

<b>SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS</b> <i>OFFEROR TO COMPLETE BLOCKS 12, 17, 23, 24, &amp; 30</i>				1. REQUISITION NUMBER 15EM002509		PAGE OF 1   3	
2. CONTRACT NO. DE-EM0003927		3. AWARD/ EFFECTIVE DATE	4. ORDER NUMBER		5. SOLICITATION NUMBER		6. SOLICITATION ISSUE DATE
7. FOR SOLICITATION INFORMATION CALL:		a. NAME Scott Stephenson			b. TELEPHONE NUMBER (No collect calls) 803-952-9298	8. OFFER DUE DATE/LOCAL TIME	
9. ISSUED BY Savannah River Operations U.S. Department of Energy Savannah River Operations P.O. Box A Aiken SC 29802			CODE 00901	10. THIS ACQUISITION IS <input type="checkbox"/> UNRESTRICTED OR <input checked="" type="checkbox"/> SET ASIDE: 100.00 % FOR:  <input type="checkbox"/> SMALL BUSINESS <input type="checkbox"/> HUBZONE SMALL BUSINESS <input checked="" type="checkbox"/> SERVICE-DISABLED VETERAN-OWNED SMALL BUSINESS <input type="checkbox"/> WOMEN-OWNED SMALL BUSINESS (WOSB) ELIGIBLE UNDER THE WOMEN-OWNED SMALL BUSINESS PROGRAM <input type="checkbox"/> EDWOSB <input type="checkbox"/> 8(A) NAICS: 541990 SIZE STANDARD: \$15.0			
11. DELIVERY FOR FOB DESTINATION UNLESS BLOCK IS MARKED <input type="checkbox"/> SEE SCHEDULE		12. DISCOUNT TERMS NET 30		13a. THIS CONTRACT IS A RATED ORDER UNDER DPAS (15 CFR 700)		13b. RATING	
15. DELIVER TO Savannah River (Loading Dock) Attn: Charlene Stokes-Geter DOE Loading Dock, Bldg. 730B Aiken SC 29802			CODE 00902	18. ADMINISTERED BY Savannah River Operations U.S. Department of Energy Savannah River Operations P.O. Box A Aiken SC 29802		CODE 00901	
17a. CONTRACTOR/OFFEROR VETERAN SOLUTIONS, INC Attn: Michael Bisacre 32 DEFENSE ST ANNAPOLIS MD 214013103  TELEPHONE NO. 3015995511		CODE 146485565	FACILITY CODE	18a. PAYMENT WILL BE MADE BY OR for Savannah River U.S. Department of Energy Oak Ridge Financial Service Center P.O. Box 6017 Oak Ridge TN 37831		CODE 00515	
<input type="checkbox"/> 17b. CHECK IF REMITTANCE IS DIFFERENT AND PUT SUCH ADDRESS IN OFFER				18b. SUBMIT INVOICES TO ADDRESS SHOWN IN BLOCK 18a UNLESS BLOCK BELOW IS CHECKED <input type="checkbox"/> SEE ADDENDUM			
19. ITEM NO.	20. SCHEDULE OF SUPPLIES/SERVICES			21. QUANTITY	22. UNIT	23. UNIT PRICE	24. AMOUNT
	Tax ID Number: 20-1059001 DUNS Number: 146485565 This is a firm fixed price Contract for technical support services to Department of Energy's Savannah River Operations Office - Office of Safeguards, Security and Emergency Services.  List of Attachments  Contract DE-EM0003927 Terms and Conditions Attachment 1 VSI Performance Work Statement <i>(Use Reverse and/or Attach Additional Sheets as Necessary)</i>						
25. ACCOUNTING AND APPROPRIATION DATA See schedule						26. TOTAL AWARD AMOUNT (For Govt. Use Only) \$3,362,866.37	
<input type="checkbox"/> 27a. SOLICITATION INCORPORATES BY REFERENCE FAR 52.212-1, 52.212-4, FAR 52.212-3 AND 52.212-5 ARE ATTACHED. ADDENDA				<input type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED.			
<input checked="" type="checkbox"/> 27b. CONTRACT/PURCHASE ORDER INCORPORATES BY REFERENCE FAR 52.212-4, FAR 52.212-5 IS ATTACHED. ADDENDA				<input type="checkbox"/> ARE <input checked="" type="checkbox"/> ARE NOT ATTACHED.			
28. CONTRACTOR IS REQUIRED TO SIGN THIS DOCUMENT AND RETURN COPIES TO ISSUING OFFICE. CONTRACTOR AGREES TO FURNISH AND DELIVER ALL ITEMS SET FORTH OR OTHERWISE IDENTIFIED ABOVE AND ON ANY ADDITIONAL SHEETS SUBJECT TO THE TERMS AND CONDITIONS SPECIFIED.				29. AWARD OF CONTRACT: _____ OFFER DATED _____ YOUR OFFER ON SOLICITATION (BLOCK 5), INCLUDING ANY ADDITIONS OR CHANGES WHICH ARE SET FORTH HEREIN, IS ACCEPTED AS TO ITEMS: _____			
30a. SIGNATURE OF OFFEROR/CONTRACTOR <b>April Willis</b> <small>Digitally signed by April Willis DN: cn=April Willis, ou=Veteran Solutions, Inc, ou=Finance and Contracts Administration, email=awillis@veteransolutions.com, c=US Date: 2015.09.21 10:15:03 -0400</small>				31a. UNITED STATES OF AMERICA (SIGNATURE OF CONTRACTING OFFICER)			
30b. NAME AND TITLE OF SIGNER (Type or print) April Willis Director of Contract Administration		30c. DATE SIGNED 09/21/2015		31b. NAME OF CONTRACTING OFFICER (Type or print) David Whitney Hepner		31c. DATE SIGNED	

19. ITEM NO.	20. SCHEDULE OF SUPPLIES/SERVICES	21. QUANTITY	22. UNIT	23. UNIT PRICE	24. AMOUNT
	Attachment 2 Special Contract Clauses Attachment 3 Pricing Schedule BASE PERIOD Attachment 3 Pricing Schedule OPTION PERIOD Attachment 4 Correspondence and Invoice Instructions Attachment 5 Reporting Requirements Checklist Attachment 6 - List of DOE Directives and Manuals  NOTE: See Attachment 4 Correspondence and Invoice Instructions for correct invoicing and payment procedures. Period of Performance: 10/01/2015 to 09/30/2016				
00001	CLIN 001 EM Base Labor Obligated Amount: \$1,278,111.03  Accounting Info: VSI Fund: 01250 Appr Year: 2015 Allottee: 36 Report Entity: 410225 Object Class: 25233 Program: 1111166 Project: 0001765 WFO: 0000000 Local Use: 0000000 Funded: \$1,278,111.03				1,278,111.03
00002	CLIN 002 NNSA Base Labor Obligated Amount: \$283,000.00  Accounting Info: NNSA Fund: 00900 Appr Year: 2015 Allottee: 36 Continued ...				283,000.00

32a. QUANTITY IN COLUMN 21 HAS BEEN

RECEIVED     INSPECTED     ACCEPTED, AND CONFORMS TO THE CONTRACT, EXCEPT AS NOTED: \_\_\_\_\_

32b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE	32c. DATE	32d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE
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32e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE	32f. TELEPHONE NUMBER OF AUTHORIZED GOVERNMENT REPRESENTATIVE
	32g. E-MAIL OF AUTHORIZED GOVERNMENT REPRESENTATIVE

33. SHIP NUMBER  <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL	34. VOUCHER NUMBER	35. AMOUNT VERIFIED CORRECT FOR	36. PAYMENT  <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL	37. CHECK NUMBER
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38. SJR ACCOUNT NUMBER	39. SJR VOUCHER NUMBER	40. PAID BY
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41a. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT	42a. RECEIVED BY (Print)	
41b. SIGNATURE AND TITLE OF CERTIFYING OFFICER	41c. DATE	42b. RECEIVED AT (Location)
		42c. DATE REC'D (YY/MM/DD)

**CONTINUATION SHEET**

REFERENCE NO. OF DOCUMENT BEING CONTINUED  
DE-EM0003927

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NAME OF OFFEROR OR CONTRACTOR  
VETERAN SOLUTIONS, INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	Report Entity: 410206 Object Class: 25233 Program: 2222383 Project: 0000000 WFO: 0000000 Local Use: 0000000 Funded: \$283,000.00				
00003	CLIN 003 Other Direct Costs Base Obligated Amount: \$99,000.00  Accounting Info: VSI Fund: 01250 Appr Year: 2015 Allottee: 36 Report Entity: 410225 Object Class: 25233 Program: 1111166 Project: 0001765 WFO: 0000000 Local Use: 0000000 Funded: \$99,000.00				99,000.00
00004	UNCLASSIFIED CONTROLLED NUCLEAR INFORMATION CLIN 004 EM Option Labor Amount: \$1,312,755.34 (Option Line Item)				1,312,755.34
00005	CLIN 005 NNSA Option Labor Amount: \$291,000.00 (Option Line Item)				291,000.00
00006	CLIN 006 Other Direct Costs Option Amount: \$99,000.00 (Option Line Item)				99,000.00