

|  |  |   |   |   |              |
|--|--|---|---|---|--------------|
| <b>SOLICITATION/CONTRACT/ORDER FOR COMMERICAL ITEMS<br/>OFFEROR TO COMPLETE BLOCKS 12, 17, 23, 24, &amp; 30</b>  |  |   |   | 1. REQUISITION NUMBER   | PAGE OF PAGE |
| 2. CONTRACT NO.<br><b>AG-04H1-B-12-7140</b>  | 3. AWARD/EFFECTIVE DATE<br><b>06/04/2012 - 06/04/2015</b>  | 4. ORDER NUMBER   | 5. SOLICITATION NUMBER<br><b>AG-04H1-S-12-7005</b>  | 6. SOLICITATION ISSUE DATE<br><b>02/02/2012 20:21 PST</b>   |              |
| 7. FOR SOLICITATION INFORMATION CALL: <b>Leif Shjeflo</b>  |  |   | b. TELEPHONE NUMBER (No collect calls)<br><b>541-504-7380</b>   | 8. OFFER DUE DATE/ LOCAL TIME<br><b>04/23/2012 16:30 PDT</b>  |              |
| 9. ISSUED BY<br><b>USDA Forest Service</b><br><br><b>Leif Shjeflo</b><br><b>Redmond Air Center</b><br><b>1740 NE Ochoco Way</b><br><b>Redmond, Oregon, 97756</b>   |  |   | 10. THIS ACQUISITION IS <input type="checkbox"/> UNRESTRICTED OR <input checked="" type="checkbox"/> SET ASIDE: _____ % FOR:<br><input checked="" type="checkbox"/> SMALL BUSINESS <input type="checkbox"/> WOMEN-OWNED SMALL BUSINESS (WOSB) NAICS: <b>115310</b><br><input type="checkbox"/> HUBZONE SMALL BUSINESS <input type="checkbox"/> ECONOMICALLY DISADVANTAGED WOMEN-OWNED SMALL BUSINESS (EDWOSB) SIZE STANDARD: <b>\$ 17.5 million</b><br><input type="checkbox"/> SERVICE-DISABLED VETERAN-OWNED SMALL BUSINESS <input type="checkbox"/> 8(A) |   |              |
| 11. DELIVERY FOR FOB DESTINATION UNLESS BLOCK IS MARKED<br><br><input type="checkbox"/> SEE SCHEDULE   | 12. DISCOUNT TERMS<br><b>3% Net 10</b>   | 13a. THIS CONTRACT IS A RATED ORDER UNDER DPAS (15 CFR 700)<br><input type="checkbox"/>   |   | 13b. RATING   |              |
| 15. DELIVER TO   |  | 16. ADMINISTERED BY<br><b>Leif Shjeflo</b><br><b>Redmond Air Center</b><br><b>1740 NE Ochoco Way</b><br><b>Redmond, Oregon, 97756</b> |   | 14. METHOD OF SOLICITATION<br><input checked="" type="checkbox"/> RFQ <input type="checkbox"/> IFB <input type="checkbox"/> RFP |              |
| 17a. CONTRACTOR/OFFEROR<br><br><b>ACW, INC</b><br><br><b>524 N. Hwy. 20</b><br><b>Hines, Oregon, 97738-9403</b><br><br>TELEPHONE NO. <b>541-573-3615</b>   | 18a. PAYMENT WILL BE MADE BY<br><br><b>Refer to Exhibit B</b>  |   | 18b. SUBMIT INVOICES TO ADDRESS SHOWN IN BLOCK 18a UNLESS BLOCK BELOW IS CHECKED <input type="checkbox"/> SEE ADDENDUM  |   |              |
| 17b. CHECK IF REMITTANCE IS DIFFERENT AND PUT SUCH ADDRESS IN OFFER <input type="checkbox"/>   |  |   |   |   |              |
| 19. ITEM NO.   | 20. SCHEDULE OF SUPPLIES/SERVICES  | 21. QUANTITY  | 22. UNIT  | 23. UNIT PRICE  | 24. AMOUNT   |
|  | <b>VIPR I-BPA for Miscellaneous Heavy Equipment for Region 6 - Pacific Northwest Region</b><br><br><i>(Use Reverse and/or Attach Additional Sheets as Necessary)</i> |   |   |   |              |
| 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 52.212-5 ARE ATTACHED. ADDENDA <input checked="" type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED   |  |   | 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  |   |              |
| 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>06/04/2012</b> . YOUR OFFER ON SOLICITATION (BLOCK 5), INCLUDING ANY ADDITIONS OR CHANGES WHICH ARE SET FORTH HEREIN, IS ACCEPTED AS TO ITEMS: <input checked="" type="checkbox"/>   |   |              |
| 30a. SIGNATURE OF OFFEROR/CONTRACTOR<br><b>/s/ Andy Root</b>   |  |   | 31a. UNITED STATES OF AMERICA (SIGNATURE OF CONTRACTING OFFICER)<br><b>/s/ Leif Shjeflo</b>   |   |              |
| 30b. NAME AND TITLE OF SIGNER (Type or print)<br><b>Andy Root -</b>  | 30c. DATE SIGNED<br><b>03/13/2012</b>  | 31b. NAME OF CONTRACTING OFFICER (Type or print)<br><b>Leif Shjeflo</b>   | 31c. DATE SIGNED<br><b>06/04/2012</b>   |   |              |

Schedule of Items

| Item Description          | Equipment ID | Dispatch Center | Rates         |
|---------------------------|--------------|-----------------|---------------|
| =====                     |              |                 |               |
| VIN Number: DW770CH573407 |              |                 |               |
| Road Grader Type 1        | 99 GRADER    | OR-BIC          |               |
|                           |              | Daily Rate      | \$1520.00/Day |
|                           |              | Mileage Rate    | \$5.00/Mile   |
|                           |              | Transport Rate  | \$1140.00/Day |

License #:  
 State:NA  
 Make:JOHN DEERE  
 Model:770CH  
 Year:1999  
 Insurance Expiration Date:06/05/2012  
 Location City: HINES  
 Location State: OR  
 Capacity (horsepower): 185  
 Mold Board (length): 14

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|                    |           |                |               |
|--------------------|-----------|----------------|---------------|
| VIN Number: 512319 |           |                |               |
| Road Grader Type 2 | 87 GRADER | OR-BIC         |               |
|                    |           | Daily Rate     | \$1382.00/Day |
|                    |           | Mileage Rate   | \$5.00/Mile   |
|                    |           | Transport Rate | \$1140.00/Day |

License #:  
 State:NA  
 Make:JOHN DEERE  
 Model:670B  
 Year:1987  
 Insurance Expiration Date:06/05/2012  
 Location City: HINES  
 Location State: OR  
 Capacity (horsepower): 135  
 Mold Board (length): 14

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Vendor Information

Company Name: ACW, INC

DBA:

DUNS: 602689390

Company Address:

524 N. Hwy. 20

Hines, Oregon, 97738-9403

Mailing Address: same as above

Contact:

Name: Andy Root

Email: shelleyj@acwinc.net

Daytime Phone: 541-573-3615

Evening/After Hours Phone: 541-589-0107

Cell/Alternate Phone: 541-589-1662

Fax: None

Discount Terms:

3% Net 10

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: 06/30/2012

Has sufficient employees: Y

Is registered in CCR: Y

Has completed ORCA: Y