

ORDER FOR SUPPLIES OR SERVICES

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

1. DATE OF ORDER 09/21/2009	2. CONTRACT NO. (If any)	6. SHIP TO: Thelma B. Goldring		
3. ORDER NO. DTMA1V09415	4. REQUISITION/REFERENCE NO. PR800090058	a. NAME OF CONSIGNEE DOT/Maritime Administration, MAR-220		
5. ISSUING OFFICE (Address correspondence to) DOT/Maritime Administration, MAR-380 1200 New Jersey Ave SE, MAR380 W26-429		b. STREET ADDRESS 1200 New Jersey Ave., SE		
Washington DC 20590		c. CITY Washington	d. STATE DC	e. ZIP CODE 20590

7. TO:	f. SHIP VIA
a. NAME OF CONTRACTOR Mary Fernandez	

b. COMPANY NAME Pacer Service Center		8. TYPE OF ORDER		
c. STREET ADDRESS 7550 IH 10 W, SUITE 600		<input checked="" type="checkbox"/> a. PURCHASE	<input type="checkbox"/> b. DELIVERY - Except for billing instructions on the reverse, this delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.	
d. CITY San Antonio	e. STATE TX	f. ZIP CODE 78229-5803	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.	

9. ACCOUNTING AND APPROPRIATION DATA 7009 - 2009 - 1750HQ - 10PEDOE - - 2200 - - 000122006 - 25305 - - 6100 - - 6600 - - 11 - - N96633	10. REQUISITIONING OFFICE DOT/Maritime Administration, MAR-800
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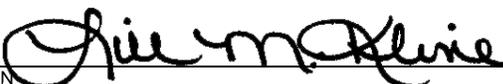
11. BUSINESS CLASSIFICATION (Check appropriate box(es))	12. F.O.B. POINT
<input type="checkbox"/> a. SMALL <input type="checkbox"/> b. OTHER THAN SMALL <input type="checkbox"/> c. DISADVANTAGED <input type="checkbox"/> g. SERVICE-DISABLED VETERAN-OWNED <input type="checkbox"/> d. WOMEN-OWNED <input type="checkbox"/> e. HUBZone <input type="checkbox"/> f. EMERGING SMALL BUSINESS	Destination

13. PLACE OF		14. GOVERNMENT B/L NO.	15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date)	16. DISCOUNT TERMS
a. INSPECTION	b. ACCEPTANCE			

17. SCHEDULE (See reverse for Rejections)

ITEM NO. (a)	SUPPLIES OR SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	SEE LINE ITEM DETAIL					

SEE BILLING INSTRUCTIONS ON REVERSE	18. SHIPPING POINT	19. GROSS SHIPPING WEIGHT	20. INVOICE NO.		17(h) TOT. (Cont. pages)
	21. MAIL INVOICE TO: Tammy Curnett				
	a. NAME DOT/ Enterprise Services Center (ESC) OFO/FAA, Oklahoma City				
	b. STREET ADDRESS (or P.O. Box) MARAD A/P Branch, AMZ-150 PO Box 25710				
	c. CITY Oklahoma City	d. STATE OK	e. ZIP CODE 73125	\$1,500.00	17(i) GRAND TOTAL

22. UNITED STATES OF AMERICA BY (Signature) 	23. NAME (Typed) Jill M. Kline TITLE: CONTRACTING/ORDERING OFFICER
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**ORDER FOR SUPPLIES OR SERVICES
SCHEDULE - CONTINUATION**

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

DATE OF ORDER 09/21/2009	CONTRACT NO.	ORDER NO. DTMA1V09415
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ITEM NO. (a)	SUPPLIES OR SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
0001	Annual Pacer Service <i>Start Date</i> <i>End Date</i> 08/01/2009 07/31/2010 Reference Requisition: PR800090058	1.00	LOT	1,500.000	1,500.00	

TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17i) ⇒ \$1,500.00

Line Item Detail	Title Pacer Service Center	Document Number DTMA1V09415	Page 4 of 5
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Detail

Line Item Number	Description	Ship Code	Invoice Code	Quantity	Unit of Issue	Unit Price	Total Cost (Includes Disc)
0001	Annual Pacer Service			1.00	LOT	\$1,500.000	\$ 1,500.00

Ref Req No: PR800090058

Contract Type: Fixed Price

Delivery Date:

Period of Performance: 08/01/2009 to 07/31/2010

Extended Description:

Line Type: Priced

Period Type: Base Period

Product/Service Code: R418

SIC Code: 7375

NAICS Code: 519130

Description

Company:	Model Number:	Inspection/Acceptance
Prod./Cat. Number:	NSN:	Location:
Drawing Number:	Recycled Product:	Level:
Spec. Number:	Color:	
Serial Number:	Size:	
Piece Number:		

Pricing

		Estimates					
Base Fee:	.000	Min. Profit Fee:	.000	Quantity:	.000	Est. Cost:	.000
Award Fee:	.000	Max. Profit Fee:	.000	Min. Quantity:	.000	Est. Cost - Low:	.000
Fixed Fee:	.000	Target Profit Fee:	.000	Max. Quantity:	.000	Est. Cost - High:	.000
Ceiling:	.000	Taxes:	.000	Variation in Quantity:	.000	Target Cost:	.000
						Target Price:	.000

Funding

Funding Strip	Expiration Date	Funded Amount
7009 - 2009 - 1750HQ - 10PEDOE - - 2200 - - 000122006 - 25305 - - 6100 - - 6600 - - 11 - - N96633		1,500.00

Line Item Detail

Title

Pacer Service Center

Document Number

DTMA1V09415

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Address Information

F.O.B. Destination

Additional Markings: