ORDER FOR SUPPLIES OR SERVICES

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

1. DATE OF ORDER: 11/27/2006
2. CONTRACT NO. *(If any)*: DTMA8C05018
3. ORDER NO.: PCS18W07010
4. REQUISITION/REFERENCE NO.: PRWRSM07066
5. ISSUING OFFICE *(Address correspondence to)*
   DOT/Maritime Administration, WR Acquisition
   201 Mission Street, Suite 1800
   San Francisco CA 94105-1905
6. SHIP TO: Leonard LeGrappe
   a. NAME OF CONSIGNEE: DOT/Maritime Administration, WR Operations
   b. STREET ADDRESS: CAPE GIBSON
   c. CITY: ALAMEDA
   d. STATE: CA
   e. ZIP CODE:
   f. SHIP VIA:
7. TO:
   a. NAME OF CONTRACTOR:
   b. COMPANY NAME: **PATRIOT CONTRACT SERVICES LLC**
   c. STREET ADDRESS: **1661 TICE VALLEY BLVD STE 200**
   d. CITY: **Walnut Creek**
   e. STATE: **CA**
   f. ZIP CODE: **94595-1648**
8. TYPE OF ORDER
   ☐ 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.
   ☐ 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.
9. ACCOUNTING AND APPROPRIATION DATA
   07 - - X303 - 9 - - 97 - - 22MIS0 - 4100 - - 254S - - 0797 - 0713 - - -
10. REQUISITIONING OFFICE
   DOT/Maritime Administration, Western Region
11. BUSINESS CLASSIFICATION *(Check appropriate box(es))*
   ☐ a. SMALL ☑ b. OTHER THAN SMALL ☐ c. DISADVANTAGED ☐ d. WOMEN-OWNED
12. F.O.B. POINT: Destination
13. PLACE OF
   a. INSPECTION
   b. ACCEPTANCE
14. GOVERNMENT B/L NO.
15. DELIVER TO F.O.B. POINT ON OR BEFORE *(Date)*: 09/30/2007
16. DISCOUNT TERMS
   10 days %
   20 days %
   30 days %
   days %

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: Ms. Susan Wong
   a. NAME: DOT/Maritime Administration, WR Finance
   b. STREET ADDRESS *(or P.O. Box)*: 201 Mission St, Suite 1800
   c. CITY: San Francisco
   d. STATE: CA
   e. ZIP CODE: 94105

17(h) TOT. *(Cont. pages)*

17(i) GRAND TOTAL: $10,000.00

22. UNITED STATES OF AMERICA BY ***(Signature)*** Patricia L. Etridge

23. NAME *(Typed)*: Patricia L. Etridge
   TITLE: CONTRACTING/ORDERING OFFICER

If desired, this order (or a copy thereof) may be used by the Contractor as the Contractor's invoice, instead of a separate invoice, provided the following statement, (signed and dated) is on (or attached to) the order: "Payment is requested in the amount of $_____. No other invoice will be submitted." However, if the Contractor wishes to submit an invoice, the following information must be provided; contract number (if any), order number, item number(s), description of supplies or service, sizes, quantities, unit prices, and extended totals. Prepaid shipping costs will be indicated as a separate item on the invoice. Where shipping costs exceed $10 (except for parcel post), the billing must be supported by a bill of lading or receipt. When several orders are invoiced to an ordering activity during the same billing period, consolidated periodic billings are encouraged.

RECEIVING REPORT

Quantity in the "Quantity Accepted" column on the face of this order has been: ☐ inspected, ☐ accepted, ☐ received by me and conforms to contract. Items listed below have been rejected for the reasons indicated.

SHIPMENT NUMBER	PARTIAL / FINAL		DATE RECEIVED	SIGNATURE OF AUTHORIZED U.S. GOV'T REP.	DATE
TOTAL CONTAINERS		GROSS WEIGHT	RECEIVED AT	TITLE	

REPORT OF REJECTIONS

ITEM NO.	SUPPLIES OR SERVICES	UNIT	QUANTITY REJECTED	REASON FOR REJECTION

ORDER FOR SUPPLIES OR SERVICES
SCHEDULE - CONTINUATION

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

DATE OF ORDER	CONTRACT NO.	ORDER NO.
11/27/2006	DTMA8C05018	PCS18W07010

ITEM NO. (a)	SUPPLIES OR SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	(CAPE GIBSON) *CLIN 0201AE; PROJECT NO. PCS GIB07 2013A* *PRWRSM07066*					
0001	Cost reimbursable items (see Attachment J-9) individually funded via task order ~~Base year 2, Ship group 18, Ship 1 (CAPE GIBSON)~~ CLIN 0201AE; PROJECT NO. PCS GIB07 2013A Other Reimbursable The purpose of this project is to provide for other reimbursable per the ship manager's contract in support of NAVY TRAINING. *Delivery Date* 09/30/2007 Reference Requisition: PRWRSM07066	1.00	LOT	10,000.000	10,000.00	

TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17i) ⇒ $10,000.00