OFFERER TO COMPLETE BLOCKS 1, 17, 23, 24 & 30

OFFEROR: Greg Grayson

CONSUMER PRODUCT SAFETY COMMISSION
DIV OF PROCUREMENT SERVICES
4330 EAST WEST HWY
ROOM 523
BETHESDA MD 20814

CONSUMER PRODUCT SAFETY COMMISSION
DIRECTORATE FOR EPIDEMIOLOGY
4330 EAST WEST HIGHWAY
ROOM 604-26
BETHESDA MD 20814

ADVANCED INFORMATION SYSTEM INC
ATTN MR JOHN Q HSU PRESIDENT
14029 WELLAND TERRACE
GAITHERSBURG MD 20878

Telephone No. (240) 351-8454

DUNS Number: [Redacted]

Contracting Officer Representative:
Lynda Crouse
LCrouse@cpsc.gov
Tel: 301-504-6960

TASK ORDER 0019 AGAINST CONTRACT CPSC-D-06-0003
IS HEREBY ISSUED TO PROVIDE DATA ENTRY, DATA
REDUCTION AND SCANNING SERVICES FOR THE
PERFORMANCE PERIOD EFFECTIVE OCTOBER 1, 2012
THROUGH SEPTEMBER 30, 2013 UNDER CLIN 00081,
AND IS SUBJECT TO THE TERMS AND CONDITIONS SPECIFIED
IN THIS SOLICITATION.

25. ACCOUNTING AND APPROPRIATION DATA

26. TOTAL AWARD AMOUNT (For Govt Use Only)

$62,631.36

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

27b. CONTRACT/PURCHASE ORDER INCORPORATES BY REFERENCE FAR 52.212-1, 52.212-4,
FAR 52.212-3 AND 52.212-5 IS ATTACHED. ADDENDA 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 ATTACHED TO THE TERMS AND CONDITIONS SPECIFIED.

30a. SIGNATURE OF OFFEROR/CONTRACTOR

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

Ruth M. Johnson

30c. DATE SIGNED

10/25/2012

AUTHORIZED FOR LOCAL REPRODUCTION
PREVIOUS EDITION IS NOT USABLE

STANDARD FORM 1449 (REF. 2012)
The terms and conditions of the contract.

At this time incremental funding is hereby provided for three (3) months, for the performance period effective October 1, 2012 through December 31, 2012, in the amount of $62,631.36. Upon availability of funds, the government will issue a modification for the remaining funds at a later date.

<table>
<thead>
<tr>
<th>ITEM NO.</th>
<th>SCHEDULE OF SUPPLIES/SERVICES</th>
<th>QUANTITY</th>
<th>UNIT</th>
<th>UNIT PRICE</th>
<th>AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>0008 AA</td>
<td>Data Entry, Data Reduction and Scanning Services</td>
<td>12 MO</td>
<td>20,877.12</td>
<td>62,631.36</td>
<td></td>
</tr>
</tbody>
</table>

The total amount of award: $250,525.44. The obligation for this award is shown in box 26.

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
   - Complete
   - Partial
   - Final

36. Payment

37. Check Number

38. SIR Account Number

39. SIR Voucher Number

40. Paid By

41a. I certify this account is correct and proper for payment

41b. Signature and Title of Certifying Officer 41c. Date

42a. Received by (Print)

42b. Received at (Location)

42c. Date Rec'd (YY/MM/DD) 42d. Total Containers