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| ***[INSERT WHITE PAPER TITLE]*****Supporting Cost Data****OFFEROR NAME** |
| **Program Funds** |
| **Type** | **Description *– The below information is required to describe each proposed cost.*** | **Amount** |
| Labor – LEAD only | [List each labor category with associated **unburdened** labor rate and hours.] |  |
| Travel – LEAD only | [List # of trips, # of days and travelers per trip, destination, purpose of trip, and cost per trip.] |  |
| Team Members | [List each team members and their associated funding less material/equipment.] |  |
| Material/Equipment – For all team members | [List all items (including item description, quantity, unit of measure, and unit price) and provide basis of cost for each (i.e., catalog pricing, vendor quote, previous purchase, etc.) Additional support documentation is required for any item proposed over $10,000.] |  |
| Other Direct Costs – LEAD only | [List all items (including item description, quantity, unit of measure, and unit price) and provide basis of cost for each (i.e., catalog pricing, vendor quote, previous purchase, etc.). Additional support documentation is required for any item proposed over $10,000.] |  |
| Indirect Costs – LEAD Only  | [Provide an estimate of the total indirect costs and provide data to support indirect cost rates by one of the required methods (see Panel Project Guide Vol 1).] |  |
|  | **Subtotal – Program Funds** |  |
| Government Participants | [List each Government Participant and their required funding.] |  |
|  | **Total Program Funds – not to exceed $150,000** |  |
| **COST SHARE (not required-and does NOT count against the “Total Program Funds” line above)** |
| **Type** | **Description** | **Amount** |
| Cash (labor, travel, etc.) | Identify the contributing project participant(s) |  |
| In Kind (Use of equipment, space/ buildings, intellectual property) | Must provide basis of cost. |  |
|  | **Total Cost Share** |  |

*Required Cost Data Table Certifications*

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| **1. Prime contractor and all subcontractors will abide by the terms and conditions of the NSRP Base Task Order Agreement.** |
| If not, please provide reason here.  |
| **2. Request ATI to do the Contracting on this project (only applicable to ECB Member Shipyards who are prime contractors and have ECB Member Shipyards as subcontractors over $10K)** |
| Insert request in this block and list the ECB Member Shipyards. |
| **3. The Government will obtain Government Purpose Rights to all intellectual Property (IP) developed under this NSRP Project. Any request for specifically negotiated rights other than Government Purpose Rights must be disclosed in White Paper Submission.**  |
| If not, please provide reason here. |
| **4. The preferred Payment Method is “Expenditure Based”. Use of the “Fixed-Support” Payment Method is limited only to organizations whose accounting systems do not have the capability to collect and invoice based on actual costs incurred. Offerors who request Fixed Support task orders will have to complete a Business System Information Questionnaire.** |
| Insert preferred Payment Method in this block. |
| **5. I certify that the proposed costs included with this Cost Table do not contain any fee or profit.** |
| **6. I certify that the proposing organization is a [INSERT TYPE] (Small Business or Commercial Organization).** |

 *Authorized Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

 Printed Name: *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

 Printed Title: *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

 Date: *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*