

Checklist for Completing the NIH Conference/Meeting Approval Form (Attachment A)

1. Conference Date Confirmed (TBD is not allowed) <i>Yes (November 2, 2013)</i>	✓
2. Conference Location Confirmed (TBD and various is not allowed) <i>Yes ([REDACTED])</i>	✓
3. NIH-827-1 Completed (used for conference space outside NIH Only) <i>Yes</i>	✓
4. Cost Per Attendee Completed (Total estimated cost must be divided by the "total number of attendees") <i>\$ [REDACTED] /attendee</i>	✓
5. Justification Cost (If "Other", Explain below in detail): - <i>[REDACTED] staff will oversee pre-event activities including but not exclusively: symposium registration and associated website (\$800), event logistics such as registration on-site, A/V (\$3679), and order/ship conference materials(\$1,500), guest speaker travel reimbursement/speaker fees (\$2,000 + \$200) = \$8,179</i> <i>Symposium meeting space/venue = \$2,000</i> <i>Travel for federal employees = \$70</i> <i>Total for the entire symposium is \$8,179+ \$2,000 + \$70 = \$10,249</i>	✓
6. Non-Federal Attendee Travel: <ul style="list-style-type: none">• Statutory Authority: We are paying for non-federal attendee travel under the statutory authority for one of the following:<ul style="list-style-type: none">(1) Limited Procurement Exception(2) Grant Funds <i>Invitational travel statute: NIH will issue Invitational Travel Orders to non-federal presenters or experts attending this event, under the authority of 5 U.S.C. 5703</i>• Each Non-Federal Attendee must provide a deliverable (i.e. presentation or speech) <i>Each Non-Federal Attendee will participate in discussions and make presentations as part of their activities advising in an area of their expertise.</i>	✓ ✓

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7. Funds:

- If already obligated, annotate in the remarks section of the Routing Slip
(See OASR Checklist)
- Provide copy of the contract details & NBS Acquisition Document
Numbering to confirm funding availability N/A

8. **Agenda** (The draft or final agenda for each meeting must state that meals and light refreshments are at the expense of the attendee. Attendees will be responsible for meals and/or light refreshments on their own, at their own cost. The government and/or government contractors are not involved in facilitating the provision of food and/or light refreshments.)

Included

Attachments / OASR Checklist

- ✓ New Conference/Meeting Approval Form - (formerly) *Attachment A* (NON-NIH SPEAKERS ATTACHED TO FORM)
- ✓ Agenda (draft)
- ✓ Conference details & NBS Acquisition Doc Numbering to confirm funding availability for contract use
(**Conference: All conference expenses will be paid using FY 2014 funds billed directly to the CAN if approved and pending the availability of funds**)
- ✓ NIH -827-1 Request for Acquisition of Temporary Commercial Conference Space (PENDING EO APPROVE)

HHS Conference or Conference Grant Request and Approval

Operating/Staff Division Information	
Operating or Staff Division	NIH - National Institutes of Health
Office	OD/DPCPSI/ [REDACTED]
Conference Description	
Title/Topic	[REDACTED]
Purpose of Conference (Attach draft program agenda, if not available, check here: <input type="checkbox"/>)	Outreach in support of the [REDACTED] program. Scheduling the symposium in conjunction with [REDACTED] conference is designed to provide information about the [REDACTED] program to potential applicants, as well as brainstorm with this community about innovative and transformative approaches required to achieve the goals of this new, high-profile [REDACTED] program.
Explanation of How the Conference Directly Supports the OPDIV/STAFFDIV Mission	Potential applicants for the [REDACTED] program are organizations and institutions that educate and train students from backgrounds underrepresented in the NIH-funded workforce. Extensive outreach efforts are required to ensure that NIH is engaging with these communities that generally have little previous experience with NIH. Therefore, holding our symposium in conjunction with the [REDACTED] national conference represents a crucial opportunity to reach students, faculty and administrators at institutions serving scientific trainees of underrepresented groups. The conference will allow NIH to provide information regarding the [REDACTED] program prior to the FOA receipt date of [REDACTED]
Justification for Conference Frequency (If scheduled regularly, explain the frequency of this conference and why the frequency is necessary. Include dates of the most recent prior conference as well as information on prior attendance size. If the size of the conference is increasing, justify why.)	This is the second of [REDACTED] symposia being held solely in support of the [REDACTED] program: [REDACTED]. The timing is designed to coincide with the program FOAs being published in [REDACTED] with a receipt date of [REDACTED]
Dates To Be Held	
From: November 2, 2013	To: November 2, 2013
Justify the Number of Days (Explain why the conference cannot be conducted in 1 to 2 days less than planned)	The symposium will last 2 hours which is the time allotted by the [REDACTED] organizers for NIH staff to inform potential applicants about the [REDACTED] program, conduct brainstorming sessions, and gather input from potential participants.
Location	
Venue	[REDACTED]
City	Arlington
State or Country	VA
Justification for Use of Non-Federal Space (Enter N/A if held in a Federal facility. If held in a facility that is not owned or controlled by the Government, explain the reason and basis for site selection)	The [REDACTED] annual conference is being held at the [REDACTED] in [REDACTED]. Our symposium needs to occur on-site in conjunction with this conference to have maximum impact and attendance.
Justification for why the conference	Our symposium needs to occur on-site in conjunction with this conference to

could not be held via teleconference, video conference, etc. to reduce attendee travel.		have maximum impact and attendance as it will be one of several symposiums available at this time and on this day.	
Audience			
Profession (Insert Description)		Minority doctoral scholars, postdoctoral scientists, faculty, program directors, and administrators pursuing or holding advanced degrees in science, technology, engineering, and mathematics	
Total Number of Attendees (Provide Best Estimate)	108	Total Number of Attendees whose Travel Expenses will be paid by HHS	8
# of Federal Attendees	7	From above, # Federal Travelers	7
# of Non-Federal Attendees	101	From above, # of Non-Federal Travelers	1
Justification for the total number of attendees		Extensive outreach efforts are required to ensure that NIH is engaging with the target under-represented communities that generally have little previous experience with NIH.	
Primary Method Used to Support the Conference (Check One)			
Government Staff	x	Contractor/Planner Support	Other (Describe below) Grant or Cooperative Agreement
Cost Information			
Total Estimated Cost	\$10249	Cost Per Attendee:	\$95
Details on Costs to be Funded by HHS (See Last Page for Explanation)			
Hosting Costs		Attendance Costs	
		If multiple OPDIVs/STAFFDIVs are participating in your conference, please include the total HHS costs below. You will be asked to break out costs by OPDIV/STAFFDIV in CTA.	
Contractor/Planner	\$0	Federal Attendee Travel	\$70
Grant/Co-Ag	\$0	Non Federal Attendee Travel	\$2000
Meeting Space/Venue	\$2000	Federal Attendee Exhibit Costs	\$0
Registration Website	\$800	Non Federal Attendee Exhibit Costs	\$0
Audio Visual	\$3679	Federal Attendee Registration Fees	\$0
Speaker Fees	\$200	Non Federal Attendee Reg. Fees	\$0
Printing	\$750	Federal Attendee Other Costs	\$0
Promotional Materials	\$300	(Explain below)	
Training Materials	\$0	Non Federal Attendee Other Costs	\$0
Other (Shipping Materials)	\$450	(Explain below)	
If charging Registration Fees to hold an HHS Conference, explain the nature of the fees, provide the estimated amount of fees to be collected/used), and site the authority used:		Explanation of Other Costs for Federal/Non Federal Attendees: <u>Statutory Authority</u> Invitational Travel Statute: NIH will issue Invitational Travel Orders to non-federal presenters or experts attending this event, under the authority of 5 U.S.C. 5703	
Conference Sponsorship funded by another HHS OPDIV/STAFFDIV: <i>Sponsor – provides funding for expenses incurred by another OPDIV/STAFFDIV for planning and conducting a conference.</i>			\$0
Reminder: Conferences that include food as part of the total estimated cost will not be approved.			

Additional Information							
Curriculum Based?	Yes		No	<input checked="" type="checkbox"/>	If yes, is there a course list?	Yes	No
If yes, describe the types of training materials			N/A				
Early Registration Deadline (enter N/A if none):			N/A				
Conference Website (enter N/A if none):			Yes, the website will provide information regarding the [REDACTED] along with logistical information for each meeting, and a registration form allowing [REDACTED] to track registrants.				
Requestor Information							
Name	[REDACTED]						
Title	Director						
Office	[REDACTED]						
Signature	[REDACTED]						
OPDIV/STAFFDIV Senior Executive Officer or Senior Travel Official Approval							
Name / Title	[REDACTED]						
Signature	[REDACTED]						
Date	[REDACTED]						
OPDIV/STAFFDIV Approval (If Total Estimated Cost Exceeds \$75,000, the OPDIV/STAFFDIV Head Must Sign the Request)							
OPDIV/STAFFDIV Head Signature (or Designee if at or below \$75,000)	[REDACTED]						
Date	[REDACTED]						
Deputy Secretary Approval (Required if Total Estimated Cost Exceeds \$75,000)							
Concur	<input type="checkbox"/>	Non-Concur				<input type="checkbox"/>	
Signature	[REDACTED]						
Date	[REDACTED]						

Instructions for Details on Cost

- General:
 - ☑ Submit one form for each conference.
 - ☑ Spell out any acronyms the 1st time they are used.
 - ☑ In the applicable blocks, include dollars only (no narrative) to the nearest dollar (no decimals).
 - ☑ Include all costs for which HHS funds will be obligated / expended except as noted below.
 - ☑ Exclude the salary of full time government employees for planning, conducting, and/or attending the conference.
- Contractor/Planner:
 - ☑ Include all estimated direct and indirect (e.g. overhead, general and administration, fee/profit) costs of any contractor support.
 - ☑ If the other cost categories (meeting space/venue, non-federal attendee travel, etc.) are included in the contract – exclude those costs from this block, and record them in the appropriate block.
 - ☑ If known, include contractor travel costs with the non-federal attendee travel information.
- Grant / Cooperative Agreement
 - N/A ☑ If the request supports a Conference Grant, insert the amount of associated with the conference.
- Meeting Space/Venue:
 - ☑ Include the estimated cost of the conference facility, excluding expenses such as audio/visual that should be recorded in the appropriate block.
- Registration Website
 - ☑ Include the estimated cost to establish, use, and maintain a registration website.
- Audio/Visual
 - ☑ Include the estimated cost of the audio/visual, including videotaping, web streaming, etc.
- Speaker Fees
 - N/A ☑ Include the estimated cost of any speaker fees (excluding speaker travel, which shall be included in travel costs as applicable) to be paid.
- Printing, Promotional Materials, Training materials
 - N/A ☑ Include the estimated cost of any Printing, Promotional, or Training materials if separately identified.

Attendance Costs:

- Federal Attendee Travel
 - ☑ For the number of federal attendees whose travel expenses will be paid by HHS, include the total estimated travel cost, including transportation, lodging, per diem, and other incidental costs that are allowable under the Federal Travel Regulation and expected to be incurred.

- Non-Federal Attendee
 - For the number of non-federal attendees whose travel expenses will be paid by HHS (including contractor support), include the total estimated travel cost, including transportation, lodging, per diem, and other incidental costs that are allowable under the Federal Travel regulation and expected to be incurred. However, exclude travel costs to be reimbursed under a federal grant for grantee attendance at the conference.
- Registration Fees
 - Include the total estimated cost of any registration fees to be charged to HHS funds to attend the conference. However, exclude registration fees to be reimbursed under a federal grant for grantee attendance at the conference.

[REDACTED]

Subject: [REDACTED] Conference Requests

From: [REDACTED]

Sent: Tuesday, August 13, 2013 5:44 PM

To: [REDACTED]

[REDACTED] here are our tentative speakers for the meetings below:

[REDACTED] (1 Non NIH Traveler): [REDACTED]

[REDACTED] (1 Non NIH Traveler): [REDACTED]

[REDACTED] (1 Non NIH Traveler): [REDACTED]

[REDACTED] (3 Non NIH Travelers): [REDACTED]

[REDACTED]

[REDACTED]

DRAFT Agenda

Short version

30min prior to start	Registration
30 min	Introduction, background, program information, purpose of today [REDACTED] <ul style="list-style-type: none">• Transforming motivation for research• Preparing students for success• Transforming institutional culture
15 min	Question and answer session
15 min	Go over breakout groups [REDACTED]
45 min	Brainstorming session #1
15 min	Reconvene whole group, discuss ideas exchanged, issues identified, additional thoughts/questions about the program
End	Adjourn
Total time: 2 hours	

Independent Government Cost Estimate

1 Contractor/Planner	\$0.00
2 Supplies, printing, shipping, courier	\$1,500.00
2 Meeting Space/Venue	\$2,000.00
3 Registration Website	\$800.00
4 Audio/Visual	\$3,679.10
5 Speaker Fees	\$200.00
6 Federal Attendee Travel	\$70.35
7 Non-Federal Attendee	\$2,000.00
8 Registration Fees	\$0.00
Total	\$10,249.45
Cost Per Attendee (n = 108)	\$94.90

* Data is based on previous meeting costs for [REDACTED] services performed by external contractors.

<div></div>		No/Style	Cost
<u>Room</u>			
Configuration		20 Crescent Round	\$2,000.00
Room Setup/Labor		1	\$170.00
<u>Audio Visual</u>			
Wireless Microphones		5	\$750.00
Wired Microphones		4	\$200.00
LCD Screen		2	\$450.00
LCD Projector Package		2	\$800.00
Flipcharts w/ Markers		5	\$225.00
Audio Package		1	\$60.00
Service Charge		22%	\$1,024.10
Total			\$5,679.10

[REDACTED]

From: [REDACTED]
Sent: Wednesday, July 31, 2013 10:48 AM
To: [REDACTED]
Subject: [REDACTED]

Hi [REDACTED]

It was a pleasure speaking with you earlier.
As I stated, rental rates for both properties is \$2000 plus 22% service charge.
Here are the links to the AV pricing for both hotels:

Crystal Gateway: <http://event-menus.com/production/WASGW/1122/hotels/travel/WASGW-crystal-gateway-marriott/technologyitems.asp>

Crystal City: <http://event-menus.com/production/WASCC/437/hotels/travel/WASCC-crystal-city-marriott-at-reagan-national-airport/technology.asp>

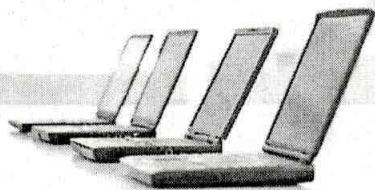
Let me know if you'd like to book the Crystal City Marriott, as space is currently available.

[REDACTED]

[REDACTED]

This e-mail and any files transmitted with it are confidential. If you are not the named addressee you should not disseminate, distribute or copy this e-mail. Please notify the sender immediately by e-mail if you have received this e-mail by mistake. If you are not the named addressee you should not disseminate, distribute or copy this e-mail. Please notify the sender immediately by e-mail if you have received this e-mail by mistake. If you are not the named addressee you should not disseminate, distribute or copy this e-mail. Please notify the sender immediately by e-mail if you have received this e-mail by mistake.

Breakfast Breaks Lunch Dinner Reception Beverage Energize Technology General Information



Event Technology

EQUIPMENT

3200-4200 Lumen LCD Projector - \$400

5800 Lumen LCD Projector - \$700

Laptop Computer \$150

Laser Pointer \$50

Wireless Mouse \$50

Wireless Mouse Pointer \$100

6' - 8' Tripod Screen - \$60

10' - 10' Cradle Screen - \$160

12' - 12' Cradle Screen - \$180

7.5' - 10' Fast Fold Screen - \$200

9' - 12' Fast Fold Screen - \$225

10.5' - 14' Fast Fold Screen - \$250

LCD Accessory Package \$120 (Includes cart, powerstrip, VGA Extension Cable, and 15 minutes of technical assistance)

Power Strip and Extension Cord \$20

Flip Chart with Markers \$45

Additional Flip Chart Paper Pads \$15

55" Plasma Monitor \$550

DVD Player \$95

Pipe and Drape \$18 per linear foot

Wired Microphone - \$50

Wireless Lavalier Microphone - \$150

Wireless Handheld Microphone - \$150

4 Channel Mixer - \$60

Direct in-Dial Telephone Line \$75

Speaker Phone with DID Phone Line - \$200

TECHNICIAN

Operator Rate per Hour - (4) Hour Minimum

In Room Operator - \$75

INTERNET PRICING

High Speed Internet Connection - \$350

Each Additional Connection - \$50

Wireless Internet Connection - \$150

Each Additional Connection - \$50

All Pricing is Per Day Per Item.

For Production Pricing, please contact the hotel at [REDACTED] and ask for the Event Technology Department.

	<u>No/Style</u>	<u>Cost</u>
Room		
Configuration	20 Crescent Round	\$5,000.00
Audio Visual		
Equipment Rental	1	\$3,656.25
Sales & Consumables	1	\$325.00
Operator Labor	1	\$500.00
Setup Charges	1	\$800.00
Damage Waiver	1	\$450.00
Audio Package	1	\$65.00
Service Charge	22%	\$2,375.18
Total		\$13,171.43

[REDACTED]

From: [REDACTED]
Sent: Tuesday, August 06, 2013 4:43 PM
To: [REDACTED]
Subject: RE: [REDACTED]
Attachments: 11.2.13 National Institutes of Health.pdf

Good afternoon [REDACTED]

I was able to talk with my director, we are not able to setup an area to sell snacks, but we are attached to the galleria mall so people could certainly buy snacks from the mall. Attached please find the a proposal from [REDACTED] I have also included a cost estimate below for the meeting including the room rental and AV costs with tax exemption. Please note that the attached AV proposal includes tax, but the number below shows the overall cost without tax.

	Price	Quantity	Total
Room rental	\$5,000.00	1	\$5,000.00
	Total Cost of F & B++		\$5,000.00
AV	\$5,731.00	1	\$5,731.00
	Total Room Rental		\$5,731.00
	Total Cost of AV,Room Rental and F&B		\$10,731.00

Please let me know if you have any questions, I would be more than happy to assist you.

Warmest Regards,
[REDACTED]

[REDACTED]

From: [REDACTED]
Sent: Tuesday, August 06, 2013 9:15 AM
To: [REDACTED]
Subject: RE: [REDACTED]

Good Morning [REDACTED]

Ah! Now I understand the question. That should be fine. Thank you for letting me know about the food and beverage minimum waiver. And I would need a complete quote for both the room charge and my requested A/V equipment by Thursday, 8/8. I will submit the quote to my director for approval. Once approved I am then able to reserve the space.

Regards,
[REDACTED]

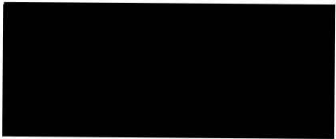


	Gross	Discount	Ext. Price
Equipment Rental	\$5,625.00	\$1,968.75	\$3,656.25
Sales & Consumables	\$500.00	\$175.00	\$325.00
Operator Labor	\$500.00		\$500.00
Setup Charges	\$800.00		\$800.00
<hr/>			
Subtotal	\$7,425.00	\$2,143.75	\$5,281.25
Damage Waiver			\$450.00
Tax			\$393.47

Total Estimate

\$6,124.72

Hotel Service Charge are NOT gratuities and are not paid in whole or in part to employees of [REDACTED] or employees of any other party.



Salon I - National Institutes of Health (11/2/2013 3:00PM - 6:30PM)

Equipment And Sales

Qty	Item Description	Days Billed	Rate	Subtotal
1	Wireless Handheld Microphone	1	\$1,050.00	\$682.50
5	Beta 58 Wireless Handheld Mic			
	One Microphone Per 4 Banquet Rounds			
5	UHF Wireless Mic Receiver			
4	Gooseneck Microphone	1	\$90.00	\$234.00
	Head Table Microphones*			
1	16 Ch Digital Mixer	1	\$340.00	\$221.00
1	Ballroom Audio Package	1	\$330.00	\$214.50
2	12" Two Way Powered Line Array			
2	Tripod Speaker Stand			
1	Lenovo T430	1	\$265.00	\$172.25
1	Salon Projection Package	1	\$2,280.00	\$1,482.00
1	9X16 Screen kit			
1	7500 Lumen 1-Chip WUXGA DLP			
1	Flip Chart Package	1	\$1,500.00	\$975.00
20	Flipchart Easel			
20	Marker Flip Chart 4 Color			
20	Pad Flip Chart Paper Plain			
Equipment And Sales Subtotal				\$3,981.25

Labor

Qty	Item Description	Rate	OT Rate	DT Rate	Days	Reg Hrs	OT Hrs	DT Hrs	Subtotal
Saturday, November 2, 2013									
1	Audio Technician - Operate	\$125.00	\$187.50	\$250.00		4.00			\$500.00
2	Technician To Set/Strike	\$100.00	\$150.00	\$200.00		4.00			\$800.00
Labor Subtotal									\$1,300.00
Salon I - National Institutes of Health (11/2/2013 3:00PM - 6:30PM) Subtotal:									\$5,281.25

Order Note:

A 10% Hotel Service Charge and applicable tax will be added to your final bill. ***Any Additions Will Not Be Available for Discount


	Gross	Discount	Ext. Price
Subtotal	\$7,425.00	\$2,143.75	\$5,281.25
Damage Waiver			\$450.00
Tax			\$393.47

Total Estimate

\$6,124.72

Hotel Service Charge are NOT gratuities and are not paid in whole or in part to employees of [REDACTED] or employees of any other party.

Thank you for your business.

		<u>No/Style</u>	<u>Cost</u>
<u>Room</u>			
Configuration		20 Crescent Round	\$5,000.00
<u>Audio Visual</u>			
Wireless mic on stand/		3	\$675.00
Wired mics for head table		2	\$180.00
LCD Projector and Screen		1	\$770.00
Laptop		1	\$265.00
Mixer & Podium Mic		1	\$260.00
Flipchart & Marker per table		10	\$950.00
Setup/Strike Labor (2 @ \$85 per hour)		1	\$170.00
Audio Technician (1 @ \$105 per hour)		3	\$315.00
Service Charge		7.95%	\$682.08
Total			\$9,267.08

Tentative Cost Estimate

Created: 08/06/2013

NIH November 2, 2013

		100			
ITEM	QTY OR PERSONS	PRICE PER UNIT NOT INCLUSIVE	TOTAL NOT INCLUSIVE	TOTAL INCLUDING Service Charge Tax	
		\$ -	\$ -		
		\$ -	\$ -		
		\$ -	\$ -		
Meeting Room	1	\$ 5,000.00	\$ 5,000.00	\$	5,000.00
Wireless mic on stand/	3	\$ 225.00	\$ 675.00	\$	823.50
Wired mics for head table	2	\$ 90.00	\$ 180.00	\$	219.60
LCD Projector and Screen	1	\$ 770.00	\$ 770.00	\$	939.40
Laptop	1	\$ 265.00	\$ 265.00	\$	323.30
Mixer & Podium Mic	1	\$ 260.00	\$ 260.00	\$	317.20
Flipchart & Marker per table	10	\$ 95.00	\$ 950.00	\$	1,159.00
Setup/Strike Labor (2 @ \$85 per hour)	1	\$ 170.00	\$ 170.00	\$	170.00
Audio Technician (1 @ \$105 per hour)	3	\$ 105.00	\$ 315.00	\$	315.00
				\$	-
TOTAL Estimate INCLUSIVE				\$	9,267.00

This is a cost estimate only. Final costs based on actual consumption.
Form is subject to internal audit and review

Request for Acquisition of Temporary Commercial Conference Space

Use prescribed by NIH Manual 26101-17-1

INSTRUCTIONS:

Send this form and quotes and supporting documentation to:

NIH Events Management Official, DMA, ORS

Bldg. 31, Room 6C17 (496-4700)

PART A—Request

1. Requester's IC and Division: [REDACTED]	2. Requester's Name: [REDACTED]	3. Requester's Title: [REDACTED]	4. Requester's Phone No.: [REDACTED]
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5. Event Name:
[REDACTED]

6. Event Date (s): 11/2/2013	7. Event Hours: 4:00 pm - 6:00 pm	8. Evening or weekend session included? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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9. List event support services required (audiovisual, clerical, business center, etc.)

Audiovisual and symposium logistics services will be required as they are not included in the meeting venue/space

10. List any special reasons why off-campus space is needed (aside from unavailability of NIH space)

[REDACTED] conference is being held at the [REDACTED]. Our symposium needs to occur on-site in conjunction with this conference to have maximum impact upon and attendance by minority doctoral scholars, postdoctoral scientists, faculty, program directors, and administrators pursuing/holding STEM advanced degrees who will be attending [REDACTED].

11. **Cost comparison** (Use only those items that are applicable. Comparison should include all costs to the Government.)

Facility Name and Location (List selected facility first)	Number and Cost of Accommodations							Cost of Administrative Services (Travel)		TOTAL COST
	Lodging		Conference Rooms		Breakout Rooms		Audiovisual Equip. & Staff	Cost for Government Personnel	Cost for Non-Government Personnel	
	No.	Cost	No.	Cost	No.	Cost	Cost			
			1	2000			3679.10	70.35	2000	7749.45
			1	5000			8171.43	70.35	2000	15241.78
			1	5000			4267.08	70.35	2000	11697.43

12. Total number of Participants:

NIH Participants: 7

Non-NIH participants: 101

PART B—Approvals

The authorized official has certified that travel to be performed with this meeting is in accordance with Federal Travel Regulation, FTR § 301-74 Appendix R, Part I. Using funds for travel, meeting facilities, and support services, as outlined above, is necessary and appropriate.

IC or NIH OD Office Fund Approving Official:

Name:

Title:

Signature:

Date:

This is to certify that NIH Conference space is: ☒ Unavailable ☐ AvailableRequest is: ☐ Approved ☐ Disapproved

NIH Events Management Official Name:

Signature:

Date: