

SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEM Offeror To Complete Block 12, 17, 23, 24, & 30				1. Requisition Number SEE SCHEDULE		Page 1 Of 5	
2. Contract No. SPRDL1-13-D-0037		3. Award/Effective Date 2013SEP23		4. Order Number 0001		5. Solicitation Number	
7. For Solicitation Information Call:		A. Name SHEILA NEIDELMAN		B. Telephone Number (No Collect Calls) (586)282-3165		6. Solicitation Issue Date	
9. Issued By DLA LAND WARREN WARREN, MI 48397-5000 HTTP://CONTRACTING.TACOM.ARMY.MIL			Code SPRDL1	10. This Acquisition is <input type="checkbox"/> Unrestricted OR <input type="checkbox"/> Set Aside: % For:			
Email: SHEILA.J.NEIDELMAN@US.ARMY.MIL			<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"/> Economically Disadvantaged Women-Owned Small Business (EDWOSB)			
			<input type="checkbox"/> Service-Disabled Veteran-Owned Small Business	NAICS: 326211			
			<input type="checkbox"/> 8(A)	Size Standard:			
11. Delivery For FOB Destination Unless Block Is Marked <input checked="" type="checkbox"/> See Schedule		12. Discount Terms		<input checked="" type="checkbox"/> 13a. This Contract Is A Rated Order Under DPAS (15 CFR 700)		13b. Rating DOA4	
15. Deliver To SEE SCHEDULE			Code W562RM	16. Administered By DCMA SANTA ANA 34 CIVIC CENTER PLAZA ROOM 5001 SANTA ANA, CA 92701-4056			
Telephone No.			Code S0513A	14. Method Of Solicitation <input type="checkbox"/> RFQ <input type="checkbox"/> IFB <input type="checkbox"/> RFP			
17a. Contractor/Offeror Code 6QND4		Facility		18a. Payment Will Be Made By DFAS-COLUMBUS CENTER DFAS-CO WEST ENTITLEMENT OPERATIONS P.O. BOX 182381 COLUMBUS, OH 43218-2381			
TACTICAL OFF ROAD, LLC 14422 ASTRONAUTICS LANE HUNTINGTON BEACH, CA 92647-2070				Code HQ0339			
Telephone No.			<input type="checkbox"/> 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 No.	20. Schedule Of Supplies/Services			21. Quantity	22. Unit	23. Unit Price	24. Amount
	SEE SCHEDULE						
	(Use Reverse and/or Attach Additional Sheets As Necessary)						
25. Accounting And Appropriation Data SEE CONTRACT ADMINISTRATION DATA						26. Total Award Amount (For Govt. Use Only) \$923,812.40	
<input type="checkbox"/> 27a. Solicitation Incorporates By Reference FAR 52.212-1, 52.212-4, FAR 52.212-3 And 52.212-5 Are Attached. Addenda <input type="checkbox"/> Are <input type="checkbox"/> Are Not Attached.							
<input checked="" type="checkbox"/> 27b. Contract/Purchase Order Incorporates By Reference FAR 52.212-4, FAR 52.212-5 Is Attached. Addenda <input checked="" type="checkbox"/> Are <input type="checkbox"/> Are Not Attached.							
<input type="checkbox"/> 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.				<input type="checkbox"/> 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				31a. United States Of America (Signature Of Contracting Officer) /SIGNED/			
30b. Name And Title Of Signer (Type Or Print)		30c. Date Signed		31b. Name Of Contracting Officer (Type Or Print) MARLENE J. SCHEELE MARLENE.SCHEELE@US.ARMY.MIL (586)282-3144		31c. Date Signed 2013SEP23	

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			
33. Ship Number <input type="checkbox"/> Partial <input type="checkbox"/> Final		34. Voucher Number	35. Amount Verified Correct For	36. Payment <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	

CONTINUATION SHEET	Reference No. of Document Being Continued PIIN/SIIN SPRDL1-13-D-0037/0001 MOD/AMD	Page 2 of 5
---------------------------	---	--------------------

Name of Offeror or Contractor: TACTICAL OFF ROAD, LLC

SUPPLEMENTAL INFORMATION

Buyer Name: SHEILA NEIDELMAN
Buyer Office Symbol/Telephone Number: ZGA/(586)282-3165
Type of Contract: Firm Fixed Price
Kind of Contract: Supply Contracts and Priced Orders
Type of Business: Other Small Business Performing in U.S.
Surveillance Criticality Designator: C

*** End of Narrative A0000 ***

CONTINUATION SHEET

Reference No. of Document Being Continued
PIIN/SIN SPRDL1-13-D-0037/0001 MOD/AMD

Name of Offeror or Contractor: TACTICAL OFF ROAD, LLC

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
	<p>FOB POINT: Origin</p> <p>SHIP TO: (W562RM) SU W0MC ARMY GENERAL SUPPLY DLA DISTRIBUTION RED RIVER HIGHWAY 82 WEST TEXARKANA, TX, 75507-5000</p> <p><u>CONTRACT/DELIVERY ORDER NUMBER</u> SPRDL1-13-D-0037/0001</p>				

CONTINUATION SHEET

Reference No. of Document Being Continued

PIIN/SIIN SPRDL1-13-D-0037/0001

MOD/AMD

Name of Offeror or Contractor: TACTICAL OFF ROAD, LLC

CONTRACT ADMINISTRATION DATA

LINE	PRON/ AMS CD/ MIPR/ <u>ITEM</u>	OBLG <u>STAT</u>	JO NO/ <u>ACCT ASSIGN</u>	ACRN	OBLIGATED <u>AMOUNT</u>
0011AA	EH37L230EH SM2B1100000	2		AA	\$ 923,812.40
TOTAL					\$ 923,812.40

<u>ACRN</u>	<u>ACCOUNTING CLASSIFICATION</u>	OBLIGATED <u>AMOUNT</u>
AA	97 X4930AC9D 6D 26KB S20113 W56HZV	\$ 923,812.40
TOTAL		\$ 923,812.40

LINE	<u>ITEM</u>	<u>ACRN</u>	<u>EDI/SFIS ACCOUNTING CLASSIFICATION</u>
0011AA	AA	97	0X0X4930AC9D S20113 6D0000SM2B110000026KB S20113 W56HZV