OFFEROR TO COMPLET		COMMERCIA		1. REQUISITIO	N NUI	MBER	PAGE [·]	1 OF	
2. CONTRACT NO.	3. AWARD/EFFECTIVE DATE	4. ORDER NUME	5. SOLICITATION NUMBER				6. SOLICITATION ISSUE DATE		
7. FOR SOLICITATION INFORMATION CALL:	a. NAME			b. TELEPHONE calls)	NUM	IBER <i>(No collec</i>		ER DUE DATE/ AL TIME	
9. ISSUED BY	CODE		10. THIS ACQUISI	NESS WON MALL SMA GABLED EDW	MEN-(ISB) E ALL BU /OSB	RICTED OR OWNED SMALI ELIGIBLE UNDE JSINESS PROC	er the Wome Gram Naic		
11. DELIVERY FOR FOB DESTINA- TION UNLESS BLOCK IS MARKED	N UNLESS BLOCK IS RKED				13b. RATING 13a. THIS CONTRACT IS A RATED ORDER UNDER DPAS (15 CFR 700) RFQ IF				
15. DELIVER TO	CODE		16. ADMINISTERE	ED BY			CODE		
17a. CONTRACTOR/ CODEOFFEROR	CODE		18a. PAYMENT W				CODE		
17b. CHECK IF REMITTANCE IS OFFER	S DIFFERENT AND PUT S	SUCH ADDRESS IN	18b. SUBMIT INV BELOW IS C			SHOWN IN BLC ADDENDUM	OCK 18a UNLE	SS BLOCK	
19. 20. ITEM NO. SCHEDULE OF SUPPLIES/SERVICES				<u> </u>	22. JNIT	23. UNIT PRIC	E	24. AMOUNT	
(Use Rever	se and/or Attach Additiona	al Sheets as Necessa	ary)						
25. ACCOUNTING AND APPROPRIAT		26	26. TOTAL AWARD AMOUNT (For Govt. Use Only)						
27a. SOLICITATION INCORPORATES 27b. CONTRACT/PURCHASE ORDER					DENDA			NOT ATTACHED	
28. CONTRACTOR IS REQUIRED COPIES TO ISSUING OFFICE. (DELIVER ALL ITEMS SET FORTH ADDITIONAL SHEETS SUBJECT	CONTRACTOR AGREES	TO FURNISH AND	ON ANY	29. AWARD OF CC DATED BLOCK 5), INCLUI SET FORTH HERE	DING	Your of Any addition	NS OR CHANG		
30a. SIGNATURE OF OFFEROR/CON	ITRACTOR		31a. UNITED STA	TES OF AMERICA	A (SIG	GNATURE OF C	CONTRACTING	GOFFICER)	
30b. NAME AND TITLE OF SIGNER (31b. NAME OF CONTRACTING OFFICER (Type or print) 31c. DATE SIGNED								

19. ITEM NO.	20. SCHEDULE OF SUPPLIES/SERVICES			21. QUANTITY	22. UNIT	23. UNIT PRICE	24. AMOUNT			
32a. QUANTITY IN (COLUMN	21 HAS BEEN								
RECEIVED		NSPECTED ACCEP	TED, AND CONFORMS	тот	HE CONT	RACT, EXCEP	T AS NOT	red:		
32b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE 32			32c. DATE			INTED NAME AND TITLE OF AUTHORIZED GOVERNMENT PRESENTATIVE				
32e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTA					32f. TELPHONE NUMBER OF AUTHORZED GOVERNMENT				MENT REPRESENTATIVE	
				3		32g. E-MAIL OF AUTHORIZED GOVERNMENT REPRESENTATIVE				
33. SHIP NUMBER	33. SHIP NUMBER 34. VOUCHER NUMBER 34.		35. AMOUNT VERIFIED 36. PAY		MENT 37. CHECK NUMBER					
PARTIAL 38. S/R ACCOUNT I	FINAL NO.	39. S/R VOUCHER NUMBER	40. PAID BY			· · -				
41a. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT 42a. RECEIVED BY (Print)										
41b. SIGNATURE AND TITLE OF CERTIFYING OFFICER		41c. DATE								
			42b. RECEIVED AT (Location)							
			42c.	42c. DATE REC'D (YY/MM/DD) 42d. TOTAL CONTAINERS				IERS		