

ORDER FOR SUPPLIES OR SERVICES

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

1. DATE OF ORDER 04/26/2010	2. CONTRACT NO. (If any) DTMA8C05019	6. SHIP TO: Cecil Hedrick		
3. ORDER NO. CLS19W10013		4. REQUISITION/REFERENCE NO. PRWRSM10114		
5. ISSUING OFFICE (Address correspondence to) DOT/Maritime Administration, DPO Acquisition 201 Mission Street, Suite 1800 San Francisco CA 94105-1905		a. NAME OF CONSIGNEE DOT/Maritime Administration, Division of Pacific Ops		
		b. STREET ADDRESS S.S. CURTISS		
		c. CITY San Diego	d. STATE CA	e. ZIP CODE 92101

7. TO: a. NAME OF CONTRACTOR	f. SHIP VIA
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b. COMPANY NAME Crowley Technical Management, Inc.		8. TYPE OF ORDER		
c. STREET ADDRESS 9487 REGENCY SQ BLVD		<input type="checkbox"/> a. PURCHASE REFERENCE YOUR:	<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 JACKSONVILLE	e. STATE FL	f. ZIP CODE 32225-8126		

9. ACCOUNTING AND APPROPRIATION DATA 2010 - - X4303 - RRF 933 - 40 - CLM0 - 0 - 0000 - 000000 - 70 - 106133 - 40 - CLM0 - 25432 - - -	10. REQUISITIONING OFFICE DOT/Maritime Administration, DPO
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11. BUSINESS CLASSIFICATION (Check appropriate box(es))	12. F.O.B. POINT
<input type="checkbox"/> a. SMALL <input checked="" 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) 09/30/2010	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: Susan Wong				
	a. NAME DOT/ Enterprise Services Center (ESC) OFO/FAA, Oklahoma City				
	b. STREET ADDRESS (or P.O. Box) MARAD A/P WR Invoices Branch, AMZ-150 PO Box 25710,				
	c. CITY Oklahoma City	d. STATE OK	e. ZIP CODE 73125		17(i) GRAND TOTAL \$10,000.00

22. UNITED STATES OF AMERICA BY (Signature) 	23. NAME (Typed) Patricia L. Etridge TITLE: CONTRACTING/ORDERING OFFICER
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