	SOL	ICITATIO	ON, OFFER	1. THIS CONT UNDER DI	RATED ORDER (700)				RATING	PAGE	OF	PAGES					
2. CON	TRACT N	UMBER		3. SOLICITATIO	N NUMBER		4. TYF	E OF SOL	ICITATION		5. DATE	ISSUED	N/A 6. RE	QUISITION/PU	RCHASE N	UMBER	
				RFP-DCS-				SEALED	BID (IFB)			16, 200					
					CODE	T	LX	NEGOTI									
7. ISSU		D		TITTE / COCK	8. ADDR	ESS OFFE	ER TO (if other	r than Item	7)								
			ent of Labor, Contract Serv														
			ion Avenue,	NW													
		C-4310 ington DC	20210														
NOTE:	In sealed	bid solicitation	s "offer" and "offeror" n	nean "hid" and "hidde	ar#		1		· · · · · · · · · · · · · · · · · · ·		 						
11012.	N1 000100	Dia Comoraziioni	0.000	iodii bio dila biodo		1 .	SOLIC	TATIC	N								
9. Seak	ed offers in	n original and _	See L.8	copies for furnishing	the supplies					e place specified	d in Item 8,	or if handcarrie	ed, in the depo	sitory located in)		
	Item	7				·	until 2:00 p.m. local time 09/23/2002										
CAUTIC	N - LATE	E Submissions,	Modifications, and Witt	ndrawals: See Sectio	n L, Provision	No. 52.214-7	or 52.215-1	All Offers	are subjec	t to all terms and	(Hour) d condition	s contained in t	his solicitation	(Date)			
10. FOR INFORMATION CALL: A. NAME								B. TELEPHONE (NO COLLECT CALLS) C. E-MAIL ADDRESS									
							AREA										
			Char	i A. Magrud	ler		(202)	693-3	693-3313 cmagruder@doleta.gov								
	т					·		I CONTENTS			See Attached Table of			I Contents		T	
			ESCRIPTION			PAGE(S)	(X)							PAGE(S)			
	PART I - THE SCHEDULE							L CONTRACT CLAI				PART II - CONTRACT CLAUSES					
	A SOLICITATION/CONTRACT FORM B SUPPLIES OR SERVICES AND PRICES/C				Property			I CONTRACT CLAUSES PART III. LIST OF DOCUMENTS, EVAIRITS AND OTHER ATTACH									
	C DESCRIPTION/SPECS./WORK STATEME							-	PART III - LIST OF DOCUMENTS, EXHIBITS AND OTHER ATTACH. J LIST OF ATTACHMENTS								
	D PACKAGING AND MARKING											IV - REPRESENTATIONS AND INSTRUCTIONS					
	E INSPECTION AND ACCEPTANCE					•		†	·	PART IV - REPRESENTATIONS AND INSTRUCTIONS REPRESENTATIONS, CERTIFICATIONS AND OTHER					Г		
	F DELIVERIES OR PERFORMANCE							1	STATEMENTS OF OFFERORS					`			
G CONTRACT ADMINISTRATION DATA								L INSTR., CONDS., AND NOTICES TO OFFERORS									
H SPECIAL CONTRACT REQUIREMENTS									М	EVALUATION F	ATION FACTORS FOR AWARD						
					OFFE	R (Must	be full	y com	pleted	by offer	or)						
NOTE:	Item 12 d	loes not apply if	the solicitation include	s the provisions at 5	2.214-16, Min	imum Bid Acc	eptance Per	od.								•	
for	recelpt of		e, the undersigned agre I above, to furnish any				endar days (6 price set opp	0 calendar osite each	days unles item, delive	ss a different per ered at the desig	iod is inse nated poir	ted by the offer t(s), within the	or) from the di time specified	ate in the			
schedule. 13. DISCOUNT FOR PROMPT PAYMENT (See Section I, Clause No. 52-232-8))	20 CALENDAR DAYS (%) 30 CALENDAR DAYS (%) CALENDAR						DAYS (%)				
14. ACKNOWLEDGEMENT OF AMENDMENTS						AMENDMENT NO.			DATE			AMENDMENT NO.			DATE		
(Th	e offeror a	acknowledges r	eceipt of amendments							3.112					5/12		
	nbered an		and related documents	•													
15A. NAME AND CODE									16. NAME AND TITLE OF PERSON AUTHORIZED TO SIGN OFFER								
	DDRESS F OFFER		3002				CILITY L			(Type or	print)						
															7		
15B. TELEPHONE NUMBER 15C. CHECK IF REMITTANCE ADDRESS							DRESS IS D	DIFFERENT FROM			RE				18. OFF	ER DATE	
AREA CODE NUMBER EXT. ABOVE - ENTER SUCH ADDRE																	
					ΔΜ	VARD (T	o be c	ample	ed by	Governi	mont)		·			·	
19. ACC	EPTED A	AS TO ITEMS N	JUMBERED		O De C	T -	-	AND APPROPR									
1						20. AMOUNT			N/A								
22. AUTHORITY FOR USING OTHER THAN FULL AND OPEN COMPETITION:								23. SUBMIT INVOICES TO ADDRESS SHOWN IN (4 copies unless otherwise specified)									
								25. PAYMENT WILL BE MADE BY CODE									
														CODE			
U.S. Department of Labor, ETA									U.S. Department of Labor, ETA/OC Division of Accounting								
200 Constitution Avenue, NW Room									200 Constitution Avenue, NW								
Washington DC 20210								Room N-4702 Washington DC 20210									
26. NAME OF CONTRACTING OFFICER (Type or print)														28. AWA	RD DATE		
										(Signature o	of Contracti	ng Officer)					
IMPORT	TANT - Av	ward will be mad	de on this Form, or on	Standard Form 26, o	r by other aut	horized official	written notic	e.									