ORAL QUOTATION FORM

DATE:	RFQ #	CUSTOMER QUOTE #	FAX # E-MAIL:
6 MAY 2026	SPRRA2-26-Q-0034 AMD 0002		

PR:	NSN:	ESOD
D16F0329D1	6130-01-044-0352	ORAL AWARD ☐ LETTER AWARD ☒

P/N: 11488393 ☐QPL APPLIES TEST NUMBER:	CAGE CODE:	QUOTE VALID FOR (Days)

COMPANY:	ADDRESS:

PHONE:	CONTACT:	QUANTITY:
		10 each

UNIT PRICE:	EXTENDED PRICE:

REMITTANCE ADDRESS:	PLANT LOCATION:

DELIVERY DATE:	DISCOUNT TERMS:	TRADE DISCOUNT:

QUANTITY VARIANCE:	METHOD OF SHIPMENT:	FOB POINT: ☐ ORIGIN ☒ DESTINATION
0	☐ PARCEL POST ☐ UPS/FEC ☐ FREIGHT ☐ FASTEST TRACEABLE MEANS (ESOD)	INSPECTION: ☒ ORIGIN ☐ DESTINATION
TOTAL WEIGHT OF ITEM:		SHIPPING POINT:

RFQ IS ☐ UNRESTRICED ☒ TOTAL SB SET-ASIDE (KTR CANNOT PROVIDE FOREIGN PRODUCT)

QUOTER IS ☐ SMALL BUSINESS ☐ SDB ☐ WOMAN-OWNED ☐ LARGE BUSINESS

PACKAGING AS REQUIRED ☒ YES ☐ NO ESOD – STANDARD COMMERCIAL PACKAGING ☐ YES ☐ NO

BAR CODE MARKING REQUIRED ☒ YES ☐ NO

IS FAST PAY ACCEPTABLE? ☐ YES ☐ NO

IS ITEM USED/RECONDITIONED? ☐ YES ☐ NO IS ITEM SURPLUS? ☐ YES ☐ NO

IS ITEM HAZARDOUS? ☐ YES ☐ NO

IS ITEM FOREIGN? ☐ YES ☐ NO IF YES, COUNTRY OF ORIGIN _____

IS ITEM PRICE LISTED? ☐ YES ☐ NO LIST PRICE _____

IF YES, PRICE LIST NUMBER: _____ DATE AND PAGE _____

IS THERE A MINIMUM BILLING: ☐ YES ☐ NO IF YES, MINIMUM IS _____

IS THERE A PRICE BREAK FOR QUANTITY? ☐ YES ☐ NO IF YES, PRICE BREAK IS _____

IS ITEM AVAILABLE ON GSA SCHEDULE CONTRACT? ☐ YES ☐ NO IF YES, CONTRACT NUMBER IS _____

DUNS:
TIN:
CORPORATE STATUS: PARENT NAME/TIN:

ACQUISITION SPECIALIST: , Harrison Mayfield