

2. CONTRACT NO. SPM300-10-D-3316	3. AWARD/EFFECTIVE DATE 10/16/09	4. ORDER NUMBER	5. SOLICITATION NUMBER	6. SOLICITATION ISSUE DATE
7. FOR SOLICITATION INFORMATION CALL:	a. NAME ANTHONY T. HUGHES	b. TELEPHONE NUMBER (No collect calls) (215) 737-2467	8. OFFER DUE DATE/ LOCAL TIME	

9. ISSUED BY DEFENSE SUPPLY CENTER PHILDELPHIA DIRECTORATE OF SUBSISTENCE 700 ROBBINS AVE ATTN: FTAS/BLDG 6 PHILADELPHIA, PA 19111-5098	10. THIS ACQUISITION IS <input type="checkbox"/> UNRESTRICTED OR <input type="checkbox"/> SET ASIDE: % FOR: <input type="checkbox"/> SMALL BUSINESS <input type="checkbox"/> EMERGING SMALL BUSINESS <input type="checkbox"/> HUBZONE SMALL BUSINESS <input type="checkbox"/> SERVICE-DISABLED VETERAN-OWNED SMALL BUSINESS <input type="checkbox"/> 8(A)
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11. DELIVERY FOR FOB DESTINATION UNLESS BLOCK IS MARKED <input type="checkbox"/> SEE SCHEDULE	12. DISCOUNT TERMS	13a. THIS CONTRACT IS A RATED ORDER UNDER DPAS (15 CFR 700)	13b. RATING
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14. METHOD OF SOLICITATION <input type="checkbox"/> RFQ <input type="checkbox"/> IFB <input type="checkbox"/> RFP	15. DELIVER TO SEE SCHEDULE	16. ADMINISTERED BY SAME AS BLOCK #9
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17a. CONTRACTOR/OFFEROR REINHART FOODSERVICE, L.L.C. (DBA) IJ, A DIVISION OF REINHART FOODSERVICE 107 B AVENUE VALDOSTA, GA 31601-5153 USA TELEPHONE NO. (229) 242-0867	18a. PAYMENT WILL BE MADE BY DFAS COLUMBUS CENTER DFAS/CO-SEPS P.O. BOX 182317 COLUMBUS, OH 43218-6260
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<input type="checkbox"/> 17b. CHECK IF REMITTANCE IS DIFFERENT AND PUT SUCH ADDRESS IN OFFER	<input type="checkbox"/> 18b. SUBMIT INVOICES TO ADDRESS SHOWN IN BLOCK 18a UNLESS BLOCK BELOW IS CHECKED <input type="checkbox"/> SEE ADDENDUM
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19. ITEM NO.	20. SCHEDULE OF SUPPLIES/SERVICES	21. QUANTITY	22. UNIT	23. UNIT PRICE	24. AMOUNT
	This is an award under other than full and open competition IAW 10 U.S.C. 2304(C)(1). All terms and conditions of contract SPM300-08-D-3096 and administrative contracts are extended under this contract. The main contract SPM300-10-D-3316 services the Navy Standard Core Menu (NSCM) in the Mayport, FL area. Administrative contracts are as follows: SPM300-10-D-3318 services  <i>(Use Reverse and/or Attach Additional Sheets as Necessary)</i>				

25. ACCOUNTING AND APPROPRIATION DATA 10% Minimum: \$ 2,278,575.03	26. TOTAL AWARD AMOUNT (For Govt. Use Only) \$ 22,785,750.34 (Est - One Year)
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<input type="checkbox"/> 27a. SOLICITATION INCORPORATES BY REFERENCE FAR 52.212-1, 52.212-4, FAR 52.212-3 AND 52.212-5 ARE ATTACHED. ADDENDA <input type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED	<input type="checkbox"/> 27b. CONTRACT/PURCHASE ORDER INCORPORATES BY REFERENCE FAR 52.212-4, FAR 52.212-5 IS ATTACHED. ADDENDA <input type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED
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<input type="checkbox"/> 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	<input type="checkbox"/> 29. AWARD OF CONTRACT: REF. _____ OFFER DATED _____ YOUR OFFER ON SOLICITATION (BLOCK 5), INCLUDING ANY ADDITIONS OR CHANGES WHICH ARE SET FORTH HEREIN, IS ACCEPTED AS TO ITEMS:
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30a. SIGNATURE OF OFFEROR/CONTRACTOR 	31a. UNITED STATES OF AMERICA (SIGNATURE OF CONTRACTING OFFICER) 
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30b. NAME AND TITLE OF SIGNER (Type or print) Brad Jordan III President	30c. DATE SIGNED 10/16/09	31b. NAME OF CONTRACTING OFFICER (Type or print) JOHN E. RICCIO	31c. DATE SIGNED 10/16/09
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Guantanamo Bay, Cuba  
 SPM300-10-D-3314 services Autec, Bahamas  
 SPM300-10-D-3319 services all Navy surrounding  
 areas other than those under the NSCM.  
 Prime Vendor full line food service for Mayport, FL,  
 Navy Ships and surrounding areas for contract  
 period October 17, 2009 up to October 16, 2010.

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 <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL	37. CHECK NUMBER
<input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL				
38. S/R ACCOUNT NO.	39. S/R VOUCHER NUMBER	40. PAID BY		
41a. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT		42a. RECEIVED BY ( <i>Print</i> )		
41b. SIGNATURE AND TITLE OF CERTIFYING OFFICER		42b. RECEIVED AT ( <i>Location</i> )		
41c. DATE		42c. DATE REC'D ( <i>YY/MM/DD</i> )		42d. TOTAL CONTAINERS