ORDER FOR SUPPLIES OR SERVICES

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

1. DATE OF ORDER: 11/06/2006
2. CONTRACT NO. *(If any)*: DTMA8C05005
3. ORDER NO.: IAS05S07007
4. REQUISITION/REFERENCE NO.: PRSAR070079
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

6. SHIP TO: No Contacts Identified

a. NAME OF CONSIGNEE
DOT/Maritime Administration, South Atlantic Region

b. STREET ADDRESS
FLICKERTAIL STATE

c. CITY | d. STATE | e. ZIP CODE

7. TO:

a. NAME OF CONTRACTOR

b. COMPANY NAME
Interocean American Shipping

c. STREET ADDRESS
221 LAUREL RD STE 300

d. CITY **Voorhees** | e. STATE **NJ** | f. ZIP CODE **08043-8302**

f. SHIP VIA

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
- - X4303 - 9 - 07 - 98 - - 7100 - 22MIS0 - - 254S - - 703 - - - -

10. REQUISITIONING OFFICE
DOT/Maritime Administration, South Atlantic 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)*

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: Jennifer Fallis
a. NAME
DOT/Maritime Administration, South Atlantic Region

b. STREET ADDRESS *(or P.O. Box)*
7737 Hampton Blvd., Bldg. 4D, Room 211

c. CITY: Norfolk | d. STATE: VA | e. ZIP CODE: 23505

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

17(i) GRAND TOTAL: $22,000.00

22. UNITED STATES OF AMERICA BY ***(Signature)*** Susan P. Barba

23. NAME *(Typed)*
Susan P. Barba
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.
11/06/2006	DTMA8C05005	IAS05S07007

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					
0001	CLIN 0202AE FLICKERTAIL The purpose of this Project (RMS Project IAS-FLK07-2013A) is to provide support for 6th Battalion personnel on the Flickertail State at Cheatham Annex. This work, identified below, is not part of the ship's approved business plan. Support may consist of, but not limited to crew wages including overtime, relocating ship, the hiring of contractors, technical representatives, acceptance of work, crew transportation, overtime, local travel, regulatory fees, pier side services and utilities, fuel, lubricants, maintenance, and preservation. All completed work shall be in compliance with applicable standards as set forth in the Ship Manager contract at C.6.3, Compliance Documents and subparagraphs therto, at the time of acceptance. Ref Req No: prsar070079 *Start Date* 10/01/2006 *End Date* 09/30/2007 Reference Requisition: PRSAR070079	1.00	JOB	22,000.000	22,000.00	

TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17i) ⇒ $22,000.00