05

AWARD/CONTRACT	1 THIS CONTRACT IS A RATED ORDER UNDER DPAS (15 CFR 350)	RATING	PAGE OF PAGES 1 2C
2 CONTRACT (Proc. Inst. Ident.) NO CPSC-N-10-0059	3 EFFECTIVE DATE 12/15/2009	4 REQUISITION/PURCHASE REQUEST/PROJECT NO	

5 ISSUED BY CODE CPMS	6 ADMINISTERED BY (If other than item 5) CODE CPMS
CONSUMER PRODUCT SAFETY COMMISSION DIV OF PROCUREMENT SERVICES 4330 EAST WEST HWY ROOM 517 BETHESDA MD 20814	CONSUMER PRODUCT SAFETY COMMISSION DIV OF PROCUREMENT SERVICES 4330 EAST WEST HWY ROOM 517 BETHESDA MD 20814

7 NAME AND ADDRESS OF CONTRACTOR (No., Street, City, County, State and ZIP Code)	8 DELIVERY [ ] FOB ORIGIN [X] OTHER (See below)
THE RESEARCH INSTITUTE AT NATIONWIDE CHILDRENS HOSPITAL ATTN GARY A SMITH MD DRPH 700 CHILDRENS DRIVE COLUMBUS OH 43205-2696	9 DISCOUNT FOR PROMPT PAYMENT Net 30
	10 SUBMIT INVOICES (4 copies unless otherwise specified) TO THE ADDRESS SHOWN IN ITEM

CODE 147212963 FACILITY CODE

11 SHIP TO/MARK FOR CODE EPDS	12 PAYMENT WILL BE MADE BY CODE FMFS
CONSUMER PRODUCT SAFETY COMMISSION DIV OF HAZARD & INJURY DATA SYS 4330 EAST WEST HIGHWAY ROOM [illegible] BETHESDA MD 20814	CONSUMER PRODUCT SAFETY COMMISSION DIVISION OF FINANCIAL SERVICES 4330 EAST WEST HWY ROOM 522 BETHESDA MD 20814

13 AUTHORITY FOR USING OTHER THAN FULL AND OPEN COMPETITION	14 ACCOUNTING AND APPROPRIATION DATA
[ ] 10 U.S.C. 2304(c)( ) [ ] 41 U.S.C. 253(c)( )	10 PS EXEM 4510 11171 2525

15A ITEM NO	15B SUPPLIES/SERVICES	15C QUANTITY	15D UNIT	15E UNIT PRICE	15F AMOUNT
	Continued				

15G TOTAL AMOUNT OF CONTRACT $32,441.50

16 TABLE OF CONTENTS

(X)	SEC	DESCRIPTION	PAGE(S)	(X)	SEC	DESCRIPTION	PAGE(S)
		PART I - THE SCHEDULE				PART II - CONTRACT CLAUSES	
X	A	SOLICITATION/CONTRACT FORM	5	X	I	CONTRACT CLAUSES	13
X	B	SUPPLIES OR SERVICES AND PRICES/COSTS	5			PART III - LIST OF DOCUMENTS, EXHIBITS AND OTHER ATTACH	
X	C	DESCRIPTION/SPECS./WORK STATEMENT	5	X	J	LIST OF ATTACHMENTS	20
	D	PACKAGING AND MARKING				PART IV - REPRESENTATIONS AND INSTRUCTIONS	
X	E	INSPECTION AND ACCEPTANCE	10		K	REPRESENTATIONS, CERTIFICATIONS AND OTHER STATEMENTS OF OFFERORS	
X	F	DELIVERIES OR PERFORMANCE	10				
X	G	CONTRACT ADMINISTRATION DATA	10		L	INSTRS., CONDS., AND NOTICES TO OFFERORS	
X	H	SPECIAL CONTRACT REQUIREMENTS	13		M	EVALUATION FACTORS FOR AWARD	

CONTRACTING OFFICER WILL COMPLETE ITEM 17 OR 18 AS APPLICABLE

17 [ ] CONTRACTOR'S NEGOTIATED AGREEMENT (Contractor is required to sign this document and return [ ] copies to issuing office.) Contractor agrees to furnish and deliver all items or perform all the services set forth or otherwise identified above and on any continuation sheets for the consideration stated herein. The rights and obligations of the parties to this contract shall be subject to and governed by the following documents: (a) this award/contract, (b) the solicitation, if any, and (c) such provisions, representations, certifications, and specifications, as are attached or incorporated by reference herein. (Attachments are listed herein.)

18 [X] AWARD (Contractor is not required to sign this document.) Your offer on Solicitation Number [illegible], including the additions or changes made by you which additions or changes are set forth in full above, is hereby accepted as to the items listed above and on any continuation sheets. This award consummates the contract which consists of the following documents: (a) the Government's solicitation and your offer, and (b) this award/contract. No further contractual document is necessary.

19A NAME AND TITLE OF SIGNER (Type or print)	20A NAME OF CONTRACTING OFFICER
Kathy Milem, Vice-President	Doris S. Kessler
19B NAME OF CONTRACTOR	19C DATE SIGNED
BY [signature] (Signature of person authorized to sign)	12-21-09
20B UNITED STATES OF AMERICA	20C DATE SIGNED
BY [signature] (Signature of Contracting Officer)	12/15/2009

NSN 7540-01-152-8069
PREVIOUS EDITION IS UNUSABLE

STANDARD FORM 26 (Rev. 4-85)
Prescribed by GSA
FAR (48 CFR) 53.214(a)

NAME OF OFFEROR OR CONTRACTOR

THE RESEARCH INSTITUTE AT NATIONWIDE CHILDRENS HOSPITAL

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	DUNS Number: 147212963 PERIOD PERFORMANCE: 10/01/09 THRU 09/30/10 HOSPITAL ID# 7V061042 This contract is being incrementally funded in the amount of $32,441.50 for the period October 1, 2009 through December 31, 2009. Additional funding will be provided, by modification, when funds become available. FOB: Destination Period of Performance: 10/01/2009 to 09/30/2010				
0001	ESTIMATED QUANTITY NEISS SURVEILLANCE REPORTS AND SPECIAL SURVEY REPORTS IN ACCORDANCE WITH THE ATTACHED STATEMENT OF WORK. MINIMUM QTY: 6,000 MAXIMUM QTY: 30,000 Obligated Amount: $31,200.00	6000	EA	5.20	31,200.00
0002	ESTIMATED QUANTITY SUPPLEMENTAL/SPECIAL STUDY REPORTS IN ACCORDANCE WITH THE ATTACHED STATEMENT OF WORK. MINIMUM QTY: 382 MAXIMUM QTY: 3,818 Obligated Amount: $1,241.50	955	EA	1.30	1,241.50
0003	OPTION PERIOD: 10/01/10 THRU 09/30/11 ESTIMATED QUANTITY NEISS SURVEILLANCE REPORTS AND SPECIAL SURVEY REPORTS. MINIMUM QTY: 6,000 MAXIMUM QTY: 30,000 Amount: $128,640.00(Option Line Item) Accounting Info: 11-PS-EXFM-4310-11179-252E $128,640.00 (Subject to Availability of Funds)	24000	EA	5.36	0.00
0004	ESTIMATED QUANTITY SUPPLEMENTAL/SPECIAL STUDY REPORTS. MINIMUM QTY: 382 Continued ...	3818	EA	1.34	0.00

NAME OF OFFEROR OR CONTRACTOR

THE RESEARCH INSTITUTE AT NATIONWIDE CHILDRENS HOSPITAL

ITEM NO (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	MAXIMUM QTY: 3,818 Amount: $5,116.12(Option Line Item) Accounting Info: 11-PS-EXFM-4310-11179-252E $5,116.12 (Subject to Availability of Funds) The total amount of award: $166,197.62. The obligation for this award is shown in box 15G.				