

PART III

Special Instruction: U.S. Customs and Border Protection Interagency Agreement Number and Project Code must be referenced on every invoice/voucher.

PARTICIPATING AGENCY FUNDING	Include in accounting strip: PROJECT CODE/NO. - APC - BFY - FUND - BUDPLN - ORG - PROG - OCC - TOTAL
	<p>6051WTW03 52 is replaced with 6051WKW03 HS0648 Approp # 14 X 4523 52 CR</p> <p style="text-align: right;">GRAND TOTAL \$6,812,803.00</p>
U. S. CUSTOMS AND BORDER PROTECTION FUNDING	Include in accounting strip: PROJECT CODE/NO. - APC - BFY - FUND - BUDPLN - ORG - PROG - OCC - TOTAL
	<p>10 6100.2532USCSGLCS0928040500Z00009173SB01 SB1402532</p> <p style="text-align: right;">GRAND TOTAL \$6,812,803.00</p>

PART IV

Check Appropriate Boxes: Transfer Appropriation Billing for actual cost incurred
 Other _____

Monthly Quarterly Semi-Annual Annual Advanced Reimbursable Direct Fund Cite

BILLING / PAYMENT	PARTICIPATING AGENCY	U. S. CUSTOMS AND BORDER PROTECTION
	Agency Locator Code: 14010001	Agency Locator Code: 70050800
	BPN No.: 130907426	BPN No.: DUNS# 879824324
	Address: National Business Center, MS-D2705 Financial Mgt - Bus Mgmt Officer Attn: Agreements 7301 W. Mansfield Ave Denver CO 80235-2230	Address: DHS - Customs & Border Protection National Finance Center PO Box 68908 Indianapolis IN 46268
	Point of Contact: MISTY FOSTER	Point of Contact: (b) (6)
	Telephone No.: 303-969-7454	Telephone No.: (b) (6)
	FAX No.:	FAX No.: (b) (6)
	E-Mail Address: MISTY_FOSTER@NBC.GOV	E-Mail Address: (b) (6)



United States Department of the Interior

OFFICE OF THE SECRETARY
WASHINGTON, D.C. 20240

AUG 2 - 2011

Memorandum

To: April Jennings, Customs and Border Protection Contracting Officer

Via: Jon Andrew, Border Coordinator, OLES *Jon Andrew*

From: Office of the Secretary Budget Office *Carl Roberts*

Subject: Acceptance of Billing change and DOI Account information to Interagency Agreement - HSBP1010X00180

Interior requests your acceptance of the following administrative changes to CBP Interagency Agreement HSBP1010X00180/DOI number RA10W0648. To properly account and bill, we request to account for funding as Time and Material vice Fixed Price. Fixed price agreements are automatically billed. In order to comply with CBP's payment policy, the IAA must be recorded in Interior's accounting system as a time and material order under a different fund code. To do so DOI must move funds from our WT fund to the correct fund of WK (time and material). We ask that you certify acceptance by signing and date below.

The Interior account number will change in Part III from 6051WTW03 to 6051WKW03, all other terms and conditions remain the same. This change will allow our accounting services to properly bill this IAA as a Time and Material agreement, billable based on expenses with attached invoices. Thank you for your attention and cooperation in this matter.

We apologize for any inconvenience. If you have any questions, please contact Carl Roberts at (202) 208-3305 or Jon Andrew (202) 208-7431.

ACCEPTANCE OF Administrative Change

(b) (6)

Name: April L. Jennings

Title: Contracting Officer

Date: 9/6/11

Attachment USCBP form 236

18221

**DEPARTMENT OF HOMELAND SECURITY
U.S. CUSTOMS AND BORDER PROTECTION**

INTERAGENCY AGREEMENT

PART I

U.S. Customs and Border Protection	Agreement No.	HSBP1010X00180	Modification No.	P00002
	Option No.		Task Order No.	
Statutory Authority ECONOMY ACT (31 U.S.C 1535)		Requisition No. 0020057641	Date Prepared 01/06/12	
Name and Address of Customs Organization (Office or Division Responsible for Agreement) DHS - Customs & Border Protection CBP 1901 South Bell Street Arlington VA 22202		Performance Location Office of the Asst Secretary, Law Enforcement & Emergency Ops 1849 C St. NW WASHINGTON DC 20240		
Participating Agency	Agreement No.	18221	Modification No.	
	Option No.		Task Order No.	
Statutory Authority		Requisition No.	Date Prepared	
Name and Address of Participating Organization (Office or Division Responsible for Agreement) Department of the Interior 1849 C Street NW Washington DC 20248-0001		Performance Location DEPARTMENT OF THE INTERIOR OFFICE OF THE SECRETARY OFFICE OF LAW ENFORCEMENT AND SECURITY 1849 C ST. NW, MS-3409, WASHINGTON DC 20248		

PART II

All acquisitions made under this Agreement shall comply with the Competition in Contracting Act, P.L. 96-389, and regulations pertaining thereto.

Scope of Work: 1. The purpose of this modification is to incorporate the revised SOW relative to the \$8,000,000.00 Conservation Action. 2. As a result, the IAA amount increased from \$6,812,803.00 to \$14,812,803.00. (See the attached SOW, inclusive of Appendix One - Appendix One has been updated to include the associated Project Description Worksheet (PDW)).	Period of Performance: From 09/28/2010 To 09/30/2015	
	Base Price of Funded IA:	\$6,812,803.00
	Amount of this Modification:	\$8,000,000.00
	Overhead:	\$0.00
	Total Price of IA:	\$14,812,803.00
Attachments	<input type="checkbox"/> Terms and Conditions of Agreement <input checked="" type="checkbox"/> Statement of Work <input type="checkbox"/> Quantity and Unit Price <input type="checkbox"/> Determinations and Findings <input type="checkbox"/> Option Period Dates <input type="checkbox"/> Form 236A <input type="checkbox"/> Market Research Findings <input type="checkbox"/> Other _____	

PART III

Special Instruction: U.S. Customs and Border Protection Interagency Agreement Number and Project Code must be referenced on every invoice/voucher.

PARTICIPATING AGENCY FUNDING	Include in accounting strip: PROJECT CODE/NO. - APC - BFY - FUND - BUDPLN - ORG - PROG - OCC - TOTAL XXXD4523WK DS65123000 DWK000000.000000 DR 65103, HS064812
	GRAND TOTAL <u>\$14,812,803.00</u>
U. S. CUSTOMS AND BORDER PROTECTION FUNDING	Include in accounting strip: PROJECT CODE/NO. - APC - BFY - FUND - BUDPLN - ORG - PROG - OCC - TOTAL 10 6100 2532 USC SGLCS0928040500Z00009173SB01 SB1402532 6100 2532 USC SGLCS0928040500ZPOP11173SB0101030000 SB1402532
	GRAND TOTAL <u>\$14,812,803.00</u>

PART IV

Check Appropriate Boxes:

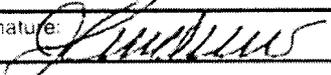
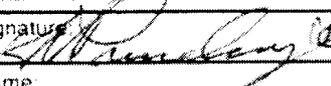
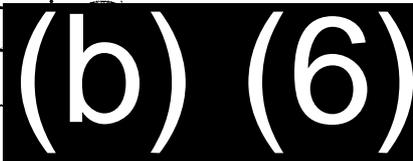
Transfer Appropriation Billing for actual cost incurred
 Other _____

Monthly Quarterly Semi-Annual Annual Advanced Reimbursable Direct Fund Cite

BILLING / PAYMENT	PARTICIPATING AGENCY	U.S. CUSTOMS AND BORDER PROTECTION
	Agency Locator Code: 14010001	Agency Locator Code: 70050800
	BPN No.: 130907426	BPN No.: DUNS# 879824324
	Address: National Business Center, MS-D2705 Financial Mgt - Bus Mgmt Officer Attn: Agreements 7301 W. Mansfield Ave Denver CO 80235-2230	Address: DHS - Customs & Border Protection National Finance Center PO Box 68908 Indianapolis IN 46268
	Point of Contact: MISTY FOSTER	Point of Contact: (b) (6)
	Telephone No.: 303-969-7454	Telephone No.: (b) (6)
	FAX No.:	FAX No.: (b) (6)
	E-Mail Address: MISTY_FOSTER@NBC.GOV	E-Mail Address: (b) (6)

U.S. Customs and Border Protection Form 236 (05/02)

APPROVALS

		PARTICIPATING AGENCY		U.S. CUSTOMS AND BORDER PROTECTION	
PROGRAM OFFICE	Name:	JONATHAN M. ANDREW		Name:	
	Title:	INTERAGENCY BORDERLAND COORDINATOR		Title:	
	Telephone No.:	202-208-7431		Telephone No.:	
	FAX No.:			FAX No.:	
	E-Mail Address:	JONATHAN_ANDREW@IOS.DOL.GOV		E-Mail Address:	
	Signature:		Date:	1-30-12	Signature:
C O T R	Name:			Name: (b) (6)	
	Title:			Title:	
	Telephone No.:			Telephone No.: (b) (6)	
	FAX No.:			FAX No.:	
	E-Mail Address:			E-Mail Address:	
	Signature:		Date:		Signature:
PROGRAM BUDGET OFFICE(R)	Name:	KIM PRENDERGAST		Name:	
	Title:	BUDGET OFFICER, OFC OF THE SEC		Title:	
	Telephone No.:	202-208-6443		Telephone No.:	
	FAX No.:	202-208-3911		FAX No.:	
	E-Mail Address:	KIM_PRENDERGAST@IOS.DOL.GOV		E-Mail Address:	
	Signature:		Date:	2/8/12	Signature:
BUDGET DIVISION (for 2X only)	Name:			Name:	
	Title:			Title:	
	Telephone No.:			Telephone No.:	
	FAX No.:			FAX No.:	
	E-Mail Address:			E-Mail Address:	
	Signature:		Date:		Signature:
CON- TRACTING OFFICER	Name:			Name: APRIL JENNINGS	
	Title:			Title: Contracting Officer	
	Telephone No.:			Telephone No.: (b) (6)	
	FAX No.:			FAX No.:	
	E-Mail Address:			E-Mail Address:	
	Signature:		Date:		
Signature:		Date:			

INSTRUCTIONS

Instructions are provided for only those items that need explanation and clarification. Enter N/A where an answer is not applicable.

PART I - ADMINISTRATION

- | | |
|-----------------------|---|
| Agreement Number - | Interagency Agreement (IA) number is assigned by U.S. Customs and Border Protection Procurement Division. |
| Option Number - | Include if the IA contains options and an option is being exercised or modified. |
| Task Order Number - | Include if referenced in the Statement of Work. |
| Statutory Authority - | Define under what authority the IA is authorized. |
| Requisition Number - | The Program Office assigns this number when appropriate. |

PART II - AGREEMENT

- | | |
|-----------------|--|
| Scope of Work - | Briefly summarize the statement of work. If the agreement is being modified, describe why the modification is being issued (not the accounting strip) |
| Attachments - | Check the appropriate boxes to indicate documents attached to CF236. |

PART III - FUNDING

- (1) Include line item numbers, accounting strips, and price for each.
- (2) For modification show how the prices are changed for the line items and show the revised total.
- (3) Include in the price adjustments, for all prior modifications, (under the currently funded IA) to show logic of changes to the price of the IA.
- (4) Insert in the Grand Total block the total amount, or revised total of the funded IA.

PART IV - BILLING/PAYMENT

This part is self-explanatory.

PART V - APPROVALS

- | | |
|------------------------------------|--|
| U.S. Customs and Border Protection | Provide complete information for all required Approving Officials. |
| Participating Agency | Include information requested only for those Approving Officials that are required by your organization. |

**DEPARTMENT OF HOMELAND SECURITY
U.S. CUSTOMS AND BORDER PROTECTION**

INTERAGENCY AGREEMENT

PART I

U.S. Customs and Border Protection	Agreement No.	HSBP1010X00180	Modification No.	P00003
	Option No.		Task Order No.	
Statutory Authority ECONOMY ACT (31 U.S.C 1535)			Requisition No. 0020057641	Date Prepared 04/13/12
Name and Address of Customs Organization (Office or Division Responsible for Agreement) DHS - Customs & Border Protection CBP 1901 South Bell Street Arlington VA 22202			Performance Location Office of the Asst Secretary, Law Enforcement & Emergency Ops 1849 C. St, NW WASHINGTON DC 20240	
Participating Agency	Agreement No.		Modification No.	
	Option No.		Task Order No.	
Statutory Authority			Requisition No.	Date Prepared
Name and Address of Participating Organization (Office or Division Responsible for Agreement) Department of the Interior 1849 C Street NW Washington DC 20248-0001			Performance Location DEPARTMENT OF THE INTERIOR OFFICE OF THE SECRETARY OFFICE OF LAW ENFORCEMENT AND SECURITY 1849 C ST. NW, MS-3409, WASHINGTON DC 20248	

PART II

All acquisitions made under this Agreement shall comply with the Competition in Contracting Act, P.L. 98-369, and regulations pertaining thereto.

Scope of Work: 1. The purpose of this modification is to incorporate the revised SOW relative to the \$3,000,000.00 Conservation Action. 2. As a result, the IAA amount increased from \$14,812,803.00 to \$17,812,803.00, a \$3,000,000.00 increase. (See the attached SOW and associated Project Work Description)	Period of Performance: From 09/28/2010 To 09/30/2015		
	Base Price of Funded IA:	\$14,812,803.00	
	Amount of this Modification:	\$3,000,000.00	
	Overhead:	\$0.00	
	Total Price of IA:	\$17,812,803.00	
Attachments:	<input type="checkbox"/> Terms and Conditions of Agreement	<input checked="" type="checkbox"/> Statement of Work	<input type="checkbox"/> Quantity and Unit Price
	<input type="checkbox"/> Determinations and Findings	<input type="checkbox"/> Option Period Dates	<input type="checkbox"/> Form 236A
	<input type="checkbox"/> Market Research Findings	<input type="checkbox"/> Other _____	

PART III

Special Instruction: U.S. Customs and Border Protection Interagency Agreement Number and Project Code must be referenced on every invoice/voucher.

PARTICIPATING AGENCY FUNDING	Include in accounting strip: PROJECT CODE/NO. - APC - BFY - FUND - BUDPLN - ORG - PROG - OCC - TOTAL
	GRAND TOTAL <u> </u> \$17,812,803.00
U. S. CUSTOMS AND BORDER PROTECTION FUNDING	Include in accounting strip: PROJECT CODE/NO. - APC - BFY - FUND - BUDPLN - ORG - PROG - OCC - TOTAL
	10 6100.2532USCSGLCS0928040500Z00009173SB01 SB1402532 6100.2532USCSGLCS0928040500ZFOP11173SB0101030000 SB1402532 6100.2532USCSGLCS0928040500ZFOP12173SB0101003400 SB1402532 style="text-align: right;"> GRAND TOTAL <u> </u> \$17,812,803.00

PART IV

Check Appropriate Boxes: Transfer Appropriation Billing for actual cost incurred
 Other _____

Monthly Quarterly Semi-Annual Annual Advanced Reimbursable Direct Fund Cite

BILLING / PAYMENT	PARTICIPATING AGENCY	U.S. CUSTOMS AND BORDER PROTECTION
	Agency Locator Code: 14010001	Agency Locator Code: 70050800
	BPN No.: 130907426	BPN No.: DUNS# 879824324
	Address: National Business Center, MS-D2705 Financial Mgt - Bus Mgmt Officer Attn: Agreements 7301 W. Mansfield Ave Denver CO 80235-2230	Address: DHS - Customs & Border Protection National Finance Center PO Box 68908 Indianapolis IN 46268
	Point of Contact: MISTY FOSTER	Point of Contact: █ (b) (6) █
	Telephone No.: 303-969-7454	Telephone No.: █ (b) (6) █
	FAX No.:	FAX No.: █ (b) (6) █
	E-Mail Address: MISTY_FOSTER@NBC.GOV	E-Mail Address: █ (b) (6) █

APPROVALS

	PARTICIPATING AGENCY		U.S. CUSTOMS AND BORDER PROTECTION	
	PROGRAM OFFICE	Name: JONATHAN M. ANDREW		Name:
Title: INTER AGENCY BORDERLAND COORDINATOR		Title:		
Telephone No.: 202-208 7431		Telephone No.:		
FAX No.:		FAX No.:		
E-Mail Address: JONATHAN_ANDREW@IOS.DOL.GOV		E-Mail Address:		
Signature: <i>[Handwritten Signature]</i>		Date: 5-3-12	Signature:	Date:
C O T R		Name:		Name: (b) (6)
	Title:		Title:	
	Telephone No.:		Telephone No. (b) (6)	
	FAX No.:		FAX No.:	
	E-Mail Address:		E-Mail Address:	
	Signature:	Date:	Signature: (b) (6)	Date: 5-3-12
PROGRAM BUDGET OFFICE(R)	Name:		Name: (b) (6)	
	Title:		Title:	
	Telephone No.:		Telephone No.:	
	FAX No.:		FAX No.:	
	E-Mail Address:		E-Mail Address:	
	Signature:	Date:	Signature:	Date:
BUDGET DIVISION (for 2X only)	Name:		Name:	
	Title:		Title:	
	Telephone No.:		Telephone No.:	
	FAX No.:		FAX No.:	
	E-Mail Address:		E-Mail Address:	
	Signature:	Date:	Signature:	Date:
CON- TRACTING OFFICER	Name:		Name: CLARENCE ABERNATHY	
	Title:		Title: Contracting Officer	
	Telephone No.:		Telephone No. (b) (6)	
	FAX No.:		(b) (6)	
	E-Mail Address:		(b) (6)	
	Signature:	Date:	(b) (6)	Date: 5-4-12

U.S.

Form 236 (05/02)

INSTRUCTIONS

Instructions are provided for only those items that need explanation and clarification. Enter N/A where an answer is not applicable.

PART I - ADMINISTRATION

- | | |
|-----------------------|---|
| Agreement Number - | Interagency Agreement (IA) number is assigned by U.S. Customs and Border Protection Procurement Division. |
| Option Number - | Include if the IA contains options and an option is being exercised or modified. |
| Task Order Number - | Include if referenced in the Statement of Work. |
| Statutory Authority - | Define under what authority the IA is authorized. |
| Requisition Number - | The Program Office assigns this number when appropriate. |

PART II - AGREEMENT

- | | |
|-----------------|--|
| Scope of Work - | Briefly summarize the statement of work. If the agreement is being modified, describe why the modification is being issued (not the accounting strip) |
| Attachments - | Check the appropriate boxes to indicate documents attached to CF236. |

PART III - FUNDING

- (1) Include line item numbers, accounting strips, and price for each.
- (2) For modification show how the prices are changed for the line items and show the revised total.
- (3) Include in the price adjustments, for all prior modifications, (under the currently funded IA) to show logic of changes to the price of the IA.
- (4) Insert in the Grand Total block the total amount, or revised total of the funded IA.

PART IV - BILLING/PAYMENT

This part is self-explanatory.

PART V - APPROVALS

- | | |
|------------------------------------|--|
| U.S. Customs and Border Protection | Provide complete information for all required Approving Officials. |
| Participating Agency | Include information requested only for those Approving Officials that are required by your organization. |

**DEPARTMENT OF HOMELAND SECURITY
U.S. CUSTOMS AND BORDER PROTECTION**

INTERAGENCY AGREEMENT

PART I

U.S. Customs and Border Protection	Agreement No.	HSBP1010X00180	Modification No.	P00004
	Option No.		Task Order No.	
Statutory Authority ECONOMY ACT (31 U.S.C. 1535)		Requisition No. 0020057641	Date Prepared 04/13/12	
Name and Address of Customs Organization (Office or Division Responsible for Agreement) DHS - Customs & Border Protection CBP 1901 South Bell Street Arlington VA 22202		Performance Location Office of the Asst Secretary, Law Enforcement & Emergency Ops 1849 C. St. NW WASHINGTON DC 20240		
Participating Agency	Agreement No.		Modification No.	
	Option No.		Task Order No.	
Statutory Authority		Requisition No.	Date Prepared	
Name and Address of Participating Organization (Office or Division Responsible for Agreement) Department of the Interior 1849 C Street NW Washington DC 20248-0001		Performance Location DEPARTMENT OF THE INTERIOR OFFICE OF THE SECRETARY OFFICE OF LAW ENFORCEMENT AND SECURITY 1849 C ST. NW, MS-3409, WASHINGTON DC 20248		

PART II

All acquisitions made under this Agreement shall comply with the Competition in Contracting Act, P.L. 98-369, and regulations pertaining thereto.

Scope of Work: 1. The purpose of this no cost modification is to change the block checked "Monthly" to "Advanced," on Page 2, Part IV of Modification P00002, to allow for the advanced payment associated with the \$8M Conservation Action project. 2. As a result this action, the IAA amount remains \$17,812,803.00. 3. All other terms and condition remain the same.	Period of Performance: From 09/28/2010 To 09/30/2015	
	Base Price of Funded IA:	\$17,812,803.00
	Amount of this Modification:	\$0.00
	Overhead:	\$0.00
	Total Price of IA:	\$17,812,803.00
Attachments:	<input type="checkbox"/> Terms and Conditions of Agreement <input type="checkbox"/> Statement of Work <input type="checkbox"/> Quantity and Unit Price <input type="checkbox"/> Determinations and Findings <input type="checkbox"/> Option Period Dates <input type="checkbox"/> Form 236A <input type="checkbox"/> Market Research Findings <input type="checkbox"/> Other _____	