SULICITATION / OFFER				COMMERCI. 2, 17, 23, 24,		IS	1. REQUISITION	NUME	BER	PAGE 1 C)F 42	
2. CONTRACT NO. NBCD05002		3. AWARD/EFF DATE	ECTIVE 10/05/2004	4. ORDER NU	JMBER		5. SOLICITATIO NBCR0401		BER	6. SOLICIT	ATION ISSUE 07/30/2004	
7. FOR SOLICITA	TION	a. NAME					b. TELEPHONE	NUMB	ER (No collect		DUE DATE/ 09	
INFORMATION CA	ALL:	Marc G. Ma	cKeigan				calls) (202) 2			LOCAL TIN	ME 4:30 pm	9/07/2004
9. ISSUED BY			CODE	00003	10. THIS A	CQL	JISITION IS	11	DELIVERY FOR			
					V UNRI	ESTI	DICTED		B DESTINATION	12. DISCO	JNT TERMS	av
Dept of the Interior - Nat	ional Busines	s Center			1 =				ILESS BLOCK IS	20 da		% %
Washington DC Acquisit					SET A		•	• •	RKED	30 da		%
1849 C Street NW					. =		L BUSINESS ONE SMALL	1	SEE SCHEDULE 13a. THIS CON		ays .	%
					. –		NESS	[ORDER UND	ER DPAS (1	5 CFR 700\	
Washington, DC 20240					☐ 8((A)		13	. RATING			
TEL: () - ext.					NAICS: 0	6215	11	14.	METHOD OF SOLE	CITATION		——
FAX: (202) 208-4956 ex	xt.				SIZE STANDAR	D:		۔ ا		T IFB	 RF	ъ
15. DELIVER TO			CODE	ED9	16. ADMIN		RED BY			<u> </u>	· 	
Dept of the Interior - Nat	tional Busines	ee Cantar	1	<u></u>	-					CC	DE 00003	
Division of Employee an			et, NW MS 1	366,			erior - National Bus C Acquisition Bran		Center 324, 1849 C Street	NW		
Washington, DC 20240 Attn: Richard Hipkins		.			Washingti	on, C	C 20240					
17a, CONTRACTOR/ OFFEROR	CODE	•	FACILITY		18a. PAYM	IENT	WILL BE MADE E	Υ		CO	DE FIN	
Pembrooke Occupations	al Health	-	- 0001 -						enter, Denver Paym	ent Office	1	
2307 N Parham Rd	or records,				1		ervices, Mailstop D	-2777,1	P.O. Box 272025			
Richmond, VA 23229-31	163				Denver, C) 8 O	227-9025					
TELEPHONE NO. (804) 3					l							
17b. CHECK IF REMITT	TANCE IS DI	FFERENT AND I	PUT SUCH AL	DORESS IN			NOICES TO ADD CHECKED		SHOWN IN BLOCK SEE ADDENDU		BLOCK	
19.			20.		DEEC	1	21.	22.	23.	M	24.	
ITEM NO.		SCHEDULE (OF SUPPLIES	/SERVICES				UNIT	UNIT PR	ICE	AMOUN	T
	(Use Rev	erse and/or Attac	ch Additional S	heets as Nocess:	ary)		4					
25. ACCOUNTING AND					, ,	-			26. TOTAL AWAR	D AMOUNT	(For Govt. Us	e Only)
			Funding Info				<u>-</u>		1.			
27a. SOLICITATION I										✓ ARE	ARE NOT AT	TACHED
✓ 27b. CONTRACT/PUI					·					✓ ARE	ARE NOT AT	TACHED
28. CONTRACTOR IS RE TO ISSUING OFFICE SET FORTH OR OTH SUBJECT TO THE T	E. CONTRAC HERWISE ID	TOR AGREES 1 ENTIFIED ABOV	TO FURNISH A	AND DELIVER AI			AWARD OF CONT DATED INCLUDING ANY HEREIN, IS ACC	ADDIT	YOUR OFFER O			
30a, SIGNATURE OF OF	ERORICON	PRACTOR				31a.			MERICA (SIGNATO	RE OF CON	TRACTING O	FFICER)
							l all)	VV17 100	11 4	11	• •
305. NAME AND TITLE OF	F SIGNER	(Type or print)		30c. DATE SIGN	NED.	31h	NAME OF CONT	OACT!	IG OFFICER =	<u> </u>	31c. DATES	SIGNED
Russell M Bas			• <i>+</i>	10/5/69	1		Kate A. McKenna	V-1011	OFFICER (T)	pe or print)	10/5	704

	<u>.</u>		····	,		Page 2 of 42
19. ITEM NO.	20. SCHEDULE OF SUPPLIE	ES/SERVICES	21. QUANTITY	22. UNIT	23. UNIT PRICE	24. AMOUNT
19, ITEM NO.		ESISERVICES	QUANTITY	22. UNIT	23. UNIT PRICE	24, AMOUNT
32a. QUANTITY IN COLUMN	I 21 HAS BEEN				<u></u>	
		, AND CONFORMS TO THE	CONTRACT, EXCER	PT AS NOTED):	
32b. SIGNATURE OF AUTHOREPRESENTATIVE	ORIZED GOVERNMENT	32c. DATE	32d. PRINTED NA REPRESEN		E OF AUTHORIZED (GOVERNMENT
32e. MAILING ADDRESS OF	AUTHORIZED GOVERNMENT REPI	RESENTATIVE	32f. TELEPHONE	NUMBER OF	AUTHORIZED GOVE	RNMENT REPRESENTATIVE
			32g. E-MAIL OF A	UTHORIZED (GOVERNMENT REPP	RESENTATIVE
33. SHIP NUMBER	34. VOUCHER NUMBER	35. AMOUNT VERIFIED CORRECT FOR	36. PAYMENT			37. CHECK NUMBER
PARTIAL FINAL			COMPLETE	PART	TAL FINAL	
38. S/R ACCOUNT NUMBER	39. S/R VOUCHER NUMBER	40. PAID BY	,			
41a. I CERTIFY THIS ACC	COUNT IS CORRECT AND PROPER	FOR PAYMENT	42a. RECEIVED BY	(Print)		
41b. SIGNATURE AND TITLE	OF CERTIFYING OFFICER	41c. DATE				
			42b. RECEIVED AT	(Location)		
			42c. DATE REC'D	(YY/MM/E	DD) 42d. TOTAL	CONTAINERS

Line I Sumr		Document Number NBCD05002	Title Drug & Alco	hol Testing			Page 3 of 42
Line item			Delivery Date (Start Date to End Date)	Quantity	Unit of Issue	Hair Data	Total Cost
All Line Ite NBCR040	m prices for the Base	Period and all Option Yea	ars are from your Proposal E			Unit Price	(Includes Discounts) Solicitation
0001	Nationwide Collection	ons	10/01/2004	0.00	ea	\$27.000	\$ 0.00
	Quantities listed are	esting tab.) estimated. Quantities will I performance: LINE ITEMS	(10/01/2004 to 09/30/2005 y reports, chain of custody f be determined on individual \$ 0001-0014	orms, transport		n kits/supplies to co	llection site and
0002	Quality Control Spec	cimens	10/01/2004	0.00	ea	\$13.000	\$ 0.00
			(10/01/2004 to 09/30/2005))			
	(Preparing and Ship) ESTIMATED QTY: 1						
0003	On-Site Collection		10/01/2004	0.00	ea	\$14.000	\$ 0.00
			(10/01/2004 to 09/30/2005)				
	(Drug and Alcohol)						
	ESTIMATED QTY: 5	,500					
004	Testimony		10/01/2004	0.00	hr .	\$75.000	\$ 0.00
			(10/01/2004 to 09/30/2005)				
	(Collection Contracto	r)					
	ESTIMATED QTY: 4	0					

Line Item	Document Number	Title	Page
Summary	NBCD05002	Drug & Alcohol Testing	4 of 42

Line Item Number		Delivery Date (Start Date to End Date)	Quantity	Unit of Issue	Unit Price	Total Cost (Includes Discounts)
0005	Negative Result	10/01/2004	0.00	ea	\$1.500	\$ 0.00
		(10/01/2004 to 09/30/2005)				
	(Medical Review Officer (MRO)					
	ESTIMATED QTY: 36,250					
0006	Positive Result	10/01/2004	0.00	ea	\$1.500	\$ 0.00
	ESTIMATED QTY: 250	(10/01/2004 to 09/30/2005)	÷			
0007	MRO: Combined Price	10/01/2004	0.00	ea	\$1.500	\$ 0.00
		(10/01/2004 to 09/30/2005)			•	
•	(For Positive or Negative Results)					
1	ESTIMATED QTY: 36,500					
0008	MRO: Testimony	10/01/2004	0.00	hr	\$75.000	\$ 0.00
		(10/01/2004 to 09/30/2005)				
i	ESTIMATED QTY: 40					

Line I	ltem	Document Number	Title				Page
Sumr	nary	NBCD05002	Drug & Alcoh	ol Testing	<u></u>		5 of 42
Line Item			Delivery Date		Unit of		Total Cost
Number	Description	(\$	tart Date to End Date)	Quantity	Issue	Unit Price	(Includes Discount
0009	International Collections		10/01/2004	0.00	ea	\$85.000	\$ 0.0
		(10	/01/2004 to 09/30/2005)				
	(Drug and alcohol collection collection kit/supplies to co	ons to include monthly rep ollection site and return of	orts, specimen kits, cha specimen to testing lab	in of custody f	forms, breath ald	cohol testing forms,	transportation of
	ESTIMATED QTY: 100						
0010	Collection No-Shows		10/01/2004	0.00	ea	\$ 12.000	\$ 0.0
		/40	(01/2004 to 09/30/2005)			V.=VV	V 0.04
	(Covers cost of the collect the Contractor shall close : ESTIMATED QTY: 4,000	ion setup, kit and form, tra	nsportation and phone o	calls. When the of the reques	e donor does no t. The cost of co	t attend the collection direction will not be in	on site for collection included in the price
2044	Design Constant		40104 1900				
0011	Random Generator (Agend License Fee	cy Specific)	10/01/2004	0.00	ea	\$75.000	\$ 0.00
		(10/	01/2004 to 09/30/2005)				
	ESTIMATED QTY: 5						
012	Random Generator (Ageno Maintenance Fee	cy Specific)	10/01/2004	0.00	ęa	\$75.000	\$ 0.00
		(10/	01/2004 to 09/30/2005)				
	Monthly Maintenance Fee:	5 at 12 mos each= 60					
	ESTIMATED QTY: 60						

Line Item	Document Number	Title	Page
Summary	NBCD05002	Drug & Alcohol Testing	6 of 42

Line Item Number		Delivery Date (Start Date to End Date)	Quantity	Unit of Issue	Unit Price	Total Cost (Includes Discounts)
				<u> </u>		(manage placeding)
0013	Random generator (Generic) License Fee	10/01/2004	0.00	ea	\$75.000	\$ 0.00
		(10/01/2004 to 09/30/2005)				
	One-time Fee					
	ESTIMATED QTY: 5					
				,		
0014	Random Generator (Generic)	10/01/2004	0.00	ea	\$75.000	\$ 0.00
		(10/01/2004 to 09/30/2005)				
	Monthly Maintenance Fee: 5 at 12 mos eac					
	ESTIMATED QTY: 60					
						į
0015	Nationwide Collections	10/01/2006	0.00	ea	\$26.000	\$ 0.00
		(10/01/2005 to 09/30/2006)				OPTION PERIOD
	Option Year 1 10/01/2005 through 9/30/200	06				
	See description at 0001					
	ESTIMATED QTY: 31,000					
016	Quality Control Specimens	10/01/2005	0.00	ea	\$13.000	\$ 0.00
		(10/01/2005 to 09/30/2006)				OPTION PERIOD
	(Preparing and Shipping)					
	ESTIMATED QTY: 1,095					I