


SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS <i>OFFEROR TO COMPLETE BLOCKS 12, 17, 23, 24, AND 30</i>				1. REQUISITION NUMBER HQCNE93324270000		PAGE 1 OF 35		
2. CONTRACT NO. HDEC04-14-P-0115		3. AWARD/EFFECTIVE DATE 10-Sep-2014	4. ORDER NUMBER		5. SOLICITATION NUMBER HDEC04-14-T-0033		6. SOLICITATION ISSUE DATE 15-Jul-2014	
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 18 Aug 2014	
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 checked="" type="checkbox"/> UNRESTRICTED OR <input checked="" type="checkbox"/> SET ASIDE: <u>100</u> % FOR: <input checked="" type="checkbox"/> SMALL BUSINESS <input type="checkbox"/> WOMEN-OWNED SMALL BUSINESS (WOSB) <input type="checkbox"/> HUBZONE SMALL BUSINESS <input type="checkbox"/> ECONOMICALLY DISADVANTAGED WOMEN-OWNED SMALL BUSINESS (EDWOSB) NAICS: 811310 <input type="checkbox"/> SERVICE-DISABLED VETERAN-OWNED SMALL BUSINESS <input type="checkbox"/> 8(A) SIZE STANDARD: 7M					
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) <input type="checkbox"/>		13b. RATING		
15. DELIVER TO CARLISLE BARRACKS COMMISSARY BUILDING 851 SUMNER ROAD CARLISLE BARRACKS PA 17013-5011		CODE HQCNE9	16. ADMINISTERED BY SEE ITEM 9					
17a. CONTRACTOR/OFFEROR C2G, LTD CO. RICHARD (KEN) GILMORE 110 MALLOCK CT GOOSE CREEK SC 29445-5446 TELEPHONE NO. 843-879-0941 EXT 101		CODE 55DJ0	FACILITY CODE 55DJ0	18a. PAYMENT WILL BE MADE BY DFAS-WIDE AREA WORK FLOW DFAS - CVDAAA/CO P.O. BOX 369016 COLUMBUS OH 43236-9016				CODE HQ0131
<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						
19. ITEM NO.	20. SCHEDULE OF SUPPLIES/ SERVICES			21. QUANTITY	22. UNIT	23. UNIT PRICE	24. AMOUNT	
SEE SCHEDULE								
25. ACCOUNTING AND APPROPRIATION DATA See Schedule					26. TOTAL AWARD AMOUNT (For Govt. Use Only) \$11,050.00			
<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								
<input checked="" type="checkbox"/> 28. CONTRACTOR IS REQUIRED TO SIGN THIS DOCUMENT AND RETURN <u>1</u> 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. REF: HDEC04-14-T-0033				<input type="checkbox"/> 29. AWARD OF CONTRACT: REF. OFFER DATED . YOUR OFFER ON SOLICITATION (BLOCK 5), INCLUDING ANY ADDITIONS OR CHANGES WHICH ARE SET FORTH HEREIN, IS ACCEPTED AS TO ITEMS: SEE SCHEDULE				
30a. SIGNATURE OF OFFEROR/CONTRACTOR				31a. UNITED STATES OF AMERICA (SIGNATURE OF CONTRACTING OFFICER) 				
30b. NAME AND TITLE OF SIGNER (TYPE OR PRINT)		30c. DATE SIGNED		31b. NAME OF CONTRACTING OFFICER (TYPE OR PRINT) DESSIE MILLS / CONTRACTING OFFICER TEL: (804) 734-8000 EXT 48511 EMAIL: dessie.mills@deca.mil		31c. DATE SIGNED 10-Sep-2014		

**SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS
(CONTINUED)**

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

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
--	-----------	---

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
--	--------------------	---------------------------------	--	------------------

38. S/R ACCOUNT NUMBER	39. S/R VOUCHER NUMBER	40. PAID BY
------------------------	------------------------	-------------

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	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0001					\$0.00

Carlisle Barracks - 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: HQCNE933242700000

NET AMT	\$0.00
---------	--------

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0001AA		54	Hours	\$75.00	\$4,050.00

PM/Repair Hourly Rate
 FFP
 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	\$4,050.00
---------	------------

ACRN AA	\$4,050.00
CIN: HQCNE933242700LP AE0001AA	

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0001AB	Parts FFP Part Markup Rate ___0___% FOB: Destination	7,000	Each	\$1.00	\$7,000.00

NET AMT \$7,000.00

ACRN AA \$7,000.00
 CIN: HQCNE933242700LP AE0001AB

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
1001 OPTION	Carlisle Barracks - MHE FFP Maintenance and Repair on Material Handling Equipment Option 1: September 1, 2015 – August 31, 2016				\$0.00

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

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
1001AA	PM/Repair Hourly Rate	54	Hours	\$75.00	\$4,050.00
OPTION	FFP 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 \$4,050.00

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
1001AB	Parts	7,000	Each	\$1.00	\$7,000.00
OPTION	FFP Part Markup Rate <u> 0 </u> % FOB: Destination				

NET AMT \$7,000.00