ORDER FOR SUPPLIES OR SERVICES

1. DATE OF ORDER: 03/29/2010

3. ORDER NO: [Blank]

4. REQUISITION/REFERENCE NO: CPSC-N-10-0142

5. ISSUING OFFICE: CONSUMER PRODUCT SAFETY COMMISSION
   DIV OF PROCUREMENT SERVICES
   4330 EAST WEST HWY
   ROOM 517
   BETHESDA MD 20814

7. TO: REGINA BARKLEY ER MANAGER

8. NAME OF CONTRACTOR: JOHNSON CITY MEDICAL CENTER HOSPITAL

9. ADDRESS: 400 N STATE OF FRANKLIN ROAD

10. ISSUING OFFICE: CONSUMER PRODUCT SAFETY COMMISSION

12. F.O.B. POINT: Destination

13. PLACE OF DESTINATION: [Blank]

14. GOVERNMENT BILL NO: [Blank]

15. DELIVER TO F.O.B. POINT ON OR BEFORE: [Blank]

16. DISCOUNT TERMS: Net 30

19. GROSS SHIPPING WEIGHT: [Blank]

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
   d. STATE: MD
   e. ZIP CODE: 20814

22. UNITED STATES OF AMERICA

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

<table>
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<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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GRAND TOTAL: $13,800.00

PREVIOUS EDITION NOT USABLE

AUTHORIZED FOR LOCAL REPRODUCTION

OPTIONAL FORM 347 (Rev. 4/2006)
**ORDER FOR SUPPLIES OR SERVICES**

**SCHEDULE - CONTINUATION**

**DATE OF ORDER**: 03/29/2010  
**CONTRACT NO**: CPSC-N-10-0142  
**ORDER NO**:

**ITEM NO** | **SUPPLIES/SERVICES** | **QUANTITY ORDERED** | **UNIT** | **UNIT PRICE** | **AMOUNT** | **QUANTITY ACCEPTED**
---|---|---|---|---|---|---

| 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 |
| | | | | | |

**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**: 3,000  
**MAXIMUM QTY**: 15,000  
**Accounting Info**:  
0100A10DPS-2010-1117900000-EXFM004310-252EO  
**Funded**: $13,800.00  
**ESTIMATED QUANTITY**  
**OPTION PERIOD**: 10/01/10 THRU 09/30/11  
**ACCOUNTING INFO**:  
0100A10DPS-2011-1117900000-EXFM004310-252EO  
**Funded**: $0.00

**TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))**: $13,800.00

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

**SCHEDULE - CONTINUATION**

**DATE OF ORDER**: 03/29/2010  
**CONTRACT NO**: CPSC-N-10-0142

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

The total amount of award: $27,600.00. The obligation for this award is shown in box 17(i).