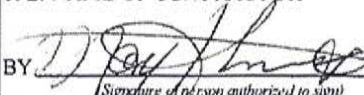


<b>AWARD/CONTRACT</b>		1. THIS CONTRACT IS A RATED ORDER UNDER DPAS (15 CFR 700)		RATING	PAGE OF PAGES 1   62	
2. CONTRACT (Proc. Inst. Ident.) NO. HDEC08-14-C-0002		3. EFFECTIVE DATE 01 Oct 2013		4. REQUISITION/PURCHASE REQUEST/PROJECT NO. HQCMA01770001		
5. ISSUED BY DEFENSE COMMISSARY AGENCY STORE SERVICES SUPPORT DIVISION 1300 E AVENUE FORT LEE VA 23801-1800		CODE HDEC08	6. ADMINISTERED BY (If other than Item 5)  <b>See Item 5</b>		CODE	
7. NAME AND ADDRESS OF CONTRACTOR (No. street, city, county, state and zip code) E AND S DIVERSIFIED SERVICES INC MAYFIELD EVANS 4433 MT VIEW DR ANCHORAGE AK 99508-1721				8. DELIVERY <input type="checkbox"/> FOB ORIGIN <input checked="" type="checkbox"/> OTHER (See below)		9. DISCOUNT FOR PROMPT PAYMENT
				10. SUBMIT INVOICES 1 (4 copies unless otherwise specified) TO THE ADDRESS SHOWN IN: ITEM <b>Block 12</b>		
CODE 0D6P3		FACILITY CODE HQCMA		12. PAYMENT WILL BE MADE BY DFAS-WIDE AREA WORK FLOW DFAS - CVDAAA/CO P.O. BOX 359016 COLUMBUS OH 43235-9016		CODE HQ0131
11. SHIP TO/MARK FOR FORT CARSON COMMISSARY KENNY ADAMS BUILDING 1800 551 PRUSSMAN BLVD FORT CARSON CO 80902		13. AUTHORITY FOR USING OTHER THAN FULL AND OPEN COMPETITION: <input type="checkbox"/> 10 U.S.C. 2304(c)( ) <input type="checkbox"/> 41 U.S.C. 253(c)( )		14. ACCOUNTING AND APPROPRIATION DATA <b>See Schedule</b>		
15A. ITEM NO.	15B. SUPPLIES/ SERVICES	15C. QUANTITY	15D. UNIT	15E. UNIT PRICE	15F. AMOUNT	
<b>SEE SCHEDULE</b>						
<b>15G. TOTAL AMOUNT OF CONTRACT</b>						<b>\$1,768,313.71 EST</b>
<b>16. TABLE OF CONTENTS</b>						
(X) SEC.	DESCRIPTION	PAGE(S)	(X) SEC.	DESCRIPTION	PAGE(S)	
<b>PART I - THE SCHEDULE</b>			<b>PART II - CONTRACT CLAUSES</b>			
X A	SOLICITATION/ CONTRACT FORM	1	X I	CONTRACT CLAUSES	48 - 61	
X B	SUPPLIES OR SERVICES AND PRICES/ COSTS	2 - 36	<b>PART III - LIST OF DOCUMENTS, EXHIBITS AND OTHER ATTACHMENTS</b>			
X C	DESCRIPTION/ SPECS./ WORK STATEMENT	37	X J	LIST OF ATTACHMENTS	62	
	D	PACKAGING AND MARKING	<b>PART IV - REPRESENTATIONS AND INSTRUCTIONS</b>			
X E	INSPECTION AND ACCEPTANCE	38	K	REPRESENTATIONS, CERTIFICATIONS AND OTHER STATEMENTS OF OFFERORS		
X F	DELIVERIES OR PERFORMANCE	39		L	INSTRS., CONDS., AND NOTICES TO OFFERORS	
X G	CONTRACT ADMINISTRATION DATA	40 - 42	M	EVALUATION FACTORS FOR AWARD		
X H	SPECIAL CONTRACT REQUIREMENTS	43 - 47				
<b>CONTRACTING OFFICER WILL COMPLETE ITEM 17 OR 18 AS APPLICABLE</b>						
17. <input checked="" type="checkbox"/> CONTRACTOR'S NEGOTIATED AGREEMENT (Contractor is required to sign this document and return 4 copies to issuing office.) Contractor agrees to furnish and deliver all items or perform all the services set forth or otherwise identified above and on any continuation sheets for the consideration stated herein. The rights and obligations of the parties to this contract shall be subject to and governed by the following documents: (a) this award/contract, (b) the solicitation, if any, and (c) such provisions, representations, certifications, and specifications, as are attached or incorporated by reference herein. (Attachments are listed herein.)				18. <input type="checkbox"/> AWARD (Contractor is not required to sign this document) Your offer on Solicitation Number HDEC08-12-R-0004-0003		
19A. NAME AND TITLE OF SIGNER (Type or print) <b>MAYfield Evans, President</b>				20A. NAME OF CONTRACTING OFFICER <b>margaret.prince@deca.mi</b> TEL: <b>804-734-8000 Ext 486116</b>		
19B. NAME OF CONTRACTOR BY: 		19C. DATE SIGNED <b>9/27/13</b>	20B. UNITED STATES OF AMERICA BY: <b>Margaret Prince</b> (Signature of Contracting Officer)		20C. DATE SIGNED <b>10/1/13</b>	

<b>AWARD/CONTRACT</b>		1. THIS CONTRACT IS A RATED ORDER UNDER DPAS (15 CFR 700)			RATING	PAGE OF PAGES 1   62	
2. CONTRACT (Proc. Inst. Ident.) NO. HDEC08-14-C-0002		3. EFFECTIVE DATE 01 Oct 2013		4. REQUISITION/PURCHASE REQUEST/PROJECT NO. HQCMCA01770001			
5. ISSUED BY DEFENSE COMMISSARY AGENCY STORE SERVICES SUPPORT DIVISION 1300 E AVENUE FORT LEE VA 23801-1800		CODE HDEC08	6. ADMINISTERED BY (If other than Item 5)  <b>See Item 5</b>			CODE	
7. NAME AND ADDRESS OF CONTRACTOR (No., street, city, county, state and zip code) E AND S DIVERSIFIED SERVICE, INC MAYFIELD EVANS 4433 MT VIEW DR ANCHORAGE AK 99508-1721				8. DELIVERY [ ] FOB ORIGIN [ X ] OTHER (See below)			
				9. DISCOUNT FOR PROMPT PAYMENT			
				10. SUBMIT INVOICES 1 (4 copies unless otherwise specified) TO THE ADDRESS SHOWN IN:			ITEM  <b>Block 12</b>
CODE 0D6P3		FACILITY CODE		12. PAYMENT WILL BE MADE BY DFAS-WIDE AREA WORK FLOW DFAS - CVDAAA/CO P.O. BOX 369016 COLUMBUS OH 43236-9016			
11. SHIP TO/MARK FOR FORT CARSON COMMISSARY KENNY ADAMS BUILDING 1800 551 PRUSSMAN BLVD FORT CARSON CO 80902		CODE HQCMCA	CODE			HQ0131	
13. AUTHORITY FOR USING OTHER THAN FULL AND OPEN COMPETITION: [ ] 10 U.S.C. 2304(e)( ) [ ] 41 U.S.C. 253(e)( )				14. ACCOUNTING AND APPROPRIATION DATA <b>See Schedule</b>			
15A. ITEM NO.	15B. SUPPLIES/ SERVICES		15C. QUANTITY	15D. UNIT	15E. UNIT PRICE	15F. AMOUNT	
<b>SEE SCHEDULE</b>							
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X	G	CONTRACT ADMINISTRATION DATA	40 - 42	L	INSTRS., CONDS., AND NOTICES TO OFFERORS		
X	H	SPECIAL CONTRACT REQUIREMENTS	43 - 47	M	EVALUATION FACTORS FOR AWARD		
<b>CONTRACTING OFFICER WILL COMPLETE ITEM 17 OR 18 AS APPLICABLE</b>							
17. [ X ] CONTRACTOR'S NEGOTIATED AGREEMENT Contractor is required to sign this document and return [ ] copies to issuing office. Contractor agrees to furnish and deliver all items or perform all the services set forth or otherwise identified above and on any continuation sheets for the consideration stated herein. The rights and obligations of the parties to this contract shall be subject to and governed by the following documents: (a) this award/contract, (b) the solicitation, if any, and (c) such provisions, representations, certifications, and specifications, as are attached or incorporated by reference herein. <u>(Attachments are listed herein.)</u>				18. [ ] AWARD (Contractor is not required to sign this document.) Your offer on Solicitation Number HDEC08-12-R-0004-0003 including the additions or changes made by you which additions or changes are set forth in full above, is hereby accepted as to the items listed above and on any continuation sheets. This award consummates the contract which consists of the following documents: (a) the Government's solicitation and your offer, and (b) this award/contract. No further contractual document is necessary.			
19A. NAME AND TITLE OF SIGNER (Type or print)				20A. NAME OF CONTRACTING OFFICER MARGARET R PRINCE / CONTRACTING OFFICER TEL: (804) 734-8000 EXT 48616 EMAIL: margaret.prince@deca.mil			
19B. NAME OF CONTRACTOR		19C. DATE SIGNED		20B. UNITED STATES OF AMERICA  BY _____ (Signature of Contracting Officer)		20C. DATE SIGNED 01-Oct-2013	
BY _____ (Signature of person authorized to sign)							



ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0001AB		7,920	Case	\$0.4539	\$3,594.89 EST
	Payment for Excess Overwrites				
	FFP				
	Overwrite cases exceeding 7% of the total monthly cases, as specified in paragraph 4.3.3.8. of the PWS, will be paid at a unit price of 60% of the case price located in SubCLIN AA above. (Note: The quantity shown is an estimated quantity.)				
	FOB: Destination				
	PURCHASE REQUEST NUMBER: HQCMCA01770001				

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NET AMT \$3,594.89 (EST.)

ACRN AB \$3,594.89  
CIN: 00000000000000000000000000000000

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0001AC		100	Hours	\$29.19	\$2,919.00 EST
	Inventory Preparation				
	FFP				
	Perform Inventory Preparation Services in accordance with Attachment 1 (PWS). (Note: The quantity shown is an estimated quantity.)				
	FOB: Destination				
	PURCHASE REQUEST NUMBER: HQCMCA01770001				

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NET AMT \$2,919.00 (EST.)

ACRN AB \$2,919.00  
CIN: 00000000000000000000000000000000





ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0001AH		12	Months	\$32,969.30	\$395,631.60
	Custodial Operations – Sales/Admin Area FFP				
	Provide Custodial Operations in accordance with Attachment 1 (PWS) for all areas except the meat processing, preparation and wrapping area, receiving/storage/holding area, and outside areas.				
	FOB: Destination PURCHASE REQUEST NUMBER: HQCMCA01770001				

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NET AMT \$395,631.60

ACRN AB \$395,631.60  
CIN: 00000000000000000000000000000000

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0001AJ		12	Months	\$7,149.68	\$85,796.16
	Custodial Operations - Meat Room FFP				
	Perform Custodial Operations in accordance with Attachment 1 (PWS) for the meat processing, preparation and wrapping area.				
	FOB: Destination PURCHASE REQUEST NUMBER: HQCMCA01770001				

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NET AMT \$85,796.16

ACRN AB \$85,796.16  
CIN: 00000000000000000000000000000000

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0001AK		12	Months	\$7,387.21	\$88,646.52
	Custodial Operations – RSHA/Outside FFP Perform Custodial Operations in accordance with Attachment 1 (PWS) for the receiving/storage/holding area and all outside areas.				
	FOB: Destination PURCHASE REQUEST NUMBER: HQCMCA01770001				

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NET AMT \$88,646.52

ACRN AB \$88,646.52  
CIN: 00000000000000000000000000000000

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0001AL		8	Hours	\$27.69	\$221.52 EST
	Custodial - Bereavement Leave FFP Custodial - Bereavement Leave (to accommodate the use of Bereavement Leave, per the CBA (Attachment 2) of this requirement for CUSTODIAN personnel). NOTE: In the case of Bereavement Leave, in order to be reimbursed, the contractor must complete and submit the BEREAVEMENT LEAVE CERTIFICATION form (Attachment 3) per occurrence. NOTE: The QUANTITY shown is an ESTIMATED QUANTITY. FOB: Destination PURCHASE REQUEST NUMBER: HQCMCA01770001				

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NET AMT \$221.52 (EST.)

ACRN AB \$221.52  
CIN: 00000000000000000000000000000000



ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0001AM	Residual Grocery Operations FFP Perform Residual Grocery Operations in accordance with Attachment 1 (PWS), to include the paragraphs preceded with "RG" in shelf stocking, receiving/storage/holding area, and custodial operations. FOB: Destination PURCHASE REQUEST NUMBER: HQCMCA01770001	12	Months	\$28,258.15	\$339,097.80

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NET AMT \$339,097.80

ACRN AB \$339,097.80  
CIN: 00000000000000000000000000000000

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0001AN	Snow & Ice Removal FFP Snow and Ice Removal from locations as specified in Attachment 1, paragraph 13.1 and Exhibit 4-6-4 of the PWS during normal day custodial hours. (Note: The quantity shown is for the months of October through April). FOB: Destination PURCHASE REQUEST NUMBER: HQCMCA01770001	7	Months	\$1,114.29	\$7,800.03

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NET AMT \$7,800.03

ACRN AB \$7,800.03  
CIN: 00000000000000000000000000000000