REQUEST FOR QUOTATION
(THIS IS NOT AN ORDER)

THIS RFQ [X] IS [ ] IS NOT A SMALL BUSINESS SET-ASIDE

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
N00173-04-Q-0087	5/12/04	68-5039-04		DO-C9

5a. ISSUED BY
Supply Officer, Code 3411, Naval Research Laboratory, Washington DC 20375-5329

6. DELIVER BY *(Date)*
06/24/04

5b. FOR INFORMATION CALL: *(NO COLLECT CALLS)*

NAME: Cynthia V. Offutt, Code 3411

TELEPHONE NUMBER: AREA CODE 202 NUMBER 767-3452

7. DELIVERY: [X] FOB DESTINATION [ ] OTHER *(See Schedule)*

8. TO:

a. NAME

b. COMPANY

c. STREET ADDRESS

d. CITY

e. STATE

f. ZIP CODE

9. DESTINATION

a. NAME OF CONSIGNEE: Naval Research Laboratory

b. STREET ADDRESS: 4555 Overlook Ave., S.W. Bldg 49

c. CITY: Washington

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)*: 5/24/04

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

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

b. 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 N00173-04-Q-0087	PAGE 2 OF 12

NAME OF OFFEROR CONTRACTOR

All Quoters

ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
001	High Power, wide band , 2-4 GHZ, 8W RF Amplifier (Part No. L0204-39) (Mfg: Microwave Power, Inc) Brand Name or Equal Please Fax quotation to Cynthia V. Offutt @ 202-767-1708 or Fed Ex to: Naval Research Laboratory, 4555 Overlook Ave S W., Code 3411 , Washington DC 20375 Note: Any questions concerning this RFQ should be e-mailed to this account SolQnA@labmis.nrl.navy.mil five (5) days prior to the closing date in block 10 of the RFQ. Please attach a Published Price List or Cost Breakdown ot the Quotation	12	ea		