

**ORDER FOR SUPPLIES OR SERVICES**

PAGE OF PAGES

1

3

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

1. DATE OF ORDER 04/14/2011		2. CONTRACT NO. (If any) DTMA8C11024		6. SHIP TO: a. NAME OF CONSIGNEE ANTARES	
3. ORDER NO. KOS24A2011018		4. REQUISITION/REFERENCE NO. MA-PR615-20110439		b. STREET ADDRESS PIER 8, North Locus Point 1450 Nicholson St.	
5. ISSUING OFFICE (Address correspondence to) U.S.DOT/ Maritime Administration Atlantic Div. Acquisition Office MAR-380-2 7737 Hampton Blvd Building 19 Suite 300 NORFOLK VA 23505-1204				c. CITY Baltimore	
7. TO: a. NAME OF CONTRACTOR KEYSTONE OCEAN SERVICES, INC				d. STATE MD	
b. COMPANY NAME				e. ZIP CODE 21230-5309	
c. STREET ADDRESS ONE BALA PLAZA - EAST SUITE 600				f. SHIP VIA	
d. CITY BALA CYNWYD				8. TYPE OF ORDER <input type="checkbox"/> a. PURCHASE <input checked="" type="checkbox"/> b. DELIVERY	
e. STATE PA				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.	
f. ZIP CODE 19004-1496				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.	
9. ACCOUNTING AND APPROPRIATION DATA See Schedule				10. REQUISITIONING OFFICE U.S. DOT/ Maritime Administration	

11. BUSINESS CLASSIFICATION (Check appropriate box(es)) <input 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
13. PLACE OF a. INSPECTION Destination		b. ACCEPTANCE Destination	14. GOVERNMENT B/L NO.	15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date)	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)
	THIS IS A CONFIRMING ORDER  ANTARES FY11 ROS CLAIMS  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						\$4,500.00
	b. STREET ADDRESS (or P.O. Box) P.O. BOX 25710						\$4,500.00
c. CITY OKLAHOMA CITY		d. STATE OK	e. ZIP CODE 73125				

22. UNITED STATES OF AMERICA BY (Signature) 			23. NAME (Typed) EILEEN WILLIAMS TITLE: CONTRACTING/ORDERING OFFICER		
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**ORDER FOR SUPPLIES OR SERVICES**  
**SCHEDULE - CONTINUATION**

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DATE OF ORDER 04/14/2011	CONTRACT NO. DTMA8C11024	ORDER NO. KOS24A2011018
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ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
0011AE	<p>Admin Office: U. S. DOT Maritime Administration Atlantic Div. Acquisition Office MAR-380.2 7737 Hampton Blvd Building 19 Suite 300 Norfolk VA 23505-1204</p> <p>Mark For: ANTARES PIER 8, North Locus Point 1450 Nicholson St. Baltimore MD 21230-5309</p> <p>Accounting Info: 70XR161710.2011.93140CLM00.1161000000.25432. 61006600 / 7011613140CLM0 Period of Performance: 04/06/2011 to 09/30/2011</p> <p>ANTARES FY11 ROS CLAIMS</p> <p>FY11 Cost Reimbursable ANTARES FY11 ROS CLAIMS, NS-5 PROJECT KEY-ANT11-7004A</p> <p>The purpose of this project is to provide for the support of Maintenance &amp; Cure claims for the Ship Managers ROS crewmembers.</p> <p>Individual claims will be listed separately by Work Order and expenditures will be reconciled quarterly.</p> <p>All completed work shall be in compliance with applicable standards and shall be evaluated in accordance with applicable standards as set forth in the Ship Manager contract at 2.4 (including general standards, government specific standards, non-consensus standards, and voluntary consensus standards) and Section E at the time of acceptance.</p> <p>WO/SR 0101439 - CLAIM # PC-155 001</p> <p>The total amount of award: \$4,500.00. The Continued ...</p>	1	LO	4,500.00	4,500.00	

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

\$4,500.00

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SCHEDULE - CONTINUATION**

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ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	obligation for this award is shown in box 17 (i).					

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

\$0.00