

1. REQUEST NO. STT10015Q0025	2. DATE ISSUED July /27/ 2015	3. REQUISITION/PURCHASE REQUEST NO. PR4483473	4. CERT. FOR NAT. DEF. UNDER BDSA REG. 2 AND/OR DMS REG. 1	RATING
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5A. ISSUED BY American Embassy Dili, Ave de Portugal Praia dos Coqueiros Dili, Timor - Leste	6. DELIVER BY (Date) June/14/2015
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5B. FOR INFORMATION CALL: (Name and telephone no.) (No collect calls)		7. DELIVERY [X] FOB DESTINATION [] OTHER (See Schedule)
NAME Retchel M. Soares	TELEPHONE NUMBER	
AREA CODE	NUMBER 3324684 ext 2074	

8. TO:	9. DESTINATION
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a. NAME	b. COMPANY	a. NAME OF CONSIGNEE American Embassy Dili
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c. STREET ADDRESS	b. STREET ADDRESS Ave de Portugal Praia dos Coqueiros
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d. CITY	e. STATE	f. ZIP CODE	c. CITY DILI	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) June 5, 2015	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)
1.	English Classes (2 Hours/Session) Beginner's Class Pre-intermediate Class Intermediate Class Advanced Class	52 52 52 52	Session Session Session Session		

12 DISCOUNT FOR PROMPT PAYMENT	a. 10 CALENDAR DAYS %	b. 20 CALENDAR DAYS %	c. 30 CALENDAR DAYS %	d. CALENDAR DAYS NUMBER %
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NOTE: Additional provisions and representations [X] 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. STREET ADDRESS				
c. COUNTRY			a. NAME (Type or print)	b. TELEPHONE
d. CITY	e. STATE	f. ZIP CODE	c. TITLE (Type or print)	AREA CODE
			NUMBER	