**ORDER FOR SUPPLIES OR SERVICES**

**DATE OF ORDER** 01/21/2010

**CONTRACT NO.** (If any) CPSC-N-10-0091

**ISSUING OFFICE** (Address correspondence to)

CONSUMER PRODUCT SAFETY COMMISSION
DIV OF PROCUREMENT SERVICES
4330 EAST WEST HWY
ROOM 517
BETHESDA MD 20814

**TO** ANGIE HAMMONS ER DIRECTOR

a NAME OF CONTRACTOR SUTTER SOLANO MEDICAL CENTER

b STREET ADDRESS 300 HOSPITAL DRIVE

c CITY VALLEJO
d STATE CA e ZIP CODE 94589

**NAME OF CONSIGNEE**

CONSUMER PRODUCT SAFETY COMMISSION

b STREET ADDRESS DIV OF HAZARD & INJURY DATA SYS
4330 EAST WEST HIGHWAY
ROOM 604-26

c CITY BETHESDA
d STATE MD e ZIP CODE 20814

**SHIP VIA**

a PURCHASE REFERENCE YOUR

**TYPE OF ORDER**

- [ ] PURCHASE
- [ ] DELIVERY

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.

**ACCOUNTING AND APPROPRIATION DATA**

10 PS EXFM 4310 11179 252E

**BUSINESS CLASSIFICATION** (Check appropriate box(es))

- [ ] SMALL
- [X] OTHER THAN SMALL
- [ ] DISADVANTAGED
- [ ] SERVICE-DISABLED
- [ ] WOMEN-OWNED
- [ ] EMERGING SMALL BUSINESS

**PLACE OF INSPECTION**

Destination

**PLACE OF ACCEPTANCE**

Destination

**SCHEDULE** (See reverse for Rejections)

<table>
<thead>
<tr>
<th>ITEM NO.</th>
<th>SUPPLIES OR SERVICES</th>
<th>QUANTITY ORDERED</th>
<th>UNIT</th>
<th>UNIT PRICE</th>
<th>AMOUNT ACCEPTED</th>
</tr>
</thead>
</table>
| DUNS Number: **[Redacted]**
BASIC CONTRACT: 10/01/09 THRU 09/30/10
HOSPITAL ID# 33362055
This contract is being incrementally funded in the amount of $3,208.70 for the period
Continued...

- [ ] NET 30

**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
d STATE MD e ZIP CODE 20814

**TOTAL** $3,208.70

**TOTAL** $3,208.70

**NAME** Doris B. Kessler

**TITLE** CONTRACTING/ORDERING OFFICER

**AUTHORIZED FOR LOCAL REPRODUCTION**

PREVIOUS EDITION NOT USABLE

**PREVIOUS EDITION NOT USABLE**

Provision by GSA/FAR 48 CFR 53.214(e)

**(Rev. 11/00)**

OPTIONAL FORM 347

(Optional)

PREVIOUS EDITION NOT USABLE
### ORDER FOR SUPPLIES OR SERVICES

#### SCHEDULE - CONTINUATION

**DATE OF ORDER:** 01/21/2010  
**CONTRACT NO.:** CPSC-N-10-0091  
**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>
<th>QUANTITY ACCEPTED</th>
</tr>
</thead>
<tbody>
<tr>
<td>0001</td>
<td>October 1, 2009 through February 28, 2010. Additional funding will be provided, by modification, when funds become available.</td>
<td>2917 EA</td>
<td>1.10</td>
<td>3,208.70</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Admin Office:  
CONSUMER PRODUCT SAFETY COMMISSION  
DIV OF PROCUREMENT SERVICES  
4330 EAST WEST HWY  
ROOM 517  
BETHESDA MD 20814

<table>
<thead>
<tr>
<th>ITEM NO</th>
<th>ESTIMATED QUANTITY</th>
<th>OPTION PERIOD: 10/01/10 THRU 09/30/11</th>
</tr>
</thead>
<tbody>
<tr>
<td>0002</td>
<td>ACCESS ONLY TO NEISS SURVEILLANCE REPORTS, SPECIAL SURVEY REPORTS AND SUPPLEMENTAL/SPECIAL STUDY REPORTS IN ACCORDANCE WITH THE ATTACHED STATEMENT OF WORK.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>MINIMUM QTY: 1,750</td>
<td>MAXIMUM QTY: 8,750</td>
</tr>
</tbody>
</table>

Period of Performance: 10/01/2009 to 09/30/2010

<table>
<thead>
<tr>
<th>ITEM NO</th>
<th>ESTIMATED QUANTITY</th>
<th>AMOUNT: $7,700.00 (Option Line Item)</th>
</tr>
</thead>
<tbody>
<tr>
<td>0003</td>
<td>ACCESS ONLY TO NEISS SURVEILLANCE REPORTS, SPECIAL SURVEY REPORTS AND SUPPLEMENTAL/SPECIAL STUDY REPORTS.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>MINIMUM QTY: 1,750</td>
<td>MAXIMUM QTY: 8,750</td>
</tr>
</tbody>
</table>

Period of Performance: 10/01/2010 to 09/30/2011

Accounting Info:  
11-PS-EXFM-4310-11179-252E  
$7,700.00 (Subject to Availability of Funds)

Period of Performance: 10/01/2010 to 09/30/2011

Continued ...
**ORDER FOR SUPPLIES OR SERVICES**

**SCHEDULE - CONTINUATION**

---

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

**DATE OF ORDER** | **CONTRACT NO** | **ORDER NO**
---|---|---
01/21/2010 | CPSC-N-10-0091 | 

<table>
<thead>
<tr>
<th><strong>ITEM NO</strong></th>
<th><strong>SUPPLIES/SERVICES</strong></th>
<th><strong>QUANTITY ORDERED</strong></th>
<th><strong>UNIT PRICE</strong></th>
<th><strong>AMOUNT</strong></th>
<th><strong>QUANTITY ACCEPTED</strong></th>
</tr>
</thead>
</table>

The total amount of award: $10,908.70. The obligation for this award is shown in box 17(i).