

<b>SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEM</b> Offeror To Complete Block 12, 17, 23, 24, & 30				<b>1. Requisition Number</b> SEE SCHEDULE		<b>Page</b> 1 <b>Of</b> 4	
<b>2. Contract No.</b> SPRDL1-12-D-0056		<b>3. Award/Effective Date</b> 2015MAR06		<b>4. Order Number</b> 0006		<b>5. Solicitation Number</b>	
<b>7. For Solicitation Information Call:</b>		<b>A. Name</b> MICHAEL HOGUE			<b>B. Telephone Number (No Collect Calls)</b> (586)282-3225		<b>6. Solicitation Issue Date</b>
<b>9. Issued By</b> DLA LAND WARREN WARREN, MI 48397-5000 HTTP://CONTRACTING.TACOM.ARMY.MIL			<b>Code</b> SPRDL1	<b>10. This Acquisition is</b> <input checked="" type="checkbox"/> Unrestricted <b>OR</b> <input type="checkbox"/> Set Aside: % For:			
				<input type="checkbox"/> Small Business	<input type="checkbox"/> Women-Owned Small Business (WOSB) Eligible Under the Women-Owned Small Business Program		
				<input type="checkbox"/> Hubzone Small Business	<input type="checkbox"/> EDWOSB		
				<input type="checkbox"/> Service-Disabled Veteran-Owned Small Business	NAICS: 326211		
				<input type="checkbox"/> 8(A)	Size Standard:		
<b>11. Delivery For FOB Destination Unless Block Is Marked</b> <input checked="" type="checkbox"/> See Schedule		<b>12. Discount Terms</b> NET 30 DAYS		<input checked="" type="checkbox"/> <b>13a. This Contract Is A Rated Order Under DPAS (15 CFR 700)</b>		<b>13b. Rating</b> DOA4	
				<b>14. Method Of Solicitation</b> <input type="checkbox"/> RFQ <input type="checkbox"/> IFB <input type="checkbox"/> RFP			
<b>15. Deliver To</b> SEE SCHEDULE			<b>Code</b> W25G1U	<b>16. Administered By</b> DCMA CHICAGO 1523 WEST CENTRAL ROAD BLDG 203 ARLINGTON HEIGHTS IL 60005-2451			<b>Code</b> S1403A
<b>Telephone No.</b>							
<b>17a. Contractor/Offeror</b> Code 1T1Z4 Facility		POMP'S TIRE SERVICE, INC. 2315 S CALHOUN RD NEW BERLIN, WI 53151-2707		<b>18a. Payment Will Be Made By</b> DFAS-COLUMBUS CENTER DFAS-CO WEST ENTITLEMENT OPERATIONS P.O. BOX 182381 COLUMBUS, OH 43218-2381			<b>Code</b> HQ0339
<b>Telephone No.</b> (920)435-8301							
<input type="checkbox"/> <b>17b. Check If Remittance Is Different And Put Such Address In Offer</b>			<input type="checkbox"/> <b>18b. Submit Invoices To Address Shown In Block 18a Unless Block Below Is Checked</b> <input type="checkbox"/> See Addendum				
<b>19. Item No.</b>	<b>20. Schedule Of Supplies/Services</b>			<b>21. Quantity</b>	<b>22. Unit</b>	<b>23. Unit Price</b>	<b>24. Amount</b>
	SEE SCHEDULE						
	(Use Reverse and/or Attach Additional Sheets As Necessary)						
<b>25. Accounting And Appropriation Data</b> SEE CONTRACT ADMINISTRATION DATA						<b>26. Total Award Amount (For Govt. Use Only)</b> \$15,754.20	
<input type="checkbox"/> <b>27a. Solicitation Incorporates By Reference FAR 52.212-1, 52.212-4, FAR 52.212-3 And 52.212-5 Are Attached. Addenda</b> <input type="checkbox"/> Are <input type="checkbox"/> Are Not Attached.							
<input checked="" type="checkbox"/> <b>27b. Contract/Purchase Order Incorporates By Reference FAR 52.212-4, FAR 52.212-5 Is Attached. Addenda</b> <input checked="" type="checkbox"/> Are <input type="checkbox"/> Are Not Attached.							
<input type="checkbox"/> <b>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.</b>				<input type="checkbox"/> <b>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:</b>			
<b>30a. Signature Of Offeror/Contractor</b>				<b>31a. United States Of America (Signature Of Contracting Officer)</b> /SIGNED/			
<b>30b. Name And Title Of Signer (Type Or Print)</b>		<b>30c. Date Signed</b>		<b>31b. Name Of Contracting Officer (Type Or Print)</b> LEAH BOURDEAU LEAH.C.BOURDEAU.CIV@MAIL.MIL (586)282-3140		<b>31c. Date Signed</b> 2015MAR06	

19. Item No.	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		37. Check Number	
<input type="checkbox"/> Partial	<input type="checkbox"/> Final			<input type="checkbox"/> Complete <input type="checkbox"/> Partial <input type="checkbox"/> Final			
38. S/R Account No.		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

<b>CONTINUATION SHEET</b>	<b>Reference No. of Document Being Continued</b> <b>PIIN/SIIN</b> SPRDL1-12-D-0056/0006 <b>MOD/AMD</b>	<b>Page 2 of 4</b>
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**Name of Offeror or Contractor:** POMP'S TIRE SERVICE, INC.

SUPPLEMENTAL INFORMATION

Buyer Name: MICHAEL HOGUE  
Buyer Office Symbol/Telephone Number: ZGA/(586)282-3225  
Type of Contract 1: Firm Fixed Price  
Kind of Contract: Supply Contracts and Priced Orders  
Type of Business: Large Business Performing in U.S.  
Surveillance Criticality Designator: C

\*\*\* End of Narrative A0000 \*\*\*

This is delivery order 0006 placed under contract SPRDL1-12-D-0056. The provisions of the basic contract are hereby incorporated by reference into delivery order 0006.

\*\*\* END OF NARRATIVE A0001 \*\*\*

CONTINUATION SHEET

Reference No. of Document Being Continued  
 PIIN/SIIN SPRDL1-12-D-0056/0006 MOD/AMD

Name of Offeror or Contractor: POMP'S TIRE SERVICE, INC.

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0013	SUPPLIES OR SERVICES AND PRICES/COSTS  WHEEL AND TIRE ASSEMBLY NSN: 2530-01-584-7914 Mfr CAGE: 19207 Mfr Part Number: 12548842				
0013AA	<p><u>THIRD ORDERING YEAR</u></p> <p>COMMODITY NAME: WHEEL AND TIRE ASSEMBLY                      CLIN CONTRACT TYPE:                          Firm Fixed Price                      PRON: EH57S107EH    PRON AMD: 02    ACRN: AA                      AMS CD: SM2B1100000                      PSC: 2530</p> <p><u>Packaging and Marking</u>                      PACKAGING/PACKING/SPECIFICATIONS:                          SEE BASIC CONTRACT FOR DETAILS                      UNIT PACK: 001                      LEVEL PRESERVATION: Military                      LEVEL PACKING: B</p> <p><u>Inspection and Acceptance</u>                      INSPECTION: Origin    ACCEPTANCE: Origin</p> <p><u>Deliveries or Performance</u>                      DOC                    SUPPL  <u>REL CD</u>    <u>MILSTRIP</u>    <u>ADDR</u>    <u>SIG CD</u>    <u>MARK FOR</u>    <u>TP CD</u>                      001    W56HZV5044006W    W25G1U    J                    2  <u>DEL REL CD</u>    <u>QUANTITY</u>    <u>DEL DATE</u>                      001                    22                    10-JUL-2015</p> <p>FOB POINT: Origin</p> <p>SHIP TO:                      (W25G1U)    SR W1BG DLA DISTRIBUTION                                  DDSP NEW CUMBERLAND FACILITY                                  2001 NORMANDY DRIVE DOOR 113 TO 134                                  NEW CUMBERLAND, PA, 17070-5002</p> <p><u>CONTRACT/DELIVERY ORDER NUMBER</u>                                  SPRDL1-12-D-0056/0006</p>	22	EA	\$ 716.10000	\$ 15,754.20

**CONTINUATION SHEET**

**Reference No. of Document Being Continued**

**PIIN/SIIN** SPRDL1-12-D-0056/0006 **MOD/AMD**

**Name of Offeror or Contractor:** POMP'S TIRE SERVICE, INC.

CONTRACT ADMINISTRATION DATA

LINE	PRON/ AMS CD/ MIPR/ <u>GFEB</u> <u>ATA</u>	OBLG <u>STAT</u>	JO NO/ <u>ACCT ASSIGN</u>	ACRN	OBLIGATED <u>AMOUNT</u>
0013AA	EH57S107EH SM2B1100000	2		AA	\$ 15,754.20
TOTAL					\$ 15,754.20

<u>ACRN</u>	<u>ACCOUNTING CLASSIFICATION</u>	OBLIGATED <u>AMOUNT</u>
AA 97 X4930AC9D 6D 26KB S20113 W56HZV		\$ 15,754.20
TOTAL		\$ 15,754.20

LINE	<u>ACRN</u>	<u>EDI/SFIS ACCOUNTING CLASSIFICATION</u>
0013AA	AA 97 0X0X4930AC9D	S20113 6D0000SM2B110000026KB S20113 W56HZV