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Contract ID:	HHSI246201500527P	Reference IDV:	_
Modification Number:	4	Transaction Number:	0
Award/IDV Type:	PO Purchase Order	Action Obligation (\$):	\$28,163.20
Date Signed:	Aug 4, 2016	Solicitation Date:	_
Contracting Agency ID:	7527	Contracting Agency:	INDIAN HEALTH SERVICE
Contracting Office Name:	OK CITY AREA INDIAN HEALTH SVC	PSC Type:	S
PSC:	R699	PSC Description:	SUPPORT- ADMINISTRATIVE: OTHER
NAICS:	561210	NAICS Description:	FACILITIES SUPPORT SERVICES
Entity City:	NORMAN	Entity State:	ок
Entity ZIP Code:	730694957	Additional Reporting Code:	_
Additional Reporting Description:	-	Unique Entity ID:	PMLZCBF9U569
Ultimate Parent Unique Entity ID:	PMLZCBF9U569	Ultimate Parent Legal Business Name:	MITCHELL CONSULTING SERVICES GROUP INC
Legal Business Name:	MITCHELL CONSULTING SERVICES GROUP INC	CAGE Code:	-
Contract ID:	HHSI246201500527P	Reference IDV:	-
Modification Number:	P00005	Transaction Number:	0
Award/IDV Type:	PO Purchase Order	Action Obligation (\$):	-\$1,502.94
Date Signed:	Sep 9, 2020	Solicitation Date:	-
Contracting Agency ID:	7527	Contracting Agency:	INDIAN HEALTH SERVICE
Contracting Office Name:	OK CITY AREA INDIAN HEALTH	PSC Type:	S
PSC:	R699	PSC Description:	SUPPORT- ADMINISTRATIVE: OTHER
NAICS:	561210	NAICS Description:	FACILITIES SUPPORT SERVICES
Entity City:	NORMAN	Entity State:	ок
Entity ZIP Code:	730694957	Additional Reporting Code:	-
Additional Reporting Description:	-	Unique Entity ID:	PMLZCBF9U569
Ultimate Parent Unique Entity ID:	PMLZCBF9U569	Ultimate Parent Legal Business Name:	MITCHELL CONSULTING SERVICES GROUP INC
Legal Business Name:	MITCHELL CONSULTING SERVICES GROUP INC	CAGE Code:	6EPD5
Contract ID:	HHSI246201500527P	Reference IDV:	-
Modification Number:	3	Transaction Number:	0
Award/IDV Type:	PO Purchase Order	Action Obligation (\$):	\$14,081.60
Date Signed:	Jun 13, 2016	Solicitation Date:	-
Contracting Agency ID:	7527	Contracting Agency:	INDIAN HEALTH SERVICE
Contracting Office Name:	OK CITY AREA INDIAN HEALTH	PSC Type:	S
PSC:	R699	PSC Description:	SUPPORT- ADMINISTRATIVE: OTHER
NAICS:	561210	NAICS Description:	FACILITIES SUPPORT SERVICES
Entity City:	NORMAN	Entity State:	OK
Entity ZIP Code:	730694957	Additional Reporting Code:	_
Entrey Air Code:	I Total Control of the Control of th	Unique Entity ID:	PMLZCBF9U569
Additional Reporting Description:	-	onique Encicy iD:	
Additional Reporting	PMLZCBF9U569	Ultimate Parent Legal Business Name:	MITCHELL CONSULTING SERVICES GROUP INC

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Contract ID:	HHSI246201500527P	Reference IDV:	-
Modification Number:	0	Transaction Number:	0
Award/IDV Type:	PO Purchase Order	Action Obligation (\$):	\$14,081.60
Date Signed:	Aug 27, 2015	Solicitation Date:	-
Contracting Agency ID:	7527	Contracting Agency:	INDIAN HEALTH SERVICE
Contracting Office Name:	DEPT OF HHS/INDIAN HEALTH SERVICE	PSC Type:	s
PSC:	R699	PSC Description:	SUPPORT- ADMINISTRATIVE: OTHER
NAICS:	561210	NAICS Description:	FACILITIES SUPPORT SERVICES
Entity City:	NORMAN	Entity State:	OK
Entity ZIP Code:	730694957	Additional Reporting Code:	-
Additional Reporting Description:	-	Unique Entity ID:	PMLZCBF9U569
Ultimate Parent Unique Entity ID:	PMLZCBF9U569	Ultimate Parent Legal Business Name:	MITCHELL CONSULTING SERVICES GROUP INC
Legal Business Name:	MITCHELL CONSULTING SERVICES GROUP INC	CAGE Code:	-
Contract ID:	HHSI246201500527P	Reference IDV:	-
Modification Number:	1	Transaction Number:	0
Award/IDV Type:	PO Purchase Order	Action Obligation (\$):	\$14,081.60
Date Signed:	Jan 13, 2016	Solicitation Date:	-
Contracting Agency ID:	7527	Contracting Agency:	INDIAN HEALTH SERVICE
Contracting Office Name:	DEPT OF HHS/INDIAN HEALTH SERVICE	PSC Type:	S
PSC:	R699	PSC Description:	SUPPORT- ADMINISTRATIVE: OTHER
NAICS:	561210	NAICS Description:	FACILITIES SUPPORT SERVICES
Entity City:	NORMAN	Entity State:	OK
Entity ZIP Code:	730694957	Additional Reporting Code:	-
Additional Reporting Description:	-	Unique Entity ID:	PMLZCBF9U569
Ultimate Parent Unique Entity ID:	PMLZCBF9U569	Ultimate Parent Legal Business Name:	MITCHELL CONSULTING SERVICES GROUP INC
Legal Business Name:	MITCHELL CONSULTING SERVICES GROUP INC	CAGE Code:	-
Contract ID:	HHSI246201500527P	Reference IDV:	-
Modification Number:	2	Transaction Number:	0
Award/IDV Type:	PO Purchase Order	Action Obligation (\$):	\$14,081.60
Date Signed:	Mar 31, 2016	Solicitation Date:	-
Contracting Agency ID:	7527	Contracting Agency:	INDIAN HEALTH SERVICE
Contracting Office Name:	DEPT OF HHS/INDIAN HEALTH SERVICE	PSC Type:	S
PSC:		PSC Description:	SUPPORT- ADMINISTRATIVE:
	R699	rsc Description:	OTHER
NAICS:	R699 561210	NAICS Description:	
NAICS: Entity City:			OTHER FACILITIES SUPPORT
	561210	NAICS Description:	OTHER FACILITIES SUPPORT SERVICES OK
Entity City:	561210 NORMAN	NAICS Description: Entity State:	OTHER FACILITIES SUPPORT SERVICES OK
Entity City: Entity ZIP Code: Additional Reporting	561210 NORMAN	NAICS Description: Entity State: Additional Reporting Code:	OTHER FACILITIES SUPPORT SERVICES OK -

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