## **APPENDIX C**

## Committee Pricing Formats

All Committee formats have multiple uses. These formats <u>may be used</u> by Nonprofit Agencies and NIB/NISH for submitting proposals to Contracting Activities and <u>must</u> be used for providing information required under PR-3 to the Committee. The Contracting Activities' formats and forms <u>must</u> be used by the Nonprofit Agencies when requested by the CA and <u>must</u> be provided to the Committee, along with the following formats and the Contract Section Schedule B.

Price Proposal SPF-1

- 1. Submitting proposals to Contracting Activities.
- 2. Recommending the Base Price to the Committee at the time of Procurement List addition and for recommending new Base Year.
- 3. As a cover sheet to forward pricing data and formats requested by the Contracting Activity.

Price Proposal Follow-on Years SPF-2

- 1. Submitting proposals to Contracting Activities for Follow-On Year Pricing.
- 2. Reporting Follow-On Year Pricing agreements to the Committee.
- 3. Incorporation into a contract's Schedule B upon award of a contract after Procurement List addition.

Price Breakdown SPF-3

- 1. Submitting details on cost elements to support proposed prices when required under cost analysis or cost realism analysis.
- 2. Reporting details on specific price elements to the Committee when required.
- 3. A tool for Nonprofit Agencies to develop a price proposal.
- 4. As a cover sheet to forward pricing data and formats requested by the Contracting Activity.

Staffing Breakdown SPF-4

- 1. Submitting details on direct labor elements to support proposed prices when required under cost analysis or cost realism analysis.
- 2. Reporting details on specific price elements to the Committee when required.
- 3. As a work tool for developing other data required by the Committee for the addition of a project to the Procurement List.

<b>Price Proposal</b>	
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Date:	PL Number:	Pro	oject Number:	
Solicitation/Contract Nu	mber:			
Service Name:				
Service Location:				_
Contracting Officer:				
Contracting Officer Phone	:	Fax:	Email:	_
NPA Contact:				
NPA Contact:		Fax.	Email:	
		1 u.A.	Linan.	_
NIB or NISH:				
Contact:				
Contact : Phone:		Fax:	Email:	_
Service Period:	through	FOY As	greement? YES N	IO
	_ 0			
Price Proposal:				
Price per Year:	<b>P</b>	rice per Mo	onth:	
Or				
-				
<b>Unit Price:</b>	Q	uantity:		
<b>Certifications:</b>				
Contracting Activity Cor	tification. Signat	11801		
Contracting Activity Cer	uncation: Signat	ure:		
accordance with The Committee Proposal Analysis Techniques.	e's Pricing Memorandun The analysis method use	n No. 3 and used for determined	nmendation to be fair and reasonabl ing the standards set forth in FAR 1 ning the recommended price(s) to be Cost-realism AnalysisOther	5.404-1 e fair and
NPA Certification: Sign	ature:			
<u> </u>				
			bated in development of this FMP ring terms and conditions of this agr	eement
CNA Certification: Sig	nature:			

In accordance with the Code of Federal Regulations (CFR 51-3.2(e) and 51-3.2(i)), as the Central Nonprofit Agency representative, I certify that my organization has participated in the development and/or review of the recommended FMP and that the Contracting Officer has indicated their agreement with the recommended price. I recommend the Committee approve the Fair Market Price.

## Price Proposal Follow-On Year

Date: PL Solicitation/Contract Number:	Number:	Project Number:
Service Name:		
Base Year Service Period:	through	
1. Follow-On Year Annual Price	es:	
FOY1:	thro	ugh
FOY2:	thro	ugh
FOY3:	thro	ugh
FOY4:	thro	ugh
	<u>ork</u>	

SPF-2

Price Breakdown
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Date:	PL Number:		Project Number:
Solicitation/Contrac	t Number:		
Service Period:	through		
Service Name: Service Location:			_
Direct Labor: Direct Labor F	Fringe:		
Direct Line Su Direct Line Su	pervision: pervision Fringe:		
Supplies: Equipment: Subcontracts: Other Direct C	Costs:		
	Total Direct Costs:		
Overhead/G&	A/Net Proceeds		
ANNU	JAL BASE PRICE:		
	MONTHLY PRICE: or		
	UNIT PRICE/Quanti	ty	

## **Staffing Breakdown**

 Date:
 PL Number:
 Project Number:

Solicitation/Contract Number: \_\_\_\_\_

Job Position	Estimated Total Direct Labor Hours	Estimated Blind or Severely Disabled Direct Labor Hours	Estimated Average Productivity