

ORDER FOR SUPPLIES OR SERVICES

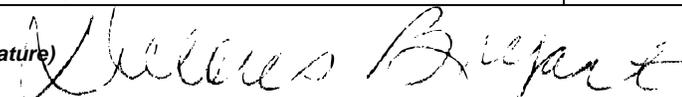
IMPORTANT: Mark all packages and papers with contract and/or order numbers.

1. DATE OF ORDER 06/23/2008		2. CONTRACT NO. (If any) GS-02F-0112P		6. SHIP TO: Louis Effa		
3. ORDER NO. DTMA1F08085		4. REQUISITION/REFERENCE NO. PR300080190		a. NAME OF CONSIGNEE DOT/Maritime Administration, MAR-340		
5. ISSUING OFFICE (Address correspondence to) DOT/Maritime Administration, MAR-380 1200 New Jersey Ave SE, MAR380 W26-429 Washington DC 20590				b. STREET ADDRESS 1200 New Jersey Ave., SE MAR380, W28-201		
c. CITY Washington		d. STATE DC		e. ZIP CODE 20590		
7. TO: a. NAME OF CONTRACTOR Libby Nelson-Blue				f. SHIP VIA		
b. COMPANY NAME Dahle North America Inc				8. TYPE OF ORDER		
c. STREET ADDRESS 49 Vose Farm Road				<input checked="" type="checkbox"/> a. PURCHASE REFERENCE YOUR: _____ 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.		<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 Petersborough		e. STATE NH	f. ZIP CODE 03458--179			
9. ACCOUNTING AND APPROPRIATION DATA - 70 - X43030 - 00 2008 - - 9304 - - 0TEC00 - 7008613 - - 040TECO - 31 - 110 - - -				10. REQUISITIONING OFFICE DOT/Maritime Administration, MAR-340		
11. BUSINESS CLASSIFICATION (Check appropriate box(es)) <input checked="" 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					12. F.O.B. POINT 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) 17(i) GRAND TOTAL
	21. MAIL INVOICE TO: Leah MacHugh						
	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		\$1,495.79	

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

PAGE NO.
3 of 3

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

DATE OF ORDER 06/23/2008	CONTRACT NO. GS-02F-0112P	ORDER NO. DTMA1F08085
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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	Shredder for MARAD's OPS Center Kobra 240hs6 Secure Shredder for MARAD's OPS Center. See Attached. Reference Requisition: PR300080190	1.00	EA	1,495.790	1,495.79	

TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17i) ⇒ \$1,495.79