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| Proposal title and number: Click here to enter text. | | | | | | | | | | | | | | |
| Supplier Name and address: | | | | | | | | Point of Contact Name, Phone Number & email: | | | | | | |
| Click here to enter text. | | | | | | | | Click here to enter text. | | | | | | |
| Contract Administration Office: | | | | | | | | Audit Office: | | | | | | |
| Click here to enter text. | | | | | | | | Click here to enter text. | | | | | | |
| Type of Subcontract (Order) Action | | | | | | | | | | | | | | |
| New Order | | | Change Order | | | | Other (Specify): Click here to enter text. | | | | | | | |
|  |  | |  | **Type of Subcontract** | | | | | | |  |  | | |
| FFP | | | CPFF | | | | Other (Specify): Click here to enter text. | | | | | | | |
| Proposal Cost Summary (attach additional pages if needed) | | | | | | | | | | | | | | |
| **Line Item #** | | **Description** | | | **Cost $** | | | | | **Profit or Fee $** | | | **FCCM $** | **Total $** |
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|  | | **Proposal Total** | | |  | | | | |  | | |  |  |
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| **Is Any Government Property Required?** | | | | | | **Yes** (must be listed in proposal)   **No** | | | | | | | | |
| Cost Accounting Standards (CAS) Information: | | | | | | | | | | | | | | |
| (a) Is your organization subject to cost accounting standards:  **Yes**   **No**  If No, Explain: Click, enter text. | | | | | | | | | | | | | | |
| (b) Has your organization submitted a CASB Disclosure Statement:  **Yes**   **No**  (c) If Yes, has it been determined to be adequate: Click, enter text.  **Yes**   **No** | | | | | | | | | | | | | | |
| (d) Have you been notified of noncompliance with your Disclosure Statement or CAS:  **Yes**   **No**  If Yes, Explain: Click, enter text. | | | | | | | | | | | | | | |
| (e) Is any aspect of this proposal inconsistent with your disclosed practices or applicable CAS:  **Yes**   **No**  If Yes, Explain: Click, enter text. | | | | | | | | | | | | | | |
| (f) Is this proposal consistent with your established estimating and accounting principles and procedures:  **Yes**   **No**  If No, Explain: Click, enter text. | | | | | | | | | | | | | | |
| (g) Is this proposal consistent with FAR Part 31 and Cost Principles:  **Yes**   **No**  If No, Explain: Click, enter text. | | | | | | | | | | | | | | |
| *This proposal reflects our estimates and/or actual costs as of this date and conforms with the instructions in FAR 15.403-5(b)(1) and Table 15-2. By submitting this proposal, we grant the Contracting Officer and authorized representative(s) the right to examine, at any time before award, those records, which include books, documents, accounting procedures and practices, and other data, regardless of type and form or whether such supporting information is specifically referenced or included in the proposal as the basis for the pricing, that will permit an adequate evaluation of the proposed price.* | | | | | | | | | | | | | | |
| Date of Submission: | | | Name and title of authorized representative: | | | | | | | | | | | |
| Date: | | | Name: | | | | | | Title: | | | | | |