

SUPPLY CHAIN ASSESSMENT (DISTRIBUTORS)

SUPPLIER INFORMATION

Company Name:		
Address:		
City:	State:	Country (if outside USA):
Name & Title of person completing this assessment:		
Phone:	Email:	

BUSINESS INFORMATION

Distributor for: Primary Product(s)/Services(s)		
Are there multiple business locations? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, please indicate the following: <input type="checkbox"/> same as above		
Headquarters Name:		
Headquarters City:	State:	Country:

QUALITY MANAGEMENT SYSTEM REGISTRATIONS/CERTIFICATIONS

<ul style="list-style-type: none"> Attach a current copy of the certificate for each registered standard For policies not registered/certified, attach documentation supporting compliance (e.g., policy, quality manual, etc.) 		
<input type="checkbox"/> AS5553 Counterfeit Electronic Parts	<input type="checkbox"/> Registered	<input type="checkbox"/> Compliant
<input type="checkbox"/> AS6081 Fraudulent/Counterfeit Electronic Parts	<input type="checkbox"/> Registered	<input type="checkbox"/> Compliant
<input type="checkbox"/> AS9100D QMS for Aviation, Space, and Defense	<input type="checkbox"/> Registered	<input type="checkbox"/> Compliant
<input type="checkbox"/> AS9120B Distributor of parts, materials, assemblies	<input type="checkbox"/> Registered	<input type="checkbox"/> Compliant
<input type="checkbox"/> AS9115 Deliverable Software (Supplement to 9100:2016)	<input type="checkbox"/> Registered	<input type="checkbox"/> Compliant
<input type="checkbox"/> CMMI for Development	<input type="checkbox"/> Registered	<input type="checkbox"/> Compliant
<input type="checkbox"/> ISO/IEC 20000-1 Information Technology	<input type="checkbox"/> Registered	<input type="checkbox"/> Compliant
<input type="checkbox"/> ISO9001-2015 QMS	<input type="checkbox"/> Registered	<input type="checkbox"/> Compliant
<input type="checkbox"/> ISO/IEC/IEEE 90003:2018 Software Engineering (Application of ISO9001 to computer software)	<input type="checkbox"/> Registered	<input type="checkbox"/> Compliant
<input type="checkbox"/> ISO/IEC 27001 Information Security Management	<input type="checkbox"/> Registered	<input type="checkbox"/> Compliant
<input type="checkbox"/> ISO 37001 Anti-bribery Management Systems	<input type="checkbox"/> Registered	<input type="checkbox"/> Compliant
<input type="checkbox"/> Other Standard (please list):	<input type="checkbox"/> Registered	<input type="checkbox"/> Compliant
<input type="checkbox"/>	<input type="checkbox"/> Registered	<input type="checkbox"/> Compliant
<input type="checkbox"/> We have Quality Assurance policies that are not affiliated with specific recognized standards.		
<input type="checkbox"/> We currently do not have any Quality Assurance policies, but will establish quality policies to meet this requirement if awarded a subcontract. (Suggested assistance and templates are available at https://www.nmptac.org/ or https://www.nmptac.org/resources/ .)		

Note: All No or NA responses require an explanation in the comments section.	
Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	1. Does your organization have a certified/authorized Distributor Letter from the company whose products you represent? If yes, please provide as supporting documentation. Comments:
Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	2. Do you handle and process inventory in your facility? If yes, does your organization have a component disposal inventory process or method? Are component disposal records maintained? Comments:
Yes <input type="checkbox"/> No <input type="checkbox"/>	3. Does your organization have a documented process for detecting, preventing, and addressing counterfeit items? If No , please explain:

SUPPLY CHAIN ASSESSMENT: DISTRIBUTORS

	<input type="checkbox"/> N/A because we do not sell items/products. <input type="checkbox"/> We currently do not have a counterfeit items process but will establish a documented policy to meet this requirement if awarded a subcontract. (Suggested assistance and templates are available at https://www.nmptac.org/ or https://www.nmptac.org/resources/).
Yes <input type="checkbox"/> No <input type="checkbox"/>	4. Is there a documented policy or procedure for protecting electronic data and systems from unauthorized viewing/use? Comments:
Yes <input type="checkbox"/> No <input type="checkbox"/>	5. Does your organization subscribe to and maintain antivirus product on all employee workstations? What antivirus software or products are used? Comments:
Yes <input type="checkbox"/> No <input type="checkbox"/>	6. Have you ever experienced a significant cybersecurity incident or data breach? If Yes , please define the incident and describe remediation actions:
Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	7. Are you able to provide or obtain Statement of Volatility documentation detailing both volatile and non-volatile components, memory type and size, purpose, and sanitization guidance with all deliverables? If Yes , please attach. Comments:
Yes <input type="checkbox"/> No <input type="checkbox"/>	8. Does your organization provide or manage device, system, or component service and repairs? (a) If Yes , is there a designated process for managing chain of custody and inventory tracking for repaired/serviced devices returning to customers? <input type="checkbox"/> Yes <input type="checkbox"/> No Comments:
Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	9. Are products and components secured and identified at <u>all</u> times while in your facility? Comments:
Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	10. Are products packaged in a manner to prevent damage during shipment? Comments:
Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	11. In your facility, are nonconforming products segregated from conforming products? Comments:
Yes <input type="checkbox"/> No <input type="checkbox"/>	12. When requested, is there a process to investigate and resolve rejected products and/or services found by the customer and implement corrective action to prevent future reoccurrence? Comments:
	13. Check <u>all</u> types of inspection performed in this facility: <input type="checkbox"/> INCOMING <input type="checkbox"/> IN-PROCESS <input type="checkbox"/> FINAL <input type="checkbox"/> AUDIT

Date: _____

Signature (person completing assessment) _____

SUPPLY CHAIN ASSESSMENT: DISTRIBUTORS

This report may be shared with the Dept. of Energy (DOE), National Nuclear Security Administration (NNSA), and with other DOE/NNSA operating subcontractors.

For NTESS/Sandia Internal Use Only		
Reviewed by:	Organization:	Date:
Status		
Approved: <input type="checkbox"/>	Conditional: <input type="checkbox"/>	Not Approved: <input type="checkbox"/>