

<b>SOLICITATION/CONTRACT/ORDER FOR COMMERICAL ITEMS OFFEROR TO COMPLETE BLOCKS 12, 17, 23, 24, &amp; 30</b>				1. REQUISITION NUMBER	PAGE OF PAGE
2. CONTRACT NO. <b>AG-04H1-B-11-7289</b>	3. AWARD/EFFECTIVE DATE <b>08/04/2011 - 08/04/2014</b>	4. ORDER NUMBER	5. SOLICITATION NUMBER <b>AG-04H1-S-11-7002</b>	6. SOLICITATION ISSUE DATE <b>10/25/2010 12:00 PDT</b>	
7. FOR SOLICITATION INFORMATION CALL: <b>Kermadine Barton</b>			b. TELEPHONE NUMBER (No collect calls) <b>541-471-6746</b>	8. OFFER DUE DATE/ LOCAL TIME <b>04/12/2011 16:00 PDT</b>	
9. ISSUED BY <b>USDA Forest Service US Forest Service Kermadine Barton Grants Pass Interagency Office 2164 NE Spalding Ave. Grants Pass, Oregon, 97526</b>			10. THIS ACQUISITION IS <input type="checkbox"/> UNRESTRICTED OR <input checked="" type="checkbox"/> SET ASIDE: _____ % FOR: <input checked="" type="checkbox"/> SMALL BUSINESS <input type="checkbox"/> WOMEN-OWNED SMALL BUSINESS (WOSB) NAICS: <b>561439</b> <input type="checkbox"/> HUBZONE SMALL BUSINESS <input type="checkbox"/> ECONOMICALLY DISADVANTAGED WOMEN-OWNED SMALL BUSINESS (EDWOSB) SIZE STANDARD: <b>\$ 7.0 million</b> <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	13a. THIS CONTRACT IS A RATED ORDER UNDER DPAS (15 CFR 700) <input type="checkbox"/>		13b. RATING	
15. DELIVER TO	16. ADMINISTERED BY <b>Kermadine Barton Grants Pass Interagency Office 2164 NE Spalding Ave. Grants Pass, Oregon, 97526</b>	14. METHOD OF SOLICITATION <input checked="" type="checkbox"/> RFQ <input type="checkbox"/> IFB <input type="checkbox"/> RFP			
17a. CONTRACTOR/OFFEROR <b>Johnson &amp; Associates JA Copy Printing Services 33566 Columbus St SE Building A Albany, Oregon, 97322-7220</b>	18a. PAYMENT WILL BE MADE BY <b>Refer to Exhibit B</b>	17b. CHECK IF REMITTANCE IS DIFFERENT AND PUT SUCH ADDRESS IN OFFER <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				
19. ITEM NO.	20. SCHEDULE OF SUPPLIES/SERVICES	21. QUANTITY	22. UNIT	23. UNIT PRICE	24. AMOUNT
	<b>VIPR I-BPA for Clerical Support Unit for Region 6 - Pacific Northwest Region</b>				
<i>(Use Reverse and/or Attach Additional Sheets as Necessary)</i>					
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 52.212-5 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 OTHERWISE IDENTIFIED ABOVE AND ON ANY ADDITIONAL SHEETS SUBJECT TO THE TERMS AND CONDITIONS SPECIFIED			<input checked="" type="checkbox"/> 29. AWARD OF CONTRACT: REF. _____ OFFER DATED <b>08/04/2011</b> . 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 <b>/s/ Stephen Johnson</b>			31a. UNITED STATES OF AMERICA (SIGNATURE OF CONTRACTING OFFICER) <b>/s/ Kermadine Barton</b>		
30b. NAME AND TITLE OF SIGNER (Type or print) <b>Stephen Johnson -</b>	30c. DATE SIGNED <b>07/12/2011</b>	31b. NAME OF CONTRACTING OFFICER (Type or print) <b>Kermadine Barton</b>	31c. DATE SIGNED <b>08/04/2011</b>		

Schedule of Items

Item Description	Equipment ID	Dispatch	
		Center	Rates
=====			
VIN Number: UNIT 1			
Clerical Support Unit	JA1	OR-UPC	
		Daily Rate	\$700.00/Day
		Internet Capable	\$/Day
		8.5x11 Black & White co	\$0.14/Copy
		8.5x11 Color copies	\$0.42/Copy
		11x17 Black & White cop	\$0.21/Copy
		11x17 Color copies	\$0.84/Copy
		8.5x11 Color paper	\$0.05/Sheet
		11x17 Color paper	\$0.10/Sheet
		8.5x11 Laminating	\$1.50/Each
		11x17 Laminating	\$3.00/Each
		Custom Laminating	\$2.50/SqFt
		FAXing	\$0.15/Page
		Book Binding	\$3.00/Book
		Plotting	\$3.50/LnFt

License #: ST01820  
 License State: OR  
 Make: N/A  
 Model: N/A  
 Model Year:  
 Insurance Policy Expiration Date: 06/28/2012  
 Location City: Albany  
 Location State: OR  
 Length of Unit: 26  
 Width of Unit: 8  
 External Internet Capability: No

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VIN Number: UNIT 2			
Clerical Support Unit	JA2	OR-COC	
		Daily Rate	\$700.00/Day
		Internet Capable	\$/Day
		8.5x11 Black & White co	\$0.14/Copy
		8.5x11 Color copies	\$0.42/Copy
		11x17 Black & White cop	\$0.21/Copy
		11x17 Color copies	\$0.84/Copy
		8.5x11 Color paper	\$0.05/Sheet
		11x17 Color paper	\$0.10/Sheet
		8.5x11 Laminating	\$1.50/Each
		11x17 Laminating	\$3.00/Each
		Custom Laminating	\$2.50/SqFt
		FAXing	\$0.15/Page
		Book Binding	\$3.00/Book
		Plotting	\$3.50/LnFt

License #: ST01821  
 License State: OR  
 Make: N/A  
 Model: N/A  
 Model Year: N/A  
 Insurance Policy Expiration Date: 06/28/2012  
 Location City: Bend  
 Location State: OR  
 Length of Unit: 26

Width of Unit: 8  
External Internet Capability: No

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VIN Number: UNIT 3  
Clerical Support Unit

JA3

WA-CCC

Daily Rate	\$700.00/Day
Internet Capable	\$/Day
8.5x11 Black & White co	\$0.14/Copy
8.5x11 Color copies	\$0.42/Copy
11x17 Black & White cop	\$0.21/Copy
11x17 Color copies	\$0.84/Copy
8.5x11 Color paper	\$0.05/Sheet
11x17 Color paper	\$0.10/Sheet
8.5x11 Laminating	\$1.50/Each
11x17 Laminating	\$3.00/Each
Custom Laminating	\$2.50/SqFt
FAXing	\$0.15/Page
Book Binding	\$3.00/Book
Plotting	\$3.50/LnFt

License #: T488445  
License State: OR  
Make: N/A  
Model: N/A  
Model Year: N/A  
Insurance Policy Expiration Date: 06/28/2012  
Location City: Albany  
Location State: OR  
Length of Unit: 24  
Width of Unit: 8  
External Internet Capability: No

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Vendor Information

Company Name: Johnson & Associates

DBA: JA Copy Printing Services

DUNS: 788002244

Company Address:

33566 Columbus St SE Building A

Albany, Oregon, 97322-7220

Mailing Address:

828 NW 31st St

Corvallis, Oregon, 97330

Contact:

Name: Stephen Johnson

Email: stephen@corvallis.com

Daytime Phone: 888-771-0199

Evening/After Hours Phone: 888-728-0013

Cell/Alternate Phone: 888-676-1414

Fax: 206-338-2200

Discount Terms:

none

Business Status

HUBZone: N

Service-Disabled Veteran-Owned Small Business: N

8(a): N

Women-Owned Small Business: N

Economically Disadvantaged Women-Owned Small Business: N

LSA Flag: Y

Supporting Documentation

Has Insurance (other than Workers' Compensation): Yes

Has DOT inspection(s): Yes

Has Workers' Compensation Insurance: Yes

Workers' Comp. Insurance Expiration Date: 08/01/2012

Has sufficient employees: Y

Is registered in CCR: Y

Has completed ORCA: Y