

ORDER FOR SUPPLIES OR SERVICES

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

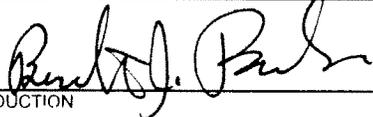
1. DATE OF ORDER 04/02/2008		2. CONTRACT NO. (If any)		6. SHIP TO: Erhard W. Koehler		
3. ORDER NO. BPC08000012		4. REQUISITION/REFERENCE NO.		a. NAME OF CONSIGNEE DOT/Maritime Administration, MAR-611		
5. ISSUING OFFICE (Address correspondence to) DOT/MARITIME ADMINISTRATION 1200 New Jersey Ave., SE 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 Prime, Inc.				8. TYPE OF ORDER		
c. STREET ADDRESS 4009 Williamsburg Ct. Suite 200				<input 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 Fairfax		e. STATE VA	f. ZIP CODE 22032-1139			
9. ACCOUNTING AND APPROPRIATION DATA - - X303 - 9 - 08 - 69 - - 1600 - 80TECO - - 254T - - 0869 - 00861 - - -				10. REQUISITIONING OFFICE DOT/Maritime Administration, MAR-612		

11. BUSINESS CLASSIFICATION (Check appropriate box(es))						12. F.O.B. POINT
<input checked="" type="checkbox"/> a. SMALL	<input type="checkbox"/> b. OTHER THAN SMALL	<input checked="" type="checkbox"/> c. DISADVANTAGED	<input type="checkbox"/> g. SERVICE-DISABLED VETERAN-OWNED			Destination
<input type="checkbox"/> d. WOMEN-OWNED	<input type="checkbox"/> e. HUBZone	<input type="checkbox"/> f. EMERGING SMALL BUSINESS				
13. PLACE OF		14. GOVERNMENT B/L NO.	15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date)		16. DISCOUNT TERMS	
a. INSPECTION Government	b. ACCEPTANCE Government		07/15/2008			

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.			
	21. MAIL INVOICE TO: Christy Remington					17(h) TOT. (Cont. pages)
	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	\$9,450.00	17(i) GRAND TOTAL

22. UNITED STATES OF AMERICA BY (Signature) 			23. NAME (Typed) Benedict J. Burnowski TITLE: CONTRACTING/ORDERING OFFICER			
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Line Item Summary

Document Number

BPC08000012

Title

Historic Services (Prime)

Page

2 of 2

Total Funding: \$9,450.00

FYs	Fund	Budget Org	Sub	Object Class	Sub	Program	Cost Org	Sub	Proj/Job No.	Sub	Reporting Category
	X303	9	08	69		1600	80TEC0		254T		0869

Division 00861
Closed FYs
Cancelled Fund

Line Item Number	Description	Delivery Date (Start Date to End Date)	Quantity	Unit of Issue	Unit Price	Total Cost (Includes Discounts)
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0001	Perform Research Services	07/15/2008	3.00		\$3,150.000	\$ 9,450.00
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(04/02/2008 to 07/15/2008)

Perform Research Services in accordance with the attached Statement of Work.

Funding Information:

- - X303 - 9 - 08 - 69 - - 1600 - 80TEC0 - - 254T - - 0869 - 00861 -

\$9,450.00

Total Cost: \$9,450.00