

**REQUEST FOR QUOTATION
(THIS IS NOT AN ORDER)**

THIS RFQ IS IS NOT A SMALL BUSINESS SET-ASIDE

1. REQUEST NO. SPM07016Q0035	2. DATE ISSUED 04/18/2016	3. REQUISITION/PURCHASE REQUEST NO. PR5246481	4. CERT. FOR NAT. DEF. UNDER BDSA REG. 2 AND/OR DMS REG. 1	RATING
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5a. ISSUED BY AMERICAN EMBASSY PANAMA CITY APARTADO 0816-02561, ATTN: GSO PANAMA	6. DELIVER BY (Date) 06/23/2016
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5b. FOR INFORMATION CALL (NO COLLECT CALLS)

NAME Luis E. Atencio	TELEPHONE NUMBER +5073175111	7. DELIVERY <input checked="" type="checkbox"/> FOB DESTINATION <input type="checkbox"/> OTHER (See Schedule)
8. TO:		9. DESTINATION a. NAME OF CONSIGNEE AMERICAN EMBASSY PANAMA CITY

a. NAME N/A	b. COMPANY NOVENDOR	b. STREET ADDRESS NEC - 2ND FLOOR, CLAYTON, ATTN: NAS
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c. STREET ADDRESS	c. CITY PANAMA CITY
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d. CITY	e. STATE	f. ZIP CODE	d. STATE	e. ZIP CODE
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10. PLEASE FURNISH QUOTATIONS TO THE ISSUING OFFICE IN BLOCK 5A ON OR BEFORE CLOSE OF BUSINESS (Date) 04/27/2016	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 services. Supplies are of domestic origin unless otherwise indicated by quoter. Any representations and/or certifications attached to this Request for Quotations must be completed by the quoter.
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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 LINE ITEMS				

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			14. SIGNATURE OF PERSON AUTHORIZED TO SIGN QUOTATION		15. DATE OF QUOTATION
a. NAME OF QUOTER			16. SIGNER		b. TELEPHONE
STREET ADDRESS					
c. COUNTY			a. NAME (Type or print)		AREA CODE
d. CITY	e. STATE	f. ZIP CODE	c. TITLE (Type or print)		NUMBER

11. SCHEDULE

(Include applicable Federal, State and local taxes)

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)
1	AN/PVS-15 (M593 tm) GEN 111 NVG OMEGA/DEFENDER TUBE OPTION or similar Funding Information: Total: \$0.00 ----- \$0.00	10.00	SE	\$0.00	\$0.00
2	Rapid assault Tool Battery Powered Hydraulic (RAT PAK tm) Door pusher/Jam spreader/Bolt cutter/Spreading wedge Backpack option in Black or similar Funding Information: Total: \$0.00 ----- \$0.00	1.00	EA	\$0.00	\$0.00
3	ATN Night Scout VX-2 Night Vision Binocular x 5 Magnification or similar Funding Information: Total: \$0.00 ----- \$0.00	1.00	EA	\$0.00	\$0.00