

SUBCONTRACT/SUBAWARD ISSUANCE REQUEST FORM

Please use a separate form for each subcontractor

ASC Account Number: _____

Name of Subcontractor/Subrecipient: _____

Please issue (mark one):

NEW

AMENDMENT

for Amendments only: Subcontract Number: _____

Amount funded by this Action: \$ _____

Subcontract Match: _____

Current Budget Period: From _____

through _____

Estimated Total funding (if incrementally funded): _____

Estimated Total Project Period: From _____ through _____

*****Please attach a copy of the subcontractor's Scope of Work and budget (required).*****

Invoicing instruction: Monthly Quarterly Other: please specify _____

Expected Deliverables and due dates (attach additional sheets as needed):

Reporting Requirements: _____

Special Instructions (if any): _____

Conflict of Interest Disclosure:

1. I, my spouse or child has any ownership interest with the Subcontractor. YES NO

2. I, my spouse or child receives salary, income from partnership, seminar, lecture, or other engagement with the Subcontractor. YES NO

3. I, my spouse or child is a founder, officer, partner, trustee, board member, or serve in a position of influence in the Subcontractor YES NO

If any answer to the above is "YES," please provide supplemental information. Include a statement on how you propose to maintain objectivity in designing, conducting, or reporting the project activity as a result of your relationship with the Subcontractor.

My signature below confirms my instruction to issue a subcontract/amendment to the organization noted above. I will be responsible for the oversight of Subcontractor's Scope of Work, and its scientific and technical progress.

PI Signature _____ Date: _____