***7600B - Order Requirements and Funding Information Order Section***

The order (or funding document) is the funding section that creates a fiscal obligation when the requesting agency demonstrates a bona fide need and provides the necessary 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 (DTIC). 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 (funding document), but may contain many orders (funding documents) 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**](https://www.fiscal.treasury.gov/fsreports/ref/fincMgmtStdzn/fincMgmtStdzn_home.htm) Trading Partners should also follow the Federal Acquisition Regulations (FAR) for intragovernmental transaction threshold guidance.

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| **Order Requirements and Funding Information (Order) Section**  |
| **24** | **Primary Organization /Office Information** |   |
|  | **Primary Organization/Office Name** | Enter the name of the primary organization /office within both the requesting agency and servicing agency (DTIC) 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. |
| **ORDER/REQUIREMENTS INFORMATION** |
| **25** | **Order Action** (Check  One) |
| New  | Check if this is a new order (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.
* Authorization of an order mod requires official signatures of both the requesting agency and the servicing agency in relation to the mod. For example, if there is a funding mod, then the funds approving officials must sign the IAA Mod.
 |
|   | 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 | **C**omplete this block **only** for modifications that **add, delete or change funding information** |
| Line # Provides Labor/Travel/ODC/CSDC funding breakout | 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=========================== |
| 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 (funding document) 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.   |
| End Date (MM-DD-YYYY) | Enter the date (Month, Day, Year) that the Order will end.   |
| **28** | **Order Line/Funding Information** |  |
| Line Number | You **must** list each line item (Labor, Travel ODC, and CSDC) and the respective amount of each item in the description section of this block regardless of whether you are are using one LOA or several LOAs Block 28 on the 7600B is specific to one line of accounting and one line item.  The following is required on all orders (funding documents) and should be specified in the Description of Products and/or Services section of Block 28. Breakout of TAT Labor, Travel and ODC/Material. The PWS Task Numbers funded by each amount CSDC amountIf you are funding the TAT effort and CSDC with a **single line of accounting**, you may complete **one** 7600B with **one** block 28.  Make sure that you list each line item (Labor, Travel ODC, and CSDC) and the respective amount of each item in the description section of this block.If you are funding your TAT effort with **one LOA and CSDC with another**, you may complete **one** 7600B with **two** block 28s (one contract, one CSDC).If you are funding your TAT effort with **multiple LOAs**, you must complete a **separate 7600B for each LOA**.  For example, let's say you completing a 7600B and want to use three different LOAs, one for each line item (i.e. one LOA for Labor, a different LOA for Travel, and another LOA for DTIC CSDC).  In this scenario, you would complete three separate 7600Bs, each with their own block 28, and use order numbers 0001, 0002 and 0003:LOA #1 - Labor - Order# 0001LOA #2 - Travel - Order# 0002LOA #3 - DTIC CSDC - Order# 0003 |
| 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**](http://www.fiscal.treasury.gov/fsservices/gov/acctg/cars/factsheet_tas.htm) |
| **Component TAS**  | **Acronym/****Field Length** | **Definition** |
| 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**](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**](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. |
|  | Requesting Agency Funding Expiration DateMM-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 does not apply to No-Year Funds.*  |
| 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.” *This does not apply to No-Year Funds.* |
| Project Number & Title | Enter the Requesting Agency’s TAT number and title |
| Description of Products and/or Services**, including the Bona Fide Need  for this** OrderInclude Labor/Travel/ODC breakout and list the funded PWS tasks for each.  | 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.Assisted Acquisition Agreements will describe the products or services required by the Requesting Agency that will be acquired from a contractor by the Servicing Agency.  |
| 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/**](http://www.census.gov/eos/www/naics/). |
| **Breakdown of Reimbursable Line Costs** |
| Units of Measure | For Reimbursable Agreements, enter the unit of measure for each Order Line, if applicable. |
| Quantity   | For Reimbursable Agreements, enter the number of items, hours, or other unit of measure being delivered for this Order Line, if applicable. |
| Unit Price   | For Reimbursable Agreements, enter the price per quantity being delivered for this Order Line, if applicable. |
| Total | For Reimbursable Agreements, enter the Total line cost, which may be the sum of the quantity multiplied by the price. |
| Overhead Fees & Charges | For Reimbursable Agreements, enter the Overhead Fees & Charges for each Order Line. |
|  | Total Line Amount Obligated | For Reimbursable Agreements, enter the total line amount obligated for the product(s) and/or service(s) that will be delivered for this Order Line. |
| Advance Line Amount (-) | For Reimbursable Agreements, enter the amount of the Advance for this Order Line.**Note 1**:  An Advance may only be paid by the Requesting Agency if “Yes” was selected for theAdvance Payment on the GT&C.**Note 2:**  All of the Advance line amounts **must** equal the Total Advance Amount for the Order (Block 29).**Note 3:**  The Advance Line Amount is based on the Servicing Agency’s capital need and may NOT equal the Total Line Amount.**The Requesting Agency MUST have authority (as cited on the GT&C, Block 8) that allows advances for reimbursable agreements.** |
|    Net Line Amount Due | For Reimbursable Agreements, enter the net Line Amount Due for the products and/or services that will be delivered for this Order Line.  This is the Total Line Amount Obligated less the Advance Line AmountAll Net Line Amount Due costs must equal the Total Net Order Amount (Block 30). |
| **Breakdown of Assisted Acquisition Line Costs**  |
| Contract Cost | For Assisted Acquisition Agreements, enter the contract cost. |
| Servicing Fees | For Assisted Acquisition Agreements, enter the servicing fees associated with the contract. |
| Total Obligated Cost | For Assisted Acquisition Agreements, the Servicing Agency enters the Total obligated cost for this Order Line; this is the sum of the contract cost and servicing fees. |
| Advance for Line (-) | For Assisted Acquisition Agreements, enter the amount of the Advance for this Order Line.**Note 1**:  An Advance may only be paid if “Yes” was selected for theAdvance Payment on the GT&C.**Note 2:**  All of the Advance line amounts **must** equal the Total Advance Amount for the Order (Block 29).**The Requesting Agency MUST have authority (as cited on the GT&C, Block 8) that allows advances for Assisted Acquisition Agreements.** |
| Net Total Cost | For Assisted Acquisition Agreements, enter the net total cost due for the product(s) and/or service(s) that will be delivered for this Order Line.  This is the Total Obligated Cost less Advance Line Amount.All Net Total Costs must equal the Total Net Order Amount (Block 30). |
| Assisted Acquisition Servicing Fees Explanation | For Assisted Acquisition Agreements, enter information to explain the related service fees for this Order Line. |
| Type of Service Requirements | Select Severable |
| **29** | **Advance Information**  | If the 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.** |
|  | Total Advance Amount for Order | Enter the total advance amount for the entire Order.All Order Line advances (Block 28) must sum to the Total Advance Amount for the Order. **Note:**  If more information is needed about the Advance, such as agreed to date of payment, include as a Funding Clause (Block 35). |
|  | Revenue Recognition Methodology | **Note:** According to the Financial Accounting Standards Advisory Board, (FASAB), Statement of Federal Financial Accounting Standards (SFFAS) Statement of Recommended Accounting Standards Number 7, advance payments may **not** be expensed.  “Accounting for Advance Payments **shall be recorded as an asset** for the Requesting Agency and liability for the Servicing Agency…  Revenue should **not** be recognized **until costs are incurred from providing goods and services**…”Identify the **Revenue** **Recognition Methodology** that both parties willuse to account for the Requesting Agency’s expense and the Servicing Agency’s revenue as costs are incurred by the Servicing Agency in providing the goods and services for this Order against ALL advances for this Order.**Straight-line** – Check if the same amount will be recognized each month. Provide the amount to be accrued and the number of months.OR**Accrual Per Work Completed** – Check if accruing revenue/expense on an other than straight-line basis and identify the accounting posting periods. **Monthly** – Check if the accrual is based on work completed and invoiced on a monthly basis. OR**Other –** Check ifan other regular period will be used and explain the other regular period (bimonthly, quarterly, etc.) for posting accruals and how the accrual amounts will be communicated if other than billed. **Work closely with the Requesting Agency’s and Servicing Agency’s Finance staff to complete this information.** |
| **30** | Total Net Order Amount | Enter total net order amount.  All Order Line Net Line Amounts Due for reimbursable agreements and Net Total Costs for Assisted Acquisition Agreements (Block 28) must sum to this total. |
| **31** | Attachments | State and/or list Attachments for key project and/or acquisition milestones (optional except for Assisted Acquisition Agreements) and any other pertinent attachments.For Assisted Acquisitions, state or list the agreed-upon projected milestones for this Order. |
| **BILLING & PAYMENT INFORMATION** |
| **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   | Check if the Requesting Agency will initiate payment via IPAC. |
| Servicing Agency Initiated IPAC   | Check if the Servicing Agency will initiate payment via IPAC. |
| Charge Card  | Check if the Requesting Agency will pay via charge card.Follow the Federal Acquisition Regulation for when and how to use charge cards.  |
| Other | Check if a payment method other than Requesting Agency Initiated IPAC, Servicing Agency Initiated IPAC, or credit card is used.Explain other payment method and reasoning.                                                               |
| **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. |
| Quarterly  | Check if the invoice will be billed quarterly.  |
| Other | Check if the invoice will be billed **other than** monthly or quarterly. Explain the other agreed-upon billing frequency. |
| **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.  |
| 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. For Example: When the U.S. General Services Administration initiates the IPAC statement, the funds will move within 24 hours. The Requesting Agency and Servicing Agency would enter this arrangement for payment here. |
| **35** | **Funding Clauses/Instructions** (Optional) | Include availability of funds or other funding clauses as deemed necessary. If a “subject to the availability of funds” clause is used, it is important to note that no services may be performed until the Requesting Agency gives written notice to the Servicing Agency that funds are available and that the Servicing Agency can proceed. |
| **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. |
| **37** | **PROGRAM OFFICIALS** | 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. 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. 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. |
| 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. |