

REQUEST FOR QUOTATION (THIS IS NOT AN ORDER)		THIS RFQ <input checked="" type="checkbox"/> IS <input type="checkbox"/> IS NOT A SMALL BUSINESS SET-ASIDE		PAGE OF PAGES 1 12	
1. REQUEST NO. N00173-14-Q-0409	2. DATE ISSUED 09/18/14	3. REQUISITION/PURCHASE REQUEST NO. 74-6413-14	4. CERT. FOR NAT. DEF. UNDER BDSA REG. 2 AND/OR DMS REG. 1	RATING ▷	
5a. ISSUED BY Supply Officer (Code 3410) NRL, Washington DC 20375			6. DELIVER BY (Date) TBD		
5b. FOR INFORMATION CALL (NO COLLECT CALLS)					
NAME Cheryl L. Benthall		TELEPHONE NUMBER AREA CODE NUMBER 202 767-0288		7. DELIVERY <input checked="" type="checkbox"/> FOB DESTINATION <input type="checkbox"/> OTHER (See Schedule)	
8. TO:			9. DESTINATION		
a. NAME All Quoters			a. NAME OF CONSIGNEE Stennis Space Center - NRL		
b. COMPANY			b. STREET ADDRESS 1005 Balch Blvd		
c. STREET ADDRESS			c. CITY Stennis Space Center		
d. CITY		e. STATE	f. ZIP CODE	d. STATE MS	e. ZIP CODE 39529-5004
10. PLEASE FURNISH QUOTATIONS TO THE ISSUING OFFICE IN BLOCK 5a ON OR BEFORE CLOSE OF BUSINESS (Date) 09/25/14		IMPORTANT: This is a request for information and quotations furnished are not offers. If you are unable to quote, please so indicate on this form and return it to the address in Block 5a. This request does not commit the Government to pay any costs incurred in the preparation of the submission of this quotation or to contract for supplies or service. Supplies are of domestic origin unless otherwise indicated by quoter. Any representations and/or certifications attached to this Request for Quotation must be completed by the quoter.			

11. SCHEDULE (Include applicable Federal, State and local taxes)

ITEM NO. (a)	SUPPLIES/ SERVICES (b)	QUANTITY (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)
	See attach continuation sheets.				

12. DISCOUNT FOR PROMPT PAYMENT ▷	a. 10 CALENDAR DAYS (%)	b. 20 CALENDAR DAYS (%)	c. 30 CALENDAR DAYS (%)	d. CALENDAR DAYS	
				NUMBER	PERCENTAGE

NOTE: Additional provisions and representations are are not attached.

13. NAME AND ADDRESS OF QUOTER			14. SIGNATURE OF PERSON AUTHORIZED TO SIGN QUOTATION		15. DATE OF QUOTATION
a. NAME OF QUOTER			16. SIGNER		
b. STREET ADDRESS					a. NAME (Type or print)
c. COUNTY					AREA CODE
d. CITY		e. STATE	f. ZIP CODE	c. TITLE (Type or print)	NUMBER

CONTINUATION SHEET

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NAME OF OFFEROR CONTRACTOR

All Quoters

ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0001	<p>Drive Storage Container 05_REDPS4USS Rev7 (FULL) 45drives.com Storinator 4.0 Redundant Fully Assembled 1.0 Each item to include the following: 16GB RAM, 1 each 500GB 5400RPM Boot drives, 1 each 10gb Intel X520 DA2 SFP+, 2 each E3-1275 processor, 2 each</p> <p>Brand Name or Equal</p> <p>If available please include a published price list or a cost breakdown and return the RFQ package to the following fax number (202)767-6678.</p> <p>Any questions concerning this Request for Quotation (RFQ) must be e-mailed to SolQnA@nrl.navy.mil at least five (5) days before the closing date shown in block 10 on page 1 of RFQ.</p>	4	EA		