SOLICITATION/CONTRAC						UISITION NUN FH3324270000				PAGE	E1 OF 36	
2. CONTRACT NO.		EFFECTIVE D		DER NUMBER		5. SOL	ICITATION	NUMBER		6. SOLICI	TATION ISSUE DATE	
HDEC04-14-P-0114								04-14-T-0023			15-Jul-2014	
7. FOR SOLICITATION INFORMATION CALL:	a. NAME				b. TELEPHONE N			-	·		R DUE DATE/LOCAL TIME	
9. ISSUED BY	CODE	HDEC04	ON	10. THIS ACQ	UISITIO			00 EXT 4876	X SET ASID		PM 18 Aug 2014 100 % FOR:	
DEFENSE COMMISSARY AGENCY		TIDEC04		┨┌		⊔		NED SMALL	<u> </u>		70 T GTK.	
SUPPLY & EQUIPMENT DIVISION				X SMALL BU	SINESS	1 1	ISINESS (
BUILDING P 11200 1300 E AVENUE					HUBZONE SWALL WOMEN-OW			MICALLY DISADVANTAGED NAICS: N-OWNED SMALL BUSINESS				
FORT LEE VA 23801-1800	01-1800				LI BUSINESS LI (EDWOSB) 811310							
TEL:					SERVICE-DISABLED VETERAN-OWNED 8(A)			SIZE STANDARD:				
FAX: (804) 734-8269/8886				SMALL BI	JSINESS		T = .		7N	1		
11. DELIVERY FOR FOB DESTINA- TION UNLESS BLOCK IS	12. DISCO	DUNT TERM	S	13a THIS	ACT IS A	13b. RATING						
MARKED				☐ RAT	13a. THIS CONTRACT IS RATED ORDER UN DPAS (15 CFR 700)		ER 14. METHOD OF SOLICITATION					
SEE SCHEDULE				DPA							RFP	
15. DELIVER TO	CODE	HQCNFH		16. ADMINIST	EDED D	·		INI Q	СО	<u>L</u>		
FORT MYER COMMISSARY	CODE			_ 10. ADIVINIST	EKED B	1			CO	DE		
BUILDING 523 CARPENTER ROAD					S	EE ITEI	ИО					
ARLINGTON VA 22211-6010					Ü							
17a.CONTRACTOR/ CODE 09JA	3	FACILITY C	9JA3	18a. PAYMEN	IT WILL E	BE MADE BY	′		CC	DE H	Q0131	
R & P SERVICE				DFAS-WIDE	DFAS-WIDE AREA WORK FLOW							
RODGER SEAQUIST					DFAS - CVDAAA/CO							
10500 ARRON CT WALDORF MD 20603-3206					P.O. BOX 369016 COLUMBUS OH 43236-9016							
TELEPHONE NO. (301) 870-6955				OOLOWBOO	011402	.00 0010						
17b. CHECK IF REMITTANCE IS DIFFERENT AND PUT				18b. SUBMIT		. \square			OCK 18a.	UNLES	S BLOCK	
SUCH ADDRESS IN OFFER 19. 20.				BELOW IS C	BELOW IS CHECKED SEE ADDENDUM 21. 22. 23. 24.							
ITEM NO.								UNIT	UNIT PI		AMOUNT	
	SEE SCHEDULE											
				_								
25. ACCOUNTING AND APPROPRIATION DATA							26. TOTAL AWARD AMOUNT (For Gov t. Use Only			or Govt. Use Only)		
See Schedule					\$10.780.				\$10,780.00			
See Schedule											ψ10,700.00	
											1	
27a. SOLICITATION INCORPORATES BY REFERENCE FAR 52.212-1. 52.212-4. FAR 52.212-3. 52.212-5 ARE ATTACHED. ADDENDA ARE ARE NOT ATTACHED												
χ 27b. CONTRACT/PURCHASE O	RDER INCO	RPORATES	BY REFEREI	NCE FAR 52.212	2-4. FAR	52.212-5 IS	ATTACHE	ED. AD	DENDA X	ARE	ARE NOT ATTACHED	
X 28. CONTRACTOR IS REQUIRE	ED TO SIGN	THIS DOCU	MENT AND R	RETURN <u>1</u>		29. AW	ARD OF	CONTRACT: I	REF.			
COPIES TO ISSUING OFFICE. CONTRACTOR AGREES TO FURNISH A												
DELIVER ALL ITEMS SET FORTH OR OTHERWISE IDENTIFIED ABOVE ADDITIONAL SHEETS SUBJECT TO THE TERMS AND CONDITIONS SPE					l							
ADDITIONAL SHEETS SUBJECT		IDEC04-14-T-00		SPECIFIED.		SETT)K 111 11L1	CLIN, 10 ACC	LI ILD AG I	OTTLING	S. SEE SCHEDULE	
80a. SIGNATURE OF OFFEROR/CONTRACTOR 31a. UNITED STATES OF AMERICA (SIGNATURE OF CONTRACTING OFFICER)												
						_						
				4	\Rightarrow	تحصر	A. 7	Diche				
30b. NAME AND TITLE OF SIGNER	?	30c. E	ATE SIGNE	D 31b. NAM	E OF CON	TRACTING C	FFICER	(TYPE C	R PRINT)		31c. DATE SIGNED	
(TYPE OR PRINT)	DESSIE M	DESSIE MILLS / CONTRACTING OFFICER										
	TEI	TEL: (804) 734-8000 EXT 48511				10-Sep-2014						
				EMA	EMAIL: dessie.mills@deca.mil							

SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS (CONTINUED)						EMS					PA	GE 2 OF 36
19. ITEM NO.	20. SCHEDULE OF SUPPLIES/ SERVICES					21. QUANTIT	Υ	22. UNIT	23 UNIT F		24. AMOUNT	
ITEM NO.			SCHEDULE OF SUPE		S		QUANIII	Y	UNIT	UNIT F	RICE	AMOUNT
32a. QUANTITY IN	COLLIN	ANI OA IIA	N DEEN									
RECEIVED	,	CTED) BEEN									
	l		JACCEPTED, AND CONF		CONTRAC							
32b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE			32c. DATE			ED NAME AND	TITLE (OF AUTHOR	RIZED GOVI	ERNMEN1	Т	
32e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE					32f. TELEPHONE NUMBER OF AUTHORIZED GOVERNMENT REPRESENTATIVE							
						32g. E-MAII	OF AUTHORI	ZED GO	VERNMEN	T REPRESE	NTATIVE	
33. SHIP NUMBER	FINAL	34. VOU(CHER NUMBER	35. AMOUNT VE CORRECT		36.	PAYMENT COMPLET	E P	PARTIAL	FINAL	37. CHE	CK NUMBER
38. S/R ACCOUNT		R 39. S	/R VOUCHER NUMBER	40. PAID BY								
41a. I CERTIFY THI	S ACC	<u> </u>	CORRECT AND PROPER	FOR PAYMENT	42a. RE	CEIVED BY	(Print)					
			41c. DATE									
				42b. RECEIVED AT (Location)								
				42c. DA	TE REC'D (/Y/MM/DD)	42d. TC	TAL CONT	AINERS			

Section SF 1449 - CONTINUATION SHEET

ITEM NO SUPPLIES/SERVICES QUANTITY UNIT UNIT PRICE AMOUNT 0001 \$0.00

Fort Myer - MHE

FFP

Maintenance and Repair on Material Handling Equipment

Base: September 10, 2014 - August 31, 2015

Contractor shall provide service and repair on the material handling equipment (Gas/Electric) for the specified commissary location. Contractor shall perform in accordance with the performance work statement (PWS) attached. The award will allow labor and expenses up to the pre-determined specified total cost allocated to the commissary classification.

The contractor is responsible for capturing costs to complete the administrative process of manpower reporting. See PWS attached.

FOB: Destination

PURCHASE REQUEST NUMBER: HQCNFH33242700000

NET AMT \$0.00

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ITEM NO 0001AA	SUPPLIES/SERVICES PM/Repair Hourly Rate FFP Hourly labor shall include transportation of employee various services identified FOB: Destination	s, permits and other	er necessary ite	ems to perform the	AMOUNT \$3,780.00
	ACRN AA CIN: HQCNFH33242700I	LPAE0001AA		NET AMT	\$3,780.00 \$3,780.00
ITEM NO 0001AB	SUPPLIES/SERVICES Parts FFP Part Markup Rate0_ FOB: Destination	QUANTITY 7,000 _%	UNIT Each	UNIT PRICE \$1.00	AMOUNT \$7,000.00
	ACRN AA CIN: HQCNFH33242700I	LPAE0001AB		NET AMT	\$7,000.00 \$7,000.00

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SUPPLIES/SERVICES **QUANTITY** UNIT **UNIT PRICE** ITEM NO **AMOUNT** 1001 \$0.00 OPTION

Fort Myer - MHE

Maintenance and Repair on Material Handling Equipment

Option 1: September 1, 2015 - August 31, 2016

Contractor shall provide service and repair on the material handling equipment (Gas/Electric) for the specified commissary location. Contractor shall perform in accordance with the performance work statement (PWS) attached. The award will allow labor and expenses up to the pre-determined specified total cost allocated to the commissary classification.

The contractor is responsible for capturing costs to complete the administrative process of manpower reporting. See PWS attached.

FOB: Destination

NET AMT \$0.00

SUPPLIES/SERVICES **UNIT PRICE** ITEM NO **QUANTITY UNIT AMOUNT** 1001AA 54 Hours \$70.00 \$3,780.00

OPTION PM/Repair Hourly Rate

Hourly labor shall include all labor, supervision, equipment, tools, materials, transportation of employees, permits and other necessary items to perform the various services identified in this PWS. See equipment list attached.

FOB: Destination

NET AMT \$3,780.00

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\$0.00

ITEM NO 1001AB OPTION	SUPPLIES/SERVICES Parts FFP Part Markup Rate0_% FOB: Destination	QUANTITY 7,000	UNIT Each	UNIT PRICE \$1.00	AMOUNT \$7,000.00
				NET AMT	\$7,000.00
ITEM NO 2001 OPTION	SUPPLIES/SERVICES Fort Myer - MHE FFP Maintenance and Repair or Option 2: September 1, 20 Contractor shall provide se (Gas/Electric) for the speciaccordance with the perfor allow labor and expenses uthe commissary classificati The contractor is responsibly process of manpower report FOB: Destination	AMOUNT \$0.00			

NET AMT