

ORDER FOR SUPPLIES OR SERVICES

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

1. DATE OF ORDER 11/02/2008	2. CONTRACT NO. (If any) DTMA8C05003	6. SHIP TO: No Contacts Identified		
3. ORDER NO. KEY03S09001		4. REQUISITION/REFERENCE NO. PR SAR090075		
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		a. NAME OF CONSIGNEE DOT/Maritime Administration, South Atlantic Region		
		b. STREET ADDRESS CAPE RACE		
		c. CITY	d. STATE	e. ZIP CODE

7. TO: a. NAME OF CONTRACTOR	f. SHIP VIA
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b. COMPANY NAME KEYSTONE SHIPPING SERVICES INC		8. TYPE OF ORDER		
c. STREET ADDRESS SUITE 600, ONE BALA PLAZA EAST		<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 BALA CYNWYD	e. STATE PA	f. ZIP CODE 19004-1496		

9. ACCOUNTING AND APPROPRIATION DATA 2009 - - X4303 - RRF 931 - 40 - RAC0 - 0 - 0000 - 000000 - 70 - 096131 - 40 - RAC0 - 25432 - 6100 - 6600 -	10. REQUISITIONING OFFICE DOT/Maritime Administration, South Atlantic Region
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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	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: Gloria Fullerton				
	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(i) GRAND TOTAL \$48,904.00

22. UNITED STATES OF AMERICA BY (Signature) 	23. NAME (Typed) Milton G. Spears TITLE: CONTRACTING/ORDERING OFFICER
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**ORDER FOR SUPPLIES OR SERVICES
SCHEDULE - CONTINUATION**

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

DATE OF ORDER 11/02/2008	CONTRACT NO. DTMA8C05003	ORDER NO. KEY03S09001
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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 0401AE - RACE</p> <p>The purpose of this project (RMS PROJECT KEY-RAC09-8005A) is to provide layberth security services in accordance with the Vessel Security Plan. In addition, this project includes "heightened security" directed by the MARAD COTR in accordance with Ship Manager Contract at 4.3.3. 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 subparagraph thereto, at the time of acceptance.</p> <p align="center"><i>Start Date</i> <i>End Date</i> 10/01/2008 01/31/2009</p> <p>Reference Requisition: PRSAR090075</p>	1.00	LOT	48,904.000	48,904.00	

TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17i) ⇒ \$48,904.00