

2. CONTRACT NO.
 CPSC-D-06-0003

3. AWARD/EFFECTIVE DATE
 10/01/2010

4. ORDER NUMBER
 0014

5. SOLICITATION NUMBER

6. SOLICITATION ISSUE DATE

7. FOR SOLICITATION INFORMATION CALL:  a. NAME
 Peter Nerret

b. TELEPHONE NUMBER (No collect calls)
 301-504-7033

8. OFFER DUE DATE/LOCAL TIME
 ET

9. ISSUED BY
 CONSUMER PRODUCT SAFETY COMMISSION
 DIV OF PROCUREMENT SERVICES
 4330 EAST WEST HWY
 ROOM 517
 BETHESDA MD 20814

CODE FMPS

10. THIS ACQUISITION IS
 UNRESTRICTED OR SET ASIDE: % FOR:
 SMALL BUSINESS EMERGING SMALL BUSINESS
 HUBZONE SMALL BUSINESS SOLE SOURCE
 SERVICE-DISABLED VETERAN-OWNED SMALL BUSINESS 8(A)

NAICS: 518210
 SIZE STANDARD: 21

11. DELIVERY FOR FOB DESTINATION UNLESS BLOCK IS MARKED
 SEE SCHEDULE

12. DISCOUNT TERMS
 Net 30

13a. THIS CONTRACT IS A RATED ORDER UNDER DPAS (15 CFR 700)

13b. RATING

14. METHOD OF SOLICITATION
 RFP IFB RFP

15. DELIVER TO
 CONSUMER PRODUCT SAFETY COMMISSION
 DIRECTORATE FOR EPIDEMIOLOGY
 4330 EASTWEST HIGHWAY
 ROOM 604-26
 BETHESDA MD 20814

CODE EP

16. ADMINISTERED BY
 CONSUMER PRODUCT SAFETY COMMISSION
 DIV OF PROCUREMENT SERVICES
 4330 EAST WEST HWY
 ROOM 517
 BETHESDA MD 20814

CODE FMPS

17a. CONTRACTOR/OFFEROR
 ADVANCED INFORMATION SYSTEM INC
 ATTN MR JOHN Q HSU PRESIDENT
 14029 WELAND TERRACE
 GAITHERSBURG MD 20878

FACILITY CODE

18a. PAYMENT WILL BE MADE BY
 CONSUMER PRODUCT SAFETY COMMISSION
 DIVISION OF FINANCIAL SERVICES
 4330 EAST WEST HWY
 ROOM 522
 BETHESDA MD 20814

CODE FMFS

TELEPHONE NO. (240) 351-8454

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
	DUNS Number:  THE PURPOSE OF TASK ORDER #0014 IS TO PROVIDE 3 MONTHS OF INCREMENTAL FUNDING FOR THE PERIOD OF OCTOBER 1, 2010 THRU DECEMBER 31, 2010. BASED ON THE ABOVE, INCREMENTAL FUNDING IS PROVIDED AS FOLLOWS: Continued ... (Use Reverse and/or Attach Additional Sheets as Necessary)				

25. ACCOUNTING AND APPROPRIATION DATA
 0100A11DPS-2011-1128200000-EXHR004310-252N0

26. TOTAL AWARD AMOUNT (For Govt. Use Only)
 \$59,035.89

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.

28. 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)


30b. NAME AND TITLE OF SIGNER (Type or print)
 Eddie Ahmad

30c. DATE SIGNED

31b. NAME OF CONTRACTING OFFICER (Type or print)
 Eddie Ahmad

31c. DATE SIGNED
 11/19/10

19. ITEM NO.	20. SCHEDULE OF SUPPLIES/SERVICES	21. QUANTITY	22. UNIT	23. UNIT PRICE	24. AMOUNT
0006 AA	Data Entry, Data Reduction and Scanning Services (Period funded: October 1, 2010 thru December 31, 2010) EXCEPT AS PROVIDED HEREIN, ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED AND IN FULL FORCE AND EFFECT. The total amount of award: \$59,035.89. The obligation for this award is shown in box 26.	3	EA	19,678.63	59,035.89

32a. QUANTITY IN COLUMN 21 HAS BEEN					
<input type="checkbox"/> RECEIVED		<input type="checkbox"/> INSPECTED		<input type="checkbox"/> NOTED: _____	
ACCEPTED, AND CONFORMS TO THE CONTRACT, EXCEPT AS					
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		37. CHECK NUMBER
<input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL			<input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		
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 (<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	