U.S. Department of State

AWARD/MODIFICATION OF INTERAGENCY ACQUISITION AGREEMENT

1. Agreement Number
a. DOS
b. Other Agency
☐ Modification Number

2. Name and Address of Requesting Agency

3. Name and Address of Servicing Agency

DUNS Number

DUNS Number

4. Name and Telephone Number of Requesting Agency POC

5. Name and Telephone Number of Servicing Agency POC

6. U.S. Department of State Payment Office, Billing Address, and Name/Telephone Number of POC

Send original and _____ copies of all invoices.

7. Funding Obligations
a. Previous Total _____
b. Amount of this Action _____
c. Total Amount $0.00

8. Accounting and Appropriation Data

9. Project Title, Description of Work to be Performed, and Deliverables

☐ See Attached Statement of Work.

10. Statutory Authorization
☐ Economy Act *(31 U.S.C. 1535)*
☐ Other _____

11. Performance Period
From *(mm-dd-yyyy)* _____ To *(mm-dd-yyyy)* _____

12. Method of Payment
☐ SF-1080
☐ SF-1081
☐ IPAC *(Intra-Governmental Payment and Collection) System*
Agency Location Code *(ALC)* _____
☐ Other _____

13. Timing of Payment
☐ Advance Billing
☐ Progress Billing *(Work Completed)*

14. Limitations: U.S. Department of State *(DOS)* funds obligated on this agreement may not be exceeded without the written approval of a DOS official authorized to execute a modification to this agreement. Any DOS funds not utilized for the performance of the work described in this agreement shall be returned to DOS. This agreement may be terminated by either party by providing written notice to the other party _____ days prior to the intended termination date.

15. Requesting Agency Approval
(Signature)

16. Servicing Agency Approval
(Signature)

15A. Name and Title

16A. Name and Title

15B. Office

15C. Date *(mm-dd-yyyy)*

16B. Office

16C. Date *(mm-dd-yyyy)*

DS-1921
12-2005