


SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS <i>OFFEROR TO COMPLETE BLOCKS 12, 17, 23, 24, AND 30</i>				1. REQUISITION NUMBER HQCAA63560002000		PAGE 1 OF 18	
2. CONTRACT NO. GS -00F-279DA		3. AWARD/EFFECTIVE DATE 10-Feb-2017		4. ORDER NUMBER HDEC05-17-F-0001		5. SOLICITATION NUMBER	
7. FOR SOLICITATION INFORMATION CALL:		a. NAME				b. TELEPHONE NUMBER (No Collect Calls)	8. OFFER DUE DATE/LOCAL TIME
9. ISSUED BY DEFENSE COMMISSARY AGENCY ENTERPRISE ACQUISITION DIVISION 1300 E AVENUE FORT LEE VA 23801-1800 TEL: FAX:		CODE HDEC05	10. THIS ACQUISITION IS		<input checked="" type="checkbox"/> UNRESTRICTED OR <input type="checkbox"/> SET ASIDE: _____ % FOR: <input type="checkbox"/> SMALL BUSINESS <input type="checkbox"/> WOMEN-OWNED SMALL BUSINESS (WOSB) <input type="checkbox"/> HUBZONE SMALL BUSINESS <input type="checkbox"/> ELIGIBLE UNDER THE WOMEN-OWNED SMALL BUSINESS PROGRAM <input type="checkbox"/> SERVICE-DISABLED VETERAN-OWNED SMALL BUSINESS <input type="checkbox"/> EDWOSB NAICS: <input type="checkbox"/> 8(A) \$15,000,000 <input type="checkbox"/> SIZE STANDARD:		
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	
15. DELIVER TO		CODE	16. ADMINISTERED BY		CODE		
SEE SCHEDULE			SEE ITEM 9				
17a. CONTRACTOR/OFFEROR CLIFTONLARSONALLEN LLP WILLIAM H OLIVER 11710 BELTSVILLE DR STE 300 BELTSVILLE MD 20705-3102 TELEPHONE NO. 301-902-8563		CODE 6NAQ9	FACILITY CODE	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) \$818,753.44		
<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 type="checkbox"/> 27b. CONTRACT/PURCHASE ORDER INCORPORATES BY REFERENCE FAR 52.212-4. FAR 52.212-5 IS ATTACHED. ADDENDA <input type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED			
<input checked="" type="checkbox"/> 28. CONTRACTOR IS REQUIRED TO SIGN THIS DOCUMENT AND RETURN 1 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.				<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:			
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) JILL A. CRAFT / CONTRACTING OFFICER TEL: 804-734-8000 X 86294 EMAIL: jill.craft@deca.mil		31c. DATE SIGNED 10-Feb-2017	

**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	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0001	CFO Auditing Services FFP CONTRACTOR SHALL PROVIDE AUDIT SERVICES OF THE DEFENSE COMMISSARY AGENCY'S (DeCA) CHIEF FINANCIAL OFFICER'S STATEMENTS TO INCLUDE ALL SUPERVISION, PERSONNEL, LABOR, SUPPLIES, MATERIALS, EQUIPMENT, AND OTHER ITEMS/SERVICES NECESSARY TO PERFORM IN ACCORDANCE WITH THE PERFORMANCE WORK STATEMENT (PWS) EXCLUDING TRAVEL EXPENSES. Authorization to proceed with this work was provided by the Enterprise Acquisition Division Cheif, Michael Shaffer on December 23, 2016. This authorization was given with anticipation of this award being approved shortly after. FOB: Destination PURCHASE REQUEST NUMBER: HQCAAA63560002000	748,753.44	Each	\$1.00	\$748,753.44
NET AMT					\$748,753.44
ACRN AA CIN: HQCAAA63560002000					\$748,753.44

PSC CD: R704

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0002		70,000	Each	\$1.00	\$70,000.00

Travel Expenses

FFP

CONTRACTOR SHALL SUBMIT TRAVEL EXPENSES FOR TRAVEL REQUIRED DURING THE BASE PERIOD. IF TRAVEL IS REQUIRED, THE CONTRACTOR IS RESPONSIBLE FOR MAKING ALL NECESSARY ARRANGEMENTS FOR ITS PERSONNEL. THESE INCLUDE, BUT ARE NOT LIMITED TO, MEDICAL EXAMINATIONS, IMMUNIZATIONS, AND PASSPORTS/VISAS. THE CONTRACTOR SHALL SUBMIT TRAVEL EXPENSES AS A SEPARATE LINE ITEM ON MONTHLY INVOICES. (NOTE:TRAVEL EXPENSES WILL BE REIMBURSED IAW POLICES AND RATES LOCATED IN THE JOINT TRAVEL REGULATIONS.)

*In accordance with the GSA Clause C-FSS-370 and the FAR Clause 52.209-7, if a contractor is unable to attain the necessary security approvals for contract performance due to laws or regulatory requirements, it will be the responsibility of the Government to provide the necessary security approvals and cover the expenses.

FOB: Destination

PURCHASE REQUEST NUMBER: HQCAAA63560002000

NET AMT \$70,000.00

ACRN AA \$70,000.00
CIN: HQCAAA635600020002

PSC CD: R704

INSPECTION AND ACCEPTANCE TERMS

Supplies/services will be inspected/accepted at:

CLIN	INSPECT AT	INSPECT BY	ACCEPT AT	ACCEPT BY
0001	N/A	N/A	N/A	Government
0002	N/A	N/A	N/A	Government

DELIVERY INFORMATION

CLIN	DELIVERY DATE	QUANTITY	SHIP TO ADDRESS	DODAAC
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