

## Attachment 5

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### SAMPLE TRANSMITTAL LETTER TO SBA

(Date)  
Area Director, Office of Government  
Contracting  
Small Business Administration  
Region (*insert number*)  
(Address)

In accordance with FAR 19.705-6(a), enclosed is a copy of the Small, HUBZone small, Small Disadvantaged, Women-owned small, Veteran-Owned small, and Service Disabled Veteran-Owned small business subcontracting plan for contract (*insert number*) with (*insert name of company*) located in your region. The total estimated value of the contract is (*insert total estimated value, including options*); the expiration date of the last option period is (*insert date*).

Please direct any questions to (*administrative contracting officer*) on telephone (*insert number*).

Sincerely,  
Contracting Officer