

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 11
1. REQUEST NO. N00173-12-Q-0294	2. DATE ISSUED 8/14/12	3. REQUISITION/PURCHASE REQUEST NO. 56-9581-12	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			6. DELIVER BY (Date) 9/24/12	
5b. FOR INFORMATION CALL (NO COLLECT CALLS)			7. DELIVERY <input checked="" type="checkbox"/> FOB DESTINATION <input type="checkbox"/> OTHER (See Schedule)	
NAME Diltricia Montgomery		TELEPHONE NUMBER AREA CODE: 202 NUMBER: 767-0022		9. DESTINATION
8. TO:			a. NAME OF CONSIGNEE Naval Research Laboratory	
a. NAME All Quoters		b. COMPANY		b. STREET ADDRESS 4555 Overlook Ave SW
c. STREET ADDRESS			c. CITY Washington	
d. CITY		e. STATE	f. ZIP CODE	d. STATE DC
				e. ZIP CODE 20375
10. PLEASE FURNISH QUOTATIONS TO THE ISSUING OFFICE IN BLOCK 5a ON OR BEFORE CLOSE OF BUSINESS (Date) 8/24/12		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 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			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

NAME OF OFFEROR CONTRACTOR

ALL QUOTERS

ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0001	ONT-612H Optical Network Tester Part no. 3076/07	1	ea		
0002	Mains Cable Straight Line US Plug Part no. K 781	1	ea		
0003	Rack mount Kit for ONT-612B or H Part no. 3076/92.03	1	ea		
0004	Module-E 10G/2.5G 1310_1550/SFP Slot Part no. 3076/92.08	1	ea		
0005	Lower Rate (155Mbps, 622Mbps, 2.5 Gbps) SONET/SDH Option Part no. 3061/93.34	1	ea		
0006	SDH/SONET Single Channel Part no. 3061/93.36	1	ea		
0007	10 GiGE LAN Part no. 3061/93.47	1	ea		
0008	10 GigE WAN Module-E Part no. 3061/93.48	1	ea		
0009	OTN 10.7G Part no. 3061/93.49	1	ea		
0010	OTN 11.05/11.1G Part no. 3061/93.50	1	ea		
0011	Lower Rate (OUT!) OUT Option Part no. 3061/93.57	1	ea		
0012	IPv6 Part no. 3061/93.62	1	ea		
0013	SFP Optics 1550nm for MTM Part no. 3061/96.27	1	ea		
	Brand name or equal				

CONTINUATION SHEET

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2 a 11

NAME OF OFFEROR CONTRACTOR

ALL QUOTERS

ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
	<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 emailed to SolQnA@nrl.navy.mil at least five (5) days before the closing date shown in block 10 on page 1 of the RFQ.</p>				