

SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS OFFEROR TO COMPLETE BLOCKS 12, 17, 23, 24, & 30				1. REQUISITION NUMBER		PAGE 1 OF 55	
2. CONTRACT NO. AG-9J61-B-09-7001		3. AWARD/EFFECTIVE DATE 12/11/08		4. ORDER NUMBER		5. SOLICITATION NUMBER AG-9J61-S-08-9006	
7. FOR SOLICITATION INFORMATION CALL: 		a. NAME Kathryn Griffin		b. TELEPHONE NUMBER (No collect calls) 916-640-1064		8 OFFER DUE DATE/ LOCAL TIME: 6/30/2008 4:30 P.M.	
9. ISSUED BY USDA Forest Service R5 Regional Office Incident Acquisitions 3237 Peacekeeper Way McClellan, CA 95652				10. THIS ACQUISITION IS			
				<input type="checkbox"/> UNRESTRICTED OR		<input checked="" type="checkbox"/> SET ASIDE: 100 % FOR:	
						<input checked="" type="checkbox"/> SMALL BUSINESS	
						<input type="checkbox"/> EMERGING SMALL BUSINESS	
				NAICS: 601430 115310		<input type="checkbox"/> HUBZONE SMALL BUSINESS	
				SIZE STANDARD: 6.5 mil		<input type="checkbox"/> SERVICE DISABLED VETERAN-OWNED SMALL BUSINESS	
						<input type="checkbox"/> 8(A)	
11. DELIVERY FOR FOB DESTINATION UNLESS BLOCK IS MARKED <input type="checkbox"/> SEE SCHEDULE		12. DISCOUNT TERMS		<input type="checkbox"/> 13a THIS CONTRACT IS A RATED ORDER UNDER DPAS (15 CFR 700)		13a. RATING	
						14. METHOD OF SOLICITATION	
						<input checked="" type="checkbox"/> RFQ <input type="checkbox"/> IFB <input type="checkbox"/> RFP	
15. DELIVER TO				16. ADMINSTRERED BY			
				See Block 9			
17a. CONTRACTOR/ EXPEDITORS BY Lindale, INC 638 N ECKHOFF ST ORANGE, CA 92668 TELEPHONE NO. 800-255-3119				18. SUBMIT INVOICES TO ADDRESS SHOWN IN BLOCK 18a UNLESS BLOCK BELOW IS CHECKED <input type="checkbox"/> SEE ADDENDUM			
<input type="checkbox"/> 17b CHECK IF REMITTANCE IS DIFFERENT AND PUT SUCH ADDRESS IN OFFER							
19. ITEM NO.		20. SCHEDULE OF SUPPLIES/SERVICES		21. QUANTITY		22. UNIT	
23. UNIT PRICE		24. AMOUNT					
Item 1 REDDING ZONE		Incident Base Unit (see attached) Agreement End Date: One year from Award/Effective Date (Block 3) Operating Supplies Furnished by: [X] Contractor [] Government Operator Furnished by: [X] Contractor [] Government		Type 1 IBU		See Page 7-10	
						See Attached pages	
25. ACCOUNTING AND APPROPRIATION DATA						26. TOTAL AWARD AMOUNT (For Govt. Use Only)	
<input checked="" 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 checked="" type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED	
<input checked="" type="checkbox"/> 27b. CONTRACT/PURCHASE ORDER INCORPORATES BY REFERENCE FAR 52.212-4. FAR 52.212-5 IS ATTACHED. ADDENDA						<input checked="" type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED	
<input checked="" type="checkbox"/> 28. CONTRACTOR IS REQUIRED TO SIGN THIS DOCUMENT AND RETURN <u>1</u> COPIES TO ISSUING OFFICE. CONTRACTOR AGREES TO FURNISH AND DELIVER ALL ITEMS SET FORTH OR OTHEERWISE 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.			
30a. SIGNATURE OF OFFEROR/CONTRACTOR Dave Brown				31a UNITED STATES OF AMERICA (SIGNATURE OF CONTRACTING OFFICER) Kathryn Griffin			
30b. NAME AND TITLE OF SIGNER (Type or print) Dave Brown President		30c. DATE SIGNED 6/24/08		31b. NAME OF CONTRACTING OFFICER (Type or print) KATHRYN GRIFFIN		31c. DATE SIGNED 12/11/08	

ITEM NO.	SCHEDULE OF SUPPLIES AND SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
1	Redding Zone (Redding to Oregon Boarder) Incident Base Unit - Type 1 Daily Rate Weekly Rate Monthly Rate Mobilization/Demobilization	AQ	Daily Weekly Monthly Mile	9675 8800 x 7 7333.33 x 30	\$ 9675- \$ 61,600- \$ 220,000- \$ 82,000-
2	Incident Base Unit - Type 2 Daily Rate Weekly Rate Monthly Rate Mobilization/Demobilization	AQ	Daily Weekly Monthly Mile	7150 4900 x 7 4900 x 30	\$ 7150 \$ 34,300- \$ 147,000- \$ 75,000-

Company Name	Expeditors By Liddale, INC		
DUNS Number	865099413		
Contact Name	DAVE BROWN		
E-Mail Address	d.brown@expeditors.com		
Phone Numbers (up to 6)	800-255-3119	714-939-6330	
	714-392-6580		
Fax Number	714-388-3980		
Mailing Address	Street: 638 N. ECKHOFF ST		
	City/State	ORANGE CA	Zip: 92868

1. I certify that all employees are covered by Workman's Compensation or a legal exemption.
2. I am am not registered in the Contractor Central Registration (CCR) system (Ref. E.1 (k)).
3. I have have not completed my representations and certifications on-line (Ref. E.3)

Identify the TOTAL number of Incident Base Units offered for award, (capable of being awarded).
<u> 1 </u> Type 1
<u> 1 </u> Type 2