SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS
OFFEROR TO COMPLETE BLOCKS 12, 17, 23, 24, & 30

1 REQUISITION NUMBER

PAGE 1 OF 4

2 CONTRACT NO: SPM300-11-D-3386

3 AWARD/EFFECTIVE DATE: 11/19/10

4 ORDER NUMBER

5 SOLICITATION NUMBER

6 SOLICITATION ISSUE DATE

7 FOR SOLICITATION INFORMATION CALL:
a. NAME: Matthew P Conville/Debbie Holman
b. TELEPHONE NUMBER (No collect calls): (215) 737-2995 / -7532

8. OFFER DUE DATE/ LOCAL TIME

9 ISSUED BY CODE SPM300

DLA Troop Support
Directorate of Subsistence, Bldg. 6
700 Robbins Avenue
ATTN: FTAB
Philadelphia, PA 19111-5098

10 THIS ACQUISITION IS
[X] UNRESTRICTED OR [ ] SET ASIDE % FOR
[ ] SMALL BUSINESS [ ] EMERGING SMALL BUSINESS
[ ] HUBZONE SMALL BUSINESS
[ ] SERVICE-DISABLED VETERAN-OWNED SMALL BUSINESS [ ] 8(A)
NAICS: 424410
SIZE STANDARD: 500

11 DELIVERY FOR FOB DESTINATION UNLESS BLOCK IS MARKED
[ ] SEE SCHEDULE

12 DISCOUNT TERMS

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

13b RATING

14 METHOD OF SOLICITATION
[ ] RFQ [ ] IFB [ ] RFP

15 DELIVER TO CODE
SEE SCHEDULE

16 ADMINISTERED BY CODE
SEE BLOCK 9

17a. CONTRACTOR/ OFFEROR CODE 0BYW2 FACILITY CODE

SHAMROCK FOODS PHOENIX
2540 29TH STREET
PHOENIX, AZ 85009

TELEPHONE NO

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

18a PAYMENT WILL BE MADE BY CODE

DFAS COLUMBUS CENTER
DFAS/CO-SEPS
P.O. BOX 182317
COLUMBUS, OH 43218-6260

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

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 SPM300-10-D-3335 are extended under this contract. Prime Vendor full line food service for the Arizona region for the contract period of 21 November 2010 thru 20 November 2011. A new Distribution Fee Price Schedule is attached on the following pages				
	(Use Reverse and/or Attach Additional Sheets as Necessary)				

25 ACCOUNTING AND APPROPRIATION DATA
20% Minimum $1,140,000.00

26. TOTAL AWARD AMOUNT (For Govt. Use Only)
$5,700,000.00 (EST - One Year)

[X] 27a. SOLICITATION INCORPORATES BY REFERENCE FAR 52.212-1, 52.212-4, FAR 52.212-3 AND 52.212-5 ARE ATTACHED. ADDENDA [X] 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

[X] 28. CONTRACTOR IS REQUIRED TO SIGN THIS DOCUMENT AND RETURN 1 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

[X] 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

30a SIGNATURE OF OFFEROR/CONTRACTOR

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

30b NAME AND TITLE OF SIGNER (Type or print)
W. Kent McClellan
President and COO

30c DATE SIGNED
11-19-10

31b NAME OF CONTRACTING OFFICER (Type or print)
DEBBIE HOLMAN

31c DATE SIGNED
11/19/10

AUTHORIZED FOR LOCAL REPRODUCTION
PREVIOUS EDITION IS NOT USABLE

STANDARD FORM 1449 (REV. 3/2005)
Prescribed by GSA FAR (48 CFR) 53.212

19. ITEM NO.	20. SCHEDULE OF SUPPLIES/SERVICES	21. QUANTITY	22. UNIT	23. UNIT PRICE	24. AMOUNT

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. TELPHONE NUMBER OF AUTHORZED GOVERNMENT REPRESENTATIVE 32g. E-MAIL OF AUTHORIZED GOVERNMENT REPRESENTATIVE

33. SHIP NUMBER ☐ PARTIAL ☐ FINAL	34. VOUCHER NUMBER	35. AMOUNT VERIFIED CORRECT FOR	36. PAYMENT ☐ COMPLETE ☐ PARTIAL ☐ FINAL	37. CHECK NUMBER
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 *(Print)*	
41b. SIGNATURE AND TITLE OF CERTIFYING OFFICER	41c. DATE	42b. RECEIVED AT *(Location)*	
		42c. DATE REC'D *(YY/MM/DD)*	42d. TOTAL CONTAINERS

PRIVILEGED INFORMATION

PRIVILEGED INFORMATION