, including the Bona Fide Need for this Order | State or attach a specific, definite, and clear description that demonstrates a bona fide need and supports a binding agreement in accordance with the GT&C that can be recorded as an obligation in the fiscal year that the funds are available for obligation. This description may be, but is not required to be, in the form of a Statement of Work (SOW), Statement of Objectives (SOO), Performance Work Statement (PWS), or other requirements document. NTIS will attached a baseline Statement of Work (SOW) to the Order. Please use the following – Attachment A - NTIS XXXX-X-SOW-<Client Agency> <Project Name> |
| | North American Industry Classification System (NAICS) Number (Optional) | For each line, enter the two- to six-digit NAICS number, as needed. For more information, see http://www.census.gov/eos/www/naics/ . |
| | Breakdown of Reimbursable Line Costs | |
| | Units of Measure | Leave this field blank. |
| | Quantity | Leave this field blank. |
| Unit Price | Leave this field blank. | |
| Total | Leave this field blank. | |
| Overhead Fees & Charges | Leave this field blank. | |
| Total Line Amount Obligated | Enter the amount obligated for the project(s) and/or service(s) that will be delivered by NTIS and its JVPs. | |
| Advance Line Amount (-) | Leave this field blank. | |

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| 28. (cont.) | Net Line Amount Due | Enter the total budget amount obligated for the project(s) and/or service(s) that will be delivered by NTIS and its JVPs for this Order Line. All Net Line Amount Due costs must equal the Total Net Order Amount (Block 30). |
| | Breakdown of Assisted Acquisition Line Costs | |
| | Contract Cost | Leave this field blank. |
| | Servicing Fees | Leave this field blank. |
| | Total Obligated Cost | Leave this field blank. |
| | Advance for Line (-) | Leave this field blank. |
| | Net Total Cost | Leave this field blank. |
| | Assisted Acquisition Servicing Fees Explanation | Leave this field blank. |
| Type of Service Requirements | Select Severable, Non-Severable Service, or Not Applicable for this Order Line. If this is the Order is for the Problem Statement, Whiteboard, and selection of JVP(s), then select Non-Severable Service. | |
| 29. | Advance Information | If there are Advance Payments Allowed for this IAA is checked "Yes" in Block 8 on the GT&C, then an advance may be paid for Order(s) related to that GT&C. The Requesting Agency MUST have authority (as cited on the GT&C) that allows advances for this IAA. In most circumstances, all fields in this block are left blank. |
| | Total Advance Amount for Order | Leave this field blank. |
| | Revenue Recognition Methodology | Leave this field blank. |
| 30. | Total Net Order Amount | Enter total net order amount. All Order Net Line Amount Due in Block 28 must equal the value in Block 30. |
| 31. | Attachments | State and/or list Other Attachments the following for NTIS projects – Attachment A - NTIS XXXX-X-SOW-<Client Agency> <Project Name> |

BILLING & PAYMENT INFORMATION

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| 32. | Payment Method (Check One) | Intra-governmental Payment and Collection (IPAC) is the preferred method. If IPAC is used, the payment method must agree with the IPAC Trading Partner Agreement (TPA). |
| | Requesting Agency Initiated IPAC | Leave this unchecked. |
| | Servicing Agency Initiated IPAC | Check if the Servicing Agency will initiate payment via IPAC. NTIS will check this box by default. |
| | Charge Card | Leave this unchecked. |
| | Other | Leave this unchecked. |
| 33. | Billing Frequency (Check One) | An Invoice must be submitted by the Servicing Agency and accepted by (i.e. via IPAC transaction). |
| | Monthly | Check if the invoice will be billed monthly. NTIS will check this box by default. |
| | Quarterly | Check if the invoice will be billed quarterly. Leave this unchecked. |
| | Other | Check if the invoice will be billed other than monthly or quarterly. Explain the other agreed-upon billing frequency. Leave this unchecked. |
| 34. | Payment Terms | Payment is expected from the Requesting Agency in 7 days. |
| | 7 days | Check if the payment is due 7 days from receipt of the bill. NTIS will check this box by default. |
| | Other Payment Terms | Check if there is another arrangement other than 7 days. If Other Payment Terms is checked, provide the agreed-upon payment terms and a brief explanation. Leave this unchecked. |
| 35. | Funding Clauses/Instructions (Optional) | Include availability of funds or other funding clauses as deemed necessary. By default, NTIS will use the following clauses – “Should <Client Agency> be required to issue its own document to obligate funds, that document shall contain no term or condition that would add to, delete, or modify the terms of this agreement. After a joint venture partner(s) is selected to work on this agreement, the agreement will be modified to update the Statement of Work and to add Project-Specific Terms and Conditions.” |
| 36. | Delivery/Shipping Information for Products (Optional) | Enter the Agency Name, Point of Contact (POC) Name & Title, Email Address, Delivery Address/Room Number, and POC Telephone Number of the person who will receive the shipment. |
| | Special Shipping Information | Enter specific information for shipping, shipping company, date/time, special instructions, etc. |

Approvals and Contact Information

Fill in the points of contact for the Requesting Agency and Servicing Agency. Each agency determines who will sign its IAAs per the roles defined below.

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| 37. | PROGRAM OFFICIALS | <p>The Program Officials, as identified by the Requesting Agency and Servicing Agency, must ensure that the scope of work is properly defined and can be fulfilled for this Order. The Program Official may or may not be the Contracting Officer depending on each agency's IAA business process.</p> <p>By signing this document, the Requesting Agency Program Official confirms that a bona fide need exists and that funds are legally available for the acquisition described in this document.</p> <p>By then signing this document, the Servicing Agency Program Official accepts the Order's terms and conditions and confirms that the scope of work can be fulfilled.</p> |
| | Name | Enter the name for the Program Official. |
| | Title | Enter the title for the Program Official. |
| | Telephone Number | Enter the telephone number for the Program Official. |
| | Fax Number | Enter the fax number for the Program Official. |
| | Email Address | Enter the email address for the Program Official. |
| | SIGNATURE | The Program Official for both the Requesting Agency and the Servicing Agency must sign to accept this agreement. |
| | Date Signed | Enter the date when this order was signed. |
| 38. | FUNDING OFFICIAL | <p>The Funds Approving Officials, as identified by the Requesting Agency and Servicing Agency, certify that the funds are accurately cited and can be properly accounted for per the purposes set forth in the Order.</p> <p>The Requesting Agency Funding Official signs to obligate funds.</p> <p>The Servicing Agency Funding Official signs to start the work, and to bill, collect, and properly account for funds from the Requesting Agency, in accordance with the agreement.</p> |
| | Name | Enter the name of the Funds Approving Official. |
| | Title | Enter the title for the Funds Approving Official. |
| | Telephone Number | Enter the telephone number for the Funds Approving Official. |
| | Fax Number | Enter the fax number for the Funds Approving Official. |
| | Email Address | Enter the email address for the Funds Approving Official. |
| | SIGNATURE | The Funds Approving Official for both the Requesting Agency and the Servicing Agency must sign to certify that funds are available and acceptable for obligation for this Interagency Agreement. |
| | Date Signed | Enter the date when this order was signed. |

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| 39. | FINANCE OFFICE POINTS OF CONTACT (POCs) | The Finance Office POCs for both the Requesting Agency and the Servicing Agency must ensure that the payment (Requesting Agency), billing (Servicing Agency), and advance/accounting information are accurate and timely for this Order. |
| | Name | Enter the name of the Finance Official. Note: This could be a Contracting Officer's Technical Representative. |
| | Title | Enter the title of the Finance Official. |
| | Office Address | Enter the address of the Payment Office (Requesting Agency) and Billing Office (Servicing Agency). |
| | Telephone Number | Enter the telephone number of the Finance Official. |
| | Fax Number | Enter the fax number for the Finance Official. |
| | Email Address | Enter the email address of the Finance Official. |
| | Signature & Date (Optional) | |
| 40. | ADDITIONAL Points of Contact (POCs) (Optional) | |
| | Name | Enter the name for the additional POC. |
| | Title | Enter the title for the additional POC. |
| | Office Address | Enter the office address for the additional POC. |
| | Telephone Number | Enter the telephone number for the additional POC. |
| | Fax Number | Enter the fax number for the additional POC. |
| | Email Address | Enter the email address for the additional POC. |
| | Signature & Date (Optional) | |