

**SUPPLEMENTAL COOPERATOR INFORMATION SHEET**

**Additional information needed to fulfill FFATA requirements.**

Cooperator Name:		Agreement Number:
Parent DUNS Number:	Primary Performance Street Address:	
Primary Performance City:		Primary Performance State:
Primary Performance Zip:	County of Primary Performance:	Primary Performance Country:
Performance in Multiple States:  Yes or No		Performance in Multiple Counties:  Yes or No
Comments:		