

**Attachment 3B**

**Research Subaward Agreement  
Subrecipient Contacts**

Subaward Number:

**Subrecipient Information for FFATA reporting**

Entity's UEI/DUNS Name:

EIN No.:

Institution Type:

UEI / DUNS:

Currently registered in SAM.gov: Yes No

Parent UEI / DUNS:

Exempt from reporting executive compensation: Yes

No  
*(if no, complete 3B pg2)*

**Place of Performance Information for FFATA reporting**

Physical Address, City, State (if U.S.) and Country:

***U.S. Entities only (insert information for Place of Performance):***

Congressional District:

Zip Code+4:

[Zip Code Look-up](#)

**Subrecipient Contacts**

Central Email:

Website:

Principal Investigator Name:

Email:

Telephone Number:

Administrative Contact Name:

Email:

Telephone Number:

Financial Contact Name:

Email:

Telephone Number:

Invoice Email:

Authorized Official Name:

Email:

Telephone Number:

**Legal Address:**

**Administrative Address:**

**Payment Address:**