RFP NNH14496602R

EXHIBITS 1 - 14

COST CHARTS

Proposing Entity:

RFP NNH14496602R

EXHIBIT 1
PRIME OFFEROR
SUMMARY OF REPRESENTATIVE TASK ORDERS (RTO) ESTIMATED COST PLUS FIXED FEE

REPRESENTATIVE TASK ORDER NUMBER	TOTAL PRIME AND SIGNIFICANT SUBCONTRACTOR DIRECT LABOR HOURS	ESTIMATED COST	*MAXIMUM AVAILABLE FIXED FEE*	TOTAL ESTIMATED COST PLUS FIXED FEE
RTO 1				

EXHIBIT 1A

Offeror Pass Through Costs for RTO Other Direct Cost

Year 1

Company Name:
Place of Performance:

Other Direct Costs	Unburdened ODC Cost	CY Indirect Bid Rates/Expenses			FEE	Loaded ODCs
		* rate: %	* rate: %	* rate: %	rate: %	
**TOTAL Fellow Costs (Fellows Stipend, Travel, Relocation, Recruitment Package & Accident and Death/Dismemberment Insurance.)	$ 17,000,000.00	$	$	$	$	

Year 2

Company Name:
Place of Performance:

Other Direct Costs	Unburdened ODC Cost	CY Indirect Bid Rates/Expenses			FEE	Loaded ODCs
		* rate: %	* rate: %	* rate: %	rate: %	
**TOTAL Fellow Costs (Fellows Stipend, Travel, Relocation, Recruitment Package & Accident and Death/Dismemberment Insurance.)	$ 17,000,000.00	$	$	$	$	

***List each applicable Indirect Rate (e.g., G&A) and provide percentage. Add additional rows if needed.**
**** Pass-through plug-in costs for Fellows for proposal purposes is $17M annually**

Proposing Entity:

RFP NNH14496602R

EXHIBIT 2
PRIME OFFEROR
REPRESENTATIVE TASK ORDER (RTO) ELEMENTS OF COST SUMMARY BY CONTRACT YEAR
RTO No. _____, Contract Year * _____, WBS Level _____**

Elements of Cost	Month	Month	Month	Month	Month	Month	Month	Month	Month	Month	Month	Month	TOTAL
Direct Labor (DL) Hours:													
Prime Onsite DL Hours *(Derived from Exhibit 2-A)*													
Prime Offsite DL Hours *(Derived from Exhibit 2-A)*													
Total Prime Direct Labor Hours													
Significant Subcontractor Onsite DL Hours*:													
(List total hours separately by company)													
Subtotal Significant Subcontractor Onsite Direct Labor Hours													
Significant Subcontractor Offsite DL Hours*:													
(List total hours separately by company)													
Subtotal Significant Subcontractor Offsite Direct Labor Hours													
Total Significant Subcontractor Direct Labor Hours													
TOTAL PRIME AND SIGNIFICANT SUBCONTRACTOR DIRECT LABOR HOURS													
Direct Labor Costs:													
Prime Onsite DL Costs *(Derived from Exhibit 2-A)*													
Prime Offsite DL Costs *(Derived from Exhibit 2-A)*													
TOTAL PRIME DIRECT LABOR COSTS													
Overhead:													
Onsite													
Offsite													
TOTAL OVERHEAD													
Other Direct Costs (ODCs):													
Significant Subcontracts (list separately by company)**													
Other Subcontracts													
Material													
Travel													
Other (Specify): (Pass-through plugin)****	$1,416,666	$1,416,666	$1,416,666	$1,416,666	$1,416,667	$1,416,667	$1,416,667	$1,416,667	$1,416,667	$1,416,667	$1,416,667	$1,416,667	$17,000,000
TOTAL ODCs													
SUBTOTAL COST													
G&A													
TOTAL ESTIMATED COST													
FIXED FEE PERCENTAGE													
MAXIMUM AVAILABLE FIXED FEE													
TOTAL COST PLUS FIXED FEE													

***Significant Subcontractor ($125K of the RTO estimate) - Insert Direct Labor Hours Only**
****List each significant subcontractor separately by company ($125K of the RTO estimate) - Insert Total Cost and Fees**
*****Offeror shall use this exhibit for each contract year for the RTO period of performance**
Offerors may adjust elements of cost to be consistent with your current accounting system.
****** Pass-through plug-in costs for Fellows for proposal purposes is $17M annually (which includes Fellows Stipend, Travel, Relocation, Recruitment Package & Accident and Death/Dismemberment Insurance.)**

This exhibit contains Source Selection Information. See FAR 3.104.

Proposing Entity:

RFP NNH14496602R

EXHIBIT 2
PRIME OFFEROR
REPRESENTATIVE TASK ORDER (RTO)1 ELEMENTS OF COST SUMMARY GRAND TOTAL

Elements of Cost		GRAND TOTAL (CY 1 & 2)
Direct Labor (DL) Hours:		
Prime Onsite DL Hours *(Derived from Exhibit 2-A)*		
Prime Offsite DL Hours *(Derived from Exhibit 2-A)*		
Total Prime Direct Labor Hours		
Significant Subcontractor Onsite DL Hours*:		
(List total hours separately by company)		
Subtotal Significant Subcontractor Onsite Direct Labor Hours		
Significant Subcontractor Offsite DL Hours*:		
(List total hours separately by company)		
Subtotal Significant Subcontractor Offsite Direct Labor Hours		
Total Significant Subcontractor Direct Labor Hours		
TOTAL PRIME AND SIGNIFICANT SUBCONTRACTOR DIRECT LABOR HOURS		
Direct Labor Costs:		
Prime Onsite DL Costs *(Derived from Exhibit 2-A)*		
Prime Offsite DL Costs *(Derived from Exhibit 2-A)*		
TOTAL PRIME DIRECT LABOR COSTS		
Overhead:		
Onsite		
Offsite		
TOTAL OVERHEAD		
Other Direct Costs (ODCs):		
Significant Subcontracts (list separately by company)**		
Other Subcontracts		
Material		
Travel		
Other (Specify): (Pass-through plugin)***		$34,000,000
TOTAL ODCs		
SUBTOTAL COST		
G&A		
TOTAL ESTIMATED COST		
FIXED *FEE* PERCENTAGE		
MAXIMUM AVAILABLE FIXED FEE		
TOTAL COST PLUS FIXED FEE		

***Significant Subcontractor ($125K of the RTO estimate) - Insert Direct Labor Hours Only**
****List each significant subcontractor separately by company ($125K of the RTO estimate) - Insert Total Cost and Fees**
Offerors may adjust elements of cost to be consistent with your current accounting system.
***** Pass-through plug-in costs for Fellows for proposal purposes is $17M annually (which includes Fellows Stipend, Travel, Relocation, Recruitment Package & Accident and Death/Dismemberment Insurance.)**

Proposing Entity:
[ ] Prime Offeror OR [ ] Significant Subcontractor

RFP NNH14496602R

EXHIBIT 2-A

DIRECT LABOR HOURS, DIRECT LABOR RATES AND DIRECT LABOR COSTS DETAIL

RTO No. _____, Contract Year* _____, and WBS Level _____

Elements of Cost	Labor Type (E or NE)	Month	Month	Month	Month	Month	Month	Month	Month	Month	Month	Month	Month	TOTAL
DIRECT LABOR (DL) HOURS														
Onsite DL Hours: *(List by Individual DL Category)*														
Subtotal Onsite DL Hours														
Offsite DL Hours: *(List by Individual DL Category)*														
Subtotal Offsite DL Hours														
TOTAL DIRECT LABOR HOURS														
DIRECT LABOR HOURLY RATES**														
Onsite DL Rates: *(List by Individual DL Category)*														
Offsite DL Rates: *(List by Individual DL Category)*														
DIRECT LABOR COSTS														
Onsite DL Costs: *(List by Individual DL Category)*														
Subtotal Onsite DLCosts														
Offsite DL Costs: *(List by Individual DL Category)*														
Subtotal Offsite DL Costs														
TOTAL DIRECT LABOR COSTS														

***Offeror shall use this exhibit for each contract year for the RTO period of performance**
****Rates must match the DL Hourly Rates included in Attachment B IDIQ Direct Labor Rates, Indirect Rates, and Fee Matrices**

This exhibit contains Source Selection Information. See FAR 3.104.

Proposing Entity:

RFP NNH14496602R

EXHIBIT 2-B
SIGNIFICANT SUBCONTRACTOR
REPRESENTATIVE TASK ORDER (RTO) SUMMARY BY CONTRACT YEAR

RTO No. _____, Contract Year* _____, and WBS Level _____

Elements of Cost	Month	Month	Month	Month	Month	Month	Month	Month	Month	Month	Month	Month	TOTAL
Direct Labor (DL) Hours:													
Onsite DL Hours *(Derived from Exhibit 2-A)*													
Offsite DL Hours *(Derived from Exhibit 2-A)*													
TOTAL DIRECT LABOR HOURS													
Direct Labor Costs:													
Onsite DL Costs *(Derived from Exhibit 2-A)*													
Offsite DL Costs *(Derived from Exhibit 2-A)*													
TOTAL DIRECT LABOR COSTS													
Overhead:													
Onsite													
Offsite													
TOTAL OVERHEAD													
Other Direct Costs (ODCs):													
Other Subcontracts													
Material													
Travel													
Other (Specify)													
TOTAL ODCs													
SUBTOTAL COST													
G&A													
TOTAL ESTIMATED COST													
FIXED FEE PERCENTAGE													
MAXIMUM AVAILABLE FIXED FEE													
TOTAL COST PLUS FIXED FEE													

***Offeror shall use this exhibit for each contract year for the RTO period of performance**
Offerors may adjust elements of cost to be consistent with your current accounting system.

Proposing Entity:

RFP NNH14496602R

EXHIBIT 2-B
SIGNIFICANT SUBCONTRACTOR
REPRESENTATIVE TASK ORDER (RTO)1 ELEMENTS OF COST SUMMARY GRAND TOTAL

Elements of Cost		GRAND TOTAL (CY 1 & 2)
Direct Labor (DL) Hours:		
Prime Onsite DL Hours *(Derived from Exhibit 2-A)*		
Prime Offsite DL Hours *(Derived from Exhibit 2-A)*		
Total Prime Direct Labor Hours		
Significant Subcontractor Onsite DL Hours*:		
(List total hours separately by company)		
Subtotal Significant Subcontractor Onsite Direct Labor Hours		
Significant Subcontractor Offsite DL Hours*:		
(List total hours separately by company)		
Subtotal Significant Subcontractor Offsite Direct Labor Hours		
Total Significant Subcontractor Direct Labor Hours		
TOTAL PRIME AND SIGNIFICANT SUBCONTRACTOR DIRECT LABOR HOURS		
Direct Labor Costs:		
Prime Onsite DL Costs *(Derived from Exhibit 2-A)*		
Prime Offsite DL Costs *(Derived from Exhibit 2-A)*		
TOTAL PRIME DIRECT LABOR COSTS		
Overhead:		
Onsite		
Offsite		
TOTAL OVERHEAD		
Other Direct Costs (ODCs):		
Significant Subcontracts (list separately by company)**		
Other Subcontracts		
Material		
Travel		
Other (Specify): (Pass-through plugin)***		$34,000,000
TOTAL ODCs		
SUBTOTAL COST		
G&A		
TOTAL ESTIMATED COST		
FIXED *FEE* PERCENTAGE		
MAXIMUM AVAILABLE FIXED FEE		
TOTAL COST PLUS FIXED FEE		

***Significant Subcontractor ($125K of the RTO estimate) - Insert Direct Labor Hours Only**
****List each significant subcontractor separately by company ($125K of the RTO estimate) - Insert Total Cost and Fees**
Offerors may adjust elements of cost to be consistent with your current accounting system.
***** Pass-through plug-in costs for Fellows for proposal purposes is $17M annually (which includes Fellows Stipend, Travel, Relocation, Recruitment Package & Accident and Death/Dismemberment Insurance.)**

Proposing Entity:
[ ] **Prime Offeror** OR [ ] **Significant Subcontractor**

RFP NNH14496602R

EXHIBIT 3
RTO SOURCE OF PERSONNEL CHART
RTO No._____

Total Number of Staff	Labor Category/Position Title	Labor Category Code*	Personnel Available Within Company	Personnel to be Obtained from Incumbent	Outside Hired Staff
TOTAL					

*Code each Labor Cateogry: S=SALARIED; H=HOURLY; U=UNION; E=EXEMPT; NE=NON-EXEMPT DOL/WD DETERMINATION; I=INCUMBENT; SU=SUBCONTRACTOR

This exhibit contains Source Selection Information. See FAR 3.104.

Proposing Entity:
[ ] **Prime Offeror** OR [ ] **Significant Subcontractor**

RFP NNH14496602R

EXHIBIT 4
SUMMARY OF INDIRECT RATES

	Overhead Onsite Rate	Overhead Offsite Rate	G&A Expense Rate	Other (Identify)** Rate
Contract Year 1 *Portion of Contractor FY From:_____to_____ *Portion of Contractor FY From:_____to_____				
Contract Year 1 Composite				
Contract Year 2 *Portion of Contractor FY From:_____to_____ *Portion of Contractor FY From:_____to_____				
Contract Year 2 Composite				
Contract Year 3 *Portion of Contractor FY From:_____to_____ *Portion of Contractor FY From:_____to_____				
Contract Year 3 Composite				
Contract Year 4 *Portion of Contractor FY From:_____to_____ *Portion of Contractor FY From:_____to_____				
Contract Year 4 Composite				
Contract Year 5 *Portion of Contractor FY From:_____to_____ *Portion of Contractor FY From:_____to_____				
Contract Year 5 Composite				
Contract Year 6 *Portion of Contractor FY From:_____to_____ *Portion of Contractor FY From:_____to_____				
Contract Year 6 Composite				
BASE OF APPLICATION - INDIRECT RATE APPLIED AGAINST (Specify Base)*				

*Explain Basis of Allocation of Contractor FY Rates to Obtain Contract Year Rates
**If Multiple "Other" Indirect Rates - Add additional columns and specify each individually
***Explaination of Base of Application
Prime Offeror Contract Year Composite Rates must match the indirect rates included in Attachment B IDIQ Direct Labor Rates, Indirect Rates, and Fee Matrices

This exhibit contains Source Selection Information. See FAR 3.104.

Proposing Entity:
[ ] **Prime Offeror** OR [ ] **Significant Subcontractor**

RFP NH14496602R

EXHIBIT 5
SUMMARY OF RECURRING OTHER DIRECT COSTS (ODCs) / COST ESTIMATING RELATIONSHIPS (CERs)

	Specify ODC* Percentage/Rate/Amount**	Specify ODC* Percentage/Rate/Amount**	Specify ODC* Percentage/Rate/Amount**	Specify ODC* Percentage/Rate/Amount**
Contract Year 1 *Portion of Contractor FY From:_____to_____ *Portion of Contractor FY From:_____to_____				
Contract Year 1 Composite				
Contract Year 2 *Portion of Contractor FY From:_____to_____ *Portion of Contractor FY From:_____to_____				
Contract Year 2 Composite				
Contract Year 3 *Portion of Contractor FY From:_____to_____ *Portion of Contractor FY From:_____to_____				
Contract Year 3 Composite				
Contract Year 4 *Portion of Contractor FY From:_____to_____ *Portion of Contractor FY From:_____to_____				
Contract Year 4 Composite				
Contract Year 5 *Portion of Contractor FY From:_____to_____ *Portion of Contractor FY From:_____to_____				
Contract Year 5 Composite				
Contract Year 6 *Portion of Contractor FY From:_____to_____ *Portion of Contractor FY From:_____to_____				
Contract Year 6 Composite				
BASE OF APPLICATION - PECENTAGE/RATE/AMOUNT APPLIED AGAINST (Specific Base):*				

* Type/Name of Recurring ODCs or CERs (i.e. Computer Usage, Program Management, Administrative Support, Depreciation, etc.)
**Specify ODC as either a percentage of (%), rate, and/or dollar amount ($)
***Explaination of Base of Application
Prime Offeror Contract Year Composite %, rate or dollar amount must match what is included in Attachment B IDIQ Direct Labor Rates, Indirect Rates, and Fee Matrices

This exhibit contains Source Selection Information. See FAR 3.104.

Proposing Entity:
[ ] **Prime Offeror** OR [ ] **Significant Subcontractor**

RFP NNH14496602R

EXHIBIT 5-A
OVERHEAD (Composition of Burden Pool)

Overhead or Service Center Pool = _____

(Specify Type of Overhead Burden, e.g. Labor, Onsite, Offsite, Engineering, Procurement, Service Center(s), etc. - See Page 2)

OFFEROR'S FISCAL YEAR BEGINS _____ AND ENDS _____.

Cost Elements within the Overhead Burden Pool	Contractor Fiscal Year Prior Yr 3	Contractor Fiscal Year Prior Yr 2	Contractor Fiscal Year Prior Yr 1	Contractor Fiscal Year _____	Contractor Fiscal Year _____	Contractor Fiscal Year _____	Contractor Fiscal Year _____	Contractor Fiscal Year _____	Contractor Fiscal Year _____
Total Overhead Pool Expenses									
Base of Distribution (identify) Dollars:									
Existing Base									
Forecasted Base*									
Contractor FY Rate (%)									
Conversion of Contractor FY Overhead Rate to Contract Year (CY)				**CY 1**	**CY 2**	**CY 3**	**CY 4**	**CY 5**	**CY 6**
Proposed Overhead Bid Rate by CY									

If more than one Overhead Pool is proposed, submit a separate Exhibit for each Pool.
*Provide details of the forecasted base.

Type of Overheads - Examples include:

Material Overhead
Manufacturing Overhead
Engineering Overhead
Field Service Overhead
Site Overhead

Typical Costs Found in an Overhead Expense Pool

Material Overhead

Acquisition (Purchasing)
Inbound transportation
Indirect labor
Employee related expenses (shift & overtime premiums, employee taxes, fringe benefits)
Receiving and inspection
Material handling and storage
Vendor quality assurance
Scrap sales credits
Inventory adjustments

Operations Overhead (e.g., Manufacturing, Engineering, Field Service, and Site Operations)

Indirect labor and supervision
Perishable tooling (primarily in manufacturing overhead)
Employees related expenses (shift & overtime premiums, employee taxes, fringe benefits)
Indirect material & supplies (small tools, grinding wheels, lubricating oils)
Fixed charges (e.g., depreciation, insurance, rent, property taxes)
Downtime of direct employees (training, vacation pay, regular pay) when not working on a specific contract/job

Proposing Entity:
[ ] **Prime Offeror** OR [ ] **Significant Subcontractor**

RFP NNH14496602R

EXHIBIT 5-B
GENERAL AND ADMINISTRATIVE (G&A) (Composition of Burden Pool)

OFFEROR'S FISCAL YEAR BEGINS _____ **AND ENDS** _____.

Cost Elements Within the G&A Expense Pool	Contractor Fiscal Year Prior Yr 3	Contractor Fiscal Year Prior Yr 2	Contractor Fiscal Year Prior Yr 1	Contractor Fiscal Year _____	Contractor Fiscal Year _____	Contractor Fiscal Year _____	Contractor Fiscal Year _____	Contractor Fiscal Year _____	Contractor Fiscal Year _____
Labor:									
Labor Related Cost:									
B&P									
IR&D									
Corporate Allocations:									
Other (Specify):									
Total G&A Pool Expenses									
Base of Distribution (identify) Dollars:									
Existing Base									
Forecasted Base*									
Contractor FY Rate (%)									
Conversion of Contractor FY G&A Rate to Contract Year (CY)				CY 1	CY 2	CY 3	CY 4	CY 5	CY 6
Proposed G&A Bid Rate by CY									

If more than one G&A Pool is proposed, submit a separate Exhibit for each Pool.
*Provide details of the forecasted base.

General and Administrative (G&A) Expenses. These are management, financial, and other expenses related to the general management and administration of the business unit as a whole. To be considered a G&A Expense of a business unit, the expenditure must be incurred by, or allocated to, the general business unit. Examples of G&A Expense include:

Salary and other costs of the executive staff of the corporate or home office.
Salary and other costs of such staff services as legal, accounting, public relations, and financial offices
Selling and marketing expenses

Typical Costs Found in a G&A Expense Pool

General & executive office
Staff services (legal, accounting, public relations, financial)
Selling and marketing
Corporate or home office
Independent research and development (IR&D)
Bid and proposal (B&P)
Other miscellaneous activities related to overall business operation

Proposing Entity:
[ ] **Prime Offeror** OR [ ] **Significant Subcontractor**

RFP NNH14496602R

EXHIBIT 6
OTHER SUBCONTRACTS

RTO NO.	WBS(s)	SUBCONTRACTOR	DESCRIPTION OF EFFORT	TYPE OF CONTRACT	PRIME PROPOSED SUB HOURS	PRIME PROPOSED SUB PRICE
TOTAL						

This exhibit contains Source Selection Information. See FAR 3.104.

Proposing Entity:
[ ] **Prime Offeror** OR [ ] **Significant Subcontractor**

EXHIBIT 7
MATERIAL BY RTO
RTO No. ____

CONTRACT YEAR	WBS	NOMENCLATURE	PART NUMBER	QUANTITY REQUIRED	UNIT PRICE	TOTAL PRICE
TOTAL						

Proposing Entity:
[ ] **Prime Offeror** OR [ ] **Significant Subcontractor**

RFP NNH14496602R

EXHIBIT 8
TRAVEL BY RTO
RTO No. _____

CONTRACT YEAR	WBS	ORGIN/DESTINATION	PURPOSE	# OF TRIPS	# OF PEOPLE	# OF DAYS	PER DIEM	AIRFARE	CAR RENTAL	MISC EXPENSE	TOTAL
TOTAL											

This exhibit contains Source Selection Information. See FAR 3.104.

Proposing Entity:
[ ] **Prime Offeror** OR [ ] **Significant Subcontractor**

RFP NNH14496602R

EXHIBIT 9
OTHER DIRECT COSTS (ODC) BY RTO
RTO No. _____

CONTRACT YEAR	WBS	DESCRIPTION	QUANTITY REQUIRED	UNIT PRICE	TOTAL PRICE
TOTAL					

This exhibit contains Source Selection Information. See FAR 3.104.

EXHIBIT 10
PHASE-IN COSTS

Elements of Cost	Proposed Costs
DIRECT LABOR HOURS *(Derived from Page 2 of 2)*	
DIRECT LABOR COST *(Derived from Page 2 of 2)*	
OVERHEAD	
OTHER DIRECT COSTS:	
Relocation	
Training	
Subcontracts	
Travel	
Other (detail)	
TOTAL ODCS	
SUBTOTAL COSTS	
G&A	
TOTAL COSTS	
PROFIT	
TOTAL FIRM FIXED PRICE	

EXHIBIT 10-A
DIRECT LABOR PHASE-IN COSTS

Contract Direct Labor Categories	Hours	Proposed Rates	Proposed Costs
TOTAL PHASE-IN DIRECT LABOR COSTS			

Proposing Entity:

[ ] **Prime Offeror** OR [ ] **Significant Subcontractor**

RFP NNH14496602R

EXHIBIT 11
PRODUCTIVE WORK YEAR CALCULATION

	Contract Year 1	Contract Year 2	Contract Year 3	Contract Year 4	Contract Year 5
Total Possible Hours in Year					
Less:					
Vacation in Hours					
Holidays in Hours					
Sick Leave in Hours					
Miscellaneous in Hours (specifically identify)					
PRODUCTIVE WORK YEAR in Hours (Hours Actually Worked)					

Proposing Entity:
[ ] **Prime Offeror** OR [ ] **Significant Subcontractor**

EXHIBIT 12-A
FRINGE BENEFITS (FB)
(Total Compensation Plan)

Exempt Employees

Company Or Division Name:
Employer Location(s):
Effective:

Benefit Item	Total Cost of FB per Hour	Percentage AND Cost Per Hour of Employee Contribution		Percentage AND Cost Per Hour of Company Contribution		Remarks
		%	$	%	$	
Insurance Plans Health Life Dental Disability Other (List)						
Sick Leave						
Employee Savings						
Severance Pay						
Vacation						
Holidays						
Other (List)						
Total Cost of FB						

NOTE: This is a SAMPLE format only and reflects examples of fringe benefit items your company package may include. All costs should be shown in cents-per-hour (9 Holidays = $.185). It is recognized that such costs will be averages for the different employee categories involved (EXEMPT, UNION, etc.). Each benefit item should be briefly highlighted. EXAMPLE: Vacation – "2 weeks after one year, 3 after seven years, and 4 after fifteen years." Only company costs should be shown, if a specific benefit item is contributory by the employee, explain separately.

This exhibit contains Source Selection Information. See FAR 3.104.

Proposing Entity:
[ ] **Prime Offeror** OR [ ] **Significant Subcontractor**

EXHIBIT 12-B
FRINGE BENEFITS (FB)
(Total Compensation Plan)

Non-Exempt Employees

Company Or Division Name:
Employer Location(s):
Effective:

Benefit Item	Total Cost of FB per Hour	Percentage AND Cost Per Hour of Employee Contribution		Percentage AND Cost Per Hour of Company Contribution		Remarks
		%	$	%	$	
Insurance Plans Health Life Dental Disability Other (List)						
Sick Leave						
Employee Savings						
Severance Pay						
Vacation						
Holidays						
Other (List)						
Total Cost of FB						

NOTE: This is a SAMPLE format only and reflects examples of fringe benefit items your company package may include. All costs should be shown in cents-per-hour (9 Holidays = $.185). It is recognized that such costs will be averages for the different employee categories involved (EXEMPT, UNION, etc.). Each benefit item should be briefly highlighted. EXAMPLE: Vacation – "2 weeks after one year, 3 after seven years, and 4 after fifteen years." Only company costs should be shown, if a specific benefit item is contributory by the employee, explain separately.

This exhibit contains Source Selection Information. See FAR 3.104.

Proposing Entity:
[ ] **Prime Offeror** OR [ ] **Significant Subcontractor**

EXHIBIT 13-A
Cognizant Defense Contract Audit Agency (DCAA) Office Information

DCAA Online Info http://www.dcaa.mil

Submitting Entity:		DCAA Field Audit Office (FAO):	
Company Name:		DCAA FAO:	
POC:		POC:	
Phone Number:		Phone Number:	
FAX Number:		FAX Number:	
E-Mail Address:		E-Mail Address:	
Street:		Street:	
P.O.Box:		P.O.Box:	
City:		City:	
State:		State:	
Zip Code:		Zip Code:	

Note: The submitting entity audit point of contact (POC) and address provided above must be at a location where auditable records supporting the proposed amounts physically reside.

Proposing Entity:
[ ] **Prime Offeror** OR [ ] **Significant Subcontractor**

RFP NNH14496602R

EXHIBIT 13-B
Cognizant Defense Contract Management Agency (DCMA) Office Information

DCMA Online Info http://www.dcma.mil

	Submitting Entity:		**DCMA Cognizant Office:**
Company Name:		DCMA Office	
POC:		POC:	
Phone Number:		Phone Number:	
FAX Number:		FAX Number:	
E-Mail Address:		E-Mail Address:	
Street:		Street:	
P.O.Box:		P.O.Box:	
City:		City:	
State:		State:	
Zip Code:		Zip Code:	

Disclosures:	Date	Audit Report #	Status
Contractor Estimating System Review (CESR)			
Contractor Purchasing System Review (CPSR)			
Contractor Billing System Review			
Contractor Accounting System Review			
Contractor Disclosure Statement Accuracy			
Contractor Executive Compensation Review			
Contractor Property Management System			
Forward Pricing Rate Agreements			
Earned Value Management System (EVMS)			
Level of CAS applicability			
Determination of Cost Accounting Standards (CAS) applicability			

Note: The submitting entity audit point of contact (POC) and address provided above must be at a location where auditable records supporting the proposed amounts physically reside.

Proposing Entity:
[ ] **Prime Offeror** OR [ ] **Significant Subcontractor**

RFP NNH14496602R

EXHIBIT 14
SMALL BUSINESS SUBCONTRACTING PLAN GOALS

BUSINESS CATEGORY	PROPOSED GOALS BASED ON IDIQ MAXIMUM ORDERING VALUE of $???M		PROPOSED GOALS BASED ON TOTAL PLANNED SUBCONTRACTS of $TBP	
	Dollar Amount*	Percentage	Dollar Amount*	Percentage
Small Disadvantaged Business Concerns				
Women-Owned Small Business Concerns				
Historically Black Colleges and Universities/Other Minority Institutions				
HUBZone Small Business Concerns				
Veteran-Owned Small Business Concerns				
Service-Disabled Veteran-Owned Small Business Concerns				
Other Small Business Concerns				
TOTAL SMALL BUSINESS SUBCONTRACTING				
Large Business Concerns				
TOTAL SUBCONTRACTING (SMALL & LARGE BUSINESS CONCERNS)				

* Dollar Amount should be the same