

**REQUEST FOR QUOTATION**  
**(THIS IS NOT AN ORDER)**

THIS RFO  IS  IS NOT A SMALL BUSINESS SET-ASIDE

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1. REQUEST NO. N00173-15-Q-0378  
2. DATE ISSUED 07/30/15  
3. REQUISITION/PURCHASE REQUEST NO. 69-3505-15  
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 20375-5329  
5b. FOR INFORMATION CALL (NO COLLECT CALLS)

NAME Lillian M Moore  
TELEPHONE NUMBER  
AREA CODE 202 NUMBER 767-3320  
6. DELIVER BY (Date) TBD  
7. DELIVERY  FOB DESTINATION  OTHER (See Schedule)

8. TO:  
a. NAME To all Quoters  
b. COMPANY  
9. DESTINATION  
a. NAME OF CONSIGNEE Naval Research Laboratory  
b. STREET ADDRESS 4555 Overlook Ave, SW

c. STREET ADDRESS  
c. CITY Washington  
d. CITY  
e. STATE DC f. ZIP CODE 20375

10. PLEASE FURNISH QUOTATIONS TO THE ISSUING OFFICE IN BLOCK 5a ON OR BEFORE CLOSE OF BUSINESS (Date) 08/04/15  
IMPORTANT: This is a request for information, and quotations furnished are not officers. 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 sheet				

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

STANDARD FORM 36 JULY 1966 GENERAL SERVICES ADMINISTRATION FED. PROC. REG. (41 CFR) 1 - 16.101	<b>CONTINUATION SHEET</b>	REF. NO. DOC. BEING CONT'D N00173-15-Q-0378	PAGE OF 2 16		
To All Vendors					
ITEM NO.		QUANTITY	UNIT	UNIT PRICE	AMOUNT
0001	Portable Class III Biological Safety Cabinet, 2-door airlock, exhaust blower and hose, aluminum transport case/stand Part #PGB-30 or equal	1	ea		
0002	Increase work area dimension to 36" wide Part #PGB-30UP36 or equal	1	ea		
0003	Spare Hepa Filters Part #HGB-883 or equal	3	ea		
0004	<p>Operation and maintenance manual Part # MANUAL</p> <p>Please fax quotation to Lillian Moore @202-767-1708 or Fed Ex to: Naval Research Laboratory, 4555 Overlook Ave SW, Code 3411.C, Washington DC 20375.</p> <p>Note: Any questions concerning this RFQ should be e-mailed to this account <a href="mailto:SolOnA@nrl.navy.mil">SolOnA@nrl.navy.mil</a> five (5) days prior to the closing date in Block 10 of the RFQ.</p> <p>Please attach a Published Price List or Cost Breakdown to the Quotation.</p>	1	ea		