



May 23, 2011

Vendor name
ATTN: Business contact
Street address
City, State

Subject: Contract No. HHSO1002010000XXC; COA No. 15
(Subcontract Approval)

Dr. Whomever:

As requested in your email dated XX/XX/XXXX, authorization is hereby granted to enter into a performance based type subcontract with Vendor to conduct Whatever Studies in accordance with 1.2.1.1 and 1.2.1.5 of the Statement of Work.

This subcontract shall cover performance from the effective date of this authorization through August 30, 2011. The total estimated cost for this subcontract shall not exceed **\$\$X,XXX**.

This subcontract agreement is subject to the same terms and conditions that govern the prime contract; that is, any relevant issues not specifically addressed in the proposed subcontract document will be considered applicable, as if stated. This action does not increase the total estimated cost of the prime contract.

You are hereby authorized to proceed with the execution of the proposed subcontract, under the terms and conditions stated, and requested to return an executed copy of the final subcontract document within 30 days of the date of this letter to the undersigned. Please cite COA No. 15 on your invoice when billing for reimbursement.

In accordance with FAR 52.249-6, Termination all subcontracts authorized under this contract shall be subject to the procedures noted therein, i.e., terminated to the extent that they relate to the portion of any work which may subsequently be terminated. Any questions concerning this authorization shall be directed to the undersigned.

If you have any questions concerning this consent, please direct them to Susan Cortes-Shrank at (202) 205-4857 or via email at susan.cortes-shrank@hhs.gov.

Sincerely,

Contracting Officer

cc: Important BARDA contact, COTR
cc: Important business contact, Vendor

Request for Contracting Officer Authorization

Date Submitted:	Oct 1, 2011
Submitted by:	[INSERT NAME]
Submitted to (BARDA Contracting Specialist):	[INSERT NAME]
Submitted to (BARDA COTR):	[INSERT NAME]
Requested date of approval:	Oct 18, 2011
Requested effective date:	Oct 18, 2011

Company C requests BARDA Contracting Officer Authorization for the B.A.E.A. Contract activity described below:

Subcontractors name:	CMO
Company C point of contract (e.g. PI):	[INSERT NAME]
Subcontractor point of contact:	[INSERT NAME]
CLIN #:	CLIN 1 (base period)

Statement of work:	Reference the Statement of Work submitted by CMO as their proposal to complete activities under work breakdown structures 1.6.2 and 1.6.3.
Period of performance:	10/28/2011 - 9/28/12 (with options to extend)
Requested funding amount:	[INSERT DOLLAR AMOUNT]

Note: Attach quotes from vendors to assist with cost analysis.

Request for Contracting Officer Authorization

Task

Task	Contract Funding authorized for CLIN 1 use from proposal	COA # Approved	\$ Amount Request for this COA Approval. Also List previous COA's approved which will allow history that illustrate remaining balance available for use.	Balance Available for	VENDOR COA Request is
Name of Activity	\$	\$	COA # 1		
Name of Activity	\$	\$			
TOTAL					

Example