SOLICITATION/CO BIDDER/OFFEROR TO O BLOCKS 11, 13, 15, 21, 2	COMPLETE Allocation	ntract is a Rated Orde ons System (DPAS) - .700.				RATING	PAGE (OF		
2. CONTRACT NUMBER	3. AWARD/EFFECTIVE DATE	/E 4. SOLICITATION	☐ (IFB) INVITATION ☐ (RFF		NEGOTIATED (RFP) REQUEST FOR PROPOSAL	6. SOLICITATION ISSUE DATE				
7. ISSUED BY	со	DE NO COLLECT CALLS	SMALL HISTOI UNDEF BUSINI (HUBZO SERVIO OWNE	QUISITION IS EBUSINESS RICALLY RUTILIZED ESS ZONE ONE) SMALL BU CE-DISABLED D SMALL BUSI	ELIGIBL ECONO WOMEN USINESS NO VETERAN- SY NESS	CTED OR SALI I-OWNED SMALI E UNDER THE V MICALLY DISAD' I-OWNED SMALI DRTH AMERICAN' STEM (NAICS): STANDARD:	VOSB PROGRA VANTAGED L BUSINESS (E	AM (DWOSB)		
9. (Agency Use)										
10. ITEMS TO BE PURCHASE SUPPLIES SERVICES	, ,									
	. IF OFFER IS ACCEPTED BY THE GOVERNMENT WITHIN				12. ADMINISTERED BY CODE					
DIFFERENT PERIOD) FRC CONTRACTOR AGREES T ITEMS SOLICITED HEREIN	ENDAR DAYS UNLESS OFFER M THE DATE SET FORTH IN E O HOLD ITS OFFERED PRICE I AND TO ACCEPT ANY RESU AND CONDITIONS STATED H	BLOCK 9 ABOVE, THE S FIRM FOR THE LTING CONTRACT								
13. CONTRACTOR OFFEROR CO	DE FACIL CODE		14. PAYME	NT WILL BE M.	ADE BY		CODE			
TELEPHONE NUMBER UNIQUE ENTITY IDENTIFIER CHECK IF REMITTANCE IS DIFFERENT AND PUT SUCH ADDRESS IN OFFER 15. PROMPT PAYMENT DISCOUNT				SUBMIT INVOICES TO ADDRESS SHOWN IN BLOCK: 16. AUTHORITY FOR USING OTHER THAN FULL AND OPEN COMPETITION UNDER THE UNITED STATES CODE AT: () ()						
17. ITEM NUMBER	18. SCHEDULE SUPPLIES/SEF			19. QUANTITY	20. UNIT	21. UNIT PRICE	22. AMOUN	NT		
23. ACCOUNTING AND APPRO	OPRIATION DATA						AL AWARD AM Government Us			
FORTH OR OTHERWISE I	ED TO SIGN THIS DOCUMENT ACTOR AGREES TO FURNISH DENTIFIED ABOVE AND ON A AND CONDITIONS SPECIFIEI	HAND DELIVER ALL ITE		NUMBER	SHOWN IN BI S WHICH ARE	I T: YOUR OFFER LOCK 4 INCLUDI SET FORTH HE	ING ANY ADDIT	TIONS OR		
27. SIGNATURE OF OFFEROR/CONTRACTOR				28. UNITED STATES OF AMERICA (Signature of Contracting Officer)						
NAME AND TITLE OF SIGNER (Type or Print) DATE SIGNED				NAME OF CONTRACTING OFFICER DATE SIGNED						

NO RESPONSE FOR	NO RESPONSE FOR REASONS CHECKED						
CANNOT COMPLY WITH SPECIFICATIONS	CANNOT MEET DELIVERY REQUIREMENT						
UNABLE TO IDENTIFY THE ITEM(S)	DO NOT REGULARLY MANUFACTURE OR SELL THE TYPE OF ITEMS INVOLVED						
OTHER (Specify)							
WE DO NOT, DESIRE TO BE RETAINED ON THE MAILING LIST FOR FUTURE PROCUREMENT OF THE TYPE OF ITEMS INVOLVED							
NAME AND ADDRESS OF FIRM (Include ZIP Code)	SIGNATURE						
	TYPE OR PRINT NAME AND TITLE OF SIGNER						
	TIPE OR PRINT NAIME AND TITLE OF SIGNER						
FROM:	AFFIX						
	STAMP HERE						
ТО:							
SOLICITATION NUMBER							
DATE AND LOCAL TIME							