

## ORDER FOR SUPPLIES OR SERVICES

PAGE OF PAGES

1

2

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

1. DATE OF ORDER 04/17/2017		2. CONTRACT NO. (If any) CPSC-I-17-0016		6. SHIP TO:			
3. ORDER NO.		4. REQUISITION/REFERENCE NO. REQ-2100-17-0007		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 523 BETHESDA MD 20814				b. STREET ADDRESS INTERNAT PROG & INTERGOV AFFAIRS 4330 EAST WEST HWY RM 704		c. CITY BETHESDA	
				d. STATE MD		e. ZIP CODE 20814	
7. TO:				f. SHIP VIA			
a. NAME OF CONTRACTOR OFFICE OF LANGUAGE SERVICES				b. TYPE OF ORDER			
b. COMPANY NAME				<input checked="" type="checkbox"/> a. PURCHASE			
c. STREET ADDRESS STATE UNITED STATES DEPT OF 2401 E ST NW SA-1 14TH FLOOR				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 WASHINGTON				e. STATE DC		f. ZIP CODE 20522-0001	
9. ACCOUNTING AND APPROPRIATION DATA See Schedule				10. REQUISITIONING OFFICE INTER. PROG. & INTERGOV. AFFAIRS			
11. BUSINESS CLASSIFICATION (Check appropriate box(es))							12. F.O.B. POINT
<input type="checkbox"/> a. SMALL <input type="checkbox"/> b. OTHER THAN SMALL <input type="checkbox"/> c. DISADVANTAGED <input type="checkbox"/> d. WOMEN-OWNED <input type="checkbox"/> e. HUBZone <input type="checkbox"/> f. SERVICE-DISABLED VETERAN-OWNED <input type="checkbox"/> g. WOMEN-OWNED SMALL BUSINESS (WOSB) ELIGIBLE UNDER THE WOSB PROGRAM <input type="checkbox"/> h. EDWOSB							Destination
13. PLACE OF			14. GOVERNMENT B/L NO		15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date) 09/30/2017		16. DISCOUNT TERMS  Net 30
a. INSPECTION			b. ACCEPTANCE				
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: 024760907 COR: Sandra Obey Tel: 301-504-7563 Email: SObey@cpsc.gov  Accounting Info: Continued ...						
18. SHIPPING POINT		19. GROSS SHIPPING WEIGHT		20. INVOICE NO.		17(h) TOTAL (Cont. pages)	
21. MAIL INVOICE TO:							
a. NAME CPSC Accounts Payable Branch							
b. STREET ADDRESS AMZ 160 (or P.O. Box) P.O. Box 25710						\$10,000.00	17(i) GRAND TOTAL
c. CITY Oklahoma City						\$10,000.00	
d. STATE OK						e. ZIP CODE 73125	
22. UNITED STATES OF AMERICA BY (Signature)				23. NAME (Typed) Cassandra C. Sterba TITLE: CONTRACTING/ORDERING OFFICER			

**ORDER FOR SUPPLIES OR SERVICES  
SCHEDULE - CONTINUATION**

PAGE NO

2

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

DATE OF ORDER

CONTRACT NO.

ORDER NO.

04/17/2017

CPSC-I-17-0016

ITEM NO (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
0001	<p>0100A17DSE-2017-5314900000-EXIP002100-252H0</p> <p>Period of Performance: April 24, 2017 through September 30, 2017</p> <p>Translations of CPSC's materials to support the agency's FY17 Program Plan, specifically with regard to raising awareness about product safety matters among key stakeholders. Due to language barriers, many foreign stakeholders, including government officials and manufacturers have difficulty understanding U.S. laws and regulations on product safety. We request translations of documents including power point presentations, video scripts, and web content. In addition, we require interpretation services for meetings and training events.</p> <p>The total amount of award: \$10,000.00. The obligation for this award is shown in box 17(i).</p>				10,000.00	

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

\$10,000.00

United States Government  
Interagency Agreement (IAA) – Agreement Between Federal Agencies  
General Terms and Conditions (GT&C) Section

IAA Number CPSC-I-17-0016 - 0000 -  
GT&C #                      Order # Amendment/Mod #

DEPARTMENT AND/OR AGENCY								
1.	<b>Requesting Agency of Products/Services</b>	<b>Servicing Agency Providing Products/Services</b>						
	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 15%; padding: 5px;">Name</td><td style="padding: 5px;">U.S. Consumer Product Safety Commission Office of International Programs</td></tr><tr><td style="padding: 5px;">Address</td><td style="padding: 5px;">4330 East West Highway Bethesda, MD 20814</td></tr></table>	Name	U.S. Consumer Product Safety Commission Office of International Programs	Address	4330 East West Highway Bethesda, MD 20814	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="padding: 5px;">U.S. Department of State Office of Language Services, A/OPR/LS</td></tr><tr><td style="padding: 5px;">SA-1, 2201 C Street NW, Washington, DC 20001</td></tr></table>	U.S. Department of State Office of Language Services, A/OPR/LS	SA-1, 2201 C Street NW, Washington, DC 20001
Name	U.S. Consumer Product Safety Commission Office of International Programs							
Address	4330 East West Highway Bethesda, MD 20814							
U.S. Department of State Office of Language Services, A/OPR/LS								
SA-1, 2201 C Street NW, Washington, DC 20001								
2. Servicing Agency Agreement Tracking Number (Optional) _____								
3. Assisted Acquisition Agreement Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>								
4. GT&C Action (Check action being taken)  <input checked="" type="checkbox"/> New  <input type="checkbox"/> Amendment – Complete only the GT&C blocks being changed and explain the changes being made.     <input type="checkbox"/> Cancellation – Provide a brief explanation for the IAA cancellation and complete the effective End Date.								
5. Agreement Period    Start Date <u>04-24-2017</u> End Date <u>09-30-2017</u> of IAA or effective cancellation date MM-DD-YYYY                      MM-DD-YYYY								
6. Recurring Agreement (Check One) A Recurring Agreement will continue, unless a notice to discontinue is received. Yes <input type="checkbox"/> If Yes, is this an: Annual Renewal <input type="checkbox"/> Other Renewal <input type="checkbox"/> State the other renewal period: _____ No <input checked="" type="checkbox"/>								
7. Agreement Type (Check One) <input type="checkbox"/> Single Order IAA <input checked="" type="checkbox"/> Multiple Order IAA								
8. Are Advance Payments Allowed for this IAA (Check One) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes is checked, enter Requesting Agency's Statutory Authority Title and Citation								
Note: Specific advance amounts will be captured on each related Order.								

United States Government  
Interagency Agreement (IAA) – Agreement Between Federal Agencies  
General Terms and Conditions (GT&C) Section

IAA Number CPSC-I-17-0016 - 0000 -  
GT&C #                      Order # Amendment/Mod #

**9. Estimated Agreement Amount (The Servicing Agency completes all information for the estimated agreement amount.)**

(Optional for Assisted Acquisitions)

Direct Cost \$10,000.00  
Overhead Fees & Charges \_\_\_\_\_  
Total Estimated Amount \$10,000.00

Provide a general explanation of the Overhead Fees & Charges  
25% of the language services cost is allocated to overhead fees and charges incurred in acquiring linguistic services and managing the language services work-flow to ensure quality and timeliness. These costs are incurred upfront and non-refundable.

**10. STATUTORY AUTHORITY**

**a. Requesting Agency's Authority (Check One)**

Franchise    Revolving    Working    Economy Act    Other  
Fund        Fund        Capital Fund    (31 U.S.C. 1535/FAR 17.5)    Authority  
☐        ☐        ☐        ☒        ☐

Fill in Statutory Authority Title and Citation for Franchise Fund, Revolving Fund, Working Capital Fund, or Other Authority

**b. Servicing Agency's Authority (Check One)**

Franchise    Revolving    Working    Economy Act    Other  
Fund        Fund        Capital Fund    (31 U.S.C. 1535/FAR 17.5)    Authority  
☐        ☐        ☐        ☐        ☒

Fill in Statutory Authority Title and Citation for Franchise Fund, Revolving Fund, Working Capital Fund, or Other Authority  
Section 193 of P.L. 103-236; US Code: 22 USC 2695a

**11. Requesting Agency's Scope (State and/or list attachments that support Requesting Agency's Scope.)**

CPSC is responsible for ensuring that foreign manufacturers have access to the latest information on U.S. requirements for consumer products. CPSC has jurisdiction over more than 15,000 types of consumer products found in and around the home and in recreational facilities. Documents that require translation include brochures, power point presentations, video scripts, and web content. In addition, we require interpretation of meetings and training events with foreign stakeholders.

CPSC relies on the Department of State's Office of Language Services to ensure that communications with foreign government officials meet the highest standards.

**12. Roles & Responsibilities for the Requesting Agency and Servicing Agency (State and/or list attachments for the roles and responsibilities for the Requesting Agency and the Servicing Agency.)**

Please see Appendix A: Language Services Guidelines.

CPSC agrees to: request services in writing, approve those cost estimates provided by DOS and agreed to by CPSC, and pay DOS the agreed cost after services are delivered.

DOS agrees to: provide CPSC with an estimate of the cost to the CPSC, provide CPSC with translation services requested after CPSC has approved the agreed cost.

United States Government  
Interagency Agreement (IAA) – Agreement Between Federal Agencies  
General Terms and Conditions (GT&C) Section

IAA Number CPSC-I-17-0016 - 0000 -  
GT&C #                      Order #    Amendment/Mod #

13. Restrictions (Optional) (State and/or attach unique requirements and/or mission specific restrictions specific to this IAA).

14. Assisted Acquisition Small Business Credit Clause (The Servicing Agency will allocate the socio-economic credit to the Requesting Agency for any contract actions it has executed on behalf of the Requesting Agency.)

15. Disputes: Disputes related to this IAA shall be resolved in accordance with instructions provided in the Treasury Financial Manual (TFM) Volume 1, Part 2, Chapter 4700, Appendix 10; Intragovernmental Business Rules.

16. Termination (Insert the number of days that this IAA may be terminated by written notice by either the Requesting or Servicing Agency.)

90 Days

If this agreement is canceled, any implementing contract/order may also be canceled. If the IAA is terminated, the agencies shall agree to the terms of the termination, including costs attributable to each party and the disposition of awarded and pending actions.

If the Servicing Agency incurs costs due to the Requesting Agency's failure to give the requisite notice of its intent to terminate the IAA, the Requesting Agency shall pay any actual costs incurred by the Servicing Agency as a result of the delay in notification, provided such costs are directly attributable to the failure to give notice.

17. Assisted Acquisition Agreements – Requesting Agency's Organizations Authorized To Request Acquisition Assistance for this IAA. (State or attach a list of Requesting Agency's organizations authorized to request acquisition assistance for this IAA.)

N/A

18. Assisted Acquisition Agreements – Servicing Agency's Organizations authorized to Provide Acquisition Assistance for this IAA. (State or attach a list of Servicing Agency's organizations authorized to provide acquisition for this IAA.)

N/A

19. Requesting Agency Clause(s) (Optional) (State and/or attach any additional Requesting Agency clauses.)

United States Government  
Interagency Agreement (IAA) – Agreement Between Federal Agencies  
General Terms and Conditions (GT&C) Section

IAA Number CPSC-I-17-0016 - 0000 -  
GT&C # Order # Amendment/Mod #

20. Servicing Agency Clause(s) (Optional) (State and/or attach any additional Servicing Agency clauses.)

21. Additional Requesting Agency and/or Servicing Agency Attachments (Optional) (State and/or attach any additional Requesting Agency and/or Servicing Agency attachments.)

22. Annual Review of IAA

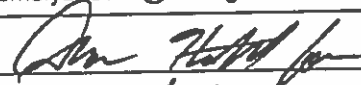
By signing this agreement, the parties agree to annually review the IAA if the agreement period exceeds one year. Appropriate changes will be made by amendment to the GT&C and/or modification to any affected Order(s).

**AGENCY OFFICIAL**

The Agency Official is the highest level accepting authority or official as designated by the Requesting Agency and Servicing Agency to sign this agreement. Each Agency Official must ensure that the general terms and conditions are properly defined, including the stated statutory authorities, and, that the scope of work can be fulfilled per the agreement.

The Agreement Period Start Date (Block 5) must be the same as or later than the signature dates.

Actual work for this IAA may NOT begin until an Order has been signed by the appropriate individuals, as stated in the Instructions for Blocks 37 and 38.

23.	Requesting Agency	Servicing Agency
Name	Cassandra Sterba	Katherine Yemelyanov
Title	Contracting Officer	Deputy Director, Language Services
Telephone Number(s)	(301) 504-7837	(202) 261-8811
Fax Number		
Email Address	CSterba@cpsec.gov	yemelyanovkh@state.gov
SIGNATURE	csterba@cpsec.gov <small>Digitally signed by csterba@cpsec.gov DN: cn=csterba@cpsec.gov Date: 2017.04.17 15:49:56 -04'00'</small>	
Approval Date		4/19/17

IAA Number CPSC-I-17-0016 - 0000 -  Servicing Agency's Agreement  
GT&C # Order # Amendment/Mod # Tracking Number (Optional) \_\_\_\_\_

FMS Form 7600B  
04/12

# IAA Order

IAA Number CPSC-I-17-0016 - 0000 -  
 GT&C # Order # Amendment/Mod #

Servicing Agency's Agreement  
 Tracking Number (Optional) \_\_\_\_\_

<b>28. Order Line/Funding Information</b>												Line Number _____							
						<b>Requesting Agency Funding Information</b>						<b>Servicing Agency Funding Information</b>							
ALC		61-00-0001										19000001							
Component TAS Required by 10/1/2014	SP	ATA	AID	BPOA	EPOA	A	MAIN	SUB	SP	ATA	AID	BPOA	EPOA	A	MAIN	SUB			
			061	2017	2017		0100	000			019			X	0113	000			
OR Current TAS format																			
BETC			DISB						COLL										
Object Class Code (Optional)																			
BPN			DUNS: 069287522						02-4760907										
BPN + 4 (Optional)																			
Additional Accounting Classification/Information (Optional)			0100A17DSE-2017-5314900000-E XIP002100-252H0																
Requesting Agency Funding Expiration Date 09-30-2017 MM-DD-YYYY									Requesting Agency Funding Cancellation Date 09-30-2022 MM-DD-YYYY										
<b>Project Number &amp; Title</b>																			
Description of Products and/or Services, including the Bona Fide Need for this Order (State or attach a description of products/services, including the bona fide need for this Order.) Please refer to Appendix B - Translation and/or Interpretation Services Estimate.																			
North American Industry Classification System (NAICS) Number (Optional) _____																			
<b>Breakdown of Reimbursable Line Costs</b>									<b>OR Breakdown of Assisted Acquisition Line Cost:</b>										
Unit of Measure								Contract Cost		\$									
Quantity		Unit Price		Total				Servicing Fees		\$									
				\$ 0.00				Total Obligated Cost		\$ 0.00									
Overhead Fees & Charges				\$				Advance for Line (-)		\$									
Total Line Amount Obligated				\$ 0.00				Net Total Cost		\$ 0.00									
Advance Line Amount (-)				\$				Assisted Acquisition Servicing Fees Explanation											
Net Line Amount Due				\$ 0.00															
<b>Type of Service Requirements</b>																			
<input type="checkbox"/> Severable Service <input checked="" type="checkbox"/> Non-severable Service <input type="checkbox"/> Not Applicable																			



# IAA Order

IAA Number CPSC-I-17-0016 - 0000 -                      Servicing Agency's Agreement  
 GT&C # Order # Amendment/Mod # Tracking Number (Optional)                     

**29. Advance Information** (Complete Block 29 if the Advance Payment for Products/Services was checked "Yes" on the GT&C.)

Total Advance Amount for the Order \$ 0.00 [All Order Line advance amounts (Block 28) must sum to this total.]

**Revenue Recognition Methodology** (according to SFFAS 7) (Identify the Revenue Recognition Methodology that will be used to account for the Requesting Agency's expense and the Servicing Agency's revenue)

- ☐ Straight-line – Provide amount to be accrued \$                      and Number of Months
- ☒ Accrual Per Work Completed – Identify the accounting posting period:
- ☐ Monthly per work completed & invoiced
- ☒ Other – Explain other regular period (bimonthly, quarterly, etc.) for posting accruals and how the accrual amounts will be communicated if other than billed. QUARTERLY

**30. Total Net Order Amount:** \$ 10,000.00

[All Order Line Net Amounts Due for reimbursable agreements and Net Total Costs for Assisted Acquisition Agreements (Block 28) must sum to this total.]

**31. Attachments** (State or list attachments.)

☐ Key project and/or acquisition milestones (Optional except for Assisted Acquisition Agreements)

Please refer to Appendix B - Translation and/or Interpretation Services Estimate.

☐ Other Attachments (Optional)

## BILLING & PAYMENT INFORMATION

**32. Payment Method** (Check One) [Intra-governmental Payment and Collection (IPAC) is the Preferred Method.]  
 If IPAC is used, the payment method must agree with the IPAC Trading Partner Agreement (TPA).

- ☐ Requesting Agency Initiated IPAC ☒ Servicing Agency Initiated IPAC
- ☐ Credit Card ☐ Other – Explain other payment method and reasoning

**33. Billing Frequency** (Check One)

[An Invoice must be submitted by the Servicing Agency and accepted by the Requesting Agency BEFORE funds are reimbursed (i.e., via IPAC transaction)]

- ☐ Monthly ☒ Quarterly ☐ Other Billing Frequency (include explanation)

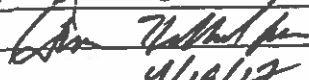
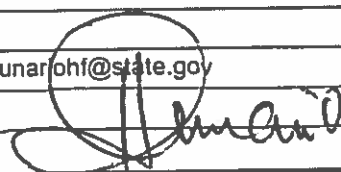
**34. Payment Terms** (Check One)

- ☒ 7 days ☐ Other Payment Terms (include explanation):

## IAA Order

IAA Number CPSC-I-17-0016 - 0000 -                       
                     GT&C #                      Order #    Amendment/Mod #

**Servicing Agency's Agreement**  
Tracking Number (Optional) \_\_\_\_\_

<b>35. Funding Clauses/Instructions (Optional)</b> (State and/or list funding clauses/instructions.)		
<b>36. Delivery/Shipping Information for Products (Optional)</b>		
Agency Name	U.S. Consumer Product Safety Commission	
Point of Contact (POC) Name & Title	Sylvia Chen	
POC Email Address	scchen@cpsc.gov	
Delivery Address /Room Number	805	
POC Telephone Number	(301) 504-7662	
Special Shipping Information		
<b>APPROVALS AND CONTACT INFORMATION</b>		
<b>37. PROGRAM OFFICIALS</b>		
The Program Officials, as identified by the Requesting Agency and Servicing Agency, must ensure that the scope of work is properly defined and can be fulfilled for this Order. The Program Official may or may not be the Contracting Officer depending on each agency's IAA business process.		
	Requesting Agency	Servicing Agency
Name	Richard O'Brien	Katherine Yemelyanov
Title	Director, International Programs	Deputy Director, A/OPR/LS
Telephone Number	(301) 504-7054	(202) 261-8811
Fax Number		
Email Address	ROBrien@cpsc.gov	yemelyanovkh@state.gov
SIGNATURE	RICHARD O'BRIEN <small>Digitally signed by Richard O'Brien DN: cn=Richard O'Brien, o=U.S. Consumer Product Safety Commission, email=robrien@cpsc.gov, c=US</small>	 4/19/12
Date Signed		
<b>38. FUNDING OFFICIALS</b> - The Funds Approving Officials, as identified by the Requesting Agency and Servicing Agency, certify that the funds are accurately cited and can be properly accounted for per the purposes set forth in the Order. The Requesting Agency Funding Official signs to obligate funds. The Servicing Agency Funding Official signs to start the work, and to bill, collect, and properly account for funds from the Requesting Agency, in accordance with the agreement.		
	Requesting Agency	Servicing Agency
Name	Christopher Snyder	Henry F. Lunario
Title	Budget Team Lead	Management Analyst
Telephone Number	(301) 504-7049	202-261-8792
Fax Number		
Email Address	CSnyder@cpsc.gov	lunarioh@state.gov
SIGNATURE	CSnyder <small>Digitally signed by CSnyder DN: cn=CSnyder, o=U.S. Consumer Product Safety Commission, email=csnyder@cpsc.gov, c=US</small>	 4/18/20
Date Signed		

## IAA Order

IAA Number CPSC-I-17-0016 - 0000 -   
GT&C # Order # Amendment/Mod #

**Servicing Agency's Agreement**  
Tracking Number (Optional) \_\_\_\_\_

## CONTACT INFORMATION

### FINANCE OFFICE Points of Contact (POCs)

**FINANCE OFFICE Points of Contact (POCs)**  
The finance office points of contact must ensure that the payment (Requesting Agency), billing (Servicing Agency), and advance/accounting information are accurate and timely for this Order.

39.	Requesting Agency (Payment Office)	Servicing Agency (Billing Office)
Name	Cindy Coszalter	US DEPARTMENT OF STATE
Title	Agency Payment Officer, OFO, FAA	RMJGFS/GFO/RR/IC - Bldg. 3V49
Office Address	PO Box 25710 Oklahoma City, OK 72125	P.O. BOX 15008 CHARLESTON, SC 29415-5008
Telephone Number	(405) 954-8250	
Fax Number		
Email Address	cindy.coszalter@faa.gov	
Signature & Date (Optional)		

**40. ADDITIONAL Points of Contacts (POCs) (as determined by each Agency)**

40. **ADDITIONAL POINTS OF CONTACT (POCs)** (as determined by the Contracting Office):

This may include CONTRACTING Office Points of Contact (POCs).

	Requesting Agency	Servicing Agency
Name	Cassandra Sterba	
Title	Contracting Officer	
Office Address	4330 East West Highway Bethesda, MD 20814	
Telephone Number	(301) 504-7837	
Fax Number		
Email Address	CSterba@cpsc.gov	
Signature & Date (Optional)		
Name		
Title		
Office Address		
Telephone Number		
Fax Number		
Email Address		
Signature & Date (Optional)		
Name		
Title		
Office Address		
Telephone Number		
Fax Number		
Email Address		
Signature & Date (Optional)		