ORDER FOR SUPPLIES OR SERVICES

Page 1 of 22

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

1. DATE OF ORDER 11/06/2009

2. CONTRACT NO. (If any) CPSC-N-10-0004

3. ORDER NO.

4. REQUISITION/REFERENCE NO.

5. ISSUING OFFICE (Address correspondence to)

CONSUMER PRODUCT SAFETY COMMISSION

DIV OF PROCUREMENT SERVICES

4330 EAST WEST HWY

ROOM 517

BETHESDA MD 20814

6. SHIP TO:

CONSUMER PRODUCT SAFETY COMMISSION

7. TO: TERESA HARRINGTON

a. NAME OF CONTRACTOR TERESA HARRINGTON

b. COMPANY NAME

c. STREET ADDRESS

8. TYPE OF ORDER

a. PURCHASE

REFERENCE YOUR:

b. DELIVERY

Except for billing instructions on the reverse, this delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.

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.

9. ACCOUNTING AND APPROPRIATION DATA

10. BUSINESS CLASSIFICATION (Check appropriate box(es))

a. SMALL

c. DISADVANTAGED

b. OTHER THAN SMALL

d. WOMEN-OWNED

e. HUBZone

f. EMERGING SMALL BUSINESS

g. SERVICE-DISABLED VETERAN-OWNED

11. PLACE OF

a. INSPECTION Destination

b. ACCEPTANCE Destination

12. F.O.B. POINT Destination

13. PLACE OF

a. INSPECTION

b. ACCEPTANCE

14. GOVERNMENT B/L NO.

15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date)

Multiple

Net 30

16. DISCOUNT TERMS

17. SCHEDULE (See reverse for Rejections)

ITEM NO. (a) SUPPLIES OR SERVICES (b)

QUANTITY ORDERED (c) UNIT UNIT AMOUNT QUANTITY

QUANTITY ACCEPTED (g)

DUNS Number: 30843055

HOSPITAL ID#: 4330103

BASIC CONTRACT: 10/01/09 THRU 09/30/10

This contract is being incrementally funded in the amount of $2,192.62 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

DIVISION OF FINANCIAL SERVICES

4330 EAST WEST HWY

ROOM 522

c. CITY BETHESDA

22. UNITED STATES OF AMERICA BY (Signature)

23. NAME ( Typed)

Doris B. Kessler
title: contracting/ordering officer

Authorized for local reproduction
Previous edition not usable

Optional Form 347 (Rev. 4/2006)
Prepared by GSA/AR 48 CFR 1527 (b)(9)
**ORDER FOR SUPPLIES OR SERVICES**  
**SCHEDULE - CONTINUATION**

**DATE OF ORDER:** 11/06/2009  
**CONTRACT NO:** CFSC-N-10-0004  
**ORDER NO:**

<table>
<thead>
<tr>
<th>ITEM NO.</th>
<th>SUPPLIES/SERVICES</th>
<th>QUANTITY ORDERED</th>
<th>UNIT</th>
<th>UNIT PRICE</th>
<th>AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>(c)</td>
<td>(d)</td>
<td>(e)</td>
<td>(f)</td>
</tr>
<tr>
<td>0001</td>
<td>NEISS SURVEILLANCE REPORTS AND SPECIAL SURVEY REPORTS IN ACCORDANCE WITH THE ATTACHED STATEMENT OF WORK.</td>
<td>700 EA</td>
<td>2.37</td>
<td>1,659.00</td>
<td></td>
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</tbody>
</table>
|          | **MINIMUM QTY:** 350  
          | **MAXIMUM QTY:** 1,750                                                          |                  |      |            |        |
| 0002     | SUPPLEMENTAL/SPECIAL STUDY REPORTS IN ACCORDANCE WITH THE ATTACHED STATEMENT OF WORK. | 200 EA           | 0.59 | 118.00     |        |
|          | **MINIMUM QTY:** 40  
          | **MAXIMUM QTY:** 400                                                             |                  |      |            |        |
| 0003     | REIMBURSEMENT FOR ESTIMATED MONTHLY RECURRING COMMUNICATION CHARGES.              | 6 MO             | 69.27| 415.62     |        |
| 0004     | OPTION PERIOD: 10/01/10 THRU 09/30/11                                             | 1400 EA          | 2.37 | 0.00       |        |
|          | **MINIMUM QTY:** 350  
          | **MAXIMUM QTY:** 1,750                                                           |                  |      |            |        |
|          | 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)) *$2,192.82*
### Schedule - Continuation

**DATE OF ORDER**: 11/06/2009  
**CONTRACT NO.**: CPSC-N-10-0004

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<th>ITEM NO.</th>
<th>SUPPLIES/SERVICES</th>
<th>QUANTITY ORDERED</th>
<th>UNIT</th>
<th>UNIT PRICE</th>
<th>AMOUNT</th>
<th>QUANTITY ACCEPTED</th>
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<tr>
<td>0005</td>
<td>ESTIMATED QUANTITY</td>
<td>400 EA</td>
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<td>0.59</td>
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<td>SUPPLEMENTAL/SPECIAL STUDY REPORTS.</td>
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<td>MINIMUM QTY: 40 MAXIMUM QTY: 400</td>
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<td>Amount: $3,318.00 (Option Line Item)</td>
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<tr>
<td></td>
<td>Accounting Info: 11-PS-EXFM-4310-11179-252E</td>
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<tr>
<td></td>
<td>$3,318.00</td>
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<td></td>
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<tr>
<td></td>
<td>Period of Performance: 10/01/2010 to 09/30/2011</td>
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<tr>
<td>0006</td>
<td>REIMBURSEMENT FOR ESTIMATED MONTHLY RECURRING COMMUNICATION CHARGES.</td>
<td>12 MO</td>
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<td>69.27</td>
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<td>Amount: $831.24 (Option Line Item)</td>
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<td>Period of Performance: 10/01/2010 to 09/30/2011</td>
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</tbody>
</table>

The total amount of award: $6,577.86. The obligation for this award is shown in box 17(i).