

<b>SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS</b> OFFEROR TO COMPLETE BLOCKS 12, 17, 23, 24, AND 30			1. REQUISITION NUMBER HQCMCY21842700000	PAGE 1 OF 38
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2. CONTRACT NO. HDEC04-13-C-0033	3. AWARD/EFFECTIVE DATE 01-May-2013	4. ORDER NUMBER	5. SOLICITATION NUMBER HDEC04-12-R-0083	6. SOLICITATION ISSUE DATE 18-Sep-2012
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7. FOR SOLICITATION INFORMATION CALL:	a. NAME PAMELA H. JACKSON	b. TELEPHONE NUMBER (No Collect Calls) (804) 734-8000 EXT 48767	8. OFFER DUE DATE/LOCAL TIME 04:00 PM 30 Oct 2012
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9. ISSUED BY DEFENSE COMMISSARY AGENCY SUPPLY & EQUIPMENT DIVISION BUILDING P 11200 1300 E AVENUE FORT LEE VA 23801-1800  TEL: FAX: (804) 734-8269/8886	CODE HDEC04	10. THIS ACQUISITION IS <input type="checkbox"/> UNRESTRICTED <input checked="" type="checkbox"/> SET ASIDE: 100% FOR <input checked="" type="checkbox"/> SB <input type="checkbox"/> HUBZONE SB <input type="checkbox"/> 8(A) <input type="checkbox"/> SVC-DISABLED VET-OWNED SB <input type="checkbox"/> EMERGING SB SIZE STD: 7.0M NAICS: 811310	11. DELIVERY FOR FOB DESTINATION UNLESS BLOCK IS MARKED <input type="checkbox"/> SEE SCHEDULE	12. DISCOUNT TERMS
			13a. THIS CONTRACT IS A RATED ORDER UNDER DPAS (15 CFR 700) 13b. RATING 14. METHOD OF SOLICITATION <input type="checkbox"/> RFQ <input type="checkbox"/> IFB <input checked="" type="checkbox"/> RFP	

15. DELIVER TO CORPUS CHRISTI NAS COMMISSARY BUILDING 337 10801 D STREET CORPUS CHRISTI TX 78419-5104	CODE HQCMCY	16. ADMINISTERED BY  <b>SEE ITEM 9</b>	CODE
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17a. CONTRACTOR/OFFEROR ALAMO FOOD EQUIPMENT & SUPPLIES, INC. GARY PALMER 6600 GUADA COMA DR SCHERTZ TX 78154-3206  TEL. (210) 651-4343 (800) 292-5352	CODE 1D5W0	18a. PAYMENT WILL BE MADE BY DFAS-WIDE AREA WORK FLOW DFAS - CVDAAA/CO P.O. BOX 369016 COLUMBUS OH 43236-9016	CODE HQ0131
	FACILITY CODE		


<input type="checkbox"/> 17b. CHECK IF REMITTANCE IS DIFFERENT AND PUT SUCH ADDRESS IN OFFER	18b. SUBMIT INVOICES TO ADDRESS SHOWN IN BLOCK 18a. UNLESS BLOCK BELOW IS CHECKED <input type="checkbox"/> SEE ADDENDUM
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19. ITEM NO.	20. SCHEDULE OF SUPPLIES/ SERVICES	21. QUANTITY	22. UNIT	23. UNIT PRICE	24. AMOUNT
<b>SEE SCHEDULE</b>					

25. ACCOUNTING AND APPROPRIATION DATA  See Schedule	26. TOTAL AWARD AMOUNT (For Govt. Use Only)  \$30,780.00
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<input type="checkbox"/> 27a. SOLICITATION INCORPORATES BY REFERENCE FAR 52.212-1. 52.212-4. FAR 52.212-3. 52.212-5 ARE ATTACHED. ADDENDA <input type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED	<input checked="" type="checkbox"/> 27b. CONTRACT/PURCHASE ORDER INCORPORATES BY REFERENCE FAR 52.212-4. FAR 52.212-5 IS ATTACHED. ADDENDA <input checked="" type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED
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28. CONTRACTOR IS REQUIRED TO SIGN THIS DOCUMENT AND RETURN COPIES TO ISSUING OFFICE. CONTRACTOR AGREES TO FURNISH AND DELIVER ALL ITEMS SET FORTH OR OTHERWISE IDENTIFIED ABOVE AND ON ANY ADDITIONAL SHEETS SUBJECT TO THE TERMS AND CONDITIONS SPECIFIED HEREIN.	29. AWARD OF CONTRACT: REFERENCE <input type="checkbox"/> OFFER DATED . YOUR OFFER ON SOLICITATION (BLOCK 5), INCLUDING ANY ADDITIONS OR CHANGES WHICH ARE SET FORTH HEREIN, IS ACCEPTED AS TO ITEMS:
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30a. SIGNATURE OF OFFEROR/CONTRACTOR	31a. UNITED STATES OF AMERICA (SIGNATURE OF CONTRACTING OFFICER) 	31c. DATE SIGNED 25-Apr-2013
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30b. NAME AND TITLE OF SIGNER (TYPE OR PRINT)	30c. DATE SIGNED	31b. NAME OF CONTRACTING OFFICER (TYPE OR PRINT) DIANA GROSS-BENDALL / CONTRACT SPECIALIST TEL: (804) 734-8000 ext 48185 EMAIL: Diana.Gross-Bendall@deca.mil
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**SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS  
(CONTINUED)**

19. ITEM NO.	20. SCHEDULE OF SUPPLIES/ SERVICES	21. QUANTITY	22. UNIT	23. UNIT PRICE	24. AMOUNT
SEE SCHEDULE					

32a. QUANTITY IN COLUMN 21 HAS BEEN  
 RECEIVED  INSPECTED  ACCEPTED, AND CONFORMS TO THE CONTRACT, EXCEPT AS NOTED: \_\_\_\_\_

32b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE	32c. DATE	32d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE
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32e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE	32f. TELEPHONE NUMBER OF AUTHORIZED GOVERNMENT REPRESENTATIVE
	32g. E-MAIL OF AUTHORIZED GOVERNMENT REPRESENTATIVE

33. SHIP NUMBER <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL	34. VOUCHER NUMBER	35. AMOUNT VERIFIED CORRECT FOR	36. PAYMENT <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL	37. CHECK NUMBER
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38. S/R ACCOUNT NUMBER	39. S/R VOUCHER NUMBER	40. PAID BY
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41a. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT	42a. RECEIVED BY ( <i>Print</i> )		
41b. SIGNATURE AND TITLE OF CERTIFYING OFFICER	41c. DATE	42b. RECEIVED AT ( <i>Location</i> )	
		42c. DATE REC'D ( <i>YY/MM/DD</i> )	42d. TOTAL CONTAINERS

Section SF 1449 - CONTINUATION SHEET

ITEM NO	SUPPLIES/SERVICES	ESTIMATED QUANTITY	UNIT	UNIT PRICE	ESTIMATED AMOUNT
0001	Corpus Christi FFP Corpus Christi Commissary Preventative Maintenance & Repair of Miscellaneous Food Processing (MFP) Equipment at Corpus Christi Base Year: May 1, 2013 or "Date of Award" - April 30, 2014.  FOB: Destination				\$0.00
ESTIMATED NET AMT					\$0.00

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0001AA	TIME REPAIR T&M IAW FAR 16.601(a)"Hourly rate" means the rate(s) prescribed in the contract for payment for labor that means the labor category qualification of a labor category specified in the contract that are -- (1) Performed by the contractor; (2) Performed by the subcontractor; or (3) Transferred between division's subsidiaries, or affiliates of the contractor under a common control.  FOB: Destination PURCHASE REQUEST NUMBER: HQCMCY21842700000	288	Hours	\$60.00	\$17,280.00
TOT ESTIMATED PRICE					\$17,280.00
CEILING PRICE					
ACRN AA CIN: HQCMCY218427000000001					\$17,280.00

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0001AB		10,000	Lot	\$1.00	\$10,000.00

PARTS

T&M

This is not a priced CLIN. DeCA will pay actual costs for materials as evidenced by supplier invoice.

IAW FAR 16.601(a)

"Materials" means--

- (1) Direct materials, including supplies transferred between divisions, by supplies transferred between divisions, subsidiaries, or affiliates of the contractor under a common control;
- (2) Subcontracts for supplies and incidental services for which there is not a labor category specified in the contract;
- (3) Other direct costs (e.g., incidental services for which there is not a labor category specified in the contract, travel, computer usage charges, etc.); and
- (4) Applicable indirect costs.

FOB: Destination

PURCHASE REQUEST NUMBER: HQCMCY21842700000

TOT ESTIMATED PRICE \$10,000.00

CEILING PRICE

ACRN AA

CIN: HQCMCY218427000000002

\$10,000.00

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0001AC		8	Quarter (Time)	\$175.00	\$1,400.00
	1M20-A/-B/HV MIXER/GRINDER PM FFP Preventative Maintenance Quarterly of CED 1M20-A/-B/HV FOB: Destination PURCHASE REQUEST NUMBER: HQCMCY21842700000				

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NET AMT \$1,400.00

ACRN AA \$1,400.00  
CIN: HQCMCY218427000000003

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0001AD		8	Quarter (Time)	\$175.00	\$1,400.00
	1M18- BAND TYPE MEAT SAW PM FFP Preventative Maintenance Quarterly of CED 1M18 FOB: Destination PURCHASE REQUEST NUMBER: HQCMCY21842700000				

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NET AMT \$1,400.00

ACRN AA \$1,400.00  
CIN: HQCMCY218427000000004