

SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS OFFEROR TO COMPLETE BLOCKS 12, 17, 23, 24, AND 30				1. REQUISITION NUMBER MMP2014SSA003		PAGE 1 OF 21		
2. CONTRACT NO.		3. AWARD/EFFECTIVE DATE	4. ORDER NUMBER		5. SOLICITATION NUMBER M67001-14-Q-0232		6. SOLICITATION ISSUE DATE 30-Jun-2014	
7. FOR SOLICITATION INFORMATION CALL:		a. NAME NANCY B. PETERSON			b. TELEPHONE NUMBER (No Collect Calls) 910-451-1582		8. OFFER DUE DATE/LOCAL TIME 12:00 PM 11 Jul 2014	
9. ISSUED BY CONTRACTING DEPARTMENT P O BOX 8368 (BLDG 1116) CAMP LEJEUNE NC 28547-8368 TEL: FAX: 910-451-2331		CODE M67001	10. THIS ACQUISITION IS <input checked="" type="checkbox"/> UNRESTRICTED <input type="checkbox"/> SET ASIDE: % FOR <input type="checkbox"/> SB <input type="checkbox"/> HUBZONE SB <input type="checkbox"/> 8(A) <input type="checkbox"/> SVC-DISABLED VET-OWNED SB <input type="checkbox"/> EMERGING SB SIZE STD: NAICS:		11. DELIVERY FOR FOB DESTINATION UNLESS BLOCK IS MARKED <input type="checkbox"/> SEE SCHEDULE 13a. THIS CONTRACT IS A RATED ORDER UNDER DPAS (15 CFR 700) 13b. RATING		12. DISCOUNT TERMS	
15. DELIVER TO SEE SCHEDULE			16. ADMINISTERED BY CODE					
17a. CONTRACTOR/OFFEROR TEL. FACILITY CODE		CODE	18a. PAYMENT WILL BE MADE BY CODE					
<input type="checkbox"/> 17b. CHECK IF REMITTANCE IS DIFFERENT AND PUT SUCH ADDRESS IN OFFER			18b. SUBMIT INVOICES TO A DRESS SHOWN IN BLOCK 18a. UNLESS BLOCK BELOW IS CHECKED <input type="checkbox"/> SEE A DDENDUM					
19. ITEM NO.	20. SCHEDULE OF SUPPLIES/ SERVICES				21. QUANTITY	22. UNIT	23. UNIT PRICE	24. AMOUNT
SEE SCHEDULE								
25. ACCOUNTING AND APPROPRIATION DATA						26. TOTAL AWARD AMOUNT (For Govt. Use Only)		
<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				
28. CONTRACTOR IS REQUIRED TO SIGN THIS DOCUMENT AND RETURN COPIES <input type="checkbox"/> 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 HEREIN.				29. AWARD OF CONTRACT: REFERENCE <input type="checkbox"/> 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)			31c. DATE SIGNED		
30b. NAME AND TITLE OF SIGNER (TYPE OR PRINT)		30c. DATE SIGNED	31b. NAME OF CONTRACTING OFFICER (TYPE OR PRINT) TEL: EMAIL:					

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STANDARD FORM 1449 (REV 3/2005)
Prescribed by GSA
FAR (48 CFR) 53.212

SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS (CONTINUED)					PAGE 2 OF 21	
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 <input type="checkbox"/> RECEIVED <input type="checkbox"/> INSPECTED <input type="checkbox"/> 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		34. VOUCHER NUMBER		35. AMOUNT VERIFIED CORRECT FOR	36. PAYMENT	37. CHECK NUMBER
<input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL					<input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL	
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	

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Section SF 1449 - CONTINUATION SHEET

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0001	MULTI-FUNCTION CHAIR FFP CHAIR, MULTI-FUNCTION, TASK Brand name or equal to: SAUDER TREY 702-0651, or U-LOFT VECTOR 80186 SPECIFICATIONS: a. Convertible rocker chair disconnects from rolling task tray/stool b. Injection-molded black plastic, black metal seat plate and pneumatic gas lift c. Tilt lock control, adjustable tilt tension and height adjustment d. Mechanism 12-gauge steel, electro-coated for corrosion resistance e. Easy removal latch on back or sides of seat for panels; flush fasteners to prevent snagging f. Accomodates weight min 250 lb to max 300 lb g. Hard plastic casters, (5) star rolling base h. Task tray i. 360-degree swivel tilt j. Without arms k. Ergonomic seat and back contour and positioning l. Color Black; similar to Maharam Lariat or Valley Forge Springbuk m. Upholstered seat padding contoured high-density polyurethane foam 1-5/8" thick minimum n. Vinyl upholstery, minimum of 140,000 rubs, using Wyzenbeek standards; resistant to temperature change, stiffening and cracking o. Seat height: min 17" to max 21" p. Seat width: min 19" to max 21" q. Height adjustability: min 2" to max 3" r. Back width: min 18" to max 20" s. Overall height min 31" to max 36" t. Removable upholstered panels u. Fully assembled v. Manufacturer's warranty minimum 10 years	192	Each		

LIST MANF: _____ P/N: _____
OF THE PRODUCT YOU ARE QUOTING

FOB: Destination
MILSTRIP: MMP20014SS00063
PURCHASE REQUEST NUMBER: MMP20014SSA0063

NET AMT