

ORDER FOR SUPPLIES OR SERVICES

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

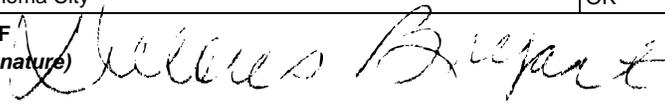
| | | | | | | |
|--|-----------------------|----------------------------------|--|--|----------------------|--|
| 1. DATE OF ORDER 07/30/2008 | | 2. CONTRACT NO. (If any) | | 6. SHIP TO: Dr. Carolyn Junemann | | |
| 3. ORDER NO. BPC08000026 | | 4. REQUISITION/REFERENCE NO. | | a. NAME OF CONSIGNEE DOT/Maritime 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 VERSAR, INC. | | | | 8. TYPE OF ORDER | | |
| c. STREET ADDRESS 6850 VERSAR CENTER | | | | <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 SPRINGFIELD | e. STATE VA | f. ZIP CODE 22151-4196 | | 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 - 69 - X1768 - 1 - 08 - SD - - 160000 - SDSCPO - - 25433 - - - - - | | | | 10. REQUISITIONING OFFICE DOT/Maritime Administration, MAR-820 | | |

| | | | | | |
|---|---|---|--|--------------------|--|
| 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 | 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 | | 12/31/2009 | | |

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: Tammy Curnett | | | | |
| | 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 | \$79,933.00 | 17(i) GRAND TOTAL |

| | |
|--|---|
| 22. UNITED STATES OF AMERICA BY (Signature)  | 23. NAME (Typed) Delores Bryant TITLE: CONTRACTING/ORDERING OFFICER |
|--|---|

| | | | |
|--------------------------|------------------------|--------------|-------------|
| Line Item Summary | Document Number | Title | Page |
|--------------------------|------------------------|--------------|-------------|

Total Funding:

| FYs | Fund | Budget Org | Sub | Object Class | Sub | Program | Cost Org | Sub | Proj/Job No. | Sub | Reporting Category |
|-----------------|-------------------|-----------------------|-----|--------------|-----|---------|----------|-----|--------------|-----|--------------------|
| 69 | X1768 | 1 | 08 | SD | | 160000 | SDSCPO | | 25433 | | |
| Division | 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) |
|------------------|-------------|---|----------|---------------|------------|------------------------------------|
|------------------|-------------|---|----------|---------------|------------|------------------------------------|

| | | | | | | |
|------|-----------------------|------------|------|--|--------------|--------------|
| 0001 | SS PIONEER CONTRACTOR | 12/31/2009 | 1.00 | | \$79,933.000 | \$ 79,933.00 |
|------|-----------------------|------------|------|--|--------------|--------------|

(08/01/2008 to 12/31/2009)

Sampling and analysis of biofouling organisms on the SS PIONEER CONTRACTOR at the Beaumont Reserve Fleet. Sampling to be conducted pre and post hull cleaning at the fleet.

Funding Information:

- 69 - X1768 - 1 - 08 - SD - - 160000 - SDSCPO - - 25433 - - - -

- -
\$79,933.00

Total Cost: \$79,933.00