

DEPARTMENT OF HOMELAND SECURITY  
**SIMPLIFIED ACQUISITION SUMMARY**

Purchases over \$25,000

1. Requisition No. \_\_\_\_\_

2. Purchase Order No. \_\_\_\_\_

**3. Required sources of Supply for contract or order**

- DHS wide contract                       Open Market  
 Federal Prison Industries               Reverse Auction  
 JWOD (FAR 8.7)                           Interagency Agreement (FAR 17.5)  
 GSA Schedule Order                       Other GWAC

4. Procurement Value \$ \_\_\_\_\_

**5. Competed:**

- Yes (Complete page 2)  
 No (Attach justification)

6. NAIC Code \_\_\_\_\_

**7. Solicitation**

- a. Purchase description: \_\_\_\_\_  
b. This is a FAR 13.5 acquisition :  Yes     No  
c. The Requirement is an economic purchase quantity (FAR 13.101(a)(1)):  Yes     No  
d. RFQ was published in FEDBizopps (FAR 5.2)  Yes     No, (Attach explanation)  
e. RFQ was issued on \_\_\_\_\_  Oral RFQ     Written RFQ  
f. Request prompt payment and trade discounts:  Yes     No  
g. Number of quotes received \_\_\_\_\_  Oral Quotes     Written Quotes  
(Complete page 2 for each quote received)

**8. Quote Evaluation (Check one and attach quote evaluation)**

- Best Value  
 Low cost technically acceptable  
 Sole Source price/cost analysis  
 Unpriced order; explain reason and specify monetary limit (FAR 13.502-2(b)); includes FAR Clause 52.213-3 with order.  
 Other (Specify): \_\_\_\_\_  
Transportation requirements evaluated  Yes     No  
Telecommuting evaluated  Yes     No  
Options evaluated  Yes     No

**9. Price Reasonableness (Check one and attach information relied upon)**

- a.  Based on Competition  
b.  Based on Market Research (Include market research report and independent government estimate in file)  
c.  Based on Comparison with other prices (Catalogs, previous purchase, prices for similar items)  
d.  Based on Comparison with Independent Government Cost Estimate (IGCE)  
e.  Cost Analysis or Other (Attach analysis)

**10. Award Information**

- a. Commercial Item:  Yes     No  
b. Includes inspection and acceptance criteria:  Yes     No  
c. Received prompt payment or trade discount of \_\_\_\_\_

**11. Awardee Information**

- a. Contractor is listed in CCR:  Yes     No (Attach waiver form CCR)  
b. Contractor DUNS number: \_\_\_\_\_  
c. Contractor TIN Number: \_\_\_\_\_  
d. The firm does not appear on the Excluded Parties list available at [www.epls.gov](http://www.epls.gov). (FAR 9.4)  
e. Contractor determined responsible:  Yes (Attach DHS form or SBA determination)  No  
f. Type of Small Business (check all that apply):  
 Small Disadvantage Business     HubZone  
 Award under 8(a) Program     Veteran Owned Small Business  
 Woman Owned Business     Service Disabled Veteran Owned Small Business

**Other Comments**

(Preparer's Name and Signature)/(Date)

(Reviewer's Name and Signature)/(Date)

DEPARTMENT OF HOMELAND SECURITY  
**SIMPLIFIED ACQUISITION SUMMARY (Page 2)**  
Purchases over \$25,000

| Firm's name  |     |      |            |           |            |           |            |           |
|--|-----|------|------------|-----------|------------|-----------|------------|-----------|
| Address/Tel No./Fax No./Email                          |     |      |            |           |            |           |            |           |
| Person Contacted                                       |     |      |            |           |            |           |            |           |
| Date Called/Offer Received                             |     |      |            |           |            |           |            |           |
| Delivery Date/Timeframe                                |     |      |            |           |            |           |            |           |
| F.O.B. Point (Origin or Destination)                   |     |      |            |           |            |           |            |           |
| Payments Terms (Not to be part of the evaluated price) |     |      |            |           |            |           |            |           |
| Type of Business (Large or Type of Small Business)     |     |      |            |           |            |           |            |           |
| CONTRACT NO. (if applicable)                           |     |      |            |           |            |           |            |           |
| DOL Wage Determination No. (If applicable)             |     |      |            |           |            |           |            |           |
| ITEM   | QTY | UNIT | UNIT PRICE | EXTENSION | UNIT PRICE | EXTENSION | UNIT PRICE | EXTENSION |
|  |     |      |            |           |            |           |            |           |
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| Proposed Price   |     |      |            |           |            |           |            |           |
| Discount (Trade or Quantity)                           |     |      |            |           |            |           |            |           |
| Estimated Shipping Cost                                |     |      |            |           |            |           |            |           |
| Total Price  |     |      |            |           |            |           |            |           |