

NONAPPROPRIATED FUND REQUEST FOR QUOTATIONS (THIS IS NOT AN ORDER)

1. REQUEST NUMBER OSAN-F-26Q0003	2. DATE ISSUED 09 Apr 2026	3. PURCHASE REQUEST NUMBER OSANF60263
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: 0505-784-8471, Fax: 82-31-661-6469	5. DELIVERY BY (Date) 30 Apr 2031	
	6. DELIVERY TERMS <input type="checkbox"/> FOB Destination <input type="checkbox"/> FOB Origin	
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) Osan Club Complex 51 FSS/FSWC UNIT #2065 APO, AP 96278-2065 , Voice: 82-31-661-6900
7. TO: (Name and Address, including Zip Code)		

9. PLEASE FURNISH QUOTATIONS TO THE ISSUING OFFICE ON OR BEFORE CLOSE OF BUSINESS (Date) 23 Apr 2026

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	Blanket Purchase Agreement (BPA) for Laundry Service See attached Statement of Work (SOW) and NAF Standard Clauses.	1	SV		
ATCH01	ATTACHMENTS OSANF26Q0003_BPA_Laundry service.pdf (132 KB)				
ATCH02	OSANF26Q0003_Laundry_BPA_SOW_9 Apr 26.pdf (223 KB)				
ATCH03	Nonappropriated Fund Standard Clauses 30 May 2025.docx (77 KB)				
NOTE01	NOTES Sampling the laundry items: You many contact Ms. Kwon, Ho Son or Ms. Pak, Kyong Hwa at 0505-784-6900 to look at the laundry items. The contractor or bidder must complete all unit prices in the price list provided in the Appendix B.				

11. DISCOUNT FOR PROMPT PAYMENT - %	10 CALENDAR DAYS - %	20 CALENDAR DAYS - %	30 CALENDAR DAYS - %	CALENDAR DAYS - %
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12. NAME AND ADDRESS OF QUOTER (Street, City, State and ZIP)	13. SIGNATURE OF PERSON AUTHORIZED TO SIGN QUOTATION	14. DATE OF QUOTATION
	15. NAME AND TITLE OF SIGNER (Type or print)	16. TELEPHONE NO. (include area code)