

SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL PRODUCTS AND COMMERCIAL SERVICES**NOTE: OFFEROR TO COMPLETE BLOCKS 12, 17, 23, 24 AND 30.**

2. CONTRACT NUMBER				3. AWARD/EFFECTIVE DATE		4. ORDER NUMBER		1. REQUISITION NUMBER		PAGE 1 OF 7	
5. SOLICITATION NUMBER 15B11025Q00000002				6. SOLICITATION ISSUE DATE 11/08/2024				7. FOR SOLICITATION INFORMATION CALL: a. NAME AKCAWOOD@BOP.GOV			
b. TELEPHONE NUMBER (No collect calls)				8. OFFER DUE DATE / LOCAL TIME 11/22/2024 02:00 ET				9. ISSUED BY Federal Bureau of Prisons FCI Manchester 805 Fox Hollow Road Manchester, KY 40962 CODE 15B110			
10. THE ACQUISITION IS <input checked="" type="checkbox"/> UNRESTRICTED OR <input type="checkbox"/> SET ASIDE: % FOR <input type="checkbox"/> SMALL BUSINESS <input type="checkbox"/> HUBZONE SMALL BUSINESS <input type="checkbox"/> SERVICE-DISABLED VETERAN-OWNED SMALL BUSINESS (SDVOSB) <input type="checkbox"/> WOMEN-OWNED SMALL BUSINESS (WOSB) <input type="checkbox"/> ECONOMICALLY DISADVANTAGED WOMEN-OWNED SMALL BUSINESS (EDWOSB) <input type="checkbox"/> 8(A) NORTH AMERICAN INDUSTRY CLASSIFICATION STANDARD (NAICS): 311511 SIZE STANDARD:				11. DELIVERY FOR FREE ON BOARD (FOB) DESTINATION UNLESS BLOCK IS MARKED <input type="checkbox"/> SEE SCHEDULE				12. DISCOUNT TERMS NET 30			
13a. THIS CONTRACT IS A RATED ORDER UNDER THE DEFENSE PRIORITIES AND ALLOCATIONS SYSTEM - DPAS (15 CFR 700) <input type="checkbox"/>				13b. RATING				14. METHOD OF SOLICITATION <input checked="" type="checkbox"/> REQUEST FOR QUOTE (RFQ) <input type="checkbox"/> INVITATION FOR BID (IFB) <input type="checkbox"/> REQUEST FOR PROPOSAL (RFP)			
15. DELIVER TO SEE SCHEDULE CODE				16. ADMINISTERED BY CODE				17a. CONTRACTOR/OFFEROR CODE FACILITY CODE			
18a. PAYMENT WILL BE MADE BY CODE				17b. CHECK IF REMITTANCE IS DIFFERENT AND PUT SUCH ADDRESS IN OFFER <input type="checkbox"/>				18b. SUBMIT INVOICES TO ADDRESS SHOWN IN BLOCK 18a UNLESS BLOCK BELOW IS CHECKED <input type="checkbox"/> SEE ADDENDUM			
19. ITEM NUMBER		20. SCHEDULE OF SUPPLIES/SERVICES				21. QUANTITY		22. UNIT		23. UNIT PRICE	
24. AMOUNT		FY25 2ND QTR MILK REQUIREMENT FCI MANCHESTER WEEKLY DELIVERY SCHEDULE WILL BE ISSUED DELIVERY ON OR AFTER JANUARY 1, 2025 EVALUATION FACTORS: PRICE AND PAST PERFORMANCE FIRM FIXED PRICE Firm Fixed Price See Continuation Sheet(s) (Use Reverse and/or Attach Additional Sheets as Necessary)									
25. ACCOUNTING AND APPROPRIATION DATA								26. TOTAL AWARD AMOUNT (For Government Use Only)			
27a. SOLICITATION INCORPORATES BY REFERENCE (FEDERAL ACQUISITION REGULATION) FAR 52.212-1, 52.212-4. FAR 52.212-3 AND 52.212-5 ARE ATTACHED. ADDENDA <input checked="" type="checkbox"/> ARE <input checked="" type="checkbox"/> ARE NOT ATTACHED								27b. CONTRACT/PURCHASE ORDER INCORPORATES BY REFERENCE FAR 52.212-4. FAR 52.212-5 IS ATTACHED. ADDENDA <input type="checkbox"/> ARE <input type="checkbox"/> 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.								29. AWARD OF CONTRACT: REFERENCE OFFER DATED ____ YOUR OFFER ON SOLICITATION (BLOCK 5) INCLUDING ANY ADDITIONS OR CHANGES WHICH ARE SET FORTH HEREIN, IS ACCEPTED AS TO ITEMS: <input type="checkbox"/>			
30a. SIGNATURE OF OFFEROR/CONTRACTOR								31a. UNITED STATES OF AMERICA (SIGNATURE OF CONTRACTING OFFICER)			
30b. NAME AND TITLE OF SIGNER (Type or print)				30c. DATE SIGNED		31b. NAME OF THE CONTRACTING OFFICER (Type or print) Andre Cawood				31c. DATE SIGNED	

19. ITEM NUMBER	20. SCHEDULE OF SUPPLIES/SERVICES	21. QUANTITY	22. UNIT	23. UNIT PRICE	24. AMOUNT

32a. QUANTITY IN COLUMN 21 HAS BEEN

☐ RECEIVED ☐ INSPECTED ☐ ACCEPTED, AND CONFORMS TO THE CONTRACT, EXCEPT AS NOTED: _____

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

42a. RECEIVED BY (*Print*)

41b. SIGNATURE AND TITLE OF CERTIFYING OFFICER

41c. DATE

42b. RECEIVED AT (*Location*)

42c. DATE REC'D (YY/MM/DD)

42d. TOTAL CONTAINERS

Table of Contents

<u>Section</u>	<u>Description</u>	<u>Page Number</u>
	Solicitation/Contract Form.....	1
1	Commodity or Services Schedule.....	4
2	Contract Clauses.....	5
3	List of Attachments.....	6
4	Solicitation Provisions.....	7

Section 1 - Commodity or Services Schedule

SCHEDULE OF SUPPLIES/SERVICES

CONTINUATION SHEET

ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0001	Cottage Cheese, 5 pound container Dairy, Cottage Cheese, Cultured or Acidified, Low Fat (2%), Fat Free, Cottage Cheese, or No Salt Added Low Fat Types, Unflavored, Small or Large Curd, Once the cottage cheese is packaged, the cottage cheese must have a remaining shelf life of at least 60 days. (CID A-A-20154C, Group I or II, Style A or B, Types 2, 3, 4, or 5, Flavor PSC: 8910	104	CO	\$_____	\$_____
ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0002	Skim Milk, 1/2 Pints, Each-1 Dairy, Milk, Pasteurized, Nonfat, Skim, or Fat Free, No Flavor. (CID A-A-20338A, Group I, Type D, Flavor 5 - No Flavor, Packaging size c or d, Agricultural practice (1)). ½ pint containers. PSC: 8910	116,046	EA	\$_____	\$_____

Section 2 - Contract Clauses

This Section Is Intentionally Left Blank

Section 3 - List of Attachments

This Section Is Intentionally Left Blank

Section 4 - Solicitation Provisions

This Section Is Intentionally Left Blank