ABSTRACT OF OFFERS	SOLICITATION NO.	OPENING DATE	PAGE O F PAGES
ISSUING OFFICE		SUPPLIES OR SERVICES *(General Description)*	

NO.	NAME OF OFFEROR	ACCEPT-ANCE TIME * *(Days)*	BUSIN-ESS SIZE L	BUSIN-ESS SIZE S	ITEM NO. / QUANTITY / UNIT				DELIV-ERY TIME**	F.O.B. POINT	REMARKS
						$	$	$			

** Indicate by an X a 60-day acceptance.*
*** Indicate by an X if offer conforms to delivery time specifed in solicitation.*

I CERTIFY THAT I HAVE OPENED, READ AND RECORDED ON THIS ABSTRACT (AND CONTIN-UATION SHEETS, IF ANY) ALL OFFERS RECEIVED IN RESPONSE TO THE SOLICITATION.

TYPED NAME AND TITLE

SIGNATURE

DATE

NSN 7540-01-142-9844 149-102

STANDARD FORM 1409 (Rev.9-88)
Prescribed by GSA, FAR (48 CFR) 53.214 (f)

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ABSTRACT OF OFFERS - CONTINUATION

NO.	ITEM NO.								
	QUANTITY								
	UNIT								
		$	$	$	$	$	$	$	$

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