ORDER FOR SUPPLIES OR SERVICES

1. DATE OF ORDER: 03/03/2010

2. CONTRACT NO: CPSC-N-10-0123

6. SHIP TO:
   a. NAME OF CONSIGNEE: CONSUMER PRODUCT SAFETY COMMISSION

5. ISSUING OFFICE:
   a. NAME OF CONTRACTOR: ZEELAND COMMUNITY HOSPITAL
   b. STREET ADDRESS: DIV OF HAZARD & INJURY DATA SYS
   c. CITY: BETHESDA
   d. STATE: MD
   e. ZIP CODE: 20814

7. TO: BARBARA DORWIN MEDICAL RECORDS
   a. NAME OF CONTRACTOR: ZEELAND COMMUNITY HOSPITAL
   b. COMPANY NAME: ZEELAND COMMUNITY HOSPITAL
   c. STREET ADDRESS: 8333 FELCH STREET

9. ACCOUNTING AND APPROPRIATION DATA
   a. CITY: ZEELAND
   b. STATE: MI
   c. ZIP CODE: 49464-1698

10. REQUISITIONING OFFICE:
    a. NAME: CONSUMER PRODUCT SAFETY COMMISSION

11. BUSINESS CLASSIFICATION
   a. SMALL
   b. OTHER THAN SMALL
   c. DISADVANTAGED
   d. WOMEN-OWNED
   e. HUBZone
   f. EMERGING SMALL BUSINESS

12. FOB POINT:
    a. Destination

13. PLACE OF INSPECTION:
    a. Destination

14. GOVERNMENT BILL NO

15. DELIVER TO FOB POINT ON OR BEFORE (Date)

16. DISCOUNT TERMS

17. 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</th>
<th>QUANTITY ACCEPTED</th>
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<td>$3,930.00</td>
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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
    c. CITY: BETHESDA

22. UNITED STATES OF AMERICA

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

AUTHORIZED FOR LOCAL REPRODUCTION
PREVIOUS EDITION NOT USABLE

Doris B. Kessler

TODD STEVENS
**ORDER FOR SUPPLIES OR SERVICES**

**SCHEDULE - CONTINUATION**

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**DATE** 03/03/2010  
**CONTRACT NO** CPSC-N-10-0123

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**ITEM NO** 0001  
**SUPPLIES/SERVICES**

**ESTIMATED QUANTITY** 3000 EA

ACCESS ONLY TO NEISS SURVEILLANCE REPORTS, SPECIAL SURVEY REPORTS AND SUPPLEMENTAL/SPECIAL STUDY REPORTS IN ACCORDANCE WITH THE ATTACHED STATEMENT OF WORK.

**MINIMUM QTY:** 750  
**MAXIMUM QTY:** 3,750

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

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**OPTION PERIOD:** 10/01/10 THRU 09/30/11

**ESTIMATED QUANTITY** 3000 EA

ACCESS ONLY TO NEISS SURVEILLANCE REPORTS, SPECIAL SURVEY REPORTS AND SUPPLEMENTAL/SPECIAL STUDY REPORTS.

**MINIMUM QTY:** 750  
**MAXIMUM QTY:** 3,750  
**Amount:** $3,930.00 (Option Line Item)

10/01/2010

**Accounting Info:**

0100A1C0PS-2010-1117900000-EXFM004310-252E0

$3,930.00 (Subject to Availability of Funds)

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

**The total amount of award:** $7,860.00. The obligation for this award is shown in box 17(i).