DEPARTMENT OF HEALTH AND HUMAN SERVICES Indian Health Service

REQUEST FOR RATIFICATION OF UNAUTHORIZED COMMITMENT (UAC)

Federal Acquisition Regulation (FAR) 1.602-3 HHS Acquisition Regulation (HHSAR) 301.602.-3

Purchase Request Number IHS				
Amount (\$)	Area Office/Service Unit/Program Office or HQ Office/Division			
For (Item or Service)		Date of Commitment (mm/dd/yyyy)		
To (Vendor/Contracto	r Name and Address)			

The following section are to be completed by

Part I - Description of Commitment and Service Unit/Area or HQ Review

Section A, to be completed by individual who committed UAC

Section B, to be completed by Funds Certifying Official

Section C, to be completed by Immediate Supervisor

Section D, Service Unit CEO or Area/HQ Office Program Director - Review and Concurrence

Section E, Area Office / HQ Executive Officer - Review and Concurrence

Part II - Area or HQ Division of Acquisition's Review/Recommendation

Section A, to be completed by Contracting Officer

Section B, to be completed by Chief of the Contracting Office

Part III - Legal Review, Office of The General Counsel (OGC), Required for \$150,000 and Above

Part IV - Approval, Head of the Contracting Activity (HCA)

PART I - SECTION A - COMMITMENT CIRCUMSTANCES

The individual who made the unauthorized commitment shall complete items 1 thru 5 of Part I, Section A, provide detailed facts, required documentation, electronically sign, date, and forward to the immediate supervisor for completion of Part I - Section B.

1. Describe Circumstances that Led to the Unauthorized Commitment

PART I - SECTION A - COMMITMENT CIRCUMSTANCES (Continued)

2. Explain Why Appropriate Acquisition Mechanism Was Not Followed and Why Vendor Was Selected

3. Statement That Funds Are and Were Available at Time of Unauthorized Commitment

4. Describe the Benefits Received by The Government (*Give value of benefit and other pertinent facts*) and if Service or Goods Have Been Received

5. List Below and Attach All Relevant Documents (Include orders, invoices, fund availability, requisition and other evidence of the transaction. Verify accuracy and completeness of documentation)

Signature Date (mm/dd/yyyy)

Name, and Title of Individual Who Made the Unauthorized Commitment

PART I - SECTION B - CONTRACTUAL RATIFICATION

The funds certifying official will complete items 6 thru 7 of Part I, Section B, electronically sign, date, and return the form to the individual who committed UAC.

6. Availability of Funds

Are Unobligated Funds Presently Available for the Amount of the Unauthorized Commitment?

Yes No

If yes, identify the CAN or approved requisition number

7. Funds Certification

I have Reviewed the Acquisition and Certify that Funds Were Available at the Time of the Occurrance, and Remain Available for the Project.

Date (mm/dd/yyyy)

Yes	No No
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Signature

Funds Certifying Official Name, Title and Area or HQ Office/Service Unit/Program

PART I - SECTION C - CONTRACTUAL RATIFICATION

The Immediate Supervisor Will Complete Items 8 thru 10 of Part I, Section C, Electronically Sign, Date, and Forward to Service Unit CEO or Area/HQ Office Program Director.

8. Describe Attempts to Resolve Unauthorized Commitment Prior to Requesting Ratification (Such as, returning merchandise, individual paying from personal funds, etc.)

9. Describe Corrective Action Taken or an Explanation of Why None Was Considered Necessary (Include a description of any administrative action taken under applicable personnel authority)

10. Describe Action Taken to Prevent Recurrence of Unauthorized Commitments

Signature Date (mm/dd/yyyy)

Immediate Supervisor Name, Title and Area or HQ Office/Service Unit/Program

PART I - SECTION D - CONTRACTUAL RATIFICATION

The Service Unit CEO, Area Program Director or HQ Division Director will complete Section D of Part I. (Section B & C, in some instances, may be the same person.)

Approval of Corrective Action Taken

Yes N

If no, explain non-concurrence

Approval of Action(s) to Preclude Recurrence of Unauthorized Commitments

Yes No

If no, explain non-concurrence

I Have Reviewed Sections A and B of Part I, Verified That the Information is Accurate and Complete, That The Government Received a Benefit and Associated Value from the Unauthorized Commitment, That Certified Funds Were Available at the Time of UAC and

I concur with the ratification of the unauthorized commitment

I do not concur with the ratification of the unauthorized commitment

If no, explain non-concurrence

Completed Purchase Description and Funding Document is Executed and Attached (Required if Ratification is Recommended). Funding Document Must Specifically State That Funds Were Available at the Time the Unauthorized Commitment Was Made and These Funds are Still Available.

Yes No (action will not be ratified)

Signature

Date (mm/dd/yyyy)

Service Unit CEO, Area Program Director or HQ Division Director Name, Title and Service Unit/Office.

PART I - SECTION E - CONTRACTUAL RATIFICATION

The Area Executive Officer or HQ Office Director will complete Section E of Part I.

Approval of Corrective Action Taken

🗌 Yes 🗌 No

If no, explain non-concurrence

Approval of Action(s) to Preclude Recurrence of Unauthorized Commitments

Yes No

If no, explain non-concurrence

I Have Reviewed Sections A and B of Part I, Verified That the Information is Accurate and Complete, That The Government Received a Benefit and Associated Value from the Unauthorized Commitment, That Certified Funds Were Available at the Time of UAC and

I concur with the ratification of the unauthorized commitment

I do not concur with the ratification of the unauthorized commitment

If no, explain non-concurrence

Completed Purchase Description and Funding Document is Executed and Attached (Required if Ratification is Recommended). Funding Document Must Specifically State That Funds Were Available at the Time the Unauthorized Commitment Was Made and These Funds are Still Available.

Yes

No (action will not be ratified)

Signature

Date (mm/dd/yyyy)

Area Executive Officer or HQ Office Director Name.

PART II - SECTION A - CONTRACTING OFFICER'S REVIEW

FAR 1.602.3 AND HHSAR 301.602-3

THE CONTRACTING OFFICER SHALL REVIEW THE FILE AND PROCEED AS FOLLOWS:

- 1. Determine the adequacy of all facts, records, and documents furnished, and obtain any additional material required.
- Prepare a summary of facts to include a recommendation as to whether or not the transaction should be ratified and reasons for the recommendation. A recommendation not to ratify must include a recommendation as to whether or not the matter should be processed under FAR part 50 and (Pub. L. 85-804) as a Government Accountability Office (GAO) claim or in some other appropriate way.
- 3. State whether the ratification is in accordance with any other limitations prescribed under agency procedures.
- 4. Determine whether supplies or services have been provided to and accepted by the Government, or the Government otherwise has obtained or will obtain as a result from performance of the unauthorized commitment. The ratifying official has the authority to enter into a contractual commitment.
- 5. The ratifying official has the authority to enter into a contractual commitment.
- 6. Determine whether the resulting contract would otherwise have been proper if made by an appropriate Contracting Officer.
- 7. State whether the price is considered fair and reasonable and indicate how that determination was made.
- 8. Indicate whether or not the Contracting Officer recommends payment and legal counsel concurs in the recommendation, unless Agency procedures expressly do not require such concurrence.
- 9. Determine that sufficient funds are available, and were available at the time the unauthorized commitment was made.

Contracting Officer's Review

If more space is required, CO's statement may be attached; signature and date required below and on attachment).

Signature	Date (mm/dd/yyyy)

Name of Contracting Officer

PART II - SECTION B - RECOMMENDATION/APPROVAL SECTION A (Completed by the Chief of the Contracting Office)

ACTION VALUED AT ANY VALUE

Based on the foregoing determination, ratification of unauthorized commitment is recommended for approval.

Based on the foregoing determination, ratification of unauthorized commitment is recommended for disapproval (Explain below).

Signature Date (mm/dd/yyyy)

Name Chief of the Contracting Office

PART III - LEGAL REVIEW

(To be completed by Office of the General Counsel for all requests \$150,000 and above, per HHS Acquisition Alert 2017-02)

Determine Whether the Acquisition is Ratifiable Under FAR 1.602-3 and HHSAR 301.602-3 or Whether the Matter Should be Processed Under (Public Law 85-804), as a GAO Claim, or Recommend Other Appropriate Disposition. (*Return to the Head of the Contracting Activity for final approval or non-approval*).

If more space is required, legal opinion may be attached; signature and date required below and on attachment)

Signature	Date (mm/dd/yyyy)

Name of Legal Advisor, Title, and Organization

PART IV - APPROVAL

(Completed by the IHS, Head of the Contracting Activity)

ALL ACTIONS REGARDLESS OF DOLLAR VALUE

Based on the foregoing determination, ratification of unauthorized commitment is recommended for approval.

Based on the foregoing determination, ratification of unauthorized commitment is recommended for disapproval (*Explain below*).

Signature

Date (mm/dd/yyyy)

Name of Head of the Contracting Activity (HCA)