

# INDEPENDENT GOVERNMENT COST ESTIMATE

1. Estimate of the Contract Price: \$

2. Rationale for Government Cost Estimate (more than one block may be checked):

- Catalog Price \_\_\_\_\_ (catalog number)
- GSA Schedule # \_\_\_\_\_
- BPA # \_\_\_\_\_
- Previous Contract Number of similar supply/service \_\_\_\_\_
- Other (identify source of data for all hours/other direct costs):

3. Options  Yes (see #4 below)  No (skip to #5 below)

4. Justification for options:

5. Assumptions or constraints affecting the estimate:

6. Type of Contract:  T&M  Firm Fixed Price  Cost Reimbursement  
 Labor Hour  Other (identify type) \_\_\_\_\_

SUBMITTER:

DATE:

**ACQUISITION SENSITIVE  
MUST NOT BE RELEASED TO PROSPECTIVE OFFEROR**