Research Subcontract Amendment

Subcontract No. BL _____ Agency: _____ Prime Contract No. _____ **Prime Contractor** Subcontractor Name: Tennessee Technological University Name: Address: Address: One William L. Jones Dr., Cookeville, TN 38505 **DUNS:** 878648153 **DUNS: Prime Contractor PI Name: Subcontractor PI Name: Amendment Effective Date: Amendment No.: Amendment(s) to Original Terms and Conditions** All other terms and conditions of this Subaward Agreement remain in full force and effect. IN WITNESS WHEREOF, duly authorized representatives of the Parties have entered into this Subcontract as of the date of the last signature set forth below: **Prime Contractor Signature Subcontractor Signature** Name: Name: Title: Title: Date: Date: