REQUEST FOR QUOTATION
(THIS IS NOT AN ORDER)

THIS RFQ ☐ IS ☒ IS NOT A SMALL BUSINESS SET-ASIDE

PAGE 1 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
N00173-04-Q-0126	07/14/04	53-4264-04		D0-C9

5a. ISSUED BY
Contracting Officer, NRL, 4555 Overlook Ave SW, Washington DC 20375

6. DELIVER BY (Date)
90 days

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

NAME: Lillian M Moore

TELEPHONE NUMBER: AREA CODE 202 NUMBER 767-3320

7. DELIVERY: ☒ FOB DESTINATION ☐ OTHER (See Schedule)

9. DESTINATION

a. NAME OF CONSIGNEE: Naval Research Laboratory

8. TO:

a. NAME: To All Bidders

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)
07/26/04

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 and Attachment #1				

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 NUMBER

c. TITLE (Type or print)

To All Buyers

ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0001.	Oscillator, Premium 10MHz -SC Ultra Low Noise Crystal, Part #501-04538 Rev F or equal, See attached Specifications	1	Ea		
0002.	Phase Locked Source, 600 MHz-SC Sorcerer, Part #500-12864 or equal, See attached Specifications	1	Ea		
0003.	Non-Recurring Engineering Fees	1	Ea		
0004.	Phase Locked Source, 14.2 GHz-SC Sorcerer, Part #500-12865 or equal, See attached Specifications	1	Ea		
0005.	Non-Recurring Engineering Fees	1	Ea		

Please fax quotation to Lillian Moore @ 202-767-1708 or FEDEX to: Naval Research Laboratory, 4555 Overlook Ave SW, Code 3411.C, Washington DC 20375.

Note: Any questions concerning this RFQ should be emailed to this account SolQnA@labmis.nrl.navy.mil five (5) days prior to the closing date in Block 10 of this RFQ.

Please attach a Published Price List or Cost Breakdown to the Quotation.