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|--------------------|--|--|------------------------------|--------------------------------|
| 2. CONTRACT NUMBER | 3. SOLICITATION NUMBER NNG08214467R | 4. TYPE OF SOLICITATION <input type="checkbox"/> SEALED BID (IFB) <input checked="" type="checkbox"/> NEGOTIATED (RFP) | 5. DATE ISSUED 01/05/2009 | 6. REQUISITION/PURCHASE NUMBER |
|--------------------|--|--|------------------------------|--------------------------------|

| | |
|--|--|
| 7. ISSUED BY CODE GSFC NASA/Goddard Space Flight Center Procurement Operations Division Greenbelt MD 20771 | 8. ADDRESS OFFER TO (If other than Item 7) |
|--|--|

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

SOLICITATION

9. Sealed offers in original and 7 copies for furnishing 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 _____ until 1300 ET local time 02/20/2009
(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 Pamela J. Taylor | B. TELEPHONE (NO COLLECT CALLS) | | | C. E-MAIL ADDRESS Pamela.J.Taylor@nasa.gov |
| | AREA CODE 757 | NUMBER 824-1068 | EXT. | | |

11. TABLE OF CONTENTS

| (X) | SEC. | DESCRIPTION | PAGE(S) | (X) | SEC. | DESCRIPTION | PAGE(S) |
|--------------------------|------|---------------------------------------|---------|--|------|--|---------|
| PART I - THE SCHEDULE | | | | PART II - CONTRACT CLAUSES | | | |
| <input type="checkbox"/> | A | SOLICITATION/CONTRACT FORM | | <input type="checkbox"/> | I | CONTRACT CLAUSES | |
| <input type="checkbox"/> | B | SUPPLIES OR SERVICES AND PRICES/COSTS | | PART III - LIST OF DOCUMENTS, EXHIBITS AND OTHER ATTACH. | | | |
| <input type="checkbox"/> | C | DESCRIPTION/SPECS./WORK STATEMENT | | <input type="checkbox"/> | J | LIST OF ATTACHMENTS | |
| <input type="checkbox"/> | D | PACKAGING AND MARKING | | PART IV - REPRESENTATIONS AND INSTRUCTIONS | | | |
| <input type="checkbox"/> | E | INSPECTION AND ACCEPTANCE | | <input type="checkbox"/> | K | REPRESENTATIONS, CERTIFICATIONS AND OTHER STATEMENTS OF OFFERORS | |
| <input type="checkbox"/> | F | DELIVERIES OR PERFORMANCE | | <input type="checkbox"/> | L | INSTRS., CONDS., AND NOTICES TO OFFERORS | |
| <input type="checkbox"/> | G | CONTRACT ADMINISTRATION DATA | | <input type="checkbox"/> | M | EVALUATION FACTORS FOR AWARD | |
| <input type="checkbox"/> | H | SPECIAL CONTRACT REQUIREMENTS | | | | | |

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 _____ 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 price set opposite each item, delivered at the designated point(s), within the time specified in the schedule.

| | | | | |
|---|----------------------|----------------------|----------------------|-------------------|
| 13. DISCOUNT FOR PROMPT PAYMENT (See Section I, Clause No. 52.232.8) | 10 CALENDAR DAYS (%) | 20 CALENDAR DAYS (%) | 30 CALENDAR DAYS (%) | CALENDAR DAYS (%) |
|---|----------------------|----------------------|----------------------|-------------------|

| | | | | |
|--|---------------|------|---------------|------|
| 14. ACKNOWLEDGEMENT 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 |
| | | | | |

| | | | |
|----------------------------------|------|----------|--|
| 15A. NAME AND ADDRESS OF OFFEROR | CODE | FACILITY | 16. NAME AND TITLE OF PERSON AUTHORIZED TO SIGN OFFER (Type or print) |
|----------------------------------|------|----------|--|

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

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 AND OPEN COMPETITION: <input type="checkbox"/> 10 U.S.C. 2304 (c) () <input type="checkbox"/> 41 U.S.C. 253 (c) () | | 23. SUBMIT INVOICES TO ADDRESS SHOWN IN (4 copies unless otherwise specified) | ITEM |
| 24. ADMINISTERED BY (If other than Item 7) CODE | | 25. PAYMENT WILL BE MADE BY CODE | |
| 26. NAME OF CONTRACTING OFFICER (Type or print) Pamela J. Taylor | | 27. UNITED STATES OF AMERICA (Signature of Contracting Officer) | |
| | | 28. AWARD DATE | |

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

CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED
NNG08214467R

PAGE 2 OF 2

NAME OF OFFEROR OR CONTRACTOR

| ITEM NO. (A) | SUPPLIES/SERVICES (B) | QUANTITY (C) | UNIT (D) | UNIT PRICE (E) | AMOUNT (F) |
|-----------------|---------------------------|-----------------|-------------|-------------------|---------------|
| | INCO TERMS 2: DESTINATION | | | | |