

ITEM NO	DESCRIPTION	BASIS OF AWARD	Artisan Colour		DCG ONE		J & I Graphics LLC dba American Printing & Publishing		MJIAIH LLC		Texas Digital Copy & Print		SIMILAR / ESTIMATE	
			020-07250	460-27793	UNIT RATE	COST	UNIT RATE	COST	UNIT RATE	COST	UNIT RATE	COST	UNIT RATE	COST
I.	<b>COMPLETE PRODUCT:</b> Prices quoted shall include the cost of all required materials and operations necessary for the complete production and distribution of the product in accordance with these specifications, including emailed proofs.													
(a)	Per page; black ink.													
(1)	Makeready and/or Setup	200	60.00	\$ 12,000.00	97.00	\$ 19,400.00	60.00	\$ 12,000.00	0.25	\$ 50.00	NC	\$ -	50.00	\$ 10,000.00
(2)	Running per 1,000 Copies	500	25.00	\$ 12,500.00	55.00	\$ 27,500.00	40.00	\$ 20,000.00	250.00	\$ 125,000.00	38.00	\$ 19,000.00	20.00	\$ 10,000.00
(b)	Printing insert sheet in black ink; per page.													
(1)	Makeready and/or Setup	2	10.00	\$ 20.00	100.00	\$ 200.00	40.00	\$ 80.00	0.25	\$ 0.50	NC	\$ -	8.00	\$ 16.00
(2)	Running per 1,000 Copies	5	25.00	\$ 125.00	100.00	\$ 500.00	30.00	\$ 150.00	250.00	\$ 1,250.00	38.00	\$ 190.00	24.00	\$ 120.00
(c)	Per page; Four-Color Process.													
(1)	Makeready and/or Setup	100	75.00	\$ 7,500.00	207.00	\$ 20,700.00	80.00	\$ 8,000.00	1.00	\$ 100.00	NC	\$ -	75.00	\$ 7,500.00
(2)	Running per 1,000 Copies	250	50.00	\$ 12,500.00	111.00	\$ 27,750.00	90.00	\$ 22,500.00	1000.00	\$ 250,000.00	80.00	\$ 20,000.00	50.00	\$ 12,500.00
II.	<b>ADDITIONAL OPERATIONS:</b>													
(a)	Computer time-work; per hour.	3	60.00	\$ 180.00	150.00	\$ 450.00	80.00	\$ 240.00	75.00	\$ 225.00	60.00	\$ 180.00	60.00	\$ 180.00
(b)	Inserting sheets into the publication; cost per 1,000 inserts.	5	30.00	\$ 150.00	85.00	\$ 425.00	60.00	\$ 300.00	250.00	\$ 1,250.00	30.00	\$ 150.00	30.00	\$ 150.00
(c)	Drilling one hole; cost per book.	2500	0.06	\$ 150.00	0.75	\$ 1,875.00	0.20	\$ 500.00	NG	\$ -	10.00	\$ 25,000.00	0.05	\$ 125.00
CONTRACTOR TOTALS				\$ 45,125.00		\$ 98,800.00		\$ 63,770.00		\$ 377,875.50		\$ 64,520.00		\$ 40,591.00
DISCOUNT				\$ -	0.25%	\$ 247.00	1.00%	\$ -		\$ -	1.00%	\$ 645.20	2%	\$ 811.82
DISCOUNTED TOTALS				\$ 45,125.00	30 days	\$ 98,553.00	15 days	\$ 63,770.00		\$ 377,875.50	20 days	\$ 63,874.80	20 days	\$ 39,779.18

AWARDED

Reviewed by: \_\_\_\_\_



September 20, 2024

This is Amendment No. 1. The specifications in our invitation for quotes on Program 1029S, scheduled for opening at 1:00 P.M., Eastern Time (ET), on October 8, 2024 , are amended as follows:

1. Add “Attachment A” and “Attachment B”

All other specifications remain the same.

If amendment is not acknowledged on quote, direct acknowledgement to:

[bids@gpo.gov](mailto:bids@gpo.gov)

The Program 1029S and quote opening date must be specified in the subject line of the email.

Amended quote or acknowledgement must be submitted using the method(s) specified in the solicitation for quote submission. Telephone submission is not acceptable.

OFFEROR MUST ACKNOWLEDGE RECEIPT OF THIS AMENDMENT PRIOR TO QUOTE OPENING. Failure to acknowledge receipt of amendment, by amendment number, prior to quote-opening time, may be reason for quote being declared nonresponsive.

Sincerely,

ROLAND D. WHITEHURST  
Contracting Officer

**Additional information on obtaining a security pass through Naval Base Kitsap's Rapid Gate program as well as obtaining access to the Controlled Industrial Area:**

The agency can make arrangements with the contractor to sponsor a driver for delivery purposes.

The following is required to obtain a DBIDS credential:.

- Present a letter or official document from my government sponsoring organization that provides the purpose for your access.
- Present valid identification, such as a passport or Real ID Act-compliant state driver's license.
- Present a completed copy of the SECNAV 5512/1 form to obtain your background check.
- Upon completion of the background check, the Visitor Control Center representative will complete the DBIDS enrollment process, which includes your photo, finger prints, base restrictions, and several other assessments; after all this is done, you will be provided with your new DBIDS credential.
- You may now proceed to work.
- <https://www.cnmc.navy.mil/Operations-and-Management/Base-Support/DBIDS/>

When delivering to base the drivers are required to show registration, proof of insurance, valid drivers license. Must be a US citizen. If there is anything in their background such as arrests they could be denied.

See Attachment B for the Form 5512 that will need to be filled out by the driver.

## DEPARTMENT OF THE NAVY LOCAL POPULATION ID CARD/BASE ACCESS PASS REGISTRATION

## PRIVACY ACT STATEMENT:

**AUTHORITY:** 10 U.S.C. 113, Secretary of Defense; DoD Directive 1000.25, DoD Personnel Identity Protection (PIP) Program; DoD Instruction 5200.08, Security of DoD Installations and Resources and the DoD Physical Security Review Board (PSRB); DoD 5200.08-R, Physical Security Program; DoD Directive 5200.27, Acquisition of Information Concerning Persons and Organizations not Affiliated with the Department of Defense (Exception to policy memos); Directive-Type Memorandum (DTM) 09-012, Interim Policy Guidance for DoD Physical Access Control; DTM 14-005, DoD Identity Management Capability Enterprise Services Application (IMESA) Access to FBI National Crime Information Center (NCIC) Files; and E.O. 9397 (SSN), as amended; OPNAVINST 5530.14E, Navy Physical Security and Law Enforcement Program; Marine Corps Order P5530.14, Marine Corps Physical Security Program Manual; SORNMM05512-2 Badge and Access Control System Records and DMDC 16, Identity Management Engine for Security and Analysis (IMESA): <http://dpcld.defense.gov/Privacy/SORNIndex>

**PURPOSE(S):** To control physical access to Department of Defense (DoD), Department of the Navy (DON) or U.S. Marine Corps Installations/Units controlled information, installations, facilities, or areas over which DoD, DON, or U.S. Marine Corps has security responsibilities by identifying or verifying an individual through the use of biometric databases and associated data processing/information services for designated populations for purposes of protecting U.S./Coalition/allied government/national security areas of responsibility and information; to issue badges, replace lost badges, and retrieve passes upon separation; to maintain visitor statistics; collect information to adjudicate access to facility; and track the entry/exit times of personnel.

**ROUTINE USE(S):** To designated contractors, Federal agencies, and foreign governments for the purpose of granting Navy officials access to their facility.

**DISCLOSURE:** Providing registration information is voluntary. Failure to provide requested information may result in denial of access to benefits, privileges, and DoD installations, facilities and buildings.

## IDENTITY PROOFING AND APPLICANT INFORMATION

1. LAST NAME:		2. FIRST NAME:		3. MIDDLE NAME:		4. NAME SUFFIX: <input type="checkbox"/> Jr. <input type="checkbox"/> Sr. <input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV	
5. RACE (Check one or more): <input type="checkbox"/> AMERICAN INDIAN or ALASKA NATIVE <input type="checkbox"/> ASIAN <input type="checkbox"/> BLACK or AFRICAN AMERICAN <input type="checkbox"/> HISPANIC OR LATINO <input type="checkbox"/> NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER <input type="checkbox"/> WHITE							
6. GENDER (Check one): <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE		7. DATE OF BIRTH:		8. CITY OF BIRTH:		9. STATE OF BIRTH:	
10. BIRTH COUNTRY:		11. US CITIZEN (Check): <input type="checkbox"/> YES <input type="checkbox"/> NO					
12. DUAL CITIZENSHIP: <input type="checkbox"/> YES <input type="checkbox"/> NO						CITIZENSHIP IF OTHER THAN US (Country) :	

## U.S. Citizen Minimum Documentation Required:

By Birth - Social Security No and/or State ID/Drivers License.

Naturalized - Certification Number, Petition Number, Date, Place and Court, United States passport number, Social Security No and/or State ID/Drivers License.

Derived - Parent's certification number, Social Security No and/or State ID/Drivers License.

## Alien Minimum Documentation Required:

Registration Number, Expiration date, Date of entry, Port of entry.

13. IDENTITY SOURCE DOCUMENTS PRESENTED:	14. DOCUMENT NUMBER:	15. ISSUED BY STATE/COURT:	16. ISSUED BY COUNTRY:	17. ISSUED:	18. EXPIRES:
<input type="checkbox"/> Social Security No.			United States		
<input type="checkbox"/> State ID/Drivers License			United States		
<input type="checkbox"/> Passport No.					
<input type="checkbox"/> Certification Number and Petition Number					
<input type="checkbox"/> Derived - Parent's Certification Number:			United States		
<input type="checkbox"/> Alien Registration No.			United States		

Date of Entry:

Port of Entry:

## OTHER APPROVED IDENTITY SOURCE DOCUMENTS:

<input type="checkbox"/>					
<input type="checkbox"/>					

19. WEIGHT (Pounds):	20. HEIGHT (Inches):	21. HAIR COLOR (Check one): <input type="checkbox"/> Blond <input type="checkbox"/> Brown <input type="checkbox"/> Black <input type="checkbox"/> Gray <input type="checkbox"/> Red <input type="checkbox"/> White <input type="checkbox"/> Silver <input type="checkbox"/> Auburn <input type="checkbox"/> Bald		22. EYE COLOR (Check one): <input type="checkbox"/> Brown <input type="checkbox"/> Green <input type="checkbox"/> Blue <input type="checkbox"/> Hazel <input type="checkbox"/> Black <input type="checkbox"/> Gray <input type="checkbox"/> Violet <input type="checkbox"/> Unknown	
23. HOME ADDRESS (Include city, state, zip code):				HOME PHONE (Include Area Code):	
24. BASE SPONSOR'S NAME:				SPONSOR PHONE (Include Area Code):	

EMPLOYMENT ACTIVITY INFORMATION			
25. EMPLOYER NAME AND ADDRESS (Include city/state/zip code):		EMPLOYER PHONE (Include Area Code):	
26. SUPERVISOR NAME AND ADDRESS (Include city/state/zip code):		SUPERVISOR PHONE(Include Area Code):	
27. Check the applicable box for WORK HOURS box or check the OTHER box and enter the work hours, then check the applicable box for WORK DAYS:			
WORK HOURS: <input type="checkbox"/> 0600-1800 <input type="checkbox"/> 0800-1700 <input type="checkbox"/> OTHER		WORK DAYS: <input type="checkbox"/> SN <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> TH <input type="checkbox"/> F <input type="checkbox"/> ST	
PRIOR FELONY CONVICTIONS			
28. Have you ever been convicted of a Felony? <input type="checkbox"/> YES <input type="checkbox"/> NO _____ Initial			
REQUIREMENT TO RETURN LOCAL POPULATION ID CARD			
29. I understand that I am required to return my Local Population Identification Card to the Base Pass Office when it expires or if my employment is terminated for any reason. _____ (initial)			
AUTHORIZATION AND RELEASE AND CERTIFICATION			
30. I hereby authorize the DOD/DON and other authorized Federal agencies to obtain any information required from the Federal government and/or state agencies, including but not limited to, the Federal Bureau of Investigation (FBI), the Defense Security Service (DSS), the U.S. Department of Homeland Security (DHS).			
I have been notified of DON right to perform minimal vetting and fitness determination as a condition of access to DON installation/facilities. I understand that I may request a record identifier; the source of the record and that I may obtain records from the State Law Enforcement Office as may be available to me under the law. I also understand that this information will be treated as privileged and confidential information.			
I release any individual, including records custodians, any component of the U.S. Government or the individual State Criminal History Repository supplying information, from all liability for damages that may result on account of compliance, or any attempts to comply with this authorization. This release is binding, now and in the future, on my heirs, assigns, associates, and personal representative(s) of any nature. Copies of this authorization that show my signature are as valid as the original release signed by me.			
FALSE STATEMENTS ARE PUNISHABLE BY LAW AND COULD RESULT IN FINES AND/OR IMPRISONMENT UP TO FIVE YEARS.			
BEFORE SIGNING THIS FORM, REVIEW IT CAREFULLY TO MAKE SURE YOU HAVE ANSWERED ALL QUESTIONS FULLY AND CORRECTLY.			
I DECLARE UNDER PENALTY OF PERJURY THAT THE STATEMENTS MADE BY ME ON THIS FORM ARE TRUE, COMPLETE AND CORRECT.			
DATE _____		SIGNATURE _____	
FINAL DETERMINATION ON YOUR ACCESS: The Base Commanding Officer has final authority for determination on granting physical access to DON controlled installations/facilities under his/her jurisdiction.			
BELOW COMPLETED BY BASE REGISTRAR PERSON CONDUCTING IDENTITY PROOFING and NCIC CHECK			
31. INFORMATION VERIFIED BY:	32. ENTERED IN C/S SYSTEM BY:	33. PASS ISSUE DATE:	34. PASS EXPIRATION DATE:
35. NCIC CHECK PERFORMED BY:	36. RESULTS OF NCIC CHECK: <input type="checkbox"/> NO RECORDS <input type="checkbox"/> RECORD IDENTIFIER RECORD NUMBER:		37. RESULTS OF LOCAL RECORDS CHECK: <input type="checkbox"/> NO RECORDS <input type="checkbox"/> RECORD IDENTIFIER RECORD NUMBER:
Office of Under Secretary of Defense Directive-Type Memorandum (DTM) 09-012, "Interim Policy Guidance for DoD Physical Access Control," December 8, 2009. DTM 09-012 requires that DoD installation government representatives query the National Crime Information Center (NCIC) and Terrorist Screening Database to vet the claimed identity and to determine the fitness of non-federal government and non-DoD-issued card holders (i.e. visitors) who are requesting unescorted access to a DoD installation. The minimum criteria to determine the fitness of a visitor is: 1) not on a terrorist watch list; 2) not on an DoD installation debarment list; and 3) not on a FBI National Criminal Information Center (NCIC) felony wants and warrants list. Additionally, SECNAV Memo, Policy for Sex Offender Tracking and Assignment and Access Restrictions within the Department of the Navy, of 7 Oct 08 and OPNAVINST 1752.3 established the Navy's policy on sex offenders, requiring Region Commanders (REGCOMs) and Installation Commanding Officers (COs) to prohibit sex offender access to DoN facilities and Navy owned, leased or PPV housing. This form describes the authority and purpose to collect and share the required information; and identifies the applicant/visitor and sponsor; and authorizes the DoD to perform the minimum vetting and fitness determination criteria. A favorable response on the vetting and fitness determination is required to receive access to DOD-controlled installation/facilities.			

Instruction for completing the Local Population Access Registration Form

INSTRUCTIONS: Please complete all information in black ink (printed) or by typing. By voluntarily providing your Personal Information, you agree to the following terms and restrictions:  
 RESTRICTIONS: Local Population Identification Card/Base Access Pass may only be used by person to whom they are issued and for the specific business/purpose issued. Applicants are reminded that soliciting (i.e., door-to-door sales) is prohibited on the base, and that such activity is grounds for cancellation of the Pass. Additionally, such action may result in debarment from the base and legal action. The Base Commanding Officer has discretion over specifying the period of validity for any Local Population ID Cards/Base Access Passes that are issued under his/her jurisdiction.  
 Review the Privacy At Statement that is printed at the top of the form

<p>Block 1: Enter the Last Name.                  Block 2: Enter the First Name.                  Block 3: Enter the Middle Name.                  Block 4: If applicable, check the box for Name Suffix.                  Block 5: Check the applicable box for Race.                  Block 6: Check the applicable box for Gender.                  Block 7: Enter Date of Birth.                  Block 8: Enter City of Birth.                  Block 9: Enter State of Birth.                  Block 10: Enter Country of Birth.                  Block 11: Check the applicable box for US Citizenship.                  Block 12: If not a US Citizen, enter the name of the Country of Citizenship.                  Block 13: Two forms of identity source documents from the list of acceptable documents listed below must be presented to the base registrar with this completed form. Check the box for the type of Documents that will be presented for identity proofing. If the document type is not listed, use the two rows under Other Approved Identity Source Documents to enter the type of document(s) that you will present.                  Block 14: Enter the Document Number located on the Identity Proofing Source document that was checked in Block 13.                  Block 15: Enter the State that issued the Identity Source Document.                  Block 16: Enter the Country that issued the Identity Source Document.</p>	<p>Block 17: Enter the Date that the Identity Source Document was issued.                  Block 18: Enter the Date that the Identity Source Document will expire.                  Block 19: Enter Weight in pounds.                  Block 20: Enter Height in inches.                  Block 21: Check the applicable box for Hair Color.                  Block 22: Check the applicable box for Eye Color.                  Block 23: Enter Home Address Including City, State, Zip Code, and Home Telephone Number.                  Block 24: Enter Name of Registrant's Base Sponsor and Base Sponsor's Telephone Number.                  Block 25: Enter Employer Name and address including City, State, Zip Code, and Employer's Telephone Number.                  Block 26: Enter Supervisor's Name including City, State, Zip Code, and Supervisor's Telephone Number.                  Block 27: Check the applicable box for Work Hours box or check the OTHER box and enter the work hours, then check applicable boxes for Work Days.                  Block 28: Check the applicable answer if you have been convicted of Felony and enter initials.                  Block 28: Check the applicable box for felony conviction.                  Block 29: Enter initials to accept terms for returning Local Population Identification Card.                  Block 30: Sign and date the form to attest that the foregoing information is true and complete to best of your knowledge.</p>
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LIST OF ACCEPTABLE DOCUMENTS - All documents must not be expired.  
 Must present one selection from List A or a combination of one selection from List B and one selection from List C.

List A - Documents that Establish Identity and Employment Authorization	OR	List B - Documents that Establish Identity	AND	List C - Documents that Establish Employment Authorization
<p>1. U.S. Passport or U.S. Passport Card                  2. Permanent Resident Card or Alien Registration Receipt Card (Form I-551).                  3. Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine-readable immigrant visa.                  4. Employment Authorization Document that contains a photograph (Form I-766).                  5. For a nonimmigrant alien authorized to work for a specific employer because of his or her status:                  a. Foreign Passport; and                  b. Form I-94 or Form I-94A that has the following:                  (1) The same name as the passport; and                  (2) An endorsement of the alien's nonimmigrant status as long as that period of endorsement has not yet expired and the proposed employment is not in conflict with and restrictions or limitations identified on form.                  6. Passport from the Federal States of Micronesia (FSM) or the Republic of the Marshal Islands (RM) with Form I-94 or Form I-94A indicating nonimmigrant admission under the Compact of Free Association Between the United States and FSM or RM.</p>	<p>1. Driver's license or ID card issued by a State or outlying possession of the United States provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address.                  2. ID card issued by federal, state or local government agencies or entities, provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address.                  3. School ID card with a photograph                  4. Voter's registration card.                  5. U.S. Military card or draft record.                  6. Military dependent's ID card.                  7. U.S. Coast Guard Merchant Mariner Card.                  8. Native American tribal document.                  9. Driver's license issued by a Canadian government authority.                   For persons under age 18 who are unable to present a document listed above:                   10. School record or report card.                  11. Clinic, doctor, or hospital record.                  12. Day-care or nursery school record.</p>	<p>1. A Social Security Account Number card, unless the card includes one of the following restrictions:                  (1) NOT VALID FOR EMPLOYMENT                  (2) VALID FOR WORK ONLY WITH INS AUTHORIZATION.                  (3) VALID FOR WORK ONLY WITH DHS AUTHORIZATION.                  2. Certification of Birth Abroad issued by the Department of State (Form FS-545).                  3. Certification of Birth issued by the Department of State (Form DS-1360).                  4. Original or certified copy of birth certificate issued by a State, county, municipal authority or territory of the United States bearing an official seal.                  5. Native American tribal document.                  6. U.S. Citizen ID Card (Form I-197).                  7. Identification Card for Use of Resident Citizen in the United States (Form I-179).                  8. Employment authorization document issued by the Department of Homeland Security.</p>		

The remainder of the form will be completed by the Base Registrar Person conducting Identify Proofing process and NCIC check.

**AGENCY DISCLOSURE STATEMENT:**

The public reporting burden for this collection of information, OMB 0703-0061, is estimated to average ten (10) minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or burden reduction suggestions to the Department of Defense, Washington Headquarters Services, Executive Services, at whs.mc-alex.esd.mbx.dd-dod-information-collections@mail.mil. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.

**PLEASE DO NOT RETURN RESPONSE TO THE ABOVE ADDRESS.**  
 Responses should be sent to the Base Registrar.



October 1, 2024

This is Amendment No. 2. The specifications in our invitation for quotes on Program 1029S, scheduled for opening at 1:00 P.M., Eastern Time (ET), on October 8, 2024 , are amended as follows:

1. Change from:  
“Proofs will be withheld not more than 2 workdays from receipt by the Government to receipt in contractor’s plant”  
To:  
“Contractor must send proof with enough time to adhere to the Schedule requirements.  
If the government is unable to provide proof approval 48 hours prior to the agreed delivery date, the government will reach out to the contractor to discuss any needed alterations to the print delivery schedule.”
2. Change from:  
“The contractor’s couriers must qualify to obtain a security pass through Naval Base Kitsap’s Rapid Gate program (360-476-4884) and must qualify to obtain access to the Controlled Industrial Area for purpose of delivering on the Naval Base Kitsap, Bremerton, to multiple locations.”  
To:  
“The contractor’s couriers must qualify to obtain a security pass through Naval Base Kitsap’s Rapid Gate program (360-476-4884) and must qualify to obtain access to the Controlled Industrial Area for purpose of delivering on the Naval Base Kitsap, Bremerton, to two locations: the Transportation Department and the Public Affairs Office. Both locations are located within the Controlled Industrial Area.”

All other specifications remain the same.

If amendment is not acknowledged on quote, direct acknowledgement to:

[bids@gpo.gov](mailto:bids@gpo.gov)

The Program 1029S and quote opening date must be specified in the subject line of the email.

Amended quote or acknowledgement must be submitted using the method(s) specified in the solicitation for quote submission. Telephone submission is not acceptable.



OFFEROR MUST ACKNOWLEDGE RECEIPT OF THIS AMENDMENT PRIOR TO QUOTE OPENING. Failure to acknowledge receipt of amendment, by amendment number, prior to quote-opening time, may be reason for quote being declared nonresponsive.

Sincerely,

ROLAND D. WHITEHURST  
Contracting Officer



Program 1029-S  
Specifications by FB  
Reviewed by RW

## QUOTATION REQUEST

U.S. GOVERNMENT PUBLISHING OFFICE  
Northwest Region

### GENERAL TERMS, CONDITIONS, AND SPECIFICATIONS

For the Procurement of

#### *Salute*

as requisitioned from the U.S. Government Publishing Office (GPO) by the  
DLA Document Services

Single Award

The term of this contract is for the period  
beginning November 1, 2024, and ending October 31, 2025

**CONTRACT TERM:** The term of this contract is for one year (the base year) and four option years. Special attention is directed to the following clause in this contract: “Economic Price Adjustment.”

**CONTRACTING METHOD:** This contract is being advertised as, and shall be awarded as, a Small Purchase contract, in accordance with the U. S. Government Publishing Office Printing Procurement Regulation (PPR: GPO Publication 305.3), Chapter VII, Section 4. The sealed bidding terminology as used throughout these specifications is synonymous with their negotiated procurement counterparts unless specifically stated otherwise. Negotiated pursuant to 41 U.S.C. 5(1).

**QUOTE OPENING:** Quotes shall be opened at 1:00 P.M., Eastern Time (ET), on October 8, 2024 at the U.S. Government Publishing Office.

**QUOTE SUBMISSION:** Submit quotes via email to [bids@gpo.gov](mailto:bids@gpo.gov) for this solicitation. No other method of quote submission will be accepted. The company name, program number, and date established for submission of quotes must be specified in the subject line of the email. ***Quotes received after the quote submission date and time specified above will not be considered for award.***

**ADDITIONAL EMAILED QUOTE SUBMISSION PROVISIONS:** The Government will not be responsible for any failure attributable to the transmission or receipt of the emailed quote including, but not limited to, the following –

1. Illegibility of quote.
2. Emails over 75 MB may not be received by GPO due to size limitations for receiving emails.
3. The offeror’s email provider may have different size limitations for sending email; however, offerors are advised not to exceed GPO’s stated limit.
4. When the email quote is received by GPO, it will remain unopened until the specified quote opening time. Government personnel will not validate receipt of the emailed quote prior to quote opening. GPO will use the prevailing time (specified as the local time zone) and the exact time that the email is received by GPO’s email server as the official time stamp for quote receipt at the specified location.

Salute  
Program 1029-S

Abstracts of contract prices are available at <https://www.gpo.gov/how-to-work-with-us/vendors/contract-pricing>

For information of a technical nature, contact [infonorthwest@gpo.gov](mailto:infonorthwest@gpo.gov) and [fbuchko@gpo.gov](mailto:fbuchko@gpo.gov).

Salute  
Program 1029-S

## SECTION 1. - GENERAL TERMS AND CONDITIONS

**GPO CONTRACT TERMS:** Any contract which results from this Invitation for Quote will be subject to the applicable provisions, clauses, and supplemental specifications of GPO Contract Terms (GPO Publication 310.2, effective December 1, 1987 (Rev. 01-18)) and GPO Contract Terms, Quality Assurance Through Attributes Program for Printing and Binding (GPO Publication 310.1, effective May 1979 (revised 9-19)).

GPO Contract Terms (GPO Publication 310.2) – <https://www.gpo.gov/docs/default-source/forms-and-standards-files-for-vendors/contractterms2018.pdf>

GPO QATAP (GPO Publication 310.1) – <https://www.gpo.gov/docs/default-source/forms-and-standards-files-for-vendors/qatap-rev-09-19.pdf>.

**QUALITY ASSURANCE LEVELS AND STANDARDS:** The following levels and standards shall apply to these specifications:

Product Quality Levels:

- (a) Printing (page related) Attributes -- Level III.
- (b) Finishing (item related) Attributes -- Level III.

Inspection Levels (from ANSI/ASQC Z1.4):

- (a) Non-destructive Tests - General Inspection Level I.
- (b) Destructive Tests - Special Inspection Level S-2.

Specified Standards: The specified standards for the attributes requiring them shall be:

<u>Attribute</u>	<u>Specified Standard</u>
P-7. Type Quality and Uniformity	Government furnished material
P-8. Halftone Match (Single and Double Impression)	Government furnished material
P-10. Process Color Match	Government furnished material

**SUBCONTRACTING:** The predominant production function is press work.

**OPTION TO EXTEND THE TERM OF THE CONTRACT:** The Government has the option to extend the term of this contract for a period of 12 months by written notice to the contractor not later than 30 days before the contract expires. If the Government exercises this option, the extended contract shall be considered to include this clause, except, the total duration of the contract may not exceed 5 years as a result of, and including, any extension(s) added under this clause. Further extension may be negotiated under the "Extension of Contract Term" clause. See also "Economic Price Adjustment" for authorized pricing adjustment(s).

**EXTENSION OF CONTRACT TERM:** At the request of the Government, the term of any contract resulting from this solicitation may be extended for such period of time as may be mutually agreeable to the GPO and the contractor.

Salute  
Program 1029-S

**ECONOMIC PRICE ADJUSTMENT:** The pricing under this contract shall be adjusted in accordance with this clause, provided that in no event will any pricing adjustment be made that would exceed the maximum permissible under any law in effect at the time of the adjustment. There will be no adjustment for orders placed during the first period specified below. Pricing will thereafter be eligible for adjustment during the second and any succeeding performance period(s). For each performance period after the first, a percentage figure will be calculated as described below and that figure will be the economic price adjustment for that entire next period. Pricing adjustments under this clause are not applicable to reimbursable postage or transportation costs, or to paper, if paper prices are subject to adjustment by separate clause elsewhere in this contract.

For the purpose of this clause, performance under this contract will be divided into successive periods. The first period will extend from November 1, 2024 to October 31, 2025, and the second and any succeeding period(s) will extend for 12 months from the end of the last preceding period, except that the length of the final period may vary. The first day of the second and any succeeding period(s) will be the effective date of the economic price adjustment for that period.

Pricing adjustments in accordance with this clause will be based on changes in the seasonally adjusted "Consumer Price Index For All Urban Consumers - Commodities Less Food" (Index) published monthly in the CPI Detailed Report by the U.S. Department of Labor, Bureau of Labor Statistics.

The economic price adjustment will be the percentage difference between Index averages as specified in this paragraph. An index called the variable index will be calculated by averaging the monthly Indexes from the 12-month interval ending three (3) months prior to the beginning of the period being considered for adjustment. This average is then compared to the average of the monthly Indexes for the 12-month interval ending July 31, called the base index. The percentage change (plus or minus) of the variable index from the base index will be the economic price adjustment for the period being considered for adjustment.

The Government will notify the contractor by contract modification specifying the percentage increase or decrease to be applied to invoices for orders placed during the period indicated. The contractor shall apply the percentage increase or decrease against the total price of the invoice less reimbursable postage or transportation costs and separately adjusted paper prices. Payment discounts shall be applied after the invoice price is adjusted.

If the Government exercises an option, the extended contract shall be considered to include this economic price adjustment clause.

**ORDERING:** Items to be furnished under the contract shall be ordered by the issuance of print orders by the Government. Orders may be issued under the contract from November 1, 2024 through October 31, 2025 plus for such additional period(s) as the contract is extended. All print orders issued hereunder are subject to the terms and conditions of the contract. The contract shall control in the event of conflict with any print order. A print order shall be "issued" upon notification by the Government for purposes of the contract when it is electronically transmitted or otherwise physically furnished to the contractor in conformance with the schedule.

**ASSIGNMENT OF JACKETS, PURCHASE AND PRINT ORDERS:** A GPO jacket number will be assigned and a purchase order issued to the contractor to cover work performed. The purchase order will be supplemented by an individual print order for each job placed with the contractor. The print order, when issued, will indicate the quantity to be produced and any other information pertinent to the particular order.

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**PREAWARD SURVEY:** In order to determine the responsibility of the prime contractor or any subcontractor, the Government reserves the right to conduct an on-site preaward survey at the contractor's/subcontractor's facility or to require other evidence of technical, production, managerial, financial, and similar abilities to perform, prior to the award of a contract. As part of the financial determination, the contractor in line for award may be required to provide one or more of the following financial documents:

- 1) Most recent profit and loss statement
- 2) Most recent balance sheet
- 3) Statement of cash flows
- 4) Current official bank statement
- 5) Current lines of credit (with amounts available)
- 6) Letter of commitment from paper supplier(s)
- 7) Letter of commitment from any subcontractor

The documents will be reviewed to validate that adequate financial resources are available to perform the contract requirements. Documents submitted will be kept confidential and used only for the determination of responsibility by the Government. Failure to provide the requested information in the time specified by the Government may result in the Contracting Officer not having adequate information to reach an affirmative determination of responsibility.

**REQUIREMENTS:** This is a requirements contract for the items and for the period specified herein. Shipment/delivery of items or performance of work shall be made only as authorized by orders issued in accordance with the clause entitled "Ordering." The quantities of items specified herein are estimates only, and are not purchased hereby. Except as may be otherwise provided in this contract, if the Government's requirements for the items set forth herein do not result in orders in the amounts or quantities described as "estimated," it shall not constitute the basis for an equitable price adjustment under this contract.

Except as otherwise provided in this contract, the Government shall order from the contractor all the items set forth which are required to be purchased by the Government activity identified on page 1.

The Government shall not be required to purchase from the contractor, requirements in excess of the limit on total orders under this contract, if any.

Orders issued during the effective period of this contract and not completed within that time shall be completed by the contractor within the time specified in the order, and the rights and obligations of the contractor and the Government respecting those orders shall be governed by the terms of this contract to the same extent as if completed during the effective period of this contract.

If shipment/delivery of any quantity of an item covered by the contract is required by reason of urgency prior to the earliest date that shipment/delivery may be specified under this contract, and if the contractor will not accept an order providing for the accelerated shipment/delivery, the Government may procure this requirement from another source.

The Government may issue orders which provide for shipment/delivery to or performance at multiple destinations.

Subject to any limitations elsewhere in this contract, the contractor shall furnish to the Government all items set forth herein which are called for by print orders issued in accordance with the "Ordering" clause of this contract.

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**PAYMENT:** Submitting invoices for payment via the GPO fax gateway (if no samples are required) utilizing the GPO barcode coversheet program application is the most efficient method of invoicing. Instruction for using this method can be found at the following web address:  
<http://winapps.access.gpo.gov/fms/vouchers/barcode/instructions.html>.

Invoices may also be mailed to: U.S. Government Publishing Office, Office of Financial Management, Attn: Comptroller, Stop: FMCE, Washington, DC 20401.

For more information about the billing process refer to the General Information of the Office of Finance web page located at <https://www.gpo.gov/how-to-work-with-us/vendors/how-to-get-paid>.

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## SECTION 2.- SPECIFICATIONS

**SCOPE:** These specifications cover the production of a saddle-stitched newsletter requiring such operations as printing, binding, packing, and delivery.

**TITLE:** Salute

**FREQUENCY OF ORDERS:** Approximately 25 orders per year.

**QUANTITY:** An average of 2,500 copies per order, an occasional order may have up to 5,000 copies.

**NUMBER OF PAGES:** 8 to 28 pages, with an average of 12 pages. Self-cover.

**TRIM SIZES:** 8-1/2" x 11"

**GOVERNMENT TO FURNISH:** The Government furnished material will consist of digital files.

Software could include but is not limited to: PhotoShop, InDesign, PostScript, and PDF files. Software will be in a variety of versions. The contractor must have current versions and up-grade as they become available.

At the option of the agency the Government furnished materials will occasionally be sent via email or via the contractor's secure SFTP website. (See Contractor to Furnish).

Print Orders.

GPO Form 906.

Identification markings such as register marks, ring folios, rubber stamped jacket numbers, commercial identification marks of any kind, etc., except GPO imprint, form number, and revision date, carried on copy or film, must not print on finished product.

### **CONTRACTOR TO FURNISH:**

The contractor's couriers must qualify to obtain a security pass through Naval Base Kitsap's Rapid Gate program (360-476-4884) and must qualify to obtain access to the Controlled Industrial Area for purpose of delivering on the Naval Base Kitsap, Bremerton, to multiple locations.

All materials and operations, other than those listed under "Government to Furnish," necessary to produce the products in accordance with these specifications.

The contractor will host a website with secure FTP service using either Secure Sockets Layer (SSL) or Transfer Layer Security (TLS) encryption. The servers must be redundant and located in a secure locked, climate controlled, fire-resistant facility.

The contractor must provide website information allowing the ordering agencies to post and retrieve Government furnished materials and proofs from their secure website when required.

Contractor is responsible for converting images to an appropriate color space and file format for output. Contractor must also apply any and all necessary prepress functions to achieve best possible output quality of supplied files.

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Prior to image processing, the contractor shall perform a basic preflight check of the furnished media and publishing files to assure correct output of the required reproduction image. If any errors, media damage, or data corruption that might interfere with proper file image processing are discovered during inspection by the contractor, work must be discontinued and further instructions should immediately be requested from the contract administrator, see below.

This preflight must identify any problem areas with digital file submission and must include but not be limited to missing or damaged fonts, damaged disks, missing bleeds, improper trim size, and improper color definition. The Contractor is also responsible for creating or altering any necessary trapping, setting proper screen angles and frequency (unless indicated otherwise by the Government), and defining proper file output selection for the imaging device being used. All furnished files must be imaged as necessary to meet the assigned Quality Assurance Through Attributes Program (QATAP) level.

Note: All costs for prepress work must be included in the cost of each issue. Additional computer time work not covered within prepress work must be brought to the attention of the agency and GPO Northwest.

**COMPUTER TIME-WORK:** Will consist of minor repairs and/or corrections, not listed above, required by the ordering agency on electronic camera copy. Time work will be rounded up to closest 15-minute increments. **Prior to work, the contractor will be required to inform the agency and the Northwest Government Publishing Office of the approximate time required for repairs or corrections, allowing the agency the opportunity to correct and/or provide corrected files.**

Prior to making revisions, the contractor shall copy the furnished files and make all changes to the copy.

When required, upon completion of each order, the contractor must furnish final production native application files (digital deliverables) with the furnished material. The digital deliverables must be an exact representation of the final printed product and shall be returned on the same type of storage media as was originally furnished. The Government will not accept, as digital deliverables, PostScript files, Adobe Acrobat Portable Document Format (PDF) files, or any proprietary file formats other than those supplied, unless specified by the Government.

**PROOFS:** PDF “Soft” Proof.

Contractor to submit one “Press Quality” PDF “soft” proof (for content only) using the same Raster Image Processor (RIP) that will be used to produce the final printed product. PDF proof will be evaluated for text flow, image position, and color breaks. Proof will not be used for color match. Contractor must call the agency to confirm receipt.

Email proofs to email address indicated on the Print Order.

Proofs will be withheld not more than 2 workdays from receipt by the Government to receipt in contractor’s plant. Contractor must not print prior to receipt of an “OK to print”.

**STOCK/PAPER:** The specifications of all paper furnished must be in accordance with those listed herein or listed for the corresponding JCP Code numbers in the “Government Paper Specification Standards No. 13” dated September 2019.



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Color of paper furnished shall be of a uniform shade and a close match by visual inspection of the JCP and/or attached color sample(s). The Contracting Officer reserves the right to reject shipments of any order printed on paper the color of which, in their opinion, materially differs from that of the color specified.

White Uncoated Text, basis weight: 70 lbs. per 500 sheets, 25 x 38", equal to JCP Code A60.

**PRINTING:** Majority of orders print head-to-head. Contractor must inform agency of their required margins; gripper requirements; and safe zones for pages that do not bleed.

Approximately 4 pages print in Four-Color Process and approximately 8 pages print in black ink only.

**MARGINS:** Some orders bleed one to four sides.

**BINDING:** Saddle stitching and trim three sides. No binding stubs are allowed. Finished trimmed signatures must be one piece and measure 11 x 17".

Approximately 2 issues per year may require printing and inserting one 8-1/2 x 11" leaf into each copy.

Approximately 1 order per year may require a suitably sized hole to be drilled through each book. Contractor must receive agency approval on the hole size and hole location.

**DEPARTMENTAL RANDOM COPIES (BLUE LABEL):** All orders must be divided into equal sublots in accordance with the chart below. A random copy must be selected from each subplot. Do not choose copies from the same general area in each subplot. The contractor will be required to certify that copies were selected as directed using GPO Form 917-Certificate of Selection of Random Copies (located on GPO.gov). The random copies constitute a part of the total quantity ordered, and no additional charge will be allowed.

<u>Quantity Ordered</u>	<u>Number of Sublots</u>
500 - 3,200	50
3,201 - 10,000	80
10,001 - 35,000	125
35,001 and over	200

These randomly selected copies must be packed separately and identified by a special label (GPO Form 2678-Departmental Random Copies (Blue Label) that must be printed on blue paper and affixed to each affected container. This form can be downloaded from GPO.gov. The container and its contents shall be recorded separately on all shipping documents and sent in accordance with the distribution list to the agency.

A copy of the print order/specification and a signed Certificate of Selection of Random Copies must be included.

A copy of the signed Certificate of Selection of Random Copies must accompany the invoice sent to U.S. Government Publishing Office, Financial Management Services, for payment. Failure to furnish the certificate may result in delay in processing the invoice.

**PACKING:** Bundle in quantities of 50.

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**LABELING AND MARKING:** Use GPO Form 905 to mark all shipping containers. A fillable GPO Form 905 is available at <https://www.gpo.gov/how-to-work-with-us/vendors/forms-and-standards> Look under "Print Procurement".

**DISTRIBUTION:** Deliver f.o.b. destination to multiple addresses in Washington state, zip code 98314. Upon completion of each order, all originals must be returned to the ordering Department.

If requested, all expenses incidental to picking up of Government furnished materials, returning materials, and furnishing sample copies must be borne by the contractor.

**SCHEDULE:** Adherence to this schedule must be maintained. Contractor must not start production of any job prior to receipt of the individual print order (GPO Form 2511).

When requested by the agency Government furnished material must be picked up from and delivered to the ordering Department (f.o.b. destination).

At the option of the agency Government furnished material will be submitted through the contractor's online drop box/ftp site.

1. A PDF file of the finalized document will be sent to the contractor Monday the week of publication. A PDF or JPEG file of the cover will be provided with the entire issue.
2. Contractor must deliver completed product not later than 11:30 a.m., Thursday, the week of publication.

Unscheduled material such as shipping documents, receipts or instructions, delivery lists, labels, etc., will be furnished with each order or shortly thereafter. In the event such information is not received in due time, the contractor will not be relieved of any responsibility in meeting the shipping schedule because of failure to request such information.

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### **SECTION 3.- DETERMINATION OF AWARD**

The Government will determine the lowest quote by applying the prices offered in the "Schedule of Prices" to the following units of production which are the estimated requirements to produce 12 months' under this contract. These units do not constitute, nor are they to be construed as, a guarantee of the volume of work which may be ordered for the term of this contract.

The following item designations correspond to those listed in the "Schedule of Prices".

- I.**
  - (a) (1)** 200
  - (2)** 500
  
  - (b) (1)** 2
  - (2)** 5
  
  - (c) (1)** 100
  - (2)** 250
  
- II.**
  - (a)** 3
  - (b)** 5
  - (c)** 2500

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**SECTION 4.- SCHEDULE OF PRICES**

Prices must include the cost of all required materials and operations for each item listed in accordance with these specifications.

Quotes offered are f.o.b. destination.

Offeror must make an entry in each of the spaces provided. Quotes submitted with any obliteration, revision, or alteration of the order and manner of submitting quotes, may be declared nonresponsive.

An entry of NC (No Charge) shall be entered if offeror intends to furnish individual items at no charge to the Government.

Quotes submitted with NB (No Bid), N/A, or blank spaces for an item may be declared nonresponsive.

The Contracting Officer reserves the right to reject any offer that contains prices for individual items of production (whether or not such items are included in the Determination of Award) that are inconsistent or unrealistic in regard to other prices in the same offer or to GPO prices for the same operation if such action would be in the best interest of the Government.

All vouchers submitted to the GPO shall be based on the most economical method of production.

Fractional parts of 1,000 will be prorated at the per 1,000 rate.

- I. COMPLETE PRODUCT:** Prices quoted shall include the cost of all required materials and operations necessary for the complete production and distribution of the product in accordance with these specifications, including emailed proofs.

	<u>Makeready and/or Setup</u> (1)	<u>Running Per 1,000 Copies</u> (2)
(a) Per page; black ink.	\$ _____	\$ _____
(b) Printing insert sheet in black ink; per page.	\$ _____	\$ _____
(c) Per page; Four-Color Process.	\$ _____	\$ _____

**II. ADDITIONAL OPERATIONS:**

(a) Computer time-work; per hour.	\$ _____
(b) Inserting sheets into the publication; cost per 1,000 inserts.	\$ _____
(c) Drilling one hole; cost per book.	\$ _____

\_\_\_\_\_  
(Initials)

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**SHIPMENT(S):** Shipments will be made from: City \_\_\_\_\_, State \_\_\_\_\_

If no shipping point is indicated above, it will be deemed that the offeror has selected the city and state shown below in the address block, and the quote will be evaluated and the contract awarded on that basis. If shipment is not made from evaluation point, the contractor will be responsible for any additional shipping costs incurred.

**DISCOUNTS:** Discounts are offered for payment as follows: \_\_\_\_\_ Percent, \_\_\_\_\_ calendar days. See Article 12 "Discounts" of Solicitation Provisions in GPO Contract Terms (Publication 310.2).

**AMENDMENT(S):** Offeror hereby acknowledges amendment(s) number(ed) \_\_\_\_\_

**QUOTE ACCEPTANCE PERIOD:** In compliance with the above, the undersigned agrees, if this quote is accepted within \_\_\_\_\_ calendar days (60 calendar days unless a different period is inserted by the offeror) from the date for receipt of quotes, to furnish the specified items at the price set opposite each item, delivered at the designated points(s), in exact accordance with specifications.

NOTE: Failure to provide a 60-day quote acceptance period may result in expiration of the quote prior to award.

**OFFEROR'S NAME AND SIGNATURE:** Unless specific written exception is taken, the offeror, by signing and submitting a quote, agrees with and accepts responsibility for all certifications and representations as required by the solicitation and GPO Contract Terms – Publication 310.2. When responding by email, fill out and return one copy of all pages in "SECTION 4. – SCHEDULE OF PRICES," including initialing/signing where indicated. Valid electronic signatures will be accepted in accordance with the Uniform Electronic Transactions Act, §2. Electronic signatures must be verifiable of the person authorized by the company to sign quotes.

Failure to sign the signature block below may result in the quote being declared non-responsive.

Offeror \_\_\_\_\_  
(Contractor Name) (GPO Contractor's Code)

\_\_\_\_\_  
(Street Address)

\_\_\_\_\_  
(City – State – Zip Code)

By \_\_\_\_\_  
(Printed Name, Signature, and Title of Person Authorized to Sign this Quote) (Date)

\_\_\_\_\_  
(Person to be Contacted) (Telephone Number) (Email)

**THIS SECTION FOR GPO USE ONLY**

Certified by: \_\_\_\_\_ Date: \_\_\_\_\_ Contracting Officer: \_\_\_\_\_ Date: \_\_\_\_\_  
(Initials) (Initials)