MARINE CORPS INSTALLATIONS PACIFIC
REGIONAL CONTRACTING OFFICE

ATTN: **Government Sales**
SUBJ: **M67400-26-Q-0042**

1. In accordance with FAR 52.212-1, **contractors must have a current, valid registration in System for Award Management (SAM)** and must furnish DUNS number, CAGE code, and tax ID number. Provide the required information in the following fields using this form. **Quotes submitted without this completed coversheet will not be evaluated nor considered for award**.

COMPANY NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

DUNS NO: _____ CAGE CODE: _____

FEDERAL TAX ID NUMBER: _____ FSC: _____ SIC: _____

NAME AND TITLE OF POC: _____

PHONE NUMBER: _____E-MAIL ADDRESS: _____

2. a) Are you quoting from a GSA contract? YES _____ NO _____

GSA Contract No. (If Applicable): _____

GSA Contract Expiration Date: _____

b) Prompt Payment Terms/Discount Terms: _____

c) Proposed delivery time: _____

d) Estimated total weight & cube of order: _____

Upon completion of this quote, please email your response to nicholas.d.debbisjohns.mil@usmc.mil.