



DEPARTMENT OF HEALTH AND HUMAN SERVICES
ASSISTANT SECRETARY for ADMINISTRATION (ASA)
CUSTOMER SERVICE AGREEMENT (CSA)

ASA AGREEMENT NUMBER:
 Task Number:
 Modification Number:

INSTRUCTIONS

The Program Support Center (PSC), a component of the HHS Division of Administration, administers Customer Service Agreements (CSA) on behalf of the HHS Assistant Secretary for Administration (ASA). This CSA is the ASA standard form for reimbursable agreements between an ASA component that provides a service ("the Provider"), and a federal government agency ("the Customer") that receives that service. This CSA replaces all prior documents such as: Interagency Agreements (IAA), Memoranda of Understanding (MOU) and Service Level Agreements (SLA.)

AGREEMENT SUMMARY

Customer Agency/Department U.S. Consumer Product Safety Commission (CPSC)	ASA Department/Program Office PSC/AOS/DSS/PMB	
Customer Lead Name Angela Heggs	ASA Lead Name Diana Matthews	
Address 4330 East-West Highway, Bethesda, MD 20814	Address 5600 Fishers Lane, Room 16-65	
Phone (301) 504-6991	Phone (301) 594-0189	
Email AHeggs@cpsc.gov	Email Diana.Matthews@psc.hhs.gov	
Agreement Period:	Start Date (mm/dd/yyyy) Date of Last Signature: 3/25/13	End Date (mm/dd/yyyy) 09/30/2013
ASA Cost Center Code: PSCAOS OP625	Agreement Amount: \$66,600	

THE ASA CUSTOMER SERVICE AGREEMENT NUMBERING SCHEME

	Description	Number
ASA Agreement Number:	This field is for the ASA's use in documenting an internal tracking number.	ASA-13-CSA321
Task Number:	Each Task identified under this Agreement will be assigned a Task number. Each additional Task under this Agreement will be assigned a new Task Number.	
Modification Number:	Subsequent changes to Tasks will be considered modifications and will be assigned a Modification number referencing such changes.	

SECTION 1 – GENERAL PROVISIONS**INTRODUCTION**

- 1.1. This Customer Service Agreement (CSA) should be carefully reviewed by the Receiving Agency ('the Customer') and the HHS Assistant Secretary for Administration, the Providing Agency ('ASA'). The document contains four parts:
 - a. Section 1: Lays out General Provisions for this Customer Service Agreement (CSA).
 - b. Section 2: Lays out the Statement of Work (SOW) that describes the cost, delivery and quantity of work that has been agreed between ASA and the Customer.
 - c. Section 3: Captures Financial Information and Payment Methods and Information required to use the agreed payment method.
 - d. Section 4: Captures Program, Financial, and Funding Officials' contact information and their approvals.
- 1.2. These General Provisions constitute an agreement between ASA and the Customer. In executing the CSA in Section 4 of this document, both parties acknowledge that they understand and agree with the General Provisions, and that suspension or termination of services may result as a consequence of not adhering to these provisions.
- 1.3. The agreement to provide a service will be executed by the ASA Designated Official shown in Section 4.1. Questions or concerns about execution of the service may be submitted directly to the ASA Program Office designated in Section 4.4. To aid with managing services delivered under this CSA, ASA and the Customer will identify appropriate Points of Contact (POC) for program, budget, financial, and billing issues. See Section 4 for all POC details.
- 1.4. If another document (e.g. MIPR, IA, MOU) has been inflated by the Customer in addition to this document, the ASA CSA prevails.

STATUTORY AUTHORITY, FUNDING, REIMBURSEMENT, RESTRICTIONS, DISPUTES AND CANCELLATION PROVISIONS

- 1.5. **Statutory Authority:**
 - a. All provisions of this CSA shall comply with 42 U.S.C. 231 and the Service and Supply Fund (SSF) Charter.
 - b. Customer Agency's Authority

<input type="checkbox"/> Franchise Fund	<input type="checkbox"/> Working Capital Funds	<input type="checkbox"/> Other _____
<input type="checkbox"/> Revolving Fund	<input checked="" type="checkbox"/> Economy Act (31 U.S.C. 1535/FAR 17.5)	
- 1.6. **Service Level Requirement Estimation and Changes in Estimates:** The Customer will provide ASA with projections of support volume. Significant changes in the receiving organization's support requirements should be submitted to ASA in a manner that will permit modification of resource requirements. It is the responsibility of the Customer to bring these major changes in required support to the attention of ASA as soon as possible prior to changing support requirements.
- 1.7. **Rates:**
Changes to these rates will be in accordance with the provisions of the SSF Charter. For rate changes that do not require Board action, the Customer will be notified immediately of such rate changes that affect the support received. All hourly rated services will be charged in the increments of quarter hours. In the event of changes, the Customer will continue to be notified of the approved rates/amounts applicable.
- 1.8. **Funding and Reimbursement:** An obligating document should be provided to ASA. Once this CSA is fully executed, obligations must be processed and recorded within 10 calendar days of execution, or the end of the calendar month; whichever comes first. CSAs must be fully executed and provided to the Customer before work begins.

In the event of a Continuing Resolution (CR), an obligating document is still required and can be funded in accordance with the applicable CR guidance. Once the budget is passed and the Customer is no longer operating under the CR, the CSA will be considered fully funded. Any change to the amount due to fluctuations in the final budget will require a modification of the CSA.

Customer bills will be available at the end of each month. Discrepancies in monthly charges must be addressed to the PSC Billing Office within 60 days of the close of the quarter in which the billing occurred (See Section 1.13. for additional information on Billing Resolution). Conversely, the receiving organization will provide ASA with additional funding to cover charges in excess of advanced fiscal year funding, and credits will be issued in the instance of excess charges.

In the case of emergency (e.g. severe weather, health epidemic, Executive Order, etc.) services requested from ASA, the receiving organization will provide ASA with a funding document to cover the cost of the emergency services within 60 days of products and services being provided. As aforementioned, a continuing resolution is not considered an emergency.

The Customer will provide financial and budget points of contact to assist ASA in determining and obtaining the appropriate funding documentation and to provide any additional information.

- 1.9. **Restrictions:** This CSA will not be valid for American Recovery & Reinvestment Act of 2009 (ARRA) funding. State and/or attach additional unique requirements and/or mission specific restrictions specific to this CSA.
- 1.10. **Assisted Acquisition Small Business Credit Clause:** ASA will allocate the socio-economic credit to the Customer Agency for any contract actions it has executed on behalf of the Requesting Agency.
- 1.11. **Cancellation:** If this agreement is canceled, any implementing contract/order may also be canceled. If the agreement is terminated, ASA and the Customer shall agree to the terms of the termination, including costs attributable to each party and the disposition of awarded and pending actions.
- If ASA incurs costs due to the Customer's failure to give the requisite notice of its intent to terminate this agreement, the Customer shall pay any actual costs incurred by ASA as a result of the delay in notification, provided such costs are directly attributable to the failure to give notice.

BILLING AND SECURITY PROVISIONS

- 1.12. **Billing:** ASA will provide clear statements of costs via the PRICES Online Viewer or other agreed upon method. Additionally, ASA will provide online access to the PRICES Online Viewer for recurring Customers and to named points of contact provided by the receiving organization. For Customers utilizing the PRICES Online Viewer, Sections 1.13 - 1.16 are applicable.
- 1.13. **Billing Resolution:** The Customer will utilize the Customer Feedback Form, available in the Online Viewer, to submit billing inquiries. ASA has seven (7) business days to respond to Customer inquiries as follows:
- The Service Provider POC will respond directly to the Customer within three (3) business days of receipt of the automatic notification via email from the PRICES Online Viewer.
 - If the Service Provider POC does not respond within seven (7) business days, the PRICES Billing Team will escalate the issue to the appropriate service area.
 - The Customer reserves the right to dispute requested payment amounts on a month-to-month basis through the dispute resolution process. The Customer must provide any detailed information or documentation required to support the dispute.
 - ASA will provide supporting documentation for the requested billing months upon request.
- 1.14. **Emergency:** In case of emergency (e.g. significant emergencies caused by inclement weather or severe power outages) which affects ASA, this CSA will remain in force only within the extent of the ASA's capabilities.
- 1.15. **Security and Privacy:** ASA will comply with NIST, HHS Policies and the Privacy Act of 1974 as amended at 5 U.S.C. 552a where applicable. System security is integrated into the ASA's products and service offerings where applicable.
- 1.16. **Customer Satisfaction:** ASA will measure the quality of the service delivery as the percentage of customers expressing overall satisfaction with services provided. To measure customer satisfaction, ASA will use its Online Comment Card response to obtain the percentage of customers that rate overall satisfaction with services as Satisfied or Very Satisfied. To ensure quality service delivery across all products and service lines, ASA will strive to adhere to published performance standards.

SECTION 2 - STATEMENT OF WORK (If additional space is required, attach a separate document.)

2.1. Background and Scope:

ASA will provide services to U.S. Consumer Product Safety Commission (CPSC)
(Enter Customer Agency)

The Program Support Center, Division of Support Services will provide Document Conversion to the U.S. Consumer Product Safety Commission by use of its contractor Quality Associates Incorporated (QAI).

2.2. Services:

The following services are to be provided under this statement of work:
(List Services to be provided here)

Document Conversion Services

2.3. Period of Performance:

This statement of work will take effect on 3/25/13 and terminate on 09/30/2013
(Enter Start Date: mm/dd/yyyy) (Enter End Date: mm/dd/yyyy)

If no end date is specified, the Agreement will remain in effect twelve months from the date of final signature unless amended in writing by the participating parties or canceled by either party upon 60 days written notification.

2.4. Official Authorization:

ASA representatives, agree by signing Section 4.1 that ASA will provide the services, as described in this Statement of Work at the prices quoted (See Section 1.7.), with services not to be delivered until the Customer receives a signed and completed copy of this CSA.

2.5. Additional Information and Attachments:

(Include specific project information, e.g., deadlines, resources, etc., and list any attachments.)

SECTION 3 – FINANCIAL AND FUNDING INFORMATION

3.1. Agreement Amount: \$66,600

3.2. Invoice and Payment Method: Please select the appropriate Invoice and Payment Type from the following table.

	Invoice and Payment Type	Customer
<input checked="" type="checkbox"/>	Intra-Governmental Payment and Collection (IPAC)	All Federal Agencies The Debt Collection Improvement Act of 1996 (DCIA) requires that, subject to the authority of the Secretary of the Treasury to grant waivers, all federal payments made after January 1, 1999 must be made by electronic funds transfer (EFT). Billing statements made under this CSA will be processed through the Intra-Governmental Payment and Collection (IPAC) system via an electronically transmitted invoice for the services rendered.
<input type="checkbox"/>	SF-1080	ASA Customer Agencies (ACF, AHRQ, AOA, HRSA, OS, SAMHSA) or Agencies that have received an IPAC waiver from the Secretary of Treasury.
<input type="checkbox"/>	Credit Card	Agencies with a government purchase card and the appropriate authorizations. (Refer to Point of Sale Contact for Transaction Completion)

3.3. If you have questions regarding invoice or payment type, please contact the PRICES Billing Team via e-mail at PRICES@psc.gov.

3.4. Indicate whether this Agreement should be set up as a PRICES Project.

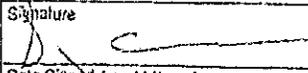
 Yes No

3.5. Funding Information: Please provide appropriate funding information below where applicable. Additional information on financial fields is available at <http://www.fms.treas.gov>.

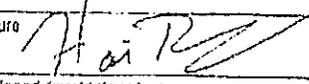
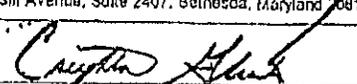
Field	Description	Customer Funding Information	PSC and ASA Funding Information
Agency Location Code (ALC)	Mandatory - Enter the Receiving Agency's Location Code.	61000001	75030030
Agency Obligating Document # (e.g., PO, MIPR, MO, IAA, etc.)	Optional for IPAC Mandatory for SF-1050	REQ-1300-13-0017	N/A
Common Accounting Number (or Budget Code/Cost Center)	Mandatory for HHS Customers		E8613DM
Object Class Code	Optional	253X0	61802
Trading Partner Code	Optional - Enter the Receiving Agency's Trading Partner Code for FACTS I.		ASA - 7501 X PSC - 750E
Treasury Account Symbol (TAS)	Mandatory - Enter one TAS for each Order Line for the Receiving Agency.	051 0100	75-X-4552
DUNS or Business Partner Number (BPN) (DUNS/BPN +4 optional)	Optional - Enter the Receiving Agency's DUNS or Business Partner Number (BPN). Note: BPN is the standard name; however, this may be a trading partner's DUNS.	069287522	ASA - 985030740 X PSC - 043982318
Employer Identification Number (EIN)	Mandatory	520978750	ASA - 28-1864615 X PSC - 28-1844759
Additional Accounting Classification/Information	Optional - Enter additional important accounting information used for internal tracking for the Receiving Agency and/or Servicing Agency.	0100A13DSE 2013 525770000 GC00001350 253X0	E8613DM
Amount of Obligation	Mandatory	\$65,600.00	N/A
Customer Agency Funding Expiration Date: 12/30/12 9/30/13			
<p>1. In accordance with appropriation law, disclosure from the Customer is required in identifying the type of source funds and their intent to ensure that funds are being used in accordance with the appropriation:</p> <p><input type="checkbox"/> Research & Development</p> <p><input type="checkbox"/> Program</p> <p><input checked="" type="checkbox"/> Administrative</p> <p><input type="checkbox"/> Other (Enter the description of the type of source funds): _____</p>			
THE FOLLOWING INFORMATION IS REQUIRED OF DEPARTMENT OF DEFENSE (DoD) ENTITIES ONLY.			
1. Fiscal Station Number (FSN)			
2. Accounting and Disbursing Station Number (ASDN)			
3. Authorized Accounting Activity Number (AAA)			
4. Activity Address Code (AAC)			

SECTION 4 – CONTACT INFORMATION AND APPROVALS

4.1. Program Officials' Contact Information and Approval:

Program Officials – The Program Officials, as identified by the Customer and ASA, must ensure that the scope of work is properly defined, and can be fulfilled for this Agreement.	
Customer	ASA Designated Official
Name Mary Boyle	Name Suzi Casas
Title Deputy General Counsel	Title Director, AOS
Telephone Number (301) 504-7859	Telephone Number (301) 443-2516
Fax Number	Fax Number (301) 443-0539
Email Address mboyle@cpsc.gov	Email Address suzi.casas@psc.hhs.gov
Signature MBoyle <small>Digitally signed by MBoyle DN: cn=CPSC, ou=HQ, ou=OSC c=MBoyle Date: 2013.03.25 14:37:23 -0400</small>	Signature 
Date Signed (mm/dd/yyyy) 03/25/2013	Date Signed (mm/dd/yyyy) 4/11/13

4.2. Funding Officials' Contact Information and Approval:

Funding Officials – The Funds Approving Officials, as identified by the Customer and ASA, certify that funds are accurately cited and can be properly accounted for per the purposes set forth in this Agreement. The Customer's Funding Official signs to obligate funds. ASA's Funding Official signs to start the work, and to bill, collect, and properly account for funds from the Customer, in accordance with this Agreement.	
Customer	PSC Business Office
Name Hai Duong	Name Creighton Glantz, CPA
Title Deputy CFO/Budget Officer	Title Director, PSC Business Office
Telephone Number (301) 504-7575	Telephone Number 301-402-4914
Fax Number	Fax Number 301-492-4931
Email Address hduong@cpsc.gov	Email Address Creighton.Glantz@psc.hhs.gov
Office Address 4330 East West Hwy., Room 520, Bethesda, MD 20814	Office Address 7700 Wisconsin Avenue, Suite 2407, Bethesda, Maryland 20814
Signature 	Signature 
Date Signed (mm/dd/yyyy) 4/8/13	Date Signed (mm/dd/yyyy) 4/22/13

4.3. Finance (Accounting Office) Contact Information:

Finance Officials – The Finance Office points of contact (Accounting Office) must ensure that the payment (Customer), and billing (PSC), are accurate and timely for this Agreement.	
Customer	PSC Finance Office
Name Priscilla Susi	Name Timothy Walsh
Title Director, Financial Services	Title GOVB AP TEAM LEAD
Telephone Number (301) 504-7566	Telephone Number (301) 443-5445
Fax Number	Fax Number (301) 443-2009
Email Address psusi@cpsc.gov	Email Address timothy.walsh@psc.hhs.gov
Office Address 4330 East West Hwy., Room 520, Bethesda, MD 20814	Office Address 12501 Ardennes Avenue, Suite 200 Rockville, MD 20857

4.4. Additional Points of Contact:

Additional Points of Contact – Please include any additional points of contact relative to the management of this Agreement (e.g., Project Officer).	
Customer	ASA Program Office
Type of Contact Project Officer	Type of Contact Project Officer
Name Alberta E. Mills	Name F. David Pair
Title FOIA Officer	Title NIH Printing Officer
Telephone Number (301) 504-7479	Telephone Number (301) 496-0552
Fax Number (301) 504-0127	Fax Number (301) 402-4099
Email Address amills@cpsc.gov	Email Address david.pair@psc.hhs.gov
Office Address 4330 East West Hwy., Room 820, Bethesda, MD 20814	Office Address 5600 Fisher Lane, Room 16-65, Rockville, MD 20857

SIGNATURE PAGE

FOR THE CONSUMER PRODUCT
SAFETY COMMISSION:

Name: 
Donna Hutton

Title: Contracting officer

Date: 4/23/13

FOR THE DEPARTMENT OF HEALTH
AND HUMAN SERVICES:

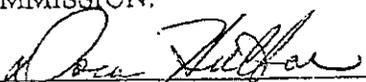
Name: _____

Title: _____

Date: _____

SIGNATURE PAGE

FOR THE CONSUMER PRODUCT
SAFETY COMMISSION:

Name: 
Donna Hutton

Title: Contracting officer

Date: 4/23/13

FOR THE DEPARTMENT OF HEALTH
AND HUMAN SERVICES:

Name: F. David Pair Sr
Digitally signed by F. David Pair Sr
DN: cn=F. David Pair Sr, o=Division of Support
Services, ou=Program Support Center,
email=david.pair@psch.hhs.gov, c=US
Date: 2013.04.24 11:33:37 -05'00'

Title: NIH Printing Officer

Date: April 24, 2013