REQUEST FOR QUOTATION
(THIS IS NOT AN ORDER)

THIS RFQ [X] IS [ ] IS NOT A SMALL BUSINESS SET-ASIDE

PAGE 1 OF PAGES 1

1. REQUEST NUMBER	2. DATE ISSUED	3. REQUISITION/PURCHASE REQUEST NUMBER	4. CERT. FOR NAT. DEF. UNDER BDSA REG. 2 AND/OR DMS REG. 1	RATING
70Z02926QNEWO0001	06/23/2026	30328PR260000001		N/A

5a. ISSUED BY
USCG SECTOR NEW ORLEANS

6. DELIVER BY *(Date)*
08/01/2026

5b. FOR INFORMATION CALL *(NO COLLECT CALLS)*

NAME	TELEPHONE NUMBER	
	AREA CODE	NUMBER
LATHAN PORTER	571	6104111

7. DELIVERY
[X] FOB DESTINATION [ ] OTHER *(See Schedule)*

8. TO:

a. NAME	b. COMPANY
LATHAN PORTER	USCG

c. STREET ADDRESS
200 HENDEE ST.

d. CITY	e. STATE	f. ZIP CODE
NEW ORLEANS	LA	70114

9. DESTINATION

a. NAME OF CONSIGNEE
USCG STATION GRAND ISLE

b. STREET ADDRESS
453 ADMIRAL CRAIK DR.

c. CITY
GRAND ISLE

d. STATE	e. ZIP CODE
LA	70358

10. PLEASE FURNISH QUOTATIONS TO THE ISSUING OFFICE IN BLOCK 5a ON OR BEFORE CLOSE OF BUSINESS *(Date)*
07/08/2026

IMPORTANT: This is a request for information and quotations furnished are not offers. If you are unable to quote, please so indicate on this form and return it to the address in Block 5a. This request does not commit the Government to pay any costs incurred in the preparation of the submission of this quotation or to contract for supplies or service. Supplies are of domestic origin unless otherwise indicated by quoter. Any representations and/or certifications attached to this Request for Quotation must be completed by the quoter.

11. SCHEDULE *(Include applicable Federal, State and local taxes)*

ITEM NUMBER (a)	SUPPLIES/SERVICES (b)	QUANTITY (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)
	The USCG is seeking qualified vendors to provide Cable TV/ Internet services for the location designated in block 9. For additional details see attached SOW This is 100% set aside for total small business. This will be a firm-fixed priced service contract awarded to the lowest priced technically acceptable offer. All vendors must have an active SAM registration. NAISC: 517410 PSC: DG11 If interested and would like to provide a quote please fill in blocks: 11E,13,14,15 and 16 and send to the following email: Lathan.A.Porter@uscg.mil All quotes are due by COB 07/08/2026 by 5pm CST delivery address for this project is located in block 9 all work will be coordinated through on site POC: Canady Strong (571) 608-8735	1	JB		$0.00

12. DISCOUNT FOR PROMPT PAYMENT	a. 10 CALENDAR DAYS (%)	b. 20 CALENDAR DAYS (%)	c. 30 CALENDAR DAYS (%)	d. CALENDAR DAYS	
				NUMBER	PERCENTAGE

NOTE: Additional provisions and representations [ ] are [ ] are not attached.

13. NAME AND ADDRESS OF QUOTER

a. NAME OF QUOTER

b. STREET ADDRESS

c. COUNTY

d. CITY	e. STATE	f. ZIP CODE

14. SIGNATURE OF PERSON AUTHORIZED TO SIGN QUOTATION

15. DATE OF QUOTATION

16. SIGNER

a. NAME *(Type or print)*	b. TELEPHONE
	AREA CODE
c. TITLE *(Type or print)*	NUMBER

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