

Purchasing Checklist and Competitive Sourcing Form

(Sponsored Transactions in excess of \$250K)

Requestor's Name: **Jane Smith** Requestor's UNI: **JS9876** Date: **7/1/2018**

Requisition or Purchase Order Number (if available/applicable): 0000987654

To comply with University Purchasing Policy, Uniform Guidance and other government regulations, completion of this Purchasing Checklist and Bid Summary Form is required for all transactions \$250K or greater when using non-UwPA suppliers. This form must be completed and sent to the Purchasing Department with all supporting documentation upon completion of a Purchase Requisition or PO. Failure to do so will delay the processing of your transaction and potentially rejected back to the requestor for reprocessing.

NOTE: IF SOLE/SINGLE SOURCE JUSTIFICATION IS BEING REQUESTED PLEASE PROCEED TO COMPLETING THE ON-LINE SOLE/SINGLE SOURCE FORM. THIS FORM IS NOT REQUIRED.

SECTION I

FEDERAL FUNDS? YES NO

OTHER SPONSORED FUNDS? YES NO

This purchase is being requested based on a competitively sourced basis;

If applicable, list at least three (3) competitive quotations/proposals solicited and received: Circle or mark the number indicating your chosen supplier. Please be sure to provide documented quotes/bids/proposals in accordance with the Competitive Procurement Policy located at <http://policylibrary.columbia.edu/competitive-procurement>.

	<u>Supplier Name</u>	<u>Items/Services Price plus any other charges</u>	<u>Shipping Cost &/ FOB Point *</u>	<u>Payment for and/or Discount Terms *</u>	<u>Total Order Price</u>
1	Waters	LC/MS \$ 295,000	\$ 4350 PPY/Add	20/80	\$ 299,350
2	Agilent	LC/MS \$ 325,000	FOB Dest/ Incl	Net 30	\$ 325,000
3	Thermo Electron	LC/MS \$ 376,500	FOB Dest/ Incl	Net 30	\$ 376,500
			<i>(* i.e. \$350/Dest or \$350/Origin)</i>	<i>(* i.e. 2%10 Net30 or 10% Edu.)</i>	

Explain criteria for supplier selection. Use either the price or cost analysis templates available on the Purchasing website to provide the required financial information to support your supplier selection. *(please attach copies of quotes/proposals received, as required)*

Check the reason that you chose this supplier or Service Provider:

- Supplier was the low bidder
- Supplier provided the best evaluated responsible offer (other than low bidder) – provide evaluation criteria
- Supplier establishes or maintains an essential research, development or engineering capability (requires a completed sole/single source)
- Supplier specifically identified within sponsored award documentation – provide verification (requires a completed sole/single source)
- Supplier/consultant is the only manufacturer/provider of this good or service (requires a completed sole/single source)
- Compatibility with other components of a system already in operation – identify existing items (directed source) *
- Other *

* Requires explanation; attach supporting documentation:

Price/Cost Analysis Based on: *(check all that apply and provide supporting documentation in all cases)*

- | | |
|---|--|
| <input checked="" type="checkbox"/> Adequate price competition (provide price analysis) | <input type="checkbox"/> Catalog/Market Pricing (provide copies/prints of pricing) |
| <input type="checkbox"/> Comparison to in-house estimate* | <input type="checkbox"/> Comparable Customer's Invoice (provide documents) |
| <input checked="" type="checkbox"/> Comparable to Price Sold to Fed. Gov't. | <input type="checkbox"/> Historical pricing (Provide previous PO#) |
| <input type="checkbox"/> Comparison to similar items* | <input type="checkbox"/> Cost Analysis (provide cost analysis worksheet) |
| <input type="checkbox"/> Award specifically identifies item/person and price | |

Summary of analysis; attach supporting documentation ***(use Competitive Sourcing Price Summary Form)***:

GSA Pricing certified by supplier.

Any negotiations should be documented below:

Supplier Quotation

Estimated Price

Negotiated Price

Savings
(Quotation less Negotiated)

Negotiation Summary: (If estimate not met, explain difference)

Not applicable low bidder selected with GSA pricing.

Note: If federal government funds are being used and the order is over \$150,000, FAR Part 19.702 requires that certain types of small businesses (i.e., disadvantaged, women-owned, veteran-owned, service disabled veteran-owned and HUBZone) shall have the maximum practicable opportunity to participate in contract performance consistent with its efficient performance. Were any of the following groups solicited (*circle all that apply*)?

YES ___ NO X

Small

Disadvantaged

HUBZone

Women-owned

Veteran-owned

Service Disabled Veteran-owned

If not solicited, explain why not:

No small or disadvantaged, women or minority or service disabled and HUBZone vendors exist in the industry for the respective instrument being sought due to enormous resources required to support the technology and manufacturing of such instruments.

If solicited and not chosen, explain why not:

NA

Department Approval Name: John Doer Dept Administrator Department Approval Signature: _____ Date: _____

(other than Preparer)

Purchasing Department Reviewer: _____

Date: _____