

ORDER FOR SUPPLIES OR SERVICES

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

1. DATE OF ORDER 09/07/2007	2. CONTRACT NO. (If any) DTMA8C05019	6. SHIP TO: No Contacts Identified		
3. ORDER NO. CLS19S07022	4. REQUISITION/REFERENCE NO. PR SAR070624	a. NAME OF CONSIGNEE DOT/Maritime Administration, South Atlantic Region		
5. ISSUING OFFICE (Address correspondence to) DOT/Maritime Administration, SAR Acquisition Office of Acquisition, MRG-7200 7737 Hampton Boulevard, Building 4D, Room 211 Norfolk VA 23505		b. STREET ADDRESS WRIGHT		
		c. CITY	d. STATE	e. ZIP CODE

7. TO: a. NAME OF CONTRACTOR	f. SHIP VIA
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b. COMPANY NAME Crowley Liner Services, Inc.		8. TYPE OF ORDER		
c. STREET ADDRESS 9487 Regency Square Blvd,		<input type="checkbox"/> a. PURCHASE	<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 Jacksonville	e. STATE FL	f. ZIP CODE 32225-8126	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 2007 - - X4303 - 998 - 22 - MIS0 - 0 - 0000 - 000000 - 70 - 076698 - 22 - MIS0 - 25432 - 6100 - 6600 -	10. REQUISITIONING OFFICE DOT/Maritime Administration, South Atlantic Region
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11. BUSINESS CLASSIFICATION (Check appropriate box(es)) <input type="checkbox"/> a. SMALL <input checked="" type="checkbox"/> b. OTHER THAN SMALL <input type="checkbox"/> c. DISADVANTAGED <input type="checkbox"/> d. WOMEN-OWNED
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12. F.O.B. POINT Destination	14. GOVERNMENT B/L NO.	15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date) 11/30/2007	16. DISCOUNT TERMS 10 days % 20 days % 30 days % days %
13. PLACE OF 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: Jennifer Fallis					
	a. NAME DOT/ Enterprise Services Center (ESC) OFO/FAA, Oklahoma City				\$90,000.00	17(i) GRAND TOTAL
	b. STREET ADDRESS (or P.O. Box) MARAD A/P SAR Invoices Branch, AMZ-150 PO Box 25710,					
c. CITY Oklahoma City		d. STATE OK	e. ZIP CODE 73125			

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

PAGE NO.
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IMPORTANT: Mark all packages and papers with contract and/or order numbers.

DATE OF ORDER 09/07/2007	CONTRACT NO. DTMA8C05019	ORDER NO. CLS19S07022
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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>CLIN 0301AE WRIGHT</p> <p>USMC SPONSOR FURNISHINGS AND M&R (PROJECT CLS-WRI-07-5001)</p> <p>Ship Manager is authorized to procure the following furnishings and make the following repairs as requested by Sponsor:</p> <p>USMC identified furniture: Cargo Lashing Gear: Lighting in #6 cargohold: Marines Urinal Piping: Marine Reefer boxes Repairs Troop House Curtains Replace Marine Galley Door Fwd</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>11/30/2007</td> <td>09/05/2007</td> <td>11/30/2007</td> </tr> </table> <p>Reference Requisition: PRSAR070624</p>	<i>Delivery Date</i>	<i>Start Date</i>	<i>End Date</i>	11/30/2007	09/05/2007	11/30/2007	1.00	JOB	90,000.000	90,000.00	
<i>Delivery Date</i>	<i>Start Date</i>	<i>End Date</i>										
11/30/2007	09/05/2007	11/30/2007										

TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17i) ⇒ \$90,000.00