



EMBASSY OF THE
UNITED STATES OF AMERICA
P.O. BOX 606 -00621, VILLAGE MARKET
NAIROBI, KENYA

February 14 , 2011

Dear Prospective Offeror/Quoter,

Subject: Request for Quotation (RFQ) No.PR1123342 Conference Facility

The American Embassy Nairobi, Kenya, has a requirement for a Institution / Company to provide a quotation for the following

1. ***Conference Facility Package for 35pax - PR1123342***

To submit a quotation, follow the instructions, complete the required portions of the attached document and submit it to the address shown on the **Standard Form 18** that follows this letter.

The U.S. Government intends to award a contract/purchase order to a responsible Institution/company submitting an acceptable quotation, with all the required technical specifications and reasonable price. You are encouraged to make your quote competitive and you are also cautioned against any collusion with other potential offerors with regard to price quotations to be submitted. The RFQ does not commit the American Embassy to make any award. The Embassy may cancel this RFQ or any part of it.

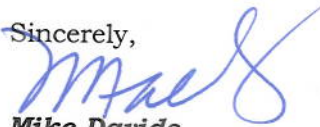
Your proposal must be submitted in a sealed envelope on or before Monday February 21 2011 at 3.00p.m marked as follows:-

1. **RFQ NO. PR1123342, Conference Package Proposal (Must have the Company Letter Head or Company Stamp/Seal including your quotation Reference Number).**

To the Contracting Officer, American Embassy, United Nations Avenue, P.O. Box 606 Village Market, 00621, Nairobi, Kenya.

Oral quotations will not be accepted.

Sincerely,


Mike Davids
Contracting Officer

Enclosure: Standard Form 18.

NB: FAILURE TO FOLLOW INSTRUCTIONS WILL LEAD TO THE DISQUALIFICATION OF THE PROPOSALS

1. REQUEST NO. R1123342	2. DATE ISSUED 02/14/2011	3. REQUISITION/PURCHASE REQUEST NO.	4. CERT. FOR NAT. DEF. UNDER BDSA REG. 2 AND/OR DMS REG. 1	RATING
5A. ISSUED BY American Embassy, General Services Office, P.O. Box 606 Village Market 00621, Nairobi, Kenya			6. DELIVER BY (Date)	
5B. FOR INFORMATION CALL: (Name and telephone no.) (No collect calls)			7. DELIVERY <input checked="" type="checkbox"/> FOB DESTINATION OTHER (See Schedule)	
NAME MIKE DAVIDS/JANE NJUNG'E		TELEPHONE NUMBER		
		AREA CODE 254	NUMBER 3636000	
8. TO:			9. DESTINATION	
b. COMPANY		a. NAME OF CONSIGNEE		
c. STREET ADDRESS To Prospective Quoters			b. STREET ADDRESS	
d. CITY NAIROBI		e. STATE	f. ZIP CODE	c. CITY
				d. STATE
				e. ZIP CODE
PLEASE FURNISH QUOTATIONS TO THE ISSUING OFFICE IN BLOCK 5A ON OR BEFORE CLOSE OF BUSINESS (Date) Monday February 21, 2011 3.00 p.m		IMPORTANT: This is a request for information, and quotations furnished are not offers. If you are unable to quote, please indicate on this form and return it to the address in Block 5A. This request does not commit the Government to pay any cost incurred in the preparation of the submission of this quotation or to contract for supplies or services. Supplies are of domestic origin unless otherwise indicated by quoter. Any representations and/or certifications attached to this Request for Quotation must be completed by the quoter		

11. SCHEDULE (Include applicable Federal, State and local taxes)

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)
	Conference Facility Package to include : Training/ conference facility in Nairobi for a 5 days 'POLICE INVESTIGATIONS OF SEXUAL AND GENDER BASED VIOLENCE' Training . DATES: FEBRUARY 28, 2011 TO MARCH 4, 2011 for 35 (30 officers and 5 instructors). Requirements:- Conference facility big enough to hold 35 participants, Morning and afternoon tea, Lunch , Bottled water (500ml) in the morning. Replace in the afternoon. Stationery (paper and pen) for each person, Projection screen, Microphone, Speakers—in case a video is shown or music is played, Flip chart etc. - Accommodation for 30 officers check in Feb 27, 2011 and check out March 4, 2011 NB: Please advise if a projector and laptop are charged separately and if yes how much ?				
DISCOUNT FOR PROMPT PAYMENT		a. 10 CALENDAR DAYS %	b. 20 CALENDAR DAYS %	c. 30 CALENDAR DAYS %	d. CALENDAR DAYS NUMBER %

NOTE: Additional provisions and representations [] are [] are not attached.

13 NAME AND ADDRESS OF QUOTER	14 SIGNATURE OF PERSON AUTHORIZED TO SIGN QUOTATION	15 DATE OF QUOTATION
a. NAME OF QUOTER		

b. STREET ADDRESS			16. SIGNER	
c. COUNTY			a. NAME (Type or print)	b. TELEPHONE
d. CITY	e. STATE	f. ZIP CODE	c. TITLE (Type or print)	AREA CODE
				NUMBER

Exhibit Error! No text of specified style in document.-1 – **Sample Request for Quotations (RFQ) (under \$100,000)**

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STANDARD FORM 18 (Rev. 6-95)

Previous edition not usable

Prescribed by GSA-FAR (48 CFR) 53.215-1(a)