FEDERAL PROCUREMENT DATA SYSTEM (FPDS)
CONTRACTING OFFICE CODE REPORT

1A. DATE SUBMITTED

1B. SUBMITTED BY

2. START DATE *(6 Pos.)*

3. REPORTING AGENCY *(FIP 95) (4 Pos.)*

4. CONTRACTING OFFICE CODE *(5 letters or numbers; no spaces, no special characters) (5 Pos.)*

5. TYPE OF ENTRY *(1 Pos.)*

A - Add
B - Delete Existing Code
C - Change Existing Code

6. AGENCY/SUBAGENCY NAME *(Left justified) (44 Pos.)*

CONTRACTING OFFICE

7. NAME *(Left justified) (44 Pos.)*

8. STREET ADDRESS *(Left justified) (44 Pos.)*

9. OPTIONAL ADDRESS LINE *(Left justified) (44 Pos.)*

10. CITY OR TOWN *(Left justified) (30 Pos.)*

11. STATE CODE *(FIPS 55 alpha) (2 Pos.)*

12. ZIP CODE *(Left justified) (9 Pos.)*

OR

13. COUNTRY CODE *(Leave blank if Item 11 is completed) (FIPS 10) (2 Pos.)*

14. POSTAL CODE *(If applicable, left justify) (9 Pos.)*