

ORDER FOR SUPPLIES OR SERVICES

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

1. DATE OF ORDER 07/28/2008		2. CONTRACT NO. (If any)		6. SHIP TO: Dr. Carolyn Junemann		
3. ORDER NO. DTMA1V08172		4. REQUISITION/REFERENCE NO. PR500080021		a. NAME OF CONSIGNEE DOT/Maritime Administration, MAR-820		
5. ISSUING OFFICE (Address correspondence to) DOT/MARITIME ADMINISTRATION 1200 New Jersey Ave., SE MAR380, W28-201 Washington DC 20590				b. STREET ADDRESS 1200 New Jersey Ave., SE MAR380, W28-201		
7. TO:		c. CITY Washington		d. STATE DC	e. ZIP CODE 20590	
a. NAME OF CONTRACTOR				f. SHIP VIA		
b. COMPANY NAME The Glosten Associates, Inc.				8. TYPE OF ORDER		
c. STREET ADDRESS 1201 Western Avenue, Suite 200				<input checked="" type="checkbox"/> a. PURCHASE		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 Seattle				REFERENCE YOUR:		
e. STATE WA		f. ZIP CODE 98101-2921		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 70 - 08 - 175000 - 2008 - - 14BO - AL - 1060 - 0000141 - - 00025305 - - 6100 - 6600 - 11 - - N86421				10. REQUISITIONING OFFICE DOT/Maritime Administration, MAR-750		
11. BUSINESS CLASSIFICATION (Check appropriate box(es)) <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						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) 09/30/2009		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: Christy Remington						
	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		\$100,000.00	

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**

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

DATE OF ORDER 07/28/2008	CONTRACT NO.	ORDER NO. DTMA1V08172
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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	<p>"Plug and Play" system</p> <p>Provide engineering support for modifications to the TS GOLDEN BEAR for installing a "plug and play" system for ballast water technology research. This effort builds upon the 2006 concept design modifications developed by your organization.</p> <table border="0"> <tr> <td><i>Delivery Date</i></td> <td><i>Start Date</i></td> <td><i>End Date</i></td> </tr> <tr> <td>09/30/2009</td> <td>08/01/2008</td> <td>09/30/2009</td> </tr> </table> <p>Reference Requisition: PR500080021</p>	<i>Delivery Date</i>	<i>Start Date</i>	<i>End Date</i>	09/30/2009	08/01/2008	09/30/2009	1.00		100,000.000	100,000.00	
<i>Delivery Date</i>	<i>Start Date</i>	<i>End Date</i>										
09/30/2009	08/01/2008	09/30/2009										

TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17i) ⇒ \$100,000.00