REQUEST FOR QUOTATION (THIS IS NOT AN ORDER)	THIS RFQ [X] 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-0055	3-26-04	56-9354-04		DO-C9

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

6. DELIVER BY (Date)

5b. FOR INFORMATION CALL (NO COLLECT CALLS)

NAME: Margaret Morton, Code 3411
TELEPHONE NUMBER: AREA CODE 202 NUMBER 767-1993

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

8. TO:

a. NAME: All Quoters
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): 4-5-04

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 sheets				

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)

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-0055	PAGE OF 2 12

NAME OF OFFEROR CONTRACTOR

All Quoters

ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0001	Solid-State (Flash) 'Disk' Drive, 77824 mbyte, SCSI Ultra320 interface, 40 mbytes/second sustained data rate, standard 3.5 inch HDD form factor, not greater than 2 inch tall. Part No: D3S320D 077824 MNN (A) Brand name or equal Please include a published price list or a cost breakdown and return the RFQ package to the following fax number 202-767-6678. Any questions concerning this Request for Quotation (RFQ) must be e-mailed to SolQnA@condor.nrl.navy.mil at least five (5) days before closing date shown in block 10 on page 1 of RFQ.	1	ea		