ORDER FOR SUPPLIES OR SERVICES

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

1. DATE OF ORDER: 10/28/2009
2. CONTRACT NO. (If any): CPSC-N-10-0001

3. ORDER NO.: 14
4. REQUISTION/REFERENCE NO.: 14

5. ISSUING OFFICE (Address correspondence to):
CONSUMER PRODUCT SAFETY COMMISSION
DIV OF PROCUREMENT SERVICES
4330 EAST WEST HWY
ROOM 517
BETHESDA MD 20814

7. TO:
a. NAME OF CONTRACTOR:
BROCK KATHERINE L
b. COMPANY NAME:

8. TYPE OF ORDER:
X a. PURCHASE
   b. DELIVERY

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.

10. REQUIRING OFFICE:
CONSUMER PRODUCT SAFETY COMMISSION

12. F.O.B. POINT:
DESTINATION

13. PLACE OF
   a. INSPECTION:
   b. ACCEPTANCE:

14. GOVERNMENT BIL NO.:

15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date):
   a. INSPECTION:
   b. ACCEPTANCE:

16. DISCOUNT TERMS:
   X Net 30

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: 001001001
HOSPITAL ID#: 3T252055
BASIC CONTRACT: 10/01/09 THRU 09/30/10

This contract is being incrementally funded in the amount of $1,695.50 for the period Continued ...

18. SHIPPING POINT:

19. GROSS SHIPPING WEIGHT:

20. INVOICE NO.:

21. MAIL INVOICE TO:
a. NAME:
CONSUMER PRODUCT SAFETY COMMISSION
b. STREET ADDRESS (or P.O. Box):
DIVISION OF FINANCIAL SERVICES
4330 EAST WEST HWY
ROOM 522

c. CITY:
BETHESDA
d. STATE:
MD
e. ZIP CODE:
20814

22. UNITED STATES OF AMERICA BY: (Signature)

23. NAME (Typed): Doris B. Kessler
   TITLE: CONTRACTING/ORDERING OFFICER

PREVIOUS EDITION NOT USABLE
<table>
<thead>
<tr>
<th>ITEM NO.</th>
<th>SUPPLIES/SERVICES</th>
<th>QUANTITY ORDERED</th>
<th>UNIT PRICE</th>
<th>AMOUNT</th>
<th>QUANTITY ACCEPTED</th>
</tr>
</thead>
<tbody>
<tr>
<td>0001</td>
<td>NEISS SURVEILLANCE REPORTS AND SPECIAL SURVEY REPORTS IN ACCORDANCE WITH THE ATTACHED STATEMENT OF WORK.</td>
<td>300 EA</td>
<td>4.35</td>
<td>1,305.00</td>
<td></td>
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<tr>
<td></td>
<td>MINIMUM QTY: 150</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>MAXIMUM QTY: 750</td>
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<td></td>
<td></td>
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<tr>
<td>0002</td>
<td>SUPPLEMENTAL/SPECIAL STUDY REPORTS IN ACCORDANCE WITH THE ATTACHED STATEMENT OF WORK.</td>
<td>50 EA</td>
<td>1.09</td>
<td>54.50</td>
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<tr>
<td></td>
<td>MINIMUM QTY: 10</td>
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<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td>MAXIMUM QTY: 100</td>
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</tr>
<tr>
<td>0003</td>
<td>REIMBURSEMENT FOR TRAINING COSTS.</td>
<td>1 LT</td>
<td>336.00</td>
<td>336.00</td>
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<td>16 HRS X $21.00 = $336.00</td>
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<tr>
<td>0004</td>
<td>OPTION PERIOD: 10/01/10 THRU 09/30/11</td>
<td>600 EA</td>
<td>4.35</td>
<td>0.00</td>
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ESTIMATED QUANTITY
NEISS SURVEILLANCE REPORTS AND SPECIAL SURVEY REPORTS.

MINIMUM QTY: 150
MAXIMUM QTY: 750
Amount: $2,610.00 (Option Line Item)

Continued ...

October 1, 2009 through March 31, 2010. Additional funds will be provided, by modification, when funds become available.

Admin Office:
CONSUMER PRODUCT SAFETY COMMISSION
DIV OF PROCUREMENT SERVICES
4330 EAST WEST HWY
ROOM 517
BETHESDA MD 20814
Period of Performance: 10/01/2009 to 09/30/2010

TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17(H)) $1,695.50
### SCHEDULE - CONTINUATION

**DATE OF ORDER:** 10/28/2009  
**CONTRACT NO.:** CPSC-N-10-0001  
**ORDER NO.:**

<table>
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<tr>
<th>ITEM NO.</th>
<th>SUPPLIES/SERVICES</th>
<th>QUANTITY ORDERED</th>
<th>UNIT</th>
<th>UNIT PRICE</th>
<th>AMOUNT</th>
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<tbody>
<tr>
<td>0005</td>
<td>ESTIMATED QUANTITY</td>
<td>100 EA</td>
<td>1.09</td>
<td></td>
<td>0.00</td>
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</tbody>
</table>

**Accounting Info:**
11-PS-EXFM-4310-11179-252E  
$2,610.00  
Period of Performance: 10/01/2010 to 09/30/2011

The total amount of award: $4,414.50. The obligation for this award is shown in box 17(i).

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The total amount carried forward to 1st page (item 17(h)) is $0.00.