

**ORDER FOR SUPPLIES OR SERVICES**

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

1. DATE OF ORDER 03/12/2010	2. CONTRACT NO. (If any) DTOS59-06-A-00050	6. SHIP TO: Raymond Venkersammy		
3. ORDER NO. DTMA1F10039	4. REQUISITION/REFERENCE NO. PR200100013	a. NAME OF CONSIGNEE U.S. MERCHANT MARINE ACADEMY		
5. ISSUING OFFICE (Address correspondence to) DOT/Maritime Administration, MAR-380 1200 New Jersey Ave SE, MAR380 W26-429  Washington DC 20590		b. STREET ADDRESS Department of Personnel		
		c. CITY Kings Point	d. STATE NY	e. ZIP CODE 11024-1699

7. TO: a. NAME OF CONTRACTOR	f. SHIP VIA
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b. COMPANY NAME Deloitte Consulting LLP	8. TYPE OF ORDER <input type="checkbox"/> a. PURCHASE <input checked="" 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.	
c. STREET ADDRESS 1750 Tysons Boulevard, Suite 800	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.	
d. CITY McLean	e. STATE VA	f. ZIP CODE 22102-4219

9. ACCOUNTING AND APPROPRIATION DATA 2010 - - 701017 - 50MA1PD - A0 - 0001 - 90 - 000510700 - - - - - 25215 - 6100 - 6600 -	10. REQUISITIONING OFFICE DOT/Maritime Administration, MAR-330
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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 Destination
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13. PLACE OF		14. GOVERNMENT B/L NO.	15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date) 09/30/2010	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)
	21. MAIL INVOICE TO: Leah MacHugh				
	a. NAME DOT/ Enterprise Services Center (ESC) OFO/FAA, Oklahoma City				\$217,000.00
	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		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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**ORDER FOR SUPPLIES OR SERVICES  
SCHEDULE - CONTINUATION**

PAGE NO.  
3 of 4

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DATE OF ORDER 03/12/2010	CONTRACT NO. DTOS59-06-A-00050	ORDER NO. DTMA1F10039
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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>Provide Internal Control Assessment for the USMMA Offices</p> <p>1)Develop a project plan to define the scope of the OMB Circular A-123, Appendix A and for FY 2010.</p> <p><i>Delivery Date</i>      <i>Start Date</i>      <i>End Date</i> 09/30/2010      03/12/2010      09/30/2010</p> <p>Reference Requisition: PR200100013</p>	1.00	NTE	217,000.000	217,000.00	
0001AA	<p>Provide Internal Control Assessment for the USMMA Offices</p> <p>2)Conduct an evaluation of internal control at the entity level, to include:</p> <p>Assist the USMMA in completing the Internal Control Self Assessment (ICSA). Conduct a gap assessment of the ICSA and provide recommendations to improve internal controls at the entity level.</p> <p><i>Delivery Date</i>      <i>Start Date</i>      <i>End Date</i> 09/30/2010      03/12/2010      09/30/2010</p>					
0001AB	<p>Provide Internal Control Assessment for the USMMA Offices</p> <p>3)Conduct an evaluation of internal control at the process level, to include:</p> <p>Prepare process documentation in accordance with the Departmental A-123 PMO ICP (Internal Control Program) documentation model for ten key business processes, including: Budget; Cash Management; Cost Accounting; Credit Card Management; Financial Reporting; HR/Time and Attendance; Procure to Pay; Property, Plant, and Equipment; Revenue and Receivables; and Travel Management.</p> <p>Conduct process level walkthroughs to assess the design of key controls within the ten key business processes.</p> <p>Assist USMMA in developing and implementing Corrective Action Plans (CAP). To resolve design deficiencies identified in the process level assessment.</p> <p>Recommend business process improvements that will enhance the effectiveness and efficiency of USMMA's internal controls over financial reporting</p> <p><i>Delivery Date</i>      <i>Start Date</i>      <i>End Date</i> 09/30/2010      03/12/2010      09/30/2010</p>					
0001AC	<p>Provide Internal Control Assessment for the USMMA Offices</p> <p>4)Develop a comprehensive schedule for testing key controls at the transaction level.</p> <p><i>Delivery Date</i>      <i>Start Date</i>      <i>End Date</i> 09/30/2010      03/12/2010      09/30/2010</p>					

**TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17i) ➡ \$217,000.00**

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

PAGE NO.  
4 of 4

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ITEM NO. (a)	SUPPLIES OR SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)					
0001AD	<p>Provide Internal Control Assessment for the USMMA Offices</p> <p>5)Conduct transaction level testing to assess the operating effectiveness of key controls within the USMMA business processes. Transaction level testing in Fiscal Year (FY) 2010 for USMMA will be consistent with the DOT Internal Control Program assessment schedule which includes the related focus areas of Cost Accounting, Financial Reporting, and Reveenue and Receivables business processes. Transaction testing will include: Identify key controls within the documented business processes</p> <p>Develop detailed test plans outlining the nature and extent of the testing to be performed and specific test steps to be completed</p> <p>Select samples from a transaction population and conduct appropriate test steps as detailed in the test plans.</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>09/30/2010</td> <td>03/12/2010</td> <td>09/30/2010</td> </tr> </table>	<i>Delivery Date</i>	<i>Start Date</i>	<i>End Date</i>	09/30/2010	03/12/2010	09/30/2010				
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09/30/2010	03/12/2010	09/30/2010									

**TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17i)** ➡ \$0.00