

Justification to Add Work Scope to an Existing Award

Please type or print information clearly

Exception to Requirement for Re-Competition - modifications that add work scope under the existing order/subcontract require sufficient rationale to justify the continued use of the vendor rather than competing the effort.

| | |
|---|--|
| 1. Purchase Request Number for Additional Work Requirements | 2. Existing Order/Subcontractor Number |
|---|--|

This completed form is required when either of the following conditions exist (and are checked below):

| |
|---|
| <p>3. Existing Conditions</p> <p><input type="checkbox"/> The total estimated value of the scope increase is expected to exceed \$30,000 OR</p> <p><input type="checkbox"/> The cumulative total value/not to exceed (current award plus the total estimated value of scope increase) is expected to exceed \$1,000,000.</p> |
|---|

Complete the following information and answer all questions

| | |
|-----------------------|--|
| 4. Recommended Vendor | 5. Total Estimated Value of Scope Increase |
|-----------------------|--|

Vendor Contact Person

| | | | |
|---------------|--------------|---------------------|-------------------|
| 6. First Name | 7. Last Name | 8. Telephone Number | 9. E-mail Address |
|---------------|--------------|---------------------|-------------------|

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| 10. Description of services and/or supplies to be provided under this modification |
|--|

Questions

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| <p>11. Describe the vendor's performance to date and the impact if the work is changed to another vendor.</p> |
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| <p>12. What capability does this vendor have that is necessary for a continuation of this specific effort that makes it clearly the <u>only vendor that can perform this work? Describe.</u></p> |
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13. Is competition precluded by contract specifications? Describe.

14. Is competition precluded due to copyrights, patent rights, trade secrets, or other intellectual property, technical or proprietary data? If so, describe specifically.

15. Other factors not considered above. Describe.

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Certification Requirements

An affirmation of the information provided is required by the technical expert to complete the request to limit competition process as follows:

- If the technical expert is a Leidos Biomed employee, complete section A.
- If the technical expert is NOT a Leidos Biomed employee, complete section B.

A. Technical Requester Certification and Attestation (Leidos Biomed employee)

In submitting this recommendation to justify a single- or sole-source procurement described herein, I recommend, based on my knowledge and analysis of the market, that only the vendor indicated above should perform/supply the product/service contemplated for this procurement.

Leidos Biomed is committed to conducting its business and procurement activities in accordance with all applicable federal, state, and local laws and regulations, and in accordance with the highest standards of business ethics. All Leidos Biomed employees are expected to comply with these obligations and assist the company in complying with these obligations.

By my signature, I certify that in submitting this single-/sole-source justification for procuring goods/services from the vendor that at all times:

1. I have complied with the Leidos "Standards of Business Ethics and Code of Conduct" (<http://phx.corporate-ir.net/External.File?item=UGFyZW50SUQ9MjA0MzU3fENoaWxkSUQ9LTF8VHlwZT0z&t=1>);
2. I have not been offered or received any incentive or inducement, including, but not limited to, gifts, offers of future employment, or anything of monetary value, as a part of this procurement; and
3. I have disclosed and reported any private business or professional activities that I have engaged in, including those with a direct or indirect financial interest with the vendor that could create a conflict of interest or the appearance of a conflict of interest.

| | | |
|----------------|------------------|-----------|
| 16. First Name | 17. Last Name | 18. Title |
| 19. Signature | 20. Program Area | 21. Date |

B. Technical Expert Certification (if other than Leidos Biomed Employee)

In submitting this recommendation to justify a single- or sole-source procurement described herein, I recommend, based on my knowledge and analysis of the market, that only the vendor indicated above should perform/supply the product/service contemplated for this procurement.

Technical Requester's Attestation

| | | |
|----------------|--------------------------|-----------|
| 22. First Name | 23. Last Name | 24. Title |
| 25. Signature | 26. Employer/Affiliation | 27. Date |

This Section is for Leidos Biomed Procurement

Buyer/Subcontract Specialist Information

| | | |
|----------------|---------------|-----------|
| 28. First Name | 29. Last Name | 30. Title |
| 31. Signature | 32. Date | |

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Cite the applicable FAR section and authority under which this is approved or disapproved.

| | |
|--|---|
| 33. Applicable FAR Section <input type="checkbox"/> 6.302-1 <input type="checkbox"/> 6.302-2 <input type="checkbox"/> 6.302-3 | 34. Approval Status <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved |
| 35. Reasons for Disapproval | |

Manager Information

| | | |
|-----------------------------------|---------------|-----------|
| 36. First Name | 37. Last Name | 38. Title |
| 39. Procurement Manager Signature | | 40. Date |

Justification to Add Work Scope to an Existing Award — Instructions

1. Enter purchase request number.
2. Enter the existing order/subcontract number that is being modified.
3. Check the appropriate box(es) after reading the requirement.
4. Enter the name of the recommended vendor.
5. Enter the total additional dollar amount, estimate or actual.
6. Enter the first name of the proposed vendor contact.
7. Enter the last name of the proposed vendor contact.
8. Enter the telephone number of the vendor contact.
9. Enter the e-mail address of the vendor contact.
10. Enter a brief description of the services and/or supplies being proposed as a modification to the current contract.

Questions:

11. Describe the performance of the current vendor to date and discuss the impact any change to a different vendor would make in terms of budget, time and any other pertinent information.
12. Describe the unique capabilities this vendor has for this specific additional work scope. Include any other vendors considered, if applicable, and describe what factors led you to reject them and select the recommended vendor.
13. Describe any specifications in the current contract that precludes consideration of any other vendor.
14. Describe any reasons precluding competition such as copyrights, patent rights, trade secrets, or other intellectual property, technical or proprietary data.
15. Describe any other pertinent reasons not previously addressed that led to your vendor determination.
16. Enter the first name of the Leidos Biomed technical expert.
17. Enter the last name of the Leidos Biomed technical expert.
18. Enter the title of the Leidos Biomed technical expert.
19. Enter the signature of the Leidos Biomed technical expert.
20. Enter the Program Area Name of the Leidos Biomed technical expert.
21. Enter the date the Leidos Biomed technical expert signed this document.
22. Enter the first name of the NON Leidos Biomed technical expert.
23. Enter the last name of the NON Leidos Biomed technical expert.
24. Enter the title of the NON Leidos Biomed technical expert.
25. Enter the signature of the NON Leidos Biomed technical expert.
26. Enter the employer/affiliation of the NON Leidos Biomed technical expert.
27. Enter the date the NON Leidos Biomed technical expert signed this document.
28. Enter the first name of the buyer/subcontract specialist.
29. Enter the last name of the buyer/subcontract specialist.

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30. Enter the title of the buyer/subcontract specialist.
31. Enter the signature of the buyer/subcontract specialist.
32. Enter the date the buyer/subcontract specialist signed this document.
33. Check the applicable FAR section and authority under which this recommendation is approved or disapproved.
34. Check the approval status.
35. Enter the reason for disapproval.
36. Enter the first name of the manager.
37. Enter the last name of the manager.
38. Enter the title of the manager.
39. Enter the signature of the procurement manager.
40. List the date the procurement manager signed this document.