SAMPLE COVER LETTER BASELINE MODIFICATION REQUEST

Date: [insert date]

General Services Administration

Federal Acquisition Service (FAS)

Multiple Award Schedule Program

[GSA Contracting Official Name]

Re: Request for FCP Baseline Modification for MAS Contract Number [insert MAS Contract Number]

Dear [Name of Contracting Official],

[Insert Contract Holder’s name] is submitting a FCP Baseline Modification to its MAS contract.

* Baseline Products with a Product File (PF)
* Baseline Services with Services Plus File (SPF)

**[Insert the following if there are no changes as a result of this modification]**

As a result of this modification, I am not deleting any items (refers to products and/or services) under the above referenced MAS contract.

As an authorized representative for the Contract Holder, by signing this document I state to the best of my knowledge and belief that all other clauses, terms and conditions of the contract referenced above remain the same.

**[Insert the following only if items are being deleted as a result of this modification]**

As a result of this modification, I am deleting [insert # items] under the above referenced MAS contract.

In addition, as an authorized representative of the Contract Holder, I make the following statements to the best of my knowledge and belief:

1. The items being deleted will not be added at a later date with a higher price without justification for such higher price;
2. There are no outstanding orders by an Ordering Activity. For those item(s) previously purchased, all promises will be rendered;
3. All other prices, discounts, clauses, terms and conditions of the contract referenced above will remain the same;
4. I certify to the best of my knowledge that the information I provided is current, complete and accurate. All other terms and conditions remain the same.

If you have any questions regarding this request, please contact [insert point-of-contact] at [insert telephone number and email address].

Thank you,

/s/

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[Name of Authorized Negotiator and/or Corporate Official]

[Title of Authorized Negotiator or Corporate Official]