

**FEDERAL AVIATION ADMINISTRATION
SIMPLIFIED PURCHASE SUMMARY**

Requisition No.

Purchase Order No.

Vendor's Name:

TIN:

UEI:

Phone:

Fax:

Address:

City:

State:

Zip:

Note: Enter an "x" in the box to the left of all applicable items.

1. ☐ Supply ☐ Service

2. Basis for Award:

- ☐ SAVES/National Contract #
- ☐ UNICOR
- ☐ Ability One
- ☐ SEDB/8(a)
- ☐ HUB Zone Small Business
- ☐ Women-Owned Small Business *
- ☐ Economically Disadvantaged Women Owned Small Business *
- ☐ Small Disadvantaged Business
- ☐ Small Business
- ☐ Large Business
- ☐ Single Source (See attached) *
- ☐ GSA/FSS **
 - Complete Number 3 Below
 - Complete Number 4 Below

3. Basis for Determining Fair and Reasonable Price in the Best interest of the FAA (AMS 3.2.2.5.4.1 & T3.2.1A.1):

Low Quote (See Reverse Side)

Comparison with published price lists, catalogs, or advertisements (Specify Source in Number 6 below)

Comparison of prices paid previously for similar items within the last 6 months (List Awards in Number 6 below)

Other: Specify in Number 6 below

4. Basis for Determining that the use of GSA/FSS is FAA's best interest and represents the best value to FAA:

5. ☐ Checked Debarred List/Excluded Parties List System for Award Management (SAM) : <http://sam.gov>

6. Remarks:

7. Vendor is Considered Responsible Based on:

8. Background Investigation Requirements:

- ☐ Background Investigation Required
- ☐ Escort Required
- ☐ No Access to FAA Facilities/Resources/Service Information

Signature of Preparer:

Date:

Signature of Contracting Officer:

Date:

Name of Contracting Officer (Printed):

SIMPLIFIED PURCHASE SUMMARY (Continued)

Quotes/Pricing Information: ☐ See Below ☐ Attached

Quotes/Pricing Information

Vendor's Name			
Address			
City, State, Zip			
Telephone/Fax			
Point of Contact			
Delivery Time			
F.O.B. Point			
Payment Terms			
Type of Business			
GSA Contract Number			
Contract/BPA Number			
DOL Wage Determination #			

[illegible]