

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

1. REQUISITION NO.

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2. CONTRACT NO.

3. AWARD/EFFECTIVE DATE

4. ORDER NO.

5. SOLICITATION NUMBER

VA-256-12-R-0037

6. SOLICITATION ISSUE DATE

02-01-2012

7. FOR SOLICITATION  
INFORMATION CALL:

a. NAME  
YOUNG, DENA

b. TELEPHONE NO. (No Collect Calls)  
479-587-5828

8. OFFER DUE DATE/LOCAL  
TIME 02-24-2012  
4:00PM CST

9. ISSUED BY

CODE

Department of Veterans Affairs  
Veterans Healthcare System of the Ozarks  
Purchasing & Contracting (90C)  
1100 N. College Ave.  
Fayetteville AR 72703

10. THIS ACQUISITION IS

☐ SMALL BUSINESS

☐ HUBZONE SMALL  
BUSINESS

☒ SERVICE-DISABLED  
VETERAN-OWNED  
SMALL BUSINESS

☐ UNRESTRICTED OR ☒ SET ASIDE: 100 % FOR:

WOMEN-OWNED SMALL BUSINESS  
(WOSB) ELIGIBLE UNDER THE WOMEN-OWNED  
SMALL BUSINESS PROGRAM NAICS: 492110

ECONOMICALLY DISADVANTAGED  
WOMEN-OWNED SMALL BUSINESS  
(EDWOSB) SIZE STANDARD:  
1500 Employees

11. DELIVERY FOR FOB DESTINA-  
TION UNLESS BLOCK IS  
MARKED

☐ SEE SCHEDULE

12. DISCOUNT TERMS

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

13b. RATING

N/A

14. METHOD OF SOLICITATION

☐ RFQ ☐ IFB ☒ RFP

15. DELIVER TO

CODE

Department of Veterans Affairs  
Veterans Healthcare System of the Ozarks  
Purchasing & Contracting (90C)  
1100 N. College Ave.  
Fayetteville AR 72703

16. ADMINISTERED BY

CODE

Department of Veterans Affairs  
Veterans Healthcare System of the Ozarks  
Purchasing & Contracting (90C)  
1100 N. College Ave.  
Fayetteville AR 72703

17a. CONTRACTOR/OFFEROR

CODE

FACILITY CODE

18a. PAYMENT WILL BE MADE BY

CODE

Department of Veterans Affairs  
Financial Services Center  
P.O. Box 149971

Austin TX 78714-8972

TELEPHONE NO.

PHONE:

FAX:

☐ 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

19.  
ITEM NO.

20.  
SCHEDULE OF SUPPLIES/SERVICES

21.  
QUANTITY

22.  
UNIT

23.  
UNIT PRICE

24.  
AMOUNT

Courier Services for Veterans health Care System of Ozarks (VHSO), and Community Based Outpatient Clinics (CBOC) in Ft. Smith, AR; Ozark, AR; Harrison, AR; Jay, OK, Mt. Vernon, MO, and Branson, MO.  
See Statement of Work (SOW) for details.  
Please complete the attached Price Schedule within offer.  
Please complete the attached Business Associate Agreement (BAA) within offer. See pages 24-29.

Contract Performance Period, BASE plus 4 Option Years  
BASE Year: 1 April 2012 - 31 March 2013

Option Year 1: 1 April 2013 - 31 March 2014

Option Year 2: 1 April 2014 - 31 March 2015

Option Year 3: 1 April 2015 - 31 March 2016

Option Year 4: 1 April 2016 - 31 March 2017

(Use Reverse and/or Attach Additional Sheets as Necessary)

12

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25. ACCOUNTING AND APPROPRIATION DATA

26. TOTAL AWARD AMOUNT (For Govt. Use Only)

☒ 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: 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)

30c. DATE SIGNED

31b. NAME OF CONTRACTING OFFICER (TYPE OR PRINT)

31c. DATE SIGNED