



Purchase Review Checklist

Section A - Customer Information

1. Is this an existing customer? **Y / N**
2. Are there any significant changes to products/services requested or new products? **Y / N**
(If No complete Sections B, D, & F only).

For New Customers, Products, and/or Services:

3. Company Name: _____
Address: _____
Contracting Officer: _____
Phone: _____
Email: _____

FFL: **Y / N**

FFL copy on hand? **Y / N / NA**

Credit Check Authorization: **Y / N / NA**

Credit Approval: **Y / N / NA**

PO Verification:

- PO #: _____
Contract #/Procurement Instrument: _____
Invoice Remittance Information: _____
Payment Terms: _____
Discount Terms:
☐ Early Pay & Discount Requested: _____
☐ N/A
Method of Payment:
☐ Electronic Funds ☐ Check ☐ Credit Card
☐ Other: _____

Section B - Service/Product Requested and Prices

Outside services required to complete job: _____
Quantity Requested: _____
Unit of Measure: _____
Unit Price: _____
Tooling Price: _____



Add'l Items: _____ Cost: _____
Amount: _____
Disbursement Schedule: _____

☐ Level 1 - Assembly

Item #: _____
Parts or Kits Provided: Y / N / NA
Exhibits/Drawings Provided: Y / N / NA

☐ Level 2 - CNC

Item #: _____
Parts or Kits Provided: Y / N / NA
Programming Provided: Y / N / NA

☐ Level 3 - Manufacturing

Item #: _____
Parts or Kits Provided: Y / N / NA
Exhibits Provided: Y / N / NA

Section C - Description/Specifications/Statement of Work

Are critical safety items being ordered? Y / N
Are the quality requirements included? Y / N
What are the acceptance/rejection criteria? _____
Are verification operations required? Y / N
If YES, What are the verification requirements? _____
Where in the manufacturing sequence are verification operations required? _____
What measurement results must be retained? _____
What specific monitoring and measurement equipment is required? _____
Are there special instructions for the use of the required measuring instruments? Y / N / NA
Are there special instructions for material sourcing? Y / N
Are there "optional" design elements? Y / N If so, are tolerances provided? Y / N / NA

Section D - Inspection and Acceptance

First Article Quantity: _____
First Article Due Date: _____
Inspection Location: _____
Acceptance Timeframe: _____



Section E - Shipping

Are there special packaging instructions? Y / N

Are there special marking instructions? Y / N

FOB:

☐ Destination

☐ Origin

Shipping Company: _____

Client Account #: _____

☐ Freight

☐ Standard

Delivery Schedule: _____

Ship To Information: _____

Section F - Special Contract Requirements

Certifications

☐ ISO9001

☐ AS9100

☐ ITAR

☐ FFL

☐ Other: _____

☐ N/A

Retention Requirements: _____

DPAS Rating: D__ - __ N/A

Reviewers Name and Authorization:

Name/Title

Acceptance Yes / No

Signature

Date