

SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEM
OFFEROR TO COMPLETE BLOCKS 12, 17, 23, 24, & 30

1. REQUISITION NUMBER: REQ-8000-10-0004
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2. CONTRACT NO: CPSC-D-07-0002
3. AWARD/EFFECTIVE DATE: 06/28/2010
4. ORDER NUMBER: 0005
5. SOLICITATION NUMBER:
6. SOLICITATION ISSUE DATE:

7. FOR SOLICITATION INFORMATION CALL: Eddie Ahmad
a. NAME: Eddie Ahmad
b. TELEPHONE NUMBER (No collect calls): (301) 504-7884
8. OFFER DUE DATE/LOCAL TIME: ET

9. ISSUED BY: CONSUMER PRODUCT SAFETY COMMISSION
DIV OF PROCUREMENT SERVICES
4330 EAST WEST HWY
ROOM 517
BETHESDA MD 20814
CODE: FMPS
10. THIS ACQUISITION IS:
 UNRESTRICTED OR SET ASIDE: % FOR:
 SMALL BUSINESS EMERGING SMALL BUSINESS
NAICS: HUBZONE SMALL BUSINESS SOLE SOURCE
SIZE STANDARD: SERVICE-DISABLED VETERAN-OWNED SMALL BUSINESS 8(A)

11. DELIVERY FOR FOB DESTINATION UNLESS BLOCK IS MARKED: SEE SCHEDULE
12. DISCOUNT TERMS: Net 30
13a. THIS CONTRACT IS A RATED ORDER UNDER DPAS (15 CFR 700):
13b. RATING:
14. METHOD OF SOLICITATION: RFQ IFB RFP

15. DELIVER TO: CONSUMER PRODUCT SAFETY COMMISSION
DIRECTORATE FOR LABORATORY SCIENCES
10901 DARNESTOWN ROAD
GAITHERSBURG MD 20878
CODE: LS
16. ADMINISTERED BY: CONSUMER PRODUCT SAFETY COMMISSION
DIV OF PROCUREMENT SERVICES
4330 EAST WEST HWY
ROOM 517
BETHESDA MD 20814
CODE: FMPS

17a. CONTRACTOR/OFFEROR: THERMO NITON ANALYZERS LLC
900 MIDDLESEX TURNPIKE BUILDING 8
BILLERICA MA 01821-3926
FACILITY CODE:
18a. PAYMENT WILL BE MADE BY: CONSUMER PRODUCT SAFETY COMMISSION
DIVISION OF FINANCIAL SERVICES
4330 EAST WEST HWY, ROOM 522
BETHESDA MD 20814
CODE: FMFS
TELEPHONE NO:

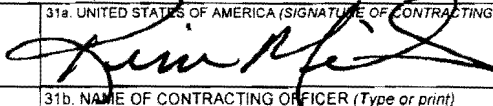
17b. CHECK IF REMITTANCE IS DIFFERENT AND PUT SUCH ADDRESS IN OFFER
 18b. SUBMIT INVOICES TO ADDRESS SHOWN IN BLOCK 18a UNLESS BLOCK BELOW IS CHECKED SEE ADDENDUM

19. ITEM NO.	20. SCHEDULE OF SUPPLIES/SERVICES	21. QUANTITY	22. UNIT	23. UNIT PRICE	24. AMOUNT
	DUNS Number: [REDACTED] TASK ORDER 0005 In accordance with contract CPSC-D-07-0002, the contractor shall provide the following NITON Analyzers as indicated below: Fund: 0100A10DOP FISCAL YEAR: 2010 BPAC: 9945300000 Organization: CFI0008000 Object Class: 311B0 Continued ... (Use Reverse and/or Attach Additional Sheets as Necessary)				

25. ACCOUNTING AND APPROPRIATION DATA: 0100A10DOP-2010-9945300000-CFI0008000-311B0
26. TOTAL AWARD AMOUNT (For Govt. Use Only): \$365,925.00

27a. SOLICITATION INCORPORATES BY REFERENCE FAR 52.212-1, 52.212-4, FAR 52.212-3 AND 52.212-5 ARE ATTACHED. ADDENDA ARE ARE NOT ATTACHED.
 27b. CONTRACT/PURCHASE ORDER INCORPORATES BY REFERENCE FAR 52.212-4. FAR 52.212-5 IS ATTACHED. ADDENDA ARE ARE NOT ATTACHED.

28. CONTRACTOR IS REQUIRED TO SIGN THIS DOCUMENT AND RETURN COPIES TO ISSUING OFFICE. CONTRACTOR AGREES TO FURNISH AND DELIVER ALL ITEMS SET FORTH OR OTHERWISE IDENTIFIED ABOVE AND ON ANY ADDITIONAL SHEETS SUBJECT TO THE TERMS AND CONDITIONS SPECIFIED HEREIN.
 29. AWARD OF CONTRACT REF. OFFER DATED _____ YOUR OFFER ON SOLICITATION (BLOCK 5), INCLUDING ANY ADDITIONS OR CHANGES WHICH ARE SET FORTH HEREIN, IS ACCEPTED AS TO ITEMS:

30a. SIGNATURE OF OFFEROR/CONTRACTOR: [REDACTED]
31a. UNITED STATES OF AMERICA (SIGNATURE OF CONTRACTING OFFICER): 
30b. NAME AND TITLE OF SIGNER (Type or print):
30c. DATE SIGNED:
31b. NAME OF CONTRACTING OFFICER (Type or print): Kim Miles
31c. DATE SIGNED: 6-28-10

Todd Steiner sm

19 ITEM NO	20 SCHEDULE OF SUPPLIES/SERVICES	21 QUANTITY	22 UNIT	23 UNIT PRICE	24 AMOUNT
0001	XL31700 Analyzer, to include chemistry mode, signature match mode, superchem mode, flip-up screen and the following: Clip-on Backscatter SHield, XL3 Electronic Analyzer Suite (B) Plastics Analysis (H) Portable Test Stand, XLS Carry Case Belt Holster One certified alloy reference standard One certified plastic reference standard The total amount of award: \$365,925.00. The obligation for this award is shown in box 26.	15	EA	24,395.00	365,925.00

32a. QUANTITY IN COLUMN 21 HAS BEEN RECEIVED INSPECTED NOTED: _____ ACCEPTED, AND CONFORMS TO THE CONTRACT, EXCEPT AS

32b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE _____ 32c. DATE _____ 32d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE _____

32e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE _____ 32f. TELEPHONE NUMBER OF AUTHORIZED GOVERNMENT REPRESENTATIVE _____

32g. E-MAIL OF AUTHORIZED GOVERNMENT REPRESENTATIVE _____

33. SHIP NUMBER _____ 34. VOUCHER NUMBER _____ 35. AMOUNT VERIFIED CORRECT FOR _____ 36. PAYMENT COMPLETE PARTIAL FINAL 37. CHECK NUMBER _____

38. S/R ACCOUNT NUMBER _____ 39. S/R VOUCHER NUMBER _____ 40. PAID BY _____

41a. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT _____ 41b. SIGNATURE AND TITLE OF CERTIFYING OFFICER _____ 41c. DATE _____ 42a. RECEIVED BY (Print) _____

42b. RECEIVED AT (Location) _____

42c. DATE REC'D (YY/MM/DD) _____ 42d. TOTAL CONTAINERS _____