REQUEST FOR QUOTATION (THIS IS NOT AN ORDER)	THIS RFQ [X] IS [ ] IS NOT A SMALL BUSINESS SET-ASIDE	PAGE 01 OF 12 PAGES

1. REQUEST NO.	2. DATE ISSUED	3. REQUISITION/PURCHASE REQUEST NO.	4. CERT. FOR NAT. DEF. UNDER BDSA REG. 2 AND/OR DMS REG. 1	RATING
N00173-14-Q-0352	08/13/2014	71-0244-14		

5a. ISSUED BY	6. DELIVER BY (Date)
Supply Officer (Code 3410) NRL Washington DC 20375-5329	TBD

5b. FOR INFORMATION CALL (NO COLLECT CALLS)			7. DELIVERY
NAME	TELEPHONE NUMBER		[X] FOB DESTINATION [ ] OTHER (See Schedule)
	AREA CODE	NUMBER	9. DESTINATION
Cynthia V. Offutt	202	767-3452	a. NAME OF CONSIGNEE: Naval Research Laboratory

8. TO:			9. DESTINATION
a. NAME: All Quoters	b. COMPANY		b. STREET ADDRESS: 4555 Overlook Ave S.W. Bldg 49
c. STREET ADDRESS			c. CITY: Washington
d. CITY	e. STATE	f. ZIP CODE	d. STATE: DC; e. ZIP CODE: 20375-5329

10. PLEASE FURNISH QUOTATIONS TO THE ISSUING OFFICE IN BLOCK 5a ON OR BEFORE CLOSE OF BUSINESS (Date)

08/25/2014

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 attached 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		
b. STREET ADDRESS	16. SIGNER	
c. COUNTY	a. NAME (Type or print)	b. TELEPHONE AREA CODE
d. CITY / e. STATE / f. ZIP CODE	c. TITLE (Type or print)	NUMBER

STANDARD FORM 36 JULY 1966 GENERAL SERVICES ADMINISTRATION FED. PROC. REG. (41 CFR) 1-16.101	CONTINUATION SHEET	REF. NO. OF DOC. BEING CONT'D N00173-14-Q-0352	PAGE OF 2 12

NAME OF OFFEROR CONTRACTOR

All Quoters

ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0001	Comsol Multiphysics, Named Single User License (NSL), for one (1) Named User.	1	ea		
0002	Acoustics Module for use with Comsol Multiphysics, Named Single User License (NSL), for one (1) Named User	1	ea		
0003	LiveLink for MATLAB for use with Comsol Multiphysics, Named Single User License (NSL), for one (1) Named User	1	ea		
0004	Nonlinear Structural Materials Module for use with Comsol Multiphysics, Named Single User License (NSL), for one (1) Named User	1	ea		
0005	Structural Mechanics Module for use with Comsol Multiphysics, Named Single User License (NSL), for one (1) Named User	1	ea		
0006	Comsol Multiphysics, Named Single User License (NSL), for one (1) Named User	1	ea		
0007	Acoustics Module for use with Comsol Multiphysics, Named Single User License (NSL), for one (1) Named User	1	ea		
0008	Structural Mechanics Module for use with Comsol Multiphysics, Named Single User License (NSL), for one (1) Named User	1	ea		
	Brand Named or Equal				
	If available please include a published price list or a cost breakdown and return the RFQ package to the following fax number 202-767-3875/6675.				
	Any questions concerning this Request for Quotation (RFQ) must be emailed to SolQnA@nrl.navy.mil at least five (5) days before the closing date shown in block 10 on page 1 of this RFQ.				