

ORDER FOR SUPPLIES OR SERVICES

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

1. DATE OF ORDER 04/04/2012		2. CONTRACT NO. (If any)		6. SHIP TO:	
3. ORDER NO. DTMA-94-P-2011-0016/0001		4. REQUISITION/REFERENCE NO.		a. NAME OF CONSIGNEE	
5. ISSUING OFFICE (Address correspondence to) U.S. DOT/ Maritime Administration Pacific Div. Acquisition Office MAR 380-4 201 Mission Street Suite 1800 San Francisco CA 94105				b. STREET ADDRESS	
7. TO: Mary Fischer, ATT Govt Solutions		f. SHIP VIA		8. TYPE OF ORDER	
a. NAME OF CONTRACTOR PACIFIC BELL TELEPHONE COMPANY (DBA: AT&T California)		b. COMPANY NAME		<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.	
c. STREET ADDRESS 12851 Manchester Room 1-W-250		<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 Des Peres e. STATE MO f. ZIP CODE 63131-1802	
9. ACCOUNTING AND APPROPRIATION DATA				10. REQUISITIONING OFFICE Div. of PACIFIC OPERATIONS	
11. BUSINESS CLASSIFICATION (Check appropriate box(es)) <input type="checkbox"/> a. SMALL <input type="checkbox"/> d. WOMEN-OWNED <input checked="" type="checkbox"/> b. OTHER THAN SMALL <input type="checkbox"/> e. HUBZone <input type="checkbox"/> c. DISADVANTAGED <input type="checkbox"/> f. EMERGING SMALL BUSINESS <input type="checkbox"/> g. SERVICE-DISABLED VETERAN-OWNED				12. F.O.B. POINT Various	
13. PLACE OF		14. GOVERNMENT B/L NO.		15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date) Multiple	
a. INSPECTION Destination		b. ACCEPTANCE Destination		16. DISCOUNT TERMS	

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)
	OFFICE FY11: ATT LOCAL AND LONG DISTANCE PHONE SERVICES. Effective 12/31/2011 Period Of Performance End Date changed from 31-DEC-11 to 13-MAR-12 Continued ...					

SEE BILLING INSTRUCTIONS ON REVERSE	18. SHIPPING POINT		19. GROSS SHIPPING WEIGHT		20. INVOICE NO.		17(h) TOTAL (Cont. pages)
	21. MAIL INVOICE TO:						
	a. NAME MARAD A/P INVOICES						\$0.00
	b. STREET ADDRESS (or P.O. Box) 8500 SOUTH MCARTHUR BLVD						\$0.00
c. CITY OKLAHOMA CITY		d. STATE OK	e. ZIP CODE 73169				

22. UNITED STATES OF AMERICA BY (Signature)



23. NAME (Typed)
Debra K. Velmere
TITLE: CONTRACTING/ORDERING OFFICER

**ORDER FOR SUPPLIES OR SERVICES
SCHEDULE - CONTINUATION**

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DATE OF ORDER
04/04/2012

CONTRACT NO.

ORDER NO.

DTMA-94-P-2011-0016/0001

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>This purchase order covers invoices with Invoice Date of 13 Mar 12 or earlier.</p> <p>Total Amount for this Modification: \$0.00</p> <p>Amount for this Award: \$5,000.00</p> <p>Admin Office: U. S. DOT Maritime Administration Pacific Div. Acquisition Office MAR 380.4 201 Mission Street Suite 1800 San Francisco CA 94105</p> <p>Period of Performance: 04/01/2011 to 03/13/2012</p>					

TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))

\$0.00