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| <b>SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEM</b><br><i>OFFEROR TO COMPLETE BLOCKS 12, 17, 23, 24, &amp; 30</i> |  | 1 REQUISITION NUMBER<br>REQ-2400-09-0225 | PAGE OF<br>1 8 |
|--|--|--|----------------|

|                                 |                                       |                                   |                        |                            |
|---------------------------------|---------------------------------------|-----------------------------------|------------------------|----------------------------|
| 2. CONTRACT NO.<br>GS-35F-5212H | 3. AWARD/EFFECTIVE DATE<br>10/15/2009 | 4. ORDER NUMBER<br>CPSC-F-10-0003 | 5. SOLICITATION NUMBER | 6. SOLICITATION ISSUE DATE |
|---------------------------------|---------------------------------------|-----------------------------------|------------------------|----------------------------|

|  |                        |  |                              |
|--|------------------------|--|------------------------------|
| 7. <b>FOR SOLICITATION INFORMATION CALL:</b> | a. NAME<br>Eddie Ahmad | b. TELEPHONE NUMBER (No collect calls)<br>(301) 504-7884 | 8. OFFER DUE DATE/LOCAL TIME |
|--|------------------------|--|------------------------------|

|  |              |  |
|--|--------------|--|
| 9. ISSUED BY<br>CONSUMER PRODUCT SAFETY COMMISSION<br>DIV OF PROCUREMENT SERVICES<br>4330 EAST WEST HWY<br>ROOM 517<br>BETHESDA MD 20814 | CODE<br>FMPS | 10. THIS ACQUISITION IS<br><input checked="" type="checkbox"/> UNRESTRICTED OR<br><input type="checkbox"/> SET ASIDE: % FOR:<br><input type="checkbox"/> SMALL BUSINESS <input type="checkbox"/> EMERGING SMALL BUSINESS<br>NAICS: <input type="checkbox"/> HUBZONE SMALL BUSINESS <input type="checkbox"/> SOLE SOURCE<br>SIZE STANDARD: <input type="checkbox"/> SERVICE-DISABLED VETERAN-OWNED SMALL BUSINESS <input type="checkbox"/> 8(A) |
|--|--------------|--|

|  |                              |  |             |  |
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| 11. DELIVERY FOR FOB DESTINATION UNLESS BLOCK IS MARKED<br><input type="checkbox"/> SEE SCHEDULE | 12. DISCOUNT TERMS<br>Net 30 | <input type="checkbox"/> 13a. THIS CONTRACT IS A RATED ORDER UNDER DPAS (15 CFR 700) | 13b. RATING | 14. METHOD OF SOLICITATION<br><input type="checkbox"/> RFQ <input type="checkbox"/> IFB <input type="checkbox"/> RFP |
|--|------------------------------|--|-------------|--|

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| 15. DELIVER TO<br>CONSUMER PRODUCT SAFETY COMMISSION<br>OFFICE OF INFORMATION SERVICES<br>4330 EASTWEST HIGHWAY<br>ROOM 706<br>BETHESDA MD 20814 | CODE<br>EXIT | 16. ADMINISTERED BY<br>CONSUMER PRODUCT SAFETY COMMISSION<br>DIV OF PROCUREMENT SERVICES<br>4330 EAST WEST HWY<br>ROOM 517<br>BETHESDA MD 20814 | CODE<br>FMPS |
|--|--------------|---|--------------|

|   |                    |               |   |              |
|---|--------------------|---------------|---|--------------|
| 17a. CONTRACTOR/OFFEROR<br>SYBASE INC<br>561 VIRGINIA RD<br>CONCORD MA 01742-2732<br><br>TELEPHONE NO. 301-896-1661 | CODE<br>[REDACTED] | FACILITY CODE | 18a. PAYMENT WILL BE MADE BY<br>CONSUMER PRODUCT SAFETY COMMISSION<br>DIVISION OF FINANCIAL SERVICES<br>4330 EAST WEST HWY<br>ROOM 522<br>BETHESDA MD 20814 | CODE<br>FMPS |
|---|--------------------|---------------|---|--------------|

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  SEE ADDENDUM

| 19. ITEM NO. | 20. SCHEDULE OF SUPPLIES/SERVICES   | 21. QUANTITY | 22. UNIT | 23. UNIT PRICE | 24. AMOUNT |
|--------------|---|--------------|----------|----------------|------------|
|              | <p>DUNS Number: [REDACTED]</p> <p>This order is issued "subject to Availability of Funds (SAF)". The contractor may not invoice and the Government cannot issue payment, until a written modification provides funds. A modification will be issued by the contracting office when funds are made available.</p> <p>The contractor shall provide the following items in accordance with the GSA schedule and the attached terms and conditions for the performance<br/>(Use Reverse and/or Attach Additional Sheets as Necessary)</p> |              |          |                |            |

|   |   |
|---|---|
| 25. ACCOUNTING AND APPROPRIATION DATA<br>SUBJECT TO THE AVAILABILITY OF FUNDS | 26. TOTAL AWARD AMOUNT (For Govt. Use Only)<br>\$0.00 |
|---|---|

27a. SOLICITATION INCORPORATES BY REFERENCE FAR 52.212-1, 52.212-4, FAR 52.212-3 AND 52.212-5 ARE ATTACHED. ADDENDA  ARE  ARE NOT ATTACHED.

27b. CONTRACT/PURCHASE ORDER INCORPORATES BY REFERENCE FAR 52.212-4, FAR 52.212-5 IS ATTACHED. ADDENDA  ARE  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 HEREIN.

29. AWARD OF CONTRACT REF. \_\_\_\_\_ 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                            | 31a. UNITED STATES OF AMERICA (SIGNATURE OF CONTRACTING OFFICER)<br> |   |                              |
| 30b. NAME AND TITLE OF SIGNER (Type or print)<br>Todd Stevenson | 30c. DATE SIGNED   | 31b. NAME OF CONTRACTING OFFICER (Type or print)<br>Rudi M. Johnson | 31c. DATE SIGNED<br>10/10/09 |

| 19.<br>ITEM NO. | 20.<br>SCHEDULE OF SUPPLIES/SERVICES  | 21.<br>QUANTITY | 22.<br>UNIT | 23.<br>UNIT PRICE | 24.<br>AMOUNT |
|-----------------|---|-----------------|-------------|-------------------|---------------|
|                 | period as referenced.   |                 |             |                   |               |
| 0001            | P/N: 20315 Data Architect Windows X8<br><br>Period of Performance: 10/01/2009 to 09/30/2010<br><br>Accounting Info:<br>10-CC-EXIT-IT-2400-99948-257I<br>\$1,472.35 (Subject to Availability of Funds)   | 1               | EA          | 1,472.35          | 0.00          |
| 0002            | ADAPTIVE SERVER ENTERPRISE FOR WINDOWS WORKPLACE X64. P/N: 15064<br><br>Period of Performance: 07/24/2010 to 09/30/2010<br><br>Accounting Info:<br>10-CC-EXIT-IT-2400-99948-257I<br>\$1,913.93 (Subject to Availability of Funds)                 | 2               | EA          | 956.965           | 0.00          |
| 0003            | ADAPTIVE SERVER ENTERPRISE FOR WINDOWS WORKPLACE X 64, P/N: 15064<br><br>Period of Performance: 07/24/2010 to 09/30/2010<br><br>Accounting Info:<br>10-CC-EXIT-IT-2400-99948-257I<br>\$574.07 (Subject to Availability of Funds)<br>Continued ... | 2               | EA          | 287.035           | 0.00          |

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  |                  |  |
| 32e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE  |                        | 32f. TELEPHONE NUMBER OF AUTHORIZED GOVERNMENT REPRESENTATIVE |  |                  |  |
|   |                        | 32g. E-MAIL OF AUTHORIZED GOVERNMENT REPRESENTATIVE           |  |                  |  |
| 33. SHIP NUMBER   | 34. VOUCHER NUMBER     | 35. AMOUNT VERIFIED CORRECT FOR                               | 36. PAYMENT<br><input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL | 37. CHECK NUMBER |  |
| 38. S/R ACCOUNT NUMBER  | 39. S/R VOUCHER NUMBER | 40. PAID BY   |  |                  |  |
| 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)                                    | 42d. TOTAL CONTAINERS  |                  |  |

NAME OF OFFEROR OR CONTRACTOR  
SYBASE INC

| ITEM NO.<br>(A) | SUPPLIES/SERVICES<br>(B)  | QUANTITY<br>(C) | UNIT<br>(D) | UNIT PRICE<br>(E) | AMOUNT<br>(F) |
|-----------------|---|-----------------|-------------|-------------------|---------------|
| 0004            | ADAPTIVE SERVER ENTERPRISE FOR WINDOWS WORKPLACE<br>X 64 P/N:15064<br><br>Period of Performance: 10/01/2009 to 09/30/2010<br><br>Accounting Info:<br>10-CC-EXIT-IT-2400-99948-257I<br>\$11,427.68 (Subject to Availability of Funds)  | 1               | EA          | 11,427.68         | 0.00          |
| 0005            | ADAPTIVE SERVER ENTERPRISE FOR WINDOWS WORKPLACE<br>X 64 P/N:15064<br><br>Period of Performance: 10/01/2009 to 09/30/2010<br><br>Accounting Info:<br>10-CC-EXIT-IT-2400-99948-257I<br>\$11,427.68 (Subject to Availability of Funds)  | 1               | EA          | 11,427.68         | 0.00          |
| 0006            | GSA STANDARD SUPPORT CONTACTS (4) P/N: 98592<br>(16260)<br><br>Period of Performance: 10/01/2009 to 09/30/2010<br><br>Accounting Info:<br>10-CC-EXIT-IT-2400-99948-257I<br>\$0.00 (Subject to Availability of Funds)  | 1               | EA          | 0.00              | 0.00          |
| 0007            | Solved Cases Included (4 contacts)<br>P/N: 99995<br>Contact ID #:<br>553022-TBD<br>553023-TBD<br>553024-TBD<br>553025-TBD<br>379774-TBD<br>285835-LiWang (301)504-6963 lwang@cpsec.gov<br>362440-Davie Liu (301)504-6869 tliu@cpsec.gov<br>362439-Albert Anders (301)504-7663 aanders<br>@cpsec.gov<br><br>Accounting Info:<br>10-CC-EXIT-IT-2400-99948-257I<br>\$0.00 (Subject to Availability of Funds) | 1               | EA          | 0.00              | 0.00          |
| Continued ...   |   |                 |             |                   |               |

**CONTINUATION SHEET**

REFERENCE NO. OF DOCUMENT BEING CONTINUED  
GS-35F-5212H/CPSC-F-10-0003

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NAME OF OFFEROR OR CONTRACTOR  
SYBASE INC

| ITEM NO.<br>(A) | SUPPLIES/SERVICES<br>(B)  | QUANTITY<br>(C) | UNIT<br>(D) | UNIT PRICE<br>(E) | AMOUNT<br>(F) |
|-----------------|---|-----------------|-------------|-------------------|---------------|
|                 | The total amount of award: \$26,815.71. The obligation for this award is shown in box 26. |                 |             |                   |               |