ORDER FOR SUPPLIES OR SERVICES

DATE OF ORDER: 01/20/2010

CONTRACT NO (if any): CPSC-N-120-0299

ORDER NO: 0001

REQUISITION/REFERENCE NO:

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

TO: JENNIFER MONTGOMERY INTERIM CFO

NAME OF CONTRACTOR:
BANNER HEALTH WASHAKIE MED CTR

COMPANY NAME:

STREET ADDRESS:
400 SOUTH 15TH
PO BOX 700 WASHAKIE CTY

CITY: WORLAND
STATE: WY
ZIP CODE: 82401-0700

NAME OF CONSIGNEE:

ADDRESS:

CITY: WORLAND
STATE: WY
ZIP CODE: 82401-0700

SHIP TO:

NAME:

ADDRESS:

CITY: WORLAND
STATE: WY
ZIP CODE: 82401-0700

SHIP VIA:

NAME: CONSUMER PRODUCT SAFETY COMMISSION

ADDRESS:

CITY: BETHESDA
STATE: MD
ZIP CODE: 20814

REQUISITIONING OFFICE:

NAME: CONSUMER PRODUCT SAFETY COMMISSION

ADDRESS:

CITY: BETHESDA
STATE: MD
ZIP CODE: 20814

PLACE OF INSPECTION:

DATE: 10/01/09 THRU 09/30/10
HOSPITAL ID#: 3D343055

BASIS CONTRACT:

BASIC CONTRACT: 10/01/09 THRU 09/30/10
HOSPITAL ID#: 3D343055

CONTINUED...

SCHEDULE (See reverse for Rejections)

ITEM NO.

SUPPLIES OR SERVICES

QUANTITY ORDERED

UNIT

UNIT PRICE

AMOUNT

QUANTITY

ACCEPTED

DUNS Number:

BASIC CONTRACT: 10/01/09 THRU 09/30/10
HOSPITAL ID#: 3D343055

CONTINUED...

SHIPPING POINT:

GROSS SHIPPING WEIGHT:

INVOICE NO.:

MAIL INVOICE TO:

CONSUMER PRODUCT SAFETY COMMISSION

INVOICE NO.:

$1,750.00

$1,750.00

17(h) TOTAL
(Cont. pages)

17(h) GRAND TOTAL

UNITED STATES OF AMERICA

AUTHORISED FOR LOCAL REPRODUCTION

PREVIOUS EDITION NOT USABLE

OBlSTONAl FORM 347 (Rev. 4/2006)

Prepared by GSA/FAR 48 CFR 53.2 (Feb)
**ITEM NO** | **SUPPLIES/SERVICES** | **QUANTITY ORDERED** | **UNIT** | **UNIT PRICE** | **AMOUNT** | **QUANTITY ACCEPTED**
--- | --- | --- | --- | --- | --- | ---
0001 | ESTIMATED QUANTITY
ACCESS ONLY TO NEISS SURVEILLANCE REPORTS,
SPECIAL SURVEY REPORTS AND
SUPPLEMENTAL/SPECIAL STUDY REPORTS IN
ACCORDANCE WITH THE ATTACHED STATEMENT OF WORK.
MINIMUM QTY: 350
MAXIMUM QTY: 1,750 | | | | | |
0002 | OPTION PERIOD: 10/01/10 THRU 09/30/11
ESTIMATED QUANTITY
ACCESS ONLY TO NEISS SURVEILLANCE REPORTS,
SPECIAL SURVEY REPORTS AND
SUPPLEMENTAL/SPECIAL STUDY REPORTS.
MINIMUM QTY: 350
MAXIMUM QTY: 1,750
Amount: $1,750.00 (Option Line Item)
10/01/2010 | | | | | |
<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>(a)</td>
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The total amount of obligation for this award is shown in box 17(i).