

ORDER FOR SUPPLIES OR SERVICES

IMPORTANT: Mark all packages and papers with contract and/or order numbers.

1. DATE OF ORDER 12/30/2009		2. CONTRACT NO. (if any) CPSC-N-10-0055		6. SHIP TO:	
3. ORDER NO.		4. REQUISITION/REFERENCE NO.		a. NAME OF CONSIGNEE CONSUMER PRODUCT SAFETY COMMISSION	
5. ISSUING OFFICE (Address correspondence to) CONSUMER PRODUCT SAFETY COMMISSION DIV OF PROCUREMENT SERVICES 4330 EAST WEST HWY ROOM 517 BETHESDA MD 20814				b. STREET ADDRESS DIV OF HAZARD & INJURY DATA SYS 4330 EAST WEST HIGHWAY ROOM 604-26	
c. CITY BETHESDA		d. STATE MD	e. ZIP CODE 20814		
7 TO:				f. SHIP VIA	
a. NAME OF CONTRACTOR HENLEY MICHELE				8. TYPE OF ORDER	
b. COMPANY NAME [REDACTED]				<input checked="" type="checkbox"/> a. PURCHASE <input type="checkbox"/> b. DELIVERY REFERENCE YOUR: Please furnish the following on the terms and conditions specified on both sides of this order and on the attached sheet, if any, including delivery as indicated.	
d. CITY JONESBOROUGH		e. STATE TN	f. ZIP CODE 37659-6118		
9. ACCOUNTING AND APPROPRIATION DATA See Schedule				10. REQUISITIONING OFFICE CONSUMER PRODUCT SAFETY COMMISSION	

11. BUSINESS CLASSIFICATION (Check appropriate box(es))						12. F.O.B. POINT Destination
<input checked="" type="checkbox"/> a. SMALL	<input type="checkbox"/> b. OTHER THAN SMALL	<input type="checkbox"/> c. DISADVANTAGED	<input type="checkbox"/> g. SERVICE-DISABLED VETERAN-OWNED			
<input checked="" type="checkbox"/> d. WOMEN-OWNED	<input type="checkbox"/> e. HUBZone	<input type="checkbox"/> f. EMERGING SMALL BUSINESS				
13. PLACE OF		14. GOVERNMENT B/L NO.		15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date) Multiple	16. DISCOUNT TERMS Net 30	
a. INSPECTION Destination	b. ACCEPTANCE Destination					

17. SCHEDULE (See reverse for Rejections)

ITEM NO (a)	SUPPLIES OR SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	DUNS Number [REDACTED] HOSPITAL ID#126913446 This contract is being incrementally funded in the amount of \$9,271.93 for the period of October 1, 2009 through January 31, Continued ...					

18. SHIPPING POINT		19. GROSS SHIPPING WEIGHT		20. INVOICE NO.		17(h) TOTAL (Cont. pages)
21. MAIL INVOICE TO:						
a. NAME CONSUMER PRODUCT SAFETY COMMISSION						\$9,271.93
b. STREET ADDRESS (or P.O. Box) DIVISION OF FINANCIAL SERVICES 4330 EAST WEST HWY ROOM 522						
c. CITY BETHESDA		d. STATE MD	e. ZIP CODE 20814		\$9,271.93	17(i) GRAND TOTAL

22. UNITED STATES OF AMERICA BY (Signature) 			23. NAME (Typed) Doris B. Kessler TITLE: CONTRACTING/ORDERING OFFICER			
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ORDER SUPPLIES OR SERVICES
SCHEDULE - CONTINUATION

PAGE NO

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DATE OF ORDER 12/30/2009	CONTRACT NO. CPSC-N-10-0055	ORDER NO.
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ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	2010. Additional funds will be provided, by modification, when funds become available. Admin Office: CONSUMER PRODUCT SAFETY COMMISSION DIV OF PROCUREMENT SERVICES 4330 EAST WEST HWY ROOM 517 BETHESDA MD 20814 Period of Performance: 10/01/2009 to 09/30/2010					
0001	ESTIMATED QUANTITY NEISS SURVEILLANCE REPORTS AND SPECIAL SURVEY REPORTS IN ACCORDANCE WITH THE ATTACHED STATEMENT OF WORK. MINIMUM QTY: 1,350 MAXIMUM QTY: 6,750 Delivery: 09/30/2010 Accounting Info: 10-PS-EXFM-4310-11179-252E Funded: \$8,748.00	1800	EA	4.86	8,748.00	
0002	ESTIMATED QUANTITY SUPPLEMENTAL/SPECIAL STUDY REPORTS IN ACCORDANCE WITH THE ATTACHED STATEMENT OF WORK. MINIMUM QTY: 130 MAXIMUM QTY: 1,300 Delivery: 09/30/2010 Accounting Info: 10-PS-EXFM-4310-11179-252E Funded: \$523.93	433	EA	1.21	523.93	
0003	OPTION PERIOD: 10/01/10 THRU 09/30/11 ESTIMATED QUANTITY NEISS SURVEILLANCE REPORTS AND SPECIAL Continued ...	5400	EA	4.86	0.00	

TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))

\$9,271.93

ORDER FOR SUPPLIES OR SERVICES
SCHEDULE - CONTINUATION

PAGE NO

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DATE OF ORDER
12/30/2009

CONTRACT NO.
CPSC-N-10-0055

ORDER NO.

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
0004	<p>SURVEY REPORTS.</p> <p>MINIMUM QTY: 1,350 MAXIMUM QTY: 6,750 Amount: \$26,244.00 (Option Line Item) 10/01/2010</p> <p>Delivery: 09/30/2011 Accounting Info: 11-PS-EXFM-4310-11179-2523 Funded: \$0.00 \$26,244.00 (Subject to Availability of Funds) \$0.00 (Subject to Availability of Funds) Period of Performance: 10/01/2010 to 09/30/2011</p> <p>ESTIMATED QUANTITY SUPPLEMENTAL/SPECIAL STUDY REPORTS.</p> <p>MINIMUM QTY: 130 MAXIMUM QTY: 1,300 Amount: \$1,573.00 (Option Line Item) 10/01/2010</p> <p>Delivery: 09/30/2011 Accounting Info: 11-PS-EXFM-4310-11179-252E Funded: \$0.00 \$1,573.00 (Subject to Availability of Funds) \$0.00 (Subject to Availability of Funds) Period of Performance: 10/01/2010 to 09/30/2011</p> <p>The total amount of award: \$37,088.93. The obligation for this award is shown in box 17(i).</p>	1300	EA	1.21	0.00	

TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))

\$0.00