

CONTRACT PRICING PROPOSAL COVER SHEET			1. SOLICITATION /CONTRACT/MODIFICATION NUMBER				
2a. NAME OF OFFEROR			3a. NAME OF OFFEROR'S POINT OF CONTACT		3c. TELEPHONE		
2b. FIRST LINE ADDRESS			3b. TITLE OF OFFEROR'S POINT OF CONTACT		AREA CODE	NUMBER	
2c. STREET ADDRESS			4. TYPE OF CONTRACT ACTION (<u>Check</u>)				
			a. NEW CONTRACT		<input type="checkbox"/>	c. LETTER CONTRACT	
2d. CITY	2e. STATE	2f. ZIP CODE	<input type="checkbox"/>	b. CHANGE ORDER	<input type="checkbox"/>	d. OTHER (<i>Specify</i>)	
5. TYPE OF CONTRACT (<i>Check</i>)			6. PROPOSED COST (A+B=C)				
<input type="checkbox"/> FFP	<input type="checkbox"/> CPFF	<input type="checkbox"/> CPIF	A. COST		B. PROFIT/FEE		
<input type="checkbox"/> FPI	<input type="checkbox"/> OTHER (<i>Specify</i>)		C. TOTAL				
7. PERFORMANCE							
P L A C E	a.					P E R I O D	a.
	b.						b.
8. List and reference the identification, quantity and total price proposed for each contract line item. A line item cost breakdown supporting this recap is required unless otherwise specified by the Company. (<i>Continue on plain paper, if necessary. Use same headings</i>)							
a. LINE ITEM NO.	b. IDENTIFICATION		c. QUANTITY	d. TOTAL PRICE	e. PROP. REF. PAGE		
9. PROVIDE THE FOLLOWING (<i>If available</i>)							
NAME OF CONTRACT ADMINISTRATION OFFICE				NAME OF AUDIT OFFICE			
STREET ADDRESS				STREET ADDRESS			
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE		
TELEPHONE				TELEPHONE			
10. WILL YOU REQUIRE THE USE OF ANY GOVERNMENT PROPERTY IN THE PERFORMANCE OF THIS WORK? (<i>If "yes", identify</i>)							
<input type="checkbox"/> YES <input type="checkbox"/> NO							
11. IS THIS PROPOSAL CONSISTENT WITH YOUR ESTABLISHED ESTIMATING AND ACCOUNTING PRACTICES AND PROCEDURES AND FAR PART 31, COST PRINCIPLES? (<i>If "no", explain in proposal</i>)							
<input type="checkbox"/> YES <input type="checkbox"/> NO							
12. COST ACCOUNTING STANDARDS BOARD (CASB) DATA (<i>Public Law 91-379 as amended and FAR PART 30</i>)							
a. WILL THIS CONTRACT ACTION BE SUBJECT TO CASB REGULATIONS? (<i>If "no", explain in proposal</i>)			b. HAVE YOU SUBMITTED A CASB DISCLOSURE STATEMENT? (<i>If "yes", specify in proposal the office to which submitted</i>)				
<input type="checkbox"/> YES <input type="checkbox"/> NO			<input type="checkbox"/> YES <input type="checkbox"/> NO				
			If "yes", has it been determined adequate?				
			<input type="checkbox"/> YES <input type="checkbox"/> NO				
c. HAVE YOU BEEN NOTIFIED THAT YOU ARE OR MAY BE IN NONCOMPLIANCE WITH YOUR DISCLOSURE STATEMENT OR COST ACCOUNTING STANDARDS? (<i>If "yes", explain in proposal</i>)			d. IS ANY ASPECT OF THIS PROPOSAL INCONSISTENT WITH YOUR DISCLOSED PRACTICES OR APPLICABLE COST ACCOUNTING STANDARDS? (<i>If "yes", explain in proposal</i>)				
<input type="checkbox"/> YES <input type="checkbox"/> NO			<input type="checkbox"/> YES <input type="checkbox"/> NO				
This proposal is submitted in response to the solicitation, contract, modification, etc., in Item 1 and 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, the offeror grants the Company and Government 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 regardless of whether such items are in written form, in the form of computer data, or any other form, or whether such supporting information is specifically referenced or included in the proposal as the basis for pricing, that will permit an adequate evaluation of the proposed price.							
13. NAME OF AUTHORIZED REPRESENTATIVE OF OFFEROR (<i>Type</i>)				14. TITLE OF AUTHORIZED REPRESENTATIVE OF OFFEROR			
15. SIGNATURE				16. DATE OF SUBMISSION			