| SOLICITATIO   | NCONTRACT<br>OR TO COMPLE           |                    |                            |  |                                  | 1. REQUI              | STTION NUM<br>IEDULE | BER          |  |               | PAGE           | 1 OF                         | 99                          |
|---|-------------------------------------|--------------------|----------------------------|--|----------------------------------|-----------------------|----------------------|--------------|--|---------------|----------------|------------------------------|-----------------------------|
| 2 CONTRACT NO.  | OK TO COMI EL                       |                    | FECTIVE DATE               |  | R NUMBER                         |                       | 5. SOU               | СПАПО        | N NUMBER                                   |               | 6. SOLICI      | TATION ISS                   | UE DATE                     |
| HDEC04-15-C-00  | 03                                  | 02-Mar-20          | 15                         |  |                                  |                       |                      |              | -R-0002                                    |               | 12-Dec         |                              |                             |
| 7. FOR SOLICITATION<br>INFORMATION CALL               | Ŀ                                   | a NAME<br>PAMELA H | Ł JACKSON                  |  |                                  |                       |                      |              | NUMBER <i>(N</i> ∞C<br><b>000 EXT487</b> 6 | •             | 1              | due date<br><b>7M 15 Jan</b> | /LOCALTIME<br>1 <b>2015</b> |
| 9. ISSUED BY  |                                     | CODE               | HDEC04                     |  | 10. THIS ACQ                     | UISITION              | IS U                 | INREST       | TRICTED OR                                 | SETASIO       | DE:1           | 00 % FOR                     | :                           |
| DEFENSE COMMIS<br>SUPPLY & EQUIPM<br>BUILDING P 11200 | MENT DIVISION                       |                    |                            |  | X SMALL BUS                      | SINESS                | ∐ BU:                | SINESS       | WNED SMALL<br>(WOSB)                       |               |                |                              |                             |
| 1300 E AVENUE<br>FORT LEE VA 2380                     |                                     |                    |                            |  | HUBZONE<br>BUSINESS              |                       | WON                  |              | ILY DISADVANTA<br>NED SMALL BUSI           | NESS IV       | AICS:<br>11310 |                              |                             |
| TEL:<br>FAX: (804) 734-4                              | 8269/8886                           |                    |                            |  | SERVICE-I<br>VETERAN<br>SMALL BU | -OWNED                | 8(A)                 |              |  |               | ZE STAN        | IDARD:                       |                             |
| 11. DELIVERY FOR                                      | FOB DESTINA-                        | 12. DISCOU         | NT TERMS                   |  |                                  |                       |                      | 13b. F       | RATING                                     |               |                |                              |                             |
| TION UNLESS I   | BLOCK IS                            |                    |                            |  | 13a. THIS                        |                       |                      |              |  |               |                |                              |                             |
| MARKED  |                                     |                    |                            |  |                                  | ED ORDER<br>S (15 CFR |                      | 14. M        | ETHOD OF SOI                               | LCITATION     |                |                              |                             |
| SEE SCHEI   | DULE                                |                    |                            |  | ·                                |                       |                      |              | RFQ  | RFQ IFB X RFF |                |                              |                             |
| 15. DELIVER TO  |                                     | CODE               |                            |  | 16. ADMINISTI                    | ERED BY               |                      | _            | <u>-</u>                                   | cc            | DDE _          |                              |                             |
| SE  | E SCHEDUL                           | .E                 |                            |  |                                  | SE                    | E ITEN               | 19           |  |               |                |                              |                             |
|   |                                     |                    |                            |  |                                  |                       |                      |              |  |               |                |                              |                             |
| 17a.CONTRACTOR<br>OFFEROR                             | / CODE 55DJ0                        |                    | CILITY 55DJ0               |  | 18a. PAYMEN                      | T WILL BE             | MADE BY              |              |  | C             | ODE H          | Q0131                        |                             |
| 029, EID 00.  |                                     |                    | DFAS-WIDE                  |  |                                  | N                     |                      |              |  |               |                |                              |                             |
| 1   |                                     |                    | DFAS - CVD<br>P.O. BOX 369 |  |                                  |                       |                      |              |  |               |                |                              |                             |
| GOOSE CREEK SC  | 29445-5446                          |                    |                            |  | COLUMBUS                         |                       | 6-9016               |              |  |               |                |                              |                             |
| TELEPHONE NO. 843-879-0941 EXT 105                    |                                     |                    |                            |  |                                  |                       |                      |              |  |               |                |                              |                             |
|   |                                     |                    |                            | 18b. SUBMIT INVOICES TO ADDRESS SHOWN IN BLOCK 18a. UNLESS BLOCK BELOW IS CHECKED SEE ADDENDUM |                                  |                       |                      |              |  |               |                |                              |                             |
| 19. 20. ITEM NO. SCHEDULE OF SUPPLIES/ SERVICE        |                                     |                    | YES.                       |  |                                  |                       |                      | 23<br>UNIT P |  | l             | 24.<br>IOUNT   |                              |                             |
| IIIIVIIVO.  |                                     | 301 ELDEL          | OI SOITELES!               | OLIVE.   | <b></b>                          |                       | QUAN                 |              | Gui  | OITT          | IUCL           | Aivi                         | -                           |
|   |                                     |                    | SEE SCHE                   | DULE   |                                  |                       |                      |              |  |               |                |                              |                             |
| 25. ACCOUNTING  | AND APPROPRIAT                      | TON DATA           |                            |  |                                  |                       |                      |              | 26. TOTAL A                                | WARD AM       | OUNT (Fo       | or Govt. Us                  | se Only)                    |
| See Schedul   | ام                                  |                    |                            |  |                                  |                       |                      |              |  |               |                | \$78,225                     | 5 00                        |
| oce ochedul   | ic                                  |                    |                            |  |                                  |                       |                      |              |  |               |                | <b>\$10,22</b> 0             | 7.00                        |
| 27a. SOLICITA   | TION INCORPORA                      | TES BY REFE        | RENCE FAR 52               | 2.212-1. \$  | 52.212-4. FAR                    | 52.212-3.             | 52.212-5 <b>A</b> F  | REATT        | ACHED. AD                                  | DENDA         | ARE            | ARE NOT                      | ATTACHED                    |
| 27b. CONTRAC  | CT/PURCHASE OR                      | DER INCORF         | ORATES BY RE               | FEREN  | CE FAR 52.212                    | 2-4. FAR 5            | 2.212-5 IS           | ATTACI       | HED. AD                                    | DENDA         | ARE            | ARE NOT                      | ATTACHED                    |
| X 28. CONTRAC   | TOR IS REQUIRED                     | TO SIGN TH         | IS DOCUMENT                | AND RE   | TURN 1                           |                       | 29. AW               | ARD OF       | CONTRACT:                                  | REF.          |                |                              |                             |
|   | SUING OFFICE. CO                    |                    |                            |  |                                  | ,   '                 | OFFER                |              |  |               |                | N SOLICI                     |                             |
|   | ITEMS SET FORTH<br>SHEETS SUBJECT 1 |                    |                            |  |                                  |                       | •                    | •            | CLUDING ANY<br>EREIN, IS ACC               |               |                |                              |                             |
|   |                                     |                    | C04-15-R-0002              |  |                                  |                       |                      |              |  |               |                |                              |                             |
| 30a. SIGNATURE  | OF OFFEROR/CO                       | NTRACTOR           |                            |  | 31a.UNITE                        | D STATES              | OF AMERIC            | A (Si        | GNATURE OF CO                              | NTRACTING     | OFFICER)       |                              |                             |
|   |                                     |                    |                            |  | 6                                | $\Rightarrow$         | de caración          | A-           | مادة موادي<br>المادة الموادية              |               |                |                              |                             |
|   |                                     |                    |                            |  |                                  |                       |                      |              |  |               |                |                              |                             |
| 30b. NAMEAND T  | TTLE OF SIGNER                      |                    | 30c. DATES                 | SIGNED   | 31b. NAME                        | OF CONT               | RACTING OF           | FICER        | (TYPE C                                    | PRINT)        |                | 31c. DAT                     | TE SIGNED                   |
| (TYPE OR PRINT)                                       |                                     |                    |                            |  | DESSIE MI                        | uis / co              | NTRACT ING           | OFFICE       | IR .                                       |               |                |                              |                             |
|   |                                     |                    |                            |  | TEL:                             | : (804) 7             | 34-8000 E            | XT 485       | 11   |               |                | 02-N                         | Mar-2015                    |
|   |                                     |                    |                            |  | EMAI                             | ц: dessi              | e.mills@de           | eca.mil      | L  |               |                | 1                            |                             |

| SOLICITA   | TION/0 |          | RACT/ORDER FOR CONTINUED)              | COMMERC                  | IAL ITI   | EMS          |                |         |             |                | PA      | GE 2 OF 99    |
|--|--------|----------|--|--------------------------|---|--------------|----------------|---------|-------------|----------------|---------|---------------|
| 19.<br>ГТЕМ NO.  |        |          | 20.<br>SCHEDULE OF SUPPLI              | ES/ SEDVICES             |   |              | 21.<br>QUANTIT | _       | 22.<br>UNIT | 23.<br>UNIT PR |         | 24.<br>AMOUNT |
| ii Livi No.  |        |          | SEE SCH                                |                          |   |              | QOANTI         |         | Oran        | ONITTO         | IOL.    | AWOON         |
|  |        |          |  |                          |   |              |                |         |             |                |         |               |
| 32a. QUANTITY IN   | COLUM  | N 21 HA  | S REEN                                 |                          |   |              |                |         |             |                |         |               |
| RECEIVED   | INSPE  | _        | 7                                      | ORMS TO THE O            | CONTRAC   | CT. 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     |        |          |  | <u> </u>                 | 32f. TELEPHONE NUMBER OF AUTHORIZED GOVERNMENT REPRESENTATIVE       |              |                |         |             |                |         |               |
|  |        |          |  |                          |   | 32g. E-IVIAI | IL OF AUTHORI  | ZED GO  | VERNIVIEN   | I KEFKESE      | VIAIIVE |               |
| 33. SHIP NUMBER  | FINAL  | 34. VOU  | CHER NUMBER                            | 35. AMOUNT VE<br>CORRECT |   | 36.          | PAYMENT        | E P     | ARTIAL [    | FINAL          | 37. CHE | CK NUMBER     |
| 38. S/R ACCOUNT  | NUMBER | ₹ 39. \$ | S/R VOUCHER NUMBER                     | 40. PAID BY              |   |              |                |         |             | •              |         |               |
|  |        |          | CORRECT AND PROPER<br>RTIFYING OFFICER | FOR PAYMENT<br>41c. DATE | 42a. RE   | CEIVED BY    | (Print)        |         |             |                |         |               |
|  |        |          |  |                          | 42b. RE   | CEIVED AT    | (Location)     |         |             |                |         |               |
|  |        |          |  |                          | 42c. DA   | TE REC'D (   | YY/MM/DD)      | 42d. TO | TAL CONT    | AINERS         |         |               |

## Section SF 1449 - CONTINUATION SHEET

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

Fort Benning Commissary MHE

**FFP** 

Preventive Maintenance (PM) and Repair of Material Handling Equipment

Base: Mar 2, 2015 - Feb 29, 2016

PMs shall include: labor, parts, expendables, fluids and trip charges to perform the requirements listed in the PM checklist. See Performance Work Statement (PWS) attached.

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

FOB: Destination

PURCHASE REQUEST NUMBER: HQCSJW33242700000

NET AMT \$0.00

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

Hours

Time - Unscheduled Maint/Repair Ft Benni

T&M

Hourly Rate

FOB: Destination

PURCHASE REQUEST NUMBER: HQCSJW33242700000

TOT ESTIMATED PRICE \$4,050.00

**CEILING PRICE** 

ACRN AA \$4,050.00

CIN: HQCSJW33242700001AA

| ITEM NO<br>0001AB | SUPPLIES/SERVICES  Materials - Ft Benning T&M This is NOT a priced CLII actual costs for parts as ev supplies used to accomplie FOB: Destination | idenced by supplic | er invoice for o | lirect materials and  | AMOUNT<br>\$6,000.00 |
|-------------------|--|--------------------|------------------|-----------------------|----------------------|
|                   |  |                    | TOT EST          | TIMATED PRICE         | \$6,000.00           |
|                   |  |                    |                  | CEILING PRICE         |                      |
|                   | ACRN AA<br>CIN: HQCSJW332427000  | 001AB              |                  |                       | \$6,000.00           |
| ITEM NO<br>0001AC | SUPPLIES/SERVICES  1R05-A, Electric Pallet Ja FFP Semi-Annual Preventive N FOB: Destination  | _                  | UNIT<br>Each     | UNIT PRICE<br>\$75.00 | AMOUNT<br>\$150.00   |
|                   |  |                    |                  | NET AMT               | \$150.00             |
|                   | ACRN AA<br>CIN: HQCSJW332427000  | 001AC              |                  |                       | \$150.00             |

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| ITEM NO<br>0001AD | SUPPLIES/SERVICES  1R06, Electric Forklift - Ft B FFP Semi-Annual Preventive Ma FOB: Destination | _   | UNIT<br>Each | UNIT PRICE<br>\$100.00 | AMOUNT<br>\$600.00   |
|-------------------|--|-----|--------------|------------------------|----------------------|
|                   | ACRN AA<br>CIN: HQCSJW33242700001  | IAD |              | NET AMT                | \$600.00<br>\$600.00 |
| ITEM NO<br>0001AE | SUPPLIES/SERVICES  1R08, Walkie Rider - Ft Ben FFP Semi-Annual Preventive Ma FOB: Destination    |     | UNIT<br>Each | UNIT PRICE<br>\$125.00 | AMOUNT<br>\$250.00   |
|                   | ACRN AA<br>CIN: HQCSJW33242700001  | IAE |              | NET AMT                | \$250.00<br>\$250.00 |

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ITEM NO SUPPLIES/SERVICES QUANTITY UNIT UNIT PRICE AMOUNT 0002 \$0.00

Robins Commissary MHE

**FFP** 

Preventive Maintenance (PM) and Repair of Material Handling Equipment

Base: Mar 2, 2015 - Feb 29, 2016

PMs shall include: labor, parts, expendables, fluids and trip charges to perform the requirements listed in the PM checklist. See Performance Work Statement (PWS) attached.

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

FOB: Destination

PURCHASE REQUEST NUMBER: HQCSJ833242700000

NET AMT \$0.00

ITEM NO SUPPLIES/SERVICES QUANTITY UNIT UNIT PRICE AMOUNT 0002AA 54 Labor \$75.00 \$4,050.00 Hours

Time - Unscheduled Maint/Repairs Robins

T&M

Hourly Rate

FOB: Destination

PURCHASE REQUEST NUMBER: HQCSJ833242700000

TOT ESTIMATED PRICE \$4,050.00

**CEILING PRICE** 

ACRN AB \$4,050.00

CIN: HQCSJ833242700002AA

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ITEM NO SUPPLIES/SERVICES **QUANTITY** UNIT **UNIT PRICE AMOUNT** 0002AB 6,000 Each \$1.00 \$6,000.00 Materials - Robins T&M This is NOT a priced CLIN, it is a pre-determined amount where DeCA will pay actual costs for parts as evidenced by supplier invoice for direct materials and supplies used to accomplish preventive maintenance and repair services. FOB: Destination TOT ESTIMATED PRICE \$6,000.00 **CEILING PRICE** ACRN AB \$6,000.00 CIN: HQCSJ833242700002AB ITEM NO SUPPLIES/SERVICES **QUANTITY** UNIT UNIT PRICE **AMOUNT** 0002AC \$600.00 Each \$75.00 1R05-A, Electric Pallet Jack - Robins Semi-Annual Preventive Maintenance FOB: Destination **NET AMT** \$600.00 ACRN AB \$600.00 CIN: HQCSJ833242700002AC

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\$0.00

ITEM NO SUPPLIES/SERVICES **QUANTITY UNIT UNIT PRICE AMOUNT** 0002AD \$100.00 \$400.00 Each 1R06, Electric Forklift - Robins **FFP** Semi-Annual Preventive Maintenance FOB: Destination **NET AMT** \$400.00 ACRN AB \$400.00 CIN: HQCSJ833242700002AD ITEM NO SUPPLIES/SERVICES **QUANTITY UNIT UNIT PRICE AMOUNT** 0003 \$0.00 Fort Gordon Commissary MHE **FFP** Preventive Maintenance (PM) and Repair of Material Handling Equipment Base: Mar 2, 2015 - Feb 29, 2016 PMs shall include: labor, parts, expendables, fluids and trip charges to perform the requirements listed in the PM checklist. See Performance Work Statement (PWS) attached. The contractor is responsible for capturing costs to complete the administrative process of manpower reporting. See PWS attached. FOB: Destination PURCHASE REQUEST NUMBER: HQCSJZ33242700000

**NET AMT** 

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\$6,000.00

ITEM NO SUPPLIES/SERVICES **QUANTITY** UNIT **UNIT PRICE AMOUNT** 0003AA Labor \$75.00 \$4,050.00 54 Hours Time - Unscheduled Maint/Repa Ft Gordon T&M Hourly Rate FOB: Destination PURCHASE REQUEST NUMBER: HQCSJZ33242700000 TOT ESTIMATED PRICE \$4,050.00 **CEILING PRICE** ACRN AC \$4,050.00 CIN: HQCSJZ33242700003AA ITEM NO SUPPLIES/SERVICES **QUANTITY** UNIT **UNIT PRICE AMOUNT** 0003AB 6,000 Each \$1.00 \$6,000.00 Materials - Fort Gordon T&M This is NOT a priced CLIN, it is a pre-determined amount where DeCA will pay actual costs for parts as evidenced by supplier invoice for direct materials and supplies used to accomplish preventive maintenance and repair services. FOB: Destination TOT ESTIMATED PRICE \$6,000.00 **CEILING PRICE** 

ACRN AC

CIN: HQCSJZ33242700003AB

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| ITEM NO 0003AC    | SUPPLIES/SERVICES  1R05-A, Electric Pallet Jack FFP Semi-Annual Preventive Ma FOB: Destination |    | UNIT<br>Each | UNIT PRICE<br>\$75.00  | AMOUNT<br>\$450.00   |
|-------------------|--|----|--------------|------------------------|----------------------|
|                   | ACRN AC<br>CIN: HQCSJZ33242700003  | AC |              | NET AMT                | \$450.00<br>\$450.00 |
| ITEM NO<br>0003AD | SUPPLIES/SERVICES  1R06, Electric Forklift - Ft OFFP Semi-Annual Preventive MaFOB: Destination |    | UNIT<br>Each | UNIT PRICE<br>\$100.00 | AMOUNT<br>\$400.00   |
|                   | ACRN AC<br>CIN: HQCSJZ33242700003  | AD |              | NET AMT                | \$400.00<br>\$400.00 |

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\$0.00

ITEM NO SUPPLIES/SERVICES QUANTITY **UNIT UNIT PRICE AMOUNT** 0003AE \$125.00 \$250.00 Each 1R12-A, Propane Forklift - Ft Gordon **FFP** Semi-Annual Preventive Maintenance FOB: Destination **NET AMT** \$250.00 ACRN AC \$250.00 CIN: HQCSJZ33242700003AE ITEM NO SUPPLIES/SERVICES **QUANTITY UNIT UNIT PRICE AMOUNT** 0004 \$0.00 **Hunter Commissary MHE FFP** Preventive Maintenance (PM) and Repair of Material Handling Equipment Base: Mar 2, 2015 - Feb 29, 2016 PMs shall include: labor, parts, expendables, fluids and trip charges to perform the requirements listed in the PM checklist. See Performance Work Statement (PWS) attached. The contractor is responsible for capturing costs to complete the administrative process of manpower reporting. See PWS attached. FOB: Destination PURCHASE REQUEST NUMBER: HQCSJ333232700000

**NET AMT** 

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ITEM NO SUPPLIES/SERVICES **QUANTITY** UNIT UNIT PRICE **AMOUNT** 0004AA 45 Labor \$75.00 \$3,375.00 Hours Time - Unscheduled Maint/Repairs Hunter T&M Hourly Rate FOB: Destination PURCHASE REQUEST NUMBER: HQCSJ333232700000 TOT ESTIMATED PRICE \$3,375.00 **CEILING PRICE** ACRN AD \$3,375.00 CIN: HQCSJ333232700004AA ITEM NO SUPPLIES/SERVICES **QUANTITY** UNIT **UNIT PRICE AMOUNT** 0004AB 6,000 Each \$1.00 \$6,000.00 Materials - Hunter T&M This is NOT a priced CLIN, it is a pre-determined amount where DeCA will pay actual costs for parts as evidenced by supplier invoice for direct materials and supplies used to accomplish preventive maintenance and repair services. FOB: Destination TOT ESTIMATED PRICE \$6,000.00 **CEILING PRICE** ACRN AD \$6,000.00

CIN: HQCSJ333232700004AB

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| ITEM NO<br>0004AC | SUPPLIES/SERVICES  1R05-A, Electric Pallet Ja FFP Semi-Annual Preventive M FOB: Destination  |      | UNIT<br>Each | UNIT PRICE<br>\$75.00  | AMOUNT<br>\$150.00   |
|-------------------|--|------|--------------|------------------------|----------------------|
|                   | ACRN AD<br>CIN: HQCSJ33323270000   | 04AC |              | NET AMT                | \$150.00<br>\$150.00 |
| ITEM NO<br>0004AD | SUPPLIES/SERVICES  1R06, Electric Forklift - H FFP Semi-Annual Preventive N FOB: Destination |      | UNIT<br>Each | UNIT PRICE<br>\$100.00 | AMOUNT<br>\$400.00   |
|                   | ACRN AD<br>CIN: HQCSJ33323270000   | 04AD |              | NET AMT                | \$400.00<br>\$400.00 |

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ITEM NO SUPPLIES/SERVICES QUANTITY UNIT UNIT PRICE AMOUNT 0005 \$0.00

Fort Stewart Commissary MHE

**FFP** 

Preventive Maintenance (PM) and Repair of Material Handling Equipment

Base: Mar 2, 2015 - Feb 29, 2016

PMs shall include: labor, parts, expendables, fluids and trip charges to perform the requirements listed in the PM checklist. See Performance Work Statement (PWS) attached.

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

FOB: Destination

PURCHASE REQUEST NUMBER: HQCSJ233252700000

NET AMT \$0.00

ITEM NO SUPPLIES/SERVICES QUANTITY UNIT UNIT PRICE AMOUNT 0005AA 70 Labor \$75.00 \$5,250.00 Hours

Time - Unscheduled Maint/Repairs Ft Stew

T&M

Hourly Rate

FOB: Destination

PURCHASE REQUEST NUMBER: HQCSJ233252700000

TOT ESTIMATED PRICE \$5,250.00

**CEILING PRICE** 

ACRN AE \$5,250.00

CIN: HQCSJ233252700005AA

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ITEM NO SUPPLIES/SERVICES **QUANTITY** UNIT **UNIT PRICE AMOUNT** 0005AB 6,000 Each \$1.00 \$6,000.00 Materials - Ft Stewart T&M This is NOT a priced CLIN, it is a pre-determined amount where DeCA will pay actual costs for parts as evidenced by supplier invoice for direct materials and supplies used to accomplish preventive maintenance and repair services. FOB: Destination TOT ESTIMATED PRICE \$6,000.00 **CEILING PRICE** ACRN AE \$6,000.00 CIN: HQCSJ233252700005AB ITEM NO SUPPLIES/SERVICES **QUANTITY** UNIT UNIT PRICE **AMOUNT** 0005AC \$75.00 \$750.00 Each 1R05-A, Electric Pallet Jack -Ft Stewart Semi-Annual Preventive Maintenance FOB: Destination **NET AMT** \$750.00 ACRN AE \$750.00 CIN: HQCSJ233252700005AC

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| ITEM NO<br>0005AD | SUPPLIES/SERVICES  1R06, Electric Forklift - F FFP Semi-Annual Preventive M FOB: Destination |      | UNIT<br>Each | UNIT PRICE<br>\$100.00 | AMOUNT<br>\$800.00   |
|-------------------|--|------|--------------|------------------------|----------------------|
|                   | ACRN AE<br>CIN: HQCSJ23325270000   | 05AD |              | NET AMT                | \$800.00<br>\$800.00 |
| ITEM NO<br>0005AE | SUPPLIES/SERVICES  1R08, Walkie Rider - Fort FFP Semi-Annual Preventive M FOB: Destination   |      | UNIT<br>Each | UNIT PRICE<br>\$125.00 | AMOUNT<br>\$500.00   |
|                   | ACRN AE<br>CIN: HQCSJ23325270000   | 05AE |              | NET AMT                | \$500.00<br>\$500.00 |

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ITEM NO SUPPLIES/SERVICES QUANTITY UNIT UNIT PRICE AMOUNT 0006 \$0.00

Albany Commissary MHE

**FFP** 

Preventive Maintenance (PM) and Repair of Material Handling Equipment

Base: Mar 2, 2015 - Feb 29, 2016

PMs shall include: labor, parts, expendables, fluids and trip charges to perform the requirements listed in the PM checklist. See Performance Work Statement (PWS) attached.

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

FOB: Destination

PURCHASE REQUEST NUMBER: HQCSJU33232700000

NET AMT \$0.00

ITEM NO SUPPLIES/SERVICES QUANTITY UNIT UNIT PRICE AMOUNT 0006AA 45 Labor \$75.00 \$3,375.00 Hours

Time - Unscheduled Maint/Repairs Albany

T&M

Hourly Rate

FOB: Destination

PURCHASE REQUEST NUMBER: HQCSJU33232700000

TOT ESTIMATED PRICE \$3,375.00

**CEILING PRICE** 

ACRN AF \$3,375.00

CIN: HQCSJU33232700006AA

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ITEM NO SUPPLIES/SERVICES **QUANTITY** UNIT **UNIT PRICE AMOUNT** 0006AB 6,000 Each \$1.00 \$6,000.00 Materials - Albany T&M This is NOT a priced CLIN, it is a pre-determined amount where DeCA will pay actual costs for parts as evidenced by supplier invoice for direct materials and supplies used to accomplish preventive maintenance and repair services. FOB: Destination TOT ESTIMATED PRICE \$6,000.00 **CEILING PRICE** ACRN AF \$6,000.00 CIN: HQCSJU33232700006AB ITEM NO SUPPLIES/SERVICES **QUANTITY** UNIT UNIT PRICE **AMOUNT** 0006AC \$75.00 \$300.00 Each 1R05-A, Electric Pallet Jack - Albany Semi-Annual Preventive Maintenance FOB: Destination **NET AMT** \$300.00 ACRN AF \$300.00 CIN: HQCSJU33232700006AC

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| ITEM NO<br>0006AD | SUPPLIES/SERVICES  1R06, Electric Forklift - Al FFP Semi-Annual Preventive M FOB: Destination | -    | UNIT<br>Each                     | UNIT PRICE<br>\$100.00        | AMOUNT<br>\$400.00   |
|-------------------|---|------|----------------------------------|-------------------------------|----------------------|
|                   | ACRN AF<br>CIN: HQCSJU3323270000  | 06AD |                                  | NET AMT                       | \$400.00<br>\$400.00 |
| ITEM NO<br>0006AE | SUPPLIES/SERVICES  Trip Charge - Unscheduled FFP  Round trip from contractor FOB: Destination |      | UNIT<br>Each<br>missary and retu | UNIT PRICE<br>\$75.00<br>urn. | AMOUNT<br>\$375.00   |
|                   | ACRN AF<br>CIN: HQCSJU3323270000  | 06AE |                                  | NET AMT                       | \$375.00<br>\$375.00 |

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ITEM NO SUPPLIES/SERVICES QUANTITY UNIT UNIT PRICE AMOUNT 0007 \$0.00

Moody AFB Commissary MHE

**FFP** 

Preventive Maintenance (PM) and Repair of Material Handling Equipment

Base: Mar 2, 2015 - Feb 29, 2016

PMs shall include: labor, parts, expendables, fluids and trip charges to perform the requirements listed in the PM checklist. See Performance Work Statement (PWS) attached.

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

FOB: Destination

PURCHASE REQUEST NUMBER: HQCSJ733242700000

NET AMT \$0.00

ITEM NO SUPPLIES/SERVICES QUANTITY UNIT UNIT PRICE AMOUNT 0007AA 54 Labor \$75.00 \$4,050.00 Hours

Time - Unscheduled Maint/Repairs Moody

T&M

Hourly Rate

FOB: Destination

PURCHASE REQUEST NUMBER: HQCSJ733242700000

TOT ESTIMATED PRICE \$4,050.00

**CEILING PRICE** 

ACRN AG \$4,050.00

CIN: HQCSJ733242700007AA

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ITEM NO SUPPLIES/SERVICES **QUANTITY** UNIT **UNIT PRICE AMOUNT** 0007AB 6,000 Each \$1.00 \$6,000.00 Materials - Moody T&M This is NOT a priced CLIN, it is a pre-determined amount where DeCA will pay actual costs for parts as evidenced by supplier invoice for direct materials and supplies used to accomplish preventive maintenance and repair services. FOB: Destination TOT ESTIMATED PRICE \$6,000.00 **CEILING PRICE** ACRN AG \$6,000.00 CIN: HQCSJ733242700007AB ITEM NO SUPPLIES/SERVICES **QUANTITY** UNIT UNIT PRICE **AMOUNT** 0007AC \$600.00 Each \$75.00 1R05-A, Electric Pallet Jack - Moody Semi-Annual Preventive Maintenance FOB: Destination **NET AMT** \$600.00 ACRN AG \$600.00 CIN: HQCSJ733242700007AC

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| ACRN AG<br>CIN: HQCSJ733242700007 | 7AD  |   | NET AMT  | \$400.00<br>\$400.00   |
|-----------------------------------|--|---|--|--|
| FFP                               | -  | UNIT<br>Each  | UNIT PRICE<br>\$125.00   | AMOUNT<br>\$250.00   |
| ACRN AG<br>CIN: HQCSJ733242700007 | 7AE  |   | NET AMT  | \$250.00<br>\$250.00   |
| S I I                             | IN: HQCSJ733242700007  UPPLIES/SERVICES  R07, Forklift Narrow Aisle FP  emi-Annual Preventive M  OB: Destination  CRN AG | UPPLIES/SERVICES QUANTITY 2 R07, Forklift Narrow Aisle - Moody FP emi-Annual Preventive Maintenance OB: Destination | IN: HQCSJ733242700007AD  UPPLIES/SERVICES QUANTITY UNIT 2 Each R07, Forklift Narrow Aisle - Moody FP emi-Annual Preventive Maintenance OB: Destination  CRN AG | IN: HQCSJ733242700007AD  UPPLIES/SERVICES QUANTITY UNIT UNIT PRICE 2 Each \$125.00  R07, Forklift Narrow Aisle - Moody FP emi-Annual Preventive Maintenance OB: Destination  NET AMT  CRN AG |