NONAPPROPRIATED FUND REQUEST FOR QUOTATIONS (THIS IS NOT AN ORDER)								Page 1 of 1	
1. REQUEST NUI	MBER OSAN-F-24Q0023	3		E ISSUED p 2024		3. PURCHAS OSANF4	SE REQUEST 0108	NUMBER	
4a. ISSUED BY: NAF Accounting Office 51 FSS/FSRA UNIT# 2065 APO, AP 96278-2065 Mr. Chin, Email chun.chin.kr@us.af.mil Voice: 82-31-661-8471 Fax: 82-31-661-6469						5. DELIVERY BY (Date) 31 Oct 2024			
						6. DELIVERY TERMS			
4b. FOR INFORMATION CALL: (Name and telephone number) (No collect calls) Mr. Chin at 0505-784-8471						8. SHIP TO (Consignee and address, including Zip Code)			
7. TO: (Name and Address, including Zip Code)						Daegu Bowling Center 607 MMS, Det 3 Unit #2166 APO, AP 96213 Kyusang Ohm Voice: 82-53-980-4321			
9. PLEASE FURNISH QUOTATIONS TO THE ISSUING OFFICE ON OR BEFORE CLOSE OF BUSINESS (Date) 02 Oct 2024									
IMPORTANT: This is a request for information and quotations furnished are not offers. If you are unable to quote, please indicate on this form and return to the address in block 4a. 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 services. Supplies are of domestic origin unless otherwise indicated by quoter. Any representation and/or certifications attached to this Request for Quotations must be completed by the quoter.									
10. SCHEDULE (Include applicable Federal, State and local taxes)									
ITEM NO. (a)	SUPPLIES/SERVICES (b)				QUANTITY (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	
0001 ATCH01	Thermoplan BW4 CTS2 See attached Required Specification ATTACHMENTS OSANF40108 Espresso coffee mach KB)		ions.xlsx (11		2	EA			
ATCH02	Nonappropriated Fund Standard Cla KB)								
11. DISCOUNT FOR PROMPT PAYMENT - % 10 CALENDA 12. NAME AND ADDRESS OF QUOTER (Street, City, State and ZIP)			R DAYS - % 20 CALENDAR DAYS - % 13. SIGNATURE OF PERSON AUTHORIZED TO 5				AR DAYS - %	CALENDAR DAYS - %	
				15. NAME AND TITLE OF SIGNER (Type or print)				NE NO. (include area code)	