UNITED STATES GOVERNMENT ORDER FORM FS FORM 7600B



Agreement Between Federal Program Agencies for Intragovernmental Reimbursable, Buy/Sell Activity. In Accordance with TFM Volume 1, Part 2, Chapter 4700, Appendix 6, Section 9.

https://www.fiscal.treasury.gov/g-invoice/

G-Invoicing Required Fields have an (*)

	NEW OR MODIFIED ORDER				
1.	*Order Number	Order Number:			
		Modification Number:			
2.	*General Terms & Conditions (0	GT&C) Number (Associated with this Order):			
3.	*Order Date (YYYY-MM-DD):				
		PARTNER INFORMATION			
4.	*Assisted Acquisition Indicator	◯ Yes ◯ No			
5.	*Period of Performance	Start Date:	End Date:		
		Requesting Agency (Buyer)	Servicing Agency (Seller)		
6.	*Agency Location Code (ALC)		47000016		
7.	*Agency Name		US General Services Administration		
8.	Cost Center				
9.	Business Unit				
10.	Department ID				
11.	Order Tracking Number				
12.	Agency Business Partner Network (BPN)				
		AUTHORITY INFORMATION			
		Requesting Agency (Buyer)	Servicing Agency (Seller)		
13.	*Statutory Authority Fund Type Code	Franchise Fund Revolving Fund	Franchise Fund Revolving Fund		
	Type code	Economy Act Other Authority	Economy Act Other Authority		
		Working Capital Fund	Working Capital Fund		
14.	Statutory Authority Fund Type Title				
15.	Statutory Authority Fund Type Citation				
16.	Program Authority Title				
17.	Program Authority Citation				
	ADVANCE INFORMATION (Required by Serving Agency if there is an advance.)				
18.	Advance Revenue Recognition Methodology	Straight Line Accrual per Work	Completed Monthly Other		
19.	Advance Revenue Recognition Description (required if "Other")				
20.	Advance Payment Authority Title				
21.	Advance Payment Authority Citation				

Page 2 of 5 Order Number: **Total Advance Amount** 22. **DELIVERY INFORMATION** (Requesting Agency completes this section.) *FOB Point Source/Origin Destination Other 23. Constructive Receipt Days (Calendar Days) *Required if Destination/Other is checked on line 23. 24. Source/Origin Acceptance Point Destination Other 25. Place of Acceptance 26. Source/Origin Destination Other Inspection Point 27. Place of Inspection 28. **ORDER BILLING** (Servicing Agency completes.) *Billing Frequency Please Select One: 29. 30. Billing Frequency Explanation **ORDER BILLING** (Requesting Agency completes.) **Priority Order Indicator** Yes ○ No 31. Capital Planning and 32. Yes ○ No Investment Control (CPIC) LINE ITEMS (Additional Lines/Schedules may be added using the + button after Block 93) *Line Number 33. Order Line Status 34. *Item Code 35. *Item Description 36. *Line Costs Unit of Measure 37. (MOU) *Unit of Measure (UOM) 38. Description **Total Line Costs** 39 Order Line Advance Amount 40. Product/Service Identifier 41. *Capitalized Asset Indicator 42. Item UID Required Indicator 43. *Type of Service Requirements SCHEDULE SUMMARY (Additional Lines/Schedules may be added using the + button after Block 93) *Schedule Number 45. Advance Pay Indicator 46. *Cancel Status (schedule) 47. *Schedule Unit Cost/Price 48. *Order Schedule Quantity 49. Order Schedule Amount 50. SCHEDULE FUNDING INFORMATION

CONEDULE I ONDING IN CINIII AND IN						
er)		Servicing A	gency (Sell	er)	
MAIN SUB	SP ATA	AID BPOA	EPOA	А	MAIN	SUB
		047		x	4534	001
	,	,	AIN SUB SP ATA AID BPOA	AIN SUB SP ATA AID BPOA EPOA	AIN SUB SP ATA AID BPOA EPOA A	AIN SUB SP ATA AID BPOA EPOA A MAIN

52.	*Agency Business Event Type Code (BETC)	DISB	COLL
53.	Agency Business Partner Network (BPN) + 4		
54.	Object Class Code		
55.	Additional Accounting Classification		
56.	*Description of Products and/or Services, including Bona Fide Need for this order. (Buyer only)		
	SLO	OA INFORMATION (*To capture Agency Inte	rnal Accounting)
57.	Accounting Classification Reference Number		
58.	Reimbursable Flag	◯ Yes ◯ No	
		Requesting Agency (Buyer)	Servicing Agency (Seller)
59.	Federal Award Identifier Number (FAIN)		
60.	Unique Record Identifier (URI)		
61.	Activity Address (AAC)		
62.	Budget Line Item		
63.	Budget Fiscal Year		
64.	Security Cooperation (FMS)		
65.	Security Cooperation Implementing Agency Code		
66.	Sub-Allocation		
67.	Agency Accounting Identifier		
68.	Funding Center Identifier		
69.	Cost Center Identifier		
70.	Project Identifier		
71.	Activity Identifier		
72.	Cost Element Code		
73.	Work Order Number		
74.	Functional Area		
75.	Agency Security Cooperation Case Designator		
76.	Parent Award Identifier (PAID)		
77.	Procurement Instrument Identifier (PIID)		
	SCHEDULE SHIPPING INFORMATION		
78.	Ship To Address Identifier		
79.	Ship To Agency Title		
80.	Address 1		

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81.	Address 2	
82.	Address 3	
83.	Ship To City	
84.	Ship To Postal Code	
85.	Ship To State	Alabama
86.	Ship To Country Code	
87.	Ship To Location Description	
88.	Delivery/Shipping Information for Product Special Shipping Information	
89.	Delivery/Shipping POC Name	
90.	Delivery/Shipping Information for Product POC Title	
91.	Delivery/Shipping Information for Product POC E-mail Address	
92.	Delivery/Shipping Information for Product POC Telephone Number	
93.	Agency Additional Information	Please see the attached GSA Disclaimer

	AGENCY POINT OF CONTACTS (POC)				
		Requesting Agency (Buyer)	Servicing Agency (Seller)		
94.	*Agency POC Name		Katrina Winfrey		
	*Agency POC E-mail		katrina.winfrey@gsa.gov		
	*Agency POC Phone No.		404-331-1143		
	Agency POC Fax No.				

AGREEMENT APROVALS

FUNDING OFFICIAL

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. The Requesting Agency Funding Official signs to obligate funds. 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.

		Requesting Agency (Buyer)	Servicing Agency (Seller)
	*Funding Official Name		Margaret Smartt
	*Signature		
	Funding Official Title		Financial Management Analyst
95.	*Funding Official E-mail		mfaye.smartt@gsa.gov
	*Funding Official Phone No.		4043313287
	Funding Official Fax No.		
	*Funding Official Date Signed		

PROGRAM OFFICIAL

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.

TAA business process.				
		Requesting Agency (Buyer)	Servicing Agency (Seller)	
	*Program Official Name		Katrina Winfrey	
	*Signature			
	Program Official Title		Financial Manger	
	*Program Official E-mail		katrina.winfrey@gsa.gov	
96.	*Program Official Phone No.		4043311143	
	Program Official Fax No.			
	*Program Official Date Signed			
	AGENCY PREPARER INFORMATION			
		Requesting Agency (Buyer)		

97.

*Name

*Phone No.

*E-mail Address



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. The Requesting Agency Funding Official signs to obligate funds. 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.

Payment

• Reimburse GSA for all telecommunication services utilized by the Agency.

GSA Fee

• Fee for the GSA OTS Full Service Program = 30% of the Costs of Vendor Services for the Agreement Period.

Funding

- Please be advised that GSA/FAS does not track funding levels on behalf of ordering agencies. GSA/FAS acknowledges that agencies may require signed documents for internal procedures in order to post obligations against their respective telecommunications appropriations; however, any tracking of funds against this Interagency Agreement (or amendments) is/are the sole responsibility of the ordering agency. GSA/FAS assumes no responsibility for tracking the actual billings against the obligation.
- It is the sole responsibility of the client to track their respective obligations and expenses and adjust funding obligations as required, providing an adjusted funding document (ex:7600B, MIPR, etc- amended) to GSA as appropriate.
- Should the client expend all funds committed to the IA and the client does not apply additional funds that allow for the current billings to be paid promptly GSA/FAS may terminate services. Disputes/Chargebacks
- Local service customers with disputes identified by the agency must notify GSA via Email: telecomdisputes@gsa.gov (provide statement number, dispute specifics, and contact name and number who can work with GSA to resolve the dispute). GSA has 3 business days to acknowledge dispute receipt and 60 days to respond/resolve the disputes. Chargebacks will only be permitted with concurrence of both parties.
- Networx customers with vendor disputes must work with their vendors to address and resolve disputes. For non-vendor billing or IPAC issues please contact GSA via Email: networxbillingissues@gsa.gov (provide statement number, dispute specifics, and contact name and number who can work with GSA to resolve the dispute). GSA has 3 business days to acknowledge dispute receipt and 60 days to respond/resolve the disputes. Chargebacks will only be permitted with concurrence of both parties. WITS 3 vendor disputes must work with their vendors to address and resolve disputes. For non-vendor billing issues please contact GSA via Email: telecomdisputes@gsa.gov (provide statement number, dispute specifics, and contact name and number who can work with GSA to resolve the dispute). GSA has 3 business days to acknowledge dispute receipt and 60 days to respond/resolve the disputes. Chargebacks will only be permitted with concurrence of both parties.
- If the above account chargeback procedures are not followed or chargebacks cannot be resolved in a timely manner GSA will place the Agency Account 'on hold' (moves, adds and changes will not be allowed or processed) and will result in termination of services by GSA.
- The Requesting Agency may dispute the contents of a billing invoice. Any dispute must be submitted within 90 days upon receipt of the billing invoice.
- Any request to adjust previously paid billing invoices must be submitted within 6 months of payment.