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|--|--|---|---|--|--------|-------------------------------------|----|--------------------------------|
| SOLICITATION, OFFER AND AWARD | | | 1. THIS CONTRACT IS A RATED ORDER UNDER DPAS (15 CFR 700) | | RATING | PAGE | OF | PAGES |
| 2. CONTRACT NUMBER 47QTCK18D0008 | | 3. SOLICITATION NUMBER QTA0016JCA0003 | | 4. TYPE OF SOLICITATION <input type="checkbox"/> SEALED BID (IFB) <input checked="" type="checkbox"/> NEGOTIATED (RFP) | | 5. DATE ISSUED 06/24/2016 | | 6. REQUISITION/PURCHASE NUMBER |
| 7. ISSUED BY | | | CODE | 8. ADDRESS OFFER TO (If other than item 7) Same as Block 7 | | | | |
| U.S. General Services Administration, Federal Acquisition Service, 333 W Broadway, Suite 950, San Diego, CA 92101 | | | | | | | | |

NOTE: In sealed bid solicitations "offer" and "offeror" mean "bid" and "bidder".

SOLICITATION

9. Sealed offers in original and 2 copies for furnishings the supplies or services in the Schedule will be received at the place specified in item 8, or if hand carried, in the depository located in GSA San Diego, CA until 4:00 pm local time ~~06/22/2016~~ 10/16/2016
(Hour) (Date)

CAUTION - LATE Submissions, Modifications, and Withdrawals: See Section L, Provision No. 52.214-7 or 52.215-1. All offers are subject to all terms and conditions contained in this solicitation.

| | | | | | |
|---------------------------|--|---------------------------------|---------------------------|-----------|-------------------|
| 10. FOR INFORMATION CALL: | A. NAME John Cavadias, Contracting Officer | B. TELEPHONE (NO COLLECT CALLS) | | | C. E-MAIL ADDRESS |
| | | AREA CODE 619 | NUMBER 696-2875 | EXTENSION | |

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OFFER (Must be fully completed by offeror)

NOTE: Item 12 does not apply if the solicitation includes the provisions at 52.214-16, Minimum Bid Acceptance Period.

12. In compliance with the above, the undersigned agrees, if this offer is accepted within 365 calendar days (60 calendar days unless a different period is inserted by the offeror) from the date for receipt of offers specified above, to furnish any or all items upon which prices are offered at the set opposite each item, delivered at the designated point(s), within the time specified in the schedule.

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|--|----------------------|----------------------|----------------------|------------------|
| 13. DISCOUNT FOR PROMPT PAYMENT (See Section I, Clause No. 52.232-8) | 10 CALENDAR DAYS (%) | 20 CALENDAR DAYS (%) | 30 CALENDAR DAYS (%) | CALENDAR DAYS(%) |
|--|----------------------|----------------------|----------------------|------------------|

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|--|---------------|---------|---------------|---------|
| 14. ACKNOWLEDGMENT OF AMENDMENTS (The offeror acknowledges receipt of amendments to the SOLICITATION for offerors and related documents numbered and dated): | AMENDMENT NO. | DATE | AMENDMENT NO. | DATE |
| | 1 | 8-2-16 | 3 | 8-17-16 |
| | 2 | 8-14-16 | 4 | 8-30-16 |

| | | | | | |
|--|------|-------|----------|--|--|
| 15A. NAME AND ADDRESS OF OFFEROR | CODE | 52302 | FACILITY | | 16. NAME AND THE TITLE OF PERSON AUTHORIZED TO SIGN OFFER (Type or print) Dawn M. Meline Leidos Contract Manager |
| 15A. NAME AND ADDRESS OF OFFEROR Leidos, Inc. 11951 Freedom way Reston, VA 20190 | | | | | |

| | | | | |
|-------------------------|--------------------------|--|---|--------------------------------------|
| 15B. TELEPHONE NUMBER | <input type="checkbox"/> | 15C. CHECK IF REMITTANCE ADDRESS IS DIFFERENT FROM ABOVE - ENTER SUCH ADDRESS IN SCHEDULE. | 17. SIGNATURE  | 18. OFFER DATE 13 Oct 2016 |
| AREA CODE 423 | NUMBER 899 | EXTENSION 5071 | | |

AWARD (To be completed by Government)

| | | | |
|---|------------|---|------|
| 19. ACCEPTED AS TO ITEMS NUMBERED | 20. AMOUNT | 21. ACCOUNTING AND APPROPRIATION | |
| 22. AUTHORITY FOR USING OTHER THAN FULL OPEN COMPETITION: <input type="checkbox"/> 10 U.S.C. 2304 (c) <input type="checkbox"/> 41 U.S.C. 3304(a) () | | 23. SUBMIT INVOICES TO ADDRESS SHOWN IN (4 copies unless otherwise specified) | ITEM |

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|--|-----------------------------|------|
| 24. ADMINISTERED BY (If other than Item 7) | 25. PAYMENT WILL BE MADE BY | CODE |
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| 26. NAME OF CONTRACTING OFFICER (Type or print) JOHN CAVADIAS | 27. UNITED STATES OF AMERICA  (Signature of Contracting Officer) | 28. AWARD DATE 11/17/2018 |
|---|--|-------------------------------------|

IMPORTANT - Award will be made on this Form, or on Standard Form 26, or by other authorized official written notice.