

ORDER FOR SUPPLIES OR SERVICES

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

1. DATE OF ORDER 06/09/2010		2. CONTRACT NO. (If any)		6. SHIP TO:			
3. ORDER NO. DTMA1V10306		4. REQUISITION/REFERENCE NO. PR300100101		a. NAME OF CONSIGNEE No Shipping Information			
5. ISSUING OFFICE (Address correspondence to) DOT/Maritime Administration, MAR-380 1200 New Jersey Ave SE, MAR380 W26-429 Washington DC 20590				b. STREET ADDRESS			
7. TO:		c. CITY		d. STATE	e. ZIP CODE		
a. NAME OF CONTRACTOR		f. SHIP VIA					
b. COMPANY NAME VSAT-Systems, LLC		8. TYPE OF ORDER					
c. STREET ADDRESS 1520 S Arlington Street		<input checked="" 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 Akron	e. STATE OH	f. ZIP CODE 44306		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 2010 - - 701017 - 50HQ11T - E0 - 0030 - 00 - 000134014 - - - - - 31111 - 6100 - 6600 -				10. REQUISITIONING OFFICE DOT/Maritime Administration, MAR-340			
11. BUSINESS CLASSIFICATION (Check appropriate box(es))					12. F.O.B. POINT		
<input checked="" type="checkbox"/> a. SMALL <input type="checkbox"/> b. OTHER THAN SMALL <input type="checkbox"/> c. DISADVANTAGED <input type="checkbox"/> g. SERVICE-DISABLED VETERAN-OWNED <input type="checkbox"/> d. WOMEN-OWNED <input type="checkbox"/> e. HUBZone <input type="checkbox"/> f. EMERGING SMALL BUSINESS					Destination		
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			06/09/2011			

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: Leah MacHugh						
	a. NAME DOT/ Enterprise Services Center (ESC) OFO/FAA, Oklahoma City						
	b. STREET ADDRESS (or P.O. Box) MARAD A/P Branch, AMZ-150 PO Box 25710						
c. CITY Oklahoma City			d. STATE OK	e. ZIP CODE 73125		\$1,000.00	17(i) GRAND TOTAL

22. UNITED STATES OF AMERICA BY (Signature) <i>Katina Barham</i>			23. NAME (Typed) Katina Barham 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 06/09/2010	CONTRACT NO.	ORDER NO. DTMA1V10306
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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>Service Calls</p> <p>Satelite Equipment Service calls support at Piney Point location at: 45353 St George's Avenue, Piney Point, MD 20674</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>06/09/2011</td> <td>06/09/2010</td> <td>06/09/2011</td> </tr> </table> <p>Reference Requisition: PR300100101</p>	<i>Delivery Date</i>	<i>Start Date</i>	<i>End Date</i>	06/09/2011	06/09/2010	06/09/2011	1.00	HR	1,000.000	1,000.00	
<i>Delivery Date</i>	<i>Start Date</i>	<i>End Date</i>										
06/09/2011	06/09/2010	06/09/2011										

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