

**ORDER FOR SUPPLIES OR SERVICES**

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

1. DATE OF ORDER 09/16/2008	2. CONTRACT NO. (If any) GS-35F-4754G	6. SHIP TO: Louis Effa		
3. ORDER NO. DTMA1F08125	4. REQUISITION/REFERENCE NO. PR300080273	a. NAME OF CONSIGNEE DOT/Maritime Administration, MAR-340		
5. ISSUING OFFICE (Address correspondence to) DOT/Maritime Administration, DGO Acquisition 500 Poydras Street, Room 1223  New Orleans LA 70130-3394		b. STREET ADDRESS 1200 New Jersey Ave., SE MAR340, W26-320		
		c. CITY Washington	d. STATE DC	e. ZIP CODE 20590-0001

7. TO: a. NAME OF CONTRACTOR <b>Ray Dion</b>	f. SHIP VIA
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b. COMPANY NAME <b>Lyme Computer Systems, Inc.</b>		8. TYPE OF ORDER		
c. STREET ADDRESS <b>One Lyme Common, P.O. Box 290</b>		<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 <b>Lyme</b>	e. STATE <b>NH</b>	f. ZIP CODE <b>03768-0290</b>	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 7008 - - 4303 - 7008 - 61 - 3040 - - ADPO - - - 26080 - - - - -	10. REQUISITIONING OFFICE DOT/Maritime Administration, MAR-340
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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
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13. PLACE OF		14. GOVERNMENT B/L NO.	15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date) 10/10/2008	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)
	<b>SEE LINE ITEM DETAIL</b>					

SEE BILLING INSTRUCTIONS ON REVERSE	18. SHIPPING POINT	19. GROSS SHIPPING WEIGHT	20. INVOICE NO.		17(h) TOT. (Cont. pages)
	21. MAIL INVOICE TO: Leah MacHugh				
	a. NAME DOT/ Enterprise Services Center (ESC) OFO/FAA, Oklahoma City				\$3,850.20
	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		17(i) GRAND TOTAL

22. UNITED STATES OF AMERICA BY (Signature) 	23. NAME (Typed) Delores Bryant TITLE: CONTRACTING/ORDERING OFFICER
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