ORDER FOR SUPPLIES OR SERVICES

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

1. DATE OF ORDER: 01/02/2009
2. CONTRACT NO. *(If any)*: N033C055340
3. ORDER NO.: MLL40A09045
4. REQUISITION/REFERENCE NO.: PRSAR090192
5. ISSUING OFFICE *(Address correspondence to)*:
Military Sealift Command, N1033/PM5
914 Charles Morris Court, S.E.
Washington DC 20398-5540

6. SHIP TO: Channing Jones
a. NAME OF CONSIGNEE: DOT/Maritime Administration, MAR-614
b. STREET ADDRESS: 1200 New Jersey Ave., SE MAR380, W28-201
c. CITY: Washington
d. STATE: DC
e. ZIP CODE: 20590
f. SHIP VIA

7. TO:
a. NAME OF CONTRACTOR
b. COMPANY NAME: **MAERSK LINE, LIMITED**
c. STREET ADDRESS: **ONE COMMERCIAL PL 20TH FL**
d. CITY: **NORFOLK**
e. STATE: **VA**
f. ZIP CODE: **23510-2126**

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
2009 - - X4303 - RRF 931 - 40 - MIS0 - 0 - 0000 - 000000 - 70 - 096131 - 40 - MIS0 - 25103 - 6100 - 6600 -

10. REQUISITIONING OFFICE
DOT/Maritime Administration, South Atlantic Region

11. BUSINESS CLASSIFICATION *(Check appropriate box(es))*
☐ a. SMALL ☑ b. OTHER THAN SMALL ☐ c. DISADVANTAGED ☐ g. SERVICE-DISABLED VETERAN-OWNED
☐ d. WOMEN-OWNED ☐ e. HUBZone ☐ f. EMERGING SMALL BUSINESS

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

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

17(i) GRAND TOTAL: $29,000.00

22. UNITED STATES OF AMERICA BY *(Signature)*

23. NAME *(Typed)*: Eileen M. Williams
TITLE: CONTRACTING/ORDERING OFFICER

SUPPLEMENTAL INVOICING INFORMATION

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		DATE RECEIVED	SIGNATURE OF AUTHORIZED U.S. GOV'T REP.	DATE
	FINAL				
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.
01/02/2009	N033C055340	MLL40A09045

ITEM NO. (a)	SUPPLIES OR SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
0001	MLL NS-5 Interface Reimburse the Ship Manager for technical support to develop and install software at the ship managers office to interface NS-5 to the Ship Managers accounting program. All completed work shall be in compliance with applicable standards shall be evaluated in accordance with applicable standards as set forth in the Ship Manager contract at J.2 (including general standards, government specific standards, non-consensus standards, and voluntary consensus standards) at the time of acceptance. *Start Date* 01/02/2009 *End Date* 03/31/2009 Reference Requisition: PRSAR090192	1.00	JOB	29,000.000	29,000.00	

TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17i) ⇒ $29,000.00