

REQUEST FOR QUOTATION (THIS IS NOT AN ORDER)			THIS RFO <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-0132	2. DATE ISSUED 04/04/12	3. REQUISITION/PURCHASE REQUEST NO. 68-4043-12	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) 60 days		
5b. FOR INFORMATION CALL (NO COLLECT CALLS)			7. DELIVERY		
NAME Lillian M Moore		TELEPHONE NUMBER		<input checked="" type="checkbox"/> FOB DESTINATION <input type="checkbox"/> OTHER (See Schedule)	
		AREA CODE 202	NUMBER 767-3320	9. DESTINATION	
8. TO:			a. NAME OF CONSIGNEE Naval Research Laboratory		
a. NAME To 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) 04/13/12		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			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

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		PAGE OF	
				N00173-12-Q-0132		2 11	
NAME OF OFFEROR CONTRACTOR							
To all Quoters							
ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT		
0001	Pfeiffer HiCube PRO, HIPACE 300 (DN 100 CF-F), ACP 15 Backing Pump, AVC 025 MA, Electromagnetic Angle Valve, Wheels, 110v 50/60Hz Part # PM S44 59 100 or equal	1	ea				
0002	Pfeiffer HiCube PRO, HIPACE 300 (DN 100 CF-F), ACP 15 Backing Pump, AVC 025 MA, Electromagnetic Angle Valve, Wheels, 5 meter cable set, 110v 50/60Hz Part # PM S44 59 120 or equal	1	ea				
0003	Vent Valve for HP300 Part # PM Z01 291 or equal	1	ea				
0004	Protection/Inlet Screen, CF-F Part # PM 016 336 or equal	1	ea				
0005	AVC 025 MA Isolation Valve, KF-25 Part # PF A44 506 or equal	1	ea				
0006	MVP 015 Diaphragm Pump, 120v Part # PK T05 064 or equal	2	ea				
0007	KF-16 Screw-in Flange Part # PK 050 108-T or equal	2	ea				
0008	Power Cable, IEC, 115v, 3m Part # P 4564 309 ZE or equal	2	ea				
<p>Please fax quotation to Lillian Moore @ 202-767-1708 or FEDEX to: Naval Research Laboratory, 4555 Overlook Ave SW, Code 3411, Washington DC 20375</p> <p>Note: Any questions concerning this Request for Quotation (RFQ) should be emailed to SolQnA@nrl.navy.mil at least five (5) days prior to the closing date shown in Block 10 on page 1 of this RFQ.</p> <p>Please attach a Published Price List or Cost Breakdown to the Quotation.</p>							