

2. CONTRACT NO: CPSC-D-16-0001

3. AWARD/EFFECTIVE DATE: 03/09/2017

4. ORDER NUMBER: 0002

5. SOLICITATION NUMBER

6. SOLICITATION ISSUE DATE

7. FOR SOLICITATION INFORMATION CALL: Rudi Johnson

b. TELEPHONE NUMBER (No collect calls): 301-504-7028

8. OFFER DUE DATE/LOCAL TIME: ET

9. ISSUED BY: CONSUMER PRODUCT SAFETY COMMISSION
DIV OF PROCUREMENT SERVICES
4330 EAST WEST HWY
ROOM 523
BETHESDA MD 20814

CODE: FMPS

10. THIS ACQUISITION IS: UNRESTRICTED OR SET ASIDE: % FOR:

SMALL BUSINESS
 HUBZONE SMALL BUSINESS
 SERVICE-DISABLED VETERAN-OWNED SMALL BUSINESS

WOMEN-OWNED SMALL BUSINESS (WOSB) ELIGIBLE UNDER THE WOMEN-OWNED SMALL BUSINESS PROGRAM
 EDWOSB

NAICS: 561210

SIZE STANDARD: \$32.5

11. DELIVERY FOR FOB DESTINATION UNLESS BLOCK IS MARKED SEE SCHEDULE

12. DISCOUNT TERMS: Net 30/SB

13a. THIS CONTRACT IS A RATED ORDER UNDER DPAS (15 CFR 700)

13b. RATING

14. METHOD OF SOLICITATION: RFP IFB RFP

15. DELIVER TO: CONSUMER PRODUCT SAFETY COMMISSION
DIVISION OF FACILITIES SERVICES
4330 EAST WEST HIGHWAY
BETHESDA MD 20814

CODE: EXFS

16. ADMINISTERED BY: CONSUMER PRODUCT SAFETY COMMISSION
DIV OF PROCUREMENT SERVICES
4330 EAST WEST HWY
ROOM 523
BETHESDA MD 20814

CODE: FMFS

17a. CONTRACTOR/OFFEROR: RWD CONSULTING LLC
1612 7TH STREET NW
WASHINGTON DC 20001

CODE: [REDACTED]

FACILITY CODE: [REDACTED]

18a. PAYMENT WILL BE MADE BY: CPSC Accounts Payable Branch
AMZ 160
P. O. Box 25710
Oklahoma City OK 73125

CODE: FMFS

17b. CHECK IF REMITTANCE IS DIFFERENT AND PUT SUCH ADDRESS IN OFFER

18b. SUBMIT INVOICES TO ADDRESS SHOWN IN BLOCK 18a UNLESS BLOCK BELOW IS CHECKED SEE ADDENDUM

9. ITEM NO.	20. SCHEDULE OF SUPPLIES/SERVICES	21. QUANTITY	22. UNIT	23. UNIT PRICE	24. AMOUNT
	DUNS Number: [REDACTED] CONTRACTING OFFICER REPRESENTATIVE (COR) IRIS PARKS EMAIL: IPARKS@CPSC.GOV TEL: 301-504-7078 TASK ORDER 0002 AGAINST DELIVERY ORDER CONTRACT CPSC-D-16-0001 IS HEREBY ISSUED TO PROVIDE ADDITIONAL WAREHOUSE PERSONNEL TO PROVIDE SUPPORT SERVICES FOR THE PERFORMANCE PERIOD BEGINNING MARCH 20, 2017 THROUGH MAY 12, 2017 IN ACCORDANCE (Use Reverse and/or Attach Additional Sheets as Necessary)				

25. ACCOUNTING AND APPROPRIATION DATA: 0100A17DSE-2017-9994300000-EXFS002600-25220

26. TOTAL AWARD AMOUNT (For Govt. Use Only): \$12,572.80


27a. SOLICITATION INCORPORATES BY REFERENCE FAR 52 212-1, 52 212-4, FAR 52 212-3 AND 52 212-5 ARE ATTACHED. ADDENDA ARE ARE NOT ATTACHED

27b. CONTRACT/PURCHASE ORDER INCORPORATES BY REFERENCE FAR 52 212-4. FAR 52 212-5 IS ATTACHED. ADDENDA ARE ARE NOT ATTACHED

28. CONTRACTOR IS REQUIRED TO SIGN THIS DOCUMENT AND RETURN COPIES TO ISSUING OFFICE. CONTRACTOR AGREES TO FURNISH AND DELIVER ALL ITEMS SET FORTH OR OTHERWISE IDENTIFIED ABOVE AND ON ANY ADDITIONAL SHEETS SUBJECT TO THE TERMS AND CONDITIONS SPECIFIED.

29. AWARD OF CONTRACT: _____ OFFER DATED _____ YOUR OFFER ON SOLICITATION (BLOCK 5), INCLUDING ANY ADDITIONS OR CHANGES WHICH ARE SET FORTH HEREIN, IS ACCEPTED AS TO ITEMS: _____

30a. SIGNATURE OF OFFEROR/CONTRACTOR

31a. UNITED STATES OF AMERICA (SIGNATURE OF CONTRACTING OFFICER): 

30b. NAME AND TITLE OF SIGNER (Type or print):

30c. DATE SIGNED:

31b. NAME OF CONTRACTING OFFICER (Type or print): Cassandra C. Sterba

31c. DATE SIGNED: 3-9-2017

19 ITEM NO.	20 SCHEDULE OF SUPPLIES/SERVICES	21 QUANTITY	22 UNIT	23 UNIT PRICE	24 AMOUNT
0001	<p>WITH THE TERMS AND CONDITIONS AS DESCRIBED IN CPSC-D-16-0001.</p> <p>THE CONTRACTOR SHALL PROVIDE ADDITIONAL WAREHOUSE SERVICES FOR 320 HOURS TO ASSIST THE SAMPLE CUSTODIAN IN RETRIEVING AND RECORDING SAMPLES FOR DESTRUCTION MONDAY THROUGH FRIDAY, 7:30 AM -4:00 PM.</p> <p>The total amount of award: \$12,572.80. The obligation for this award is shown in box 26.</p>	320	HR	39.29	12,572.80

32a. QUANTITY IN COLUMN 21 HAS BEEN

RECEIVED INSPECTED ACCEPTED, AND CONFORMS TO THE CONTRACT, EXCEPT AS NOTED: _____

32b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE _____ 32c. DATE _____ 32d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE _____

32e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE _____ 32f. TELEPHONE NUMBER OF AUTHORIZED GOVERNMENT REPRESENTATIVE _____
 32g. E-MAIL OF AUTHORIZED GOVERNMENT REPRESENTATIVE _____

33. SHIP NUMBER _____ 34. VOUCHER NUMBER _____ 35. AMOUNT VERIFIED CORRECT FOR _____ 36. PAYMENT _____ 37. CHECK NUMBER _____
 PARTIAL FINAL COMPLETE PARTIAL FINAL

38. S/R ACCOUNT NUMBER _____ 39. S/R VOUCHER NUMBER _____ 40. PAID BY _____

41a. I CERTIFY THIS ACCOUNT 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/DD) _____ 42d. TOTAL CONTAINERS _____