

FOR OFFICIAL USE ONLY - LAW ENFORCEMENT SENSITIVE

SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS <i>OFFEROR TO COMPLETE BLOCKS 12, 17, 23, 24, & 30</i>				1. REQUISITION NUMBER 192121IHQRQN00041		PAGE OF 1 3							
2. CONTRACT NO. HSHQDC-12-D-00013		3. AWARD/ EFFECTIVE DATE.		4. ORDER NUMBER 70CMSD21FR0000107		5. SOLICITATION NUMBER		6. SOLICITATION ISSUE DATE					
7. FOR SOLICITATION INFORMATION CALL:		a. NAME (b)(6); (b)(7)(C)		b. TELEPHONE NUMBER (No collect calls) 214-905 (b)(6);		8. OFFER DUE DATE/LOCAL TIME							
9. ISSUED BY CODE 70CMSD INVESTIGATIONS & OPS SUPPORT DALLAS U.S. Immigration and Customs Enforcement Office of Acquisition Management 8222 N. BELT LINE ROAD, (b)(6); (b)(7)(C) IRVING TX 75063				10. THIS ACQUISITION IS <input type="checkbox"/> UNRESTRICTED OR <input checked="" type="checkbox"/> SET ASIDE: 100.00 % FOR; <input type="checkbox"/> SMALL BUSINESS <input checked="" type="checkbox"/> HUBZONE SMALL BUSINESS <input type="checkbox"/> SERVICE-DISABLED VETERAN-OWNED SMALL BUSINESS <input type="checkbox"/> WOMEN-OWNED SMALL BUSINESS <input type="checkbox"/> (WOSB) ELIGIBLE UNDER THE WOMEN-OWNED SMALL BUSINESS PROGRAM <input type="checkbox"/> EDWOSB <input type="checkbox"/> 8(A) NAICS: 541519 SIZE STANDARD: 150									
11. DELIVERY FOR FOB DESTINATION UNLESS BLOCK IS MARKED <input checked="" type="checkbox"/> SEE SCHEDULE		12. DISCOUNT TERMS Net 30		13a. THIS CONTRACT IS A RATED ORDER UNDER DPAS (15 CFR 700) <input type="checkbox"/>		13b. RATING		14. METHOD OF SOLICITATION <input type="checkbox"/> RFQ <input type="checkbox"/> IFB <input type="checkbox"/> RFP					
15. DELIVER TO CODE ICE/INTEL, 500 12TH ST. SW WASHINGTON DC 20536				16. ADMINISTERED BY CODE ICE/IOSD. INVESTIGATIONS & OPS SUPPORT DALLAS U.S. Immigration and Customs Enforcement Office of Acquisition Management 8222 N. BELT LINE ROAD, (b)(6); (b)(7)(C) IRVING TX 75063									
17a. CONTRACTOR/ OFFEROR CODE 1666697420000 FACILITY CODE		18a. PAYMENT WILL BE MADE BY CODE ICE-INTEL DHS, ICE Burlington Finance Center P.O. Box 1620 Attn: ICE-INTEL Williston VT 05495-1620		17a. CONTRACTOR/ OFFEROR CODE 1666697420000 FACILITY CODE		18a. PAYMENT WILL BE MADE BY CODE ICE-INTEL DHS, ICE Burlington Finance Center P.O. Box 1620 Attn: ICE-INTEL Williston VT 05495-1620		TELEPHONE NO. 7038986279					
17a. CONTRACTOR/ OFFEROR CODE 1666697420000 FACILITY CODE				18a. PAYMENT WILL BE MADE BY CODE ICE-INTEL DHS, ICE Burlington Finance Center P.O. Box 1620 Attn: ICE-INTEL Williston VT 05495-1620				TELEPHONE NO. 7038986279	<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
25. ACCOUNTING AND APPROPRIATION DATA See schedule				26. TOTAL AWARD AMOUNT (For Govt. Use Only) \$602,056.00				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.	27b. CONTRACT/PURCHASE ORDER INCORPORATES BY REFERENCE FAR 52.212-4. FAR 52.212-5 IS ATTACHED. ADDENDA <input checked="" type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED.	28. CONTRACTOR IS REQUIRED TO SIGN THIS DOCUMENT AND RETURN 1 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)(6); (b)(7)(C)				31a. UNITED STATES OF AMERICA (SIGNATURE OF CONTRACTING OFFICER) Digitally signed by (b)(6); (b)(7)(C) (b)(6); (b)(7)(C) Date: 2021.08.31 08:26:27 -0500				30b. NAME AND TITLE OF SIGNER (Type or print) (b)(6); Contracts Manager	30c. DATE SIGNED 8-30-2021	31b. NAME OF CONTRACTING OFFICER (Type or print) (b)(6); (b)(7)(C)	31c. DATE SIGNED		

19. ITEM NO.	20. SCHEDULE OF SUPPLIES/SERVICES	21. QUANTITY	22. UNIT	23. UNIT PRICE	24. AMOUNT
	<p>supersede any additional terms or conditions imposed by the vendor. As such, separate terms and conditions contained within the vendor's quotation shall not be incorporated into this Delivery/Task Order. Fulfillment of this order shall be accomplished in accordance with the period of performance (PoP)/delivery dates listed herein. See Attachment 1 for additional terms and conditions.</p> <p>*****</p> <p>For questions regarding this order please contact the following as applicable:</p> <p>Contracting Officer (b)(6); (b)(7)(C) 214-905-(b)(6); (b)(6); (b)(7)(C)@ice.dhs.gov</p> <p>Contract Specialist (b)(6); (b)(7)(C) 214-905-(b)(6); (b)(6); (b)(7)(C)@ice.dhs.gov</p> <p>Contracting Officer's Representative (COR)/Invoice POC (b)(6); (b)(7)(C) 202-732-(b)(6); (b)(6); (b)(7)(C)@ice.dhs.gov</p> <p>Continued ...</p>				

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. S/R ACCOUNT NUMBER	39. S/R VOUCHER NUMBER	40. PAID BY
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41a. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT	42a. RECEIVED BY (<i>Print</i>)
41b. SIGNATURE AND TITLE OF CERTIFYING OFFICER	41c. DATE
	42b. RECEIVED AT (<i>Location</i>)
	42c. DATE REC'D (YY/MM/DD)
	42d. TOTAL CONTAINERS

CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED
HSHQDC-12-D-00013/70CMSD21FR0000107

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NAME OF OFFEROR OR CONTRACTOR
PANAMERICA COMPUTERS INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>Alternate Contracting Officer's Representative (ACOR)/Alternate Invoice POC (b)(6); (b)(7)(C) 202-732-(b)(6); (b)(6); (b)(7)(C)@ice.dhs.gov</p> <p>PCiTec (b)(6); (b)(7)(C) 540-635-(b)(6); (b)(7)(C) (b)(6); (b)(7)(C)@pcitec.com *****</p> <p>Attachments:</p> <p>Attachment 1 - Terms and Conditions *****</p> <p>Delivery: 09/06/2021 Period of Performance: 09/07/2021 to 09/06/2022</p>				
0001	<p>ShadowDragon SocialNet Identity Management Secured Link Analysis Bundled With Maltego Pro - (b)(4)</p> <p>Part Number: SD-FED-SocNet-250-MaltegoBundle</p> <p>Accounting Info: (b)(7)(E)</p> <p>Funded: (b)(4)</p> <p>Accounting Info: (b)(7)(E)</p> <p>Funded: (b)(4)</p> <p>The total amount of award: \$602,056.00. The obligation for this award is shown in box 26.</p>	(b)(4)			602,056.00