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

PROGRAM SUPPORT CENTER DHHS
5600 FISHERS LANE
RM 17-21
ATTN DIANA MATHEWS
ROCKVILLE MD 20857-0001

DUNS Number: 043982318
COR: Amelia Shifflett
301-504-7172 | ASHIFLETT@CPSC.GOV

Task Order 0011 is hereby issued to provide Procurement Support services for requisition REQ-2400-15-0068 in the estimated amount of $70,581.42.

All services shall be in accordance with the attached procurement package.
(Use Reverse and/or Attach Additional Sheets as Necessary)

CONSIGNED FOR LOCAL REPRODUCTION
PREVIOUS EDITION IS NOT USABLE
<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>0001</td>
<td>Extend the Period of Performance for CLIN 2, Operations and Maintenance for SharePoint 2013 Environment under the following existing HHS contract number: NIH Contract #: HHSN316201200061W NIH Order #: HHS-P233201400180W</td>
<td>1 EA</td>
<td>70,056.00</td>
<td>70,056.00</td>
<td></td>
</tr>
<tr>
<td>0002</td>
<td>NITAAC FEE : .75% SB CIO-SP3 SB</td>
<td>1 EA</td>
<td>525.42</td>
<td>525.42</td>
<td></td>
</tr>
<tr>
<td>0003</td>
<td>Surcharge Fee - 3.75% Simplified Acquisition</td>
<td>1 EA</td>
<td>2,646.80</td>
<td>2,646.80</td>
<td></td>
</tr>
</tbody>
</table>

32a. QUANTITY IN COLUMN 21 HAS BEEN

☐ RECEIVED  ☐ INSPECTED  ☐ ACCEPTED, AND CONFORMS TO THE CONTRACT, EXCEPT AS NOTED.

32b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE

☐ DATE

32c. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE

32d. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE

32e. TELEPHONE NUMBER OF AUTHORIZED GOVERNMENT REPRESENTATIVE

32f. 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

☐ PARTIAL  ☐ 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

☐ DATE

41b. SIGNATURE AND TITLE OF CERTIFYING OFFICER

41c. DATE

42a. RECEIVED BY (Print)

42b. RECEIVED AT (Location)

42c. DATE RECD (YY/MM/DD)

42d. TOTAL CONTAINERS

STANDARD FORM 1449 (REV. 1/2012) BACK
<table>
<thead>
<tr>
<th>ITEM NO. (A)</th>
<th>SUPPLIES/SERVICES (B)</th>
<th>QUANTITY (C)</th>
<th>UNIT (D)</th>
<th>UNIT PRICE (E)</th>
<th>AMOUNT (F)</th>
</tr>
</thead>
<tbody>
<tr>
<td>0100A15DSE-2015-5417600000-EXFM002730-253X0</td>
<td>funded: $2,646.80</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The total amount of award: $73,228.22. The obligation for this award is shown in box 26.
**REQUISITION**

**PROCUREMENT REQUEST NO:**
REQ-2400-15-0068

**REQUISITION DATE:**
04/27/2015

**3. ORIGINATING OFFICE DATA**
CONSUMER PRODUCT SAFETY COMMISSION

**4. ADDITIONAL INFORMATION**
(Suggested supply sources, security data, etc.)

**5. APPROVALS**

<table>
<thead>
<tr>
<th>APPROVING OFFICIALS</th>
<th>ROUTING SYMBOL</th>
<th>DATE (C)</th>
<th>INTERNAL ROUTING</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) AUTHORIZED REQUISTERION</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Amelia Shifflett</td>
<td>CPSC</td>
<td><a href="mailto:amorrissey@cpsc.gov">amorrissey@cpsc.gov</a></td>
<td>Digitally signed by AClyburnmiller Dn:cn=AClyburnmiller, ou=IT, ou=OD, o=OD, c=US Date:2015.04.27 13:53:21-04'00'</td>
</tr>
<tr>
<td>(2)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>AClyburnmiller</td>
<td></td>
<td><a href="mailto:mjames@cpsc.gov">mjames@cpsc.gov</a></td>
<td>Digitally signed by <a href="mailto:mjames@cpsc.gov">mjames@cpsc.gov</a> Dn:CN=<a href="mailto:mjames@cpsc.gov">mjames@cpsc.gov</a> Date:2015.04.27 17:20:04.000'</td>
</tr>
</tbody>
</table>

**6. CONSIGNEE AND DESTINATION**
CONSUMER PRODUCT SAFETY COMMISSION
OFFICE OF INFORMATION SERVICES
4330 EASTWEST HIGHWAY
ROOM 706
BETHESDA MD 20814

**7. DATE(S) REQUIRED**
5 Days After Award

**8. GOVERNMENT FURNISHED PROPERTY**

<table>
<thead>
<tr>
<th>ITEM NO.</th>
<th>ITEM OR SERVICE (Include Specifications and Special Instructions)</th>
<th>QUANTITY</th>
<th>UNIT</th>
<th>ESTIMATED COST</th>
</tr>
</thead>
<tbody>
<tr>
<td>0001</td>
<td>Extend the period of performance for CLIN 2 - Operations and Maintenance for SharePoint 2013 environment, during this period the contractor shall develop, implement, and manage requests for new or previously non-configured out-of-the-box site features, delayed or missed migration content, or changes to the site architecture or navigation scheme.</td>
<td>1</td>
<td></td>
<td>70,056.00</td>
</tr>
<tr>
<td>0002</td>
<td>NITAAC FEE : .75% SB CID-SP3 SB Continued ...</td>
<td>1</td>
<td></td>
<td>525.42</td>
</tr>
</tbody>
</table>

**TOTAL ESTIMATED COST**
$70,581.42

**9. DESCRIPTION OF ITEMS OR SERVICES**

**FOB:** Destination
Period of Performance: 08/01/2015 to 09/27/2015

NIH Contract # HHSN316201200061W
NIH Order # HHSPP233201400180W
SHAREPOINT MIGRATION
EVOKE RESEARCH AND CONSULTING

CPSC COR: Amelia Shifflett
ashifflett@cpsc.gov 301-504-7172

**10. ACCOUNTING DATA**
Accounting Info: 0100A15DIT-2015-1332800000-EXIT002400-25200

rcarroll@cpsc.gov

Digitally signed by rcarroll@cpsc.gov Date:2013.04.27 11:26:53 -04'00'