2010 Security Professionals Seminar Registration Form

Tuesday, November 30 & Wednesday, December 1, 2010

Note: All fields are required. Please type or print legibly. Return completed form via email to fissps@opm.gov or fax to 202-606-2390 (ATTN: Erika Moore).

Today's date:	**Registration Number: (FIS use only)**			

ATTENDEE INFORMATION

☐ Mr.
☐ Mrs.
☐ Miss
☐ Ms.

Last Name: First Name:

Title: Agency: Department:

Address: City: State: ZIP Code:

Office Number: Office Fax Number: Email Address:

In case of emergency, notify:
Name: Home Number: Office Number:

REGISTRATION INFORMATION (DEADLINE NOVEMBER 5, 2010)

The cost for the Seminar is $150.00. Registration confirmation will be delivered to the attendee via email after the registration has been processed. Payment information must be provided before registration can be confirmed. Cancellations will not be permitted after November 19, 2010. All payments will be processed following the cancellation deadline. For payments via government purchase card, a receipt will be provided to the cardholder via email by December 8, 2010.

How would you like your first name to appear on your name tag?

Special Requirements:
☐ Sign Interpretation ☐ TDD ☐ Wheelchair Access ☐ None

The Federal Investigative Services is required to account for all funding from the American Recovery and Reinvestment Act of 2009. Agencies receiving appropriations from the Recovery Act will be allotted one or more new Treasury Account Symbols (TAS) to track this funding. Please coordinate with your finance office if you have questions about your funding.

Will payment be funded by the American Recovery and Reinvestment Act of 2009? ☐ Yes ☐ No
If yes, please enter the appropriate TAS:

Select Payment Method: ☐ Government Purchase Card **(Complete Only Section A)** ☐ IPAC **(Complete Section B and Attached OPM Form 1616)**

(A.) PAYMENT BY GOVERNMENT PURCHASE CARD

Purchase Card Number: - - - ☐ **Visa** ☐ **MC** Expiration Date: /

Billing Address including Zip Code:

Cardholder's Name: Phone Number: Email Address:

(B.) PAYMENT BY IPAC

In order to pay via IPAC, the attached OPM Form 1616 must be completed by your finance officer. All fields are required. Registration cannot be confirmed until payment information is received.

Contact Information: Federal Investigative Services
Phone Number: **724-794-5612 Ext. 4600**

U. S. Office of Personnel Management
Interagency Agreement
Advance & Reimbursement of Funds

[----------CSA #----------]
[----------Project Code----------]
E 5 - A R H P R C A C

Agreement Name: FIS Security Professional Seminar 2010
Fiscal Year 2010 Estimated Amount
Effective 05/01/2010 Expires 04/30/2011

Requesting Agency	Performing Agency (OPM)
Agency Name and Address	Agency Name and Address U.S. Office of Personnel Management Federal Investigative Services 1900 E Street, NW, Room 2H31 Washington DC 20415
Program Office Contact *Name* *Phone #*	Program Office Contact *Name* Erika D. S. Moore *Phone #* 202-606-4093
Finance Office Contact *Name* *Phone #:*	OCFO Billing Office Contact *Name* William T. Smith *Phone #* 202-606-2237
Program Office Signature & Date Typed Name & Title	Program Office Signature & Date Typed Name & Title Dennis D. Coleman, Business Manager
Finance Office Signature & Date Typed Name & Title	OGC Signature & Date *(if required)* Typed Name & Title
	OCFO Reviewing Office Signature & Date Typed Name & Title Daniel K. Marella, Associate Deputy CFO
BILLING INFORMATION-REQUESTING AGENCY Billing Address Agency Location Code: Treasury Account Symbol: BETC: DISB Obligating Document Number : Other Accounting Data	ACCOUNTING INFORMATION – OPM Accounting Codes: *--If costs are to be charged to more than one code, enter amount to be charged to each code. Otherwise, leave amount column blank.* Fund Level 1 Org Organization Amount 0100AA10RB0D 15 1513101300 Agency Location Code: 24000001 Treasury Account Symbol: 2400100 BETC: COLL DUNS: 126536929 Labor Codes Required? ☐Y ☒ N Overlay ☒ None ☐ 40% ☐ Other % (Enter %)
Timing of Billing *(check one)* ☐ Advance ☐ Quarterly ☐ On Completion ☒ Other *(explain)* Following the registration cancellation deadline (November 19, 2010).	Billing Method ☒ IPAC *(automated billing/payment – Federal agency)* ☐ SF 1080 *(paper billing – Federal Agency* ☐ Standard *(Non-Federal agency)*

Services to be performed

Reimbursement to OPM for attendance at the Security Professionals Seminar November 30 – December 1, 2010.

Statutory Authorization: Economy Act 31 USC 1535	If not Economy Act, cite other statutory authority:

CONDITIONS OF AGREEMENT

1. Financing

Charges for services shall be comprehensive and based on actual direct and indirect costs. Costs may include salaries, fringe benefits, leave accruals and other administrative overhead, software or equipment purchases, depreciation, maintenance, telecommunications, or ADP related services.

Advance payment or non-expenditure transfer shall be limited to the goods and services to be furnished or other costs agreed to by both parties.

Advance payments are based on estimated costs. If the estimate is different from the actual cost, proper adjustment (refund or additional billing) based on actual costs shall be made. Adjustments will be made upon expiration of agreement.

Actual costs shall be determined based on the performing agency's accounting system and subsequently billed, regardless of the ultimate utility of the data to the requester. Billing shall be for total actual costs; a breakdown of costs must be provided as required by this agreement.

When OPM determines that it will need to subcontract performance of the requirements or work under this agreement to another agency/office, it may only incur cost equal to or less than the funds advanced by the requesting agency and it will provide to the requesting agency an accounting of such funds expended under that contract.

2. Compliance with Applicable Laws

Both parties agree to comply with authorities cited in this agreement. Both parties also agree to comply with any laws or regulations related to the Privacy Act, the FOIA, and GPO Printing laws and regulations that apply. Specifically, the recipient agrees to comply fully with OPM requirements to avoid statistical disclosure and agrees to make no attempts to identify individuals through data manipulation. Unless otherwise mutually agreed to, the data are supplied solely for statistical research. The recipient further agrees to safeguard any data containing personal identifiers in accordance with OPM's privacy and security standards. Any proposed publication for public information of data delivered under this agreement shall be approved by OPM prior to publication.

3. Publication

If either party publishes any results coming within the sphere of its responsibility, they *shall submit any manuscript to the cooperating party for prior review*. Publication may be joint or independent, as agreed upon, always giving due credit to the cooperation and recognizing within proper limits the rights of the individuals doing the work.

4. Personal Benefits

No member of or delegate to Congress or resident OPM official shall be admitted to any share or part of this agreement or to any personal benefit (other than OPM salary) coming from the participation.

5. Property

Non-expendable property purchased from funds supplied under this agreement shall become an asset of the agency bearing cost of acquisition (The Economy Act of 1932, as amended (31 U.S.C. 1535-1536, 33 Comp. Gen. 565)), unless otherwise agreed to by the cooperating parties.

6. Disputes

OPM and requesting agency employees responsible for the administration of this agreement are the program office contacts identified on the Form 1616. Disputes must be submitted in writing to either of these persons. Any disputes that are not resolved at this level may be referred to the appropriate program director within the OPM office performing the service, whose decision is final.