COMPTROLLER'S OFFICE CONTRACT REGISTRATION COVER SHEET

			DATE : MOD NUMBER EXT'N (5 digits)		
					OCA NUMBER:V
AC	BENCY C	ONTACT PERSON:			
EMAIL ADDRESS:			_TELE:	FAX:	
Ple	ase indica	ate your reason for submitting the attac	ched documen	ts by filling out the form below:	
Α.		·		FMS Contract Code and Contract Class)	
	FMS	S/3 CONTRACT CODE	F	FMS/3 CONTRACT CLASS	
	CT1	GENERAL CONTRACT	G	EXPENSE ENCUMBRANCES (CT1, CTA1)	
	RCT1	REVENUE CONTRACT	C	CAPITAL ENCUMBRANCES (CT1, CTA1)	
	CTR	CONTRACT REVISION (INCREASES/DECREASES/ /DATA CHANGES)	X	MIXED/SPLIT FUNDING ENCUMBRANCES (CT1, CTA1)	
	MA1	MASTER AGREEMENT	V	REVENUE (RCT1)	
	MAR	MASTER AGREEMENT REVISION (INCREASES/DECREASES/DATA CHANGES)	RA*	MASTER AGREEMENTS MA1 ACCELERATED PROCUREMENT (*ONLY FOR DCAS USE)	
	MMA1	MULTIPLE AWARD MASTER AGREEMENT (FORMERLY CONSORTIUM PARENT)	RN	MASTER AGREEMENTS (ALL OTHER MA1, MMA1, MAR)	
	CTA1	MULTIPLE AWARD CONTRACT (FORMERLY CONSORTIUM CHILD)	RG	REQUIREMENTS/TASK ORDER DRIVEN EXPENSE (CT1 and CTA1)	
			RC	REQUIREMENT CAPITAL/TASK ORDER DRIVEN (CT1, CTA1)	
		EEO 101 SUBMISSION (FILING PURPOSE ONLY)	RB	REQUIREMENTS MIXED FUNDS/TASK ORDER DRIVEN (CT1, CTA1)	
		AWARD METHOD 72 – M/WBE PURCHASE – NOT EXCEEDING \$500K (CT1 AND CTR ONLY)		G; C; AND X (AS APPLICABLE)	
В.		S A SUBMISSION OF A CONTRAC TTED OR WITHDRAWN? YES		WHICH HAS BEEN PREVIOUSLY NO	
Ol C.	ADDIT COMP	CIONAL ITEM FOR A CONTRACT ITEM FOR A CONTRACT ITEM FOR A CONTRACT ITEM TROLLER (CIF fax # (212) 815-8780 cm requested by Comptroller staff?)).	TILL UNDER REVIEW BY THENO	
	If yes,	indicate requestor's name:			

OR:

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D.	ADDITIONAL DOCUMENT(s) TO A REGISTERED CONTRACT FOR FILING PURPOSES ONLY. REGISTRATION IS NOT NECESSARY.
OR: E.	DOCUMENT(s) SUPPORTING THE REGISTRATION OF MULTIPLE CONTRACTS.