

**ORDER FOR SUPPLIES OR SERVICES**

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

1. DATE OF ORDER 04/29/2009	2. CONTRACT NO. (If any)	6. SHIP TO: Bruce Markman		
3. ORDER NO. BPC09000008/0001	4. REQUISITION/REFERENCE NO. PR500090018	a. NAME OF CONSIGNEE DOT/Maritime Administration, MAR-380		
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 1200 New Jersey Ave SE, MAR380 W26-429		
		c. CITY Washington	d. STATE DC	e. ZIP CODE 20590
7. TO:		f. SHIP VIA		
a. NAME OF CONTRACTOR		8. TYPE OF ORDER		
b. COMPANY NAME Defense Contract Audit Agency		<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.		
c. STREET ADDRESS 8725 John J Kingman Road, Suite 2135		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.		
d. CITY Fort Belvoir	e. STATE VA	f. ZIP CODE 22060-6219		
9. ACCOUNTING AND APPROPRIATION DATA 2009 - 70 - X1750 - RA08089 - 2G - HCSV - - 0000 - 151000 - - 25105 - - - - -		10. REQUISITIONING OFFICE DOT/Maritime Administration, MAR-380		

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)
	<b>Modification</b>					
	<b>SEE LINE ITEM DETAIL</b>					

SEE BILLING INSTRUCTIONS ON REVERSE	18. SHIPPING POINT	19. GROSS SHIPPING WEIGHT	20. INVOICE NO.		17(h) TOT. (Cont. pages)
	21. MAIL INVOICE TO: Tammy Curnett DOT/ Enterprise Services Center (ESC) OFO/FAA, Oklahoma MARAD A/P Branch, AMZ-150 PO Box 25710  Oklahoma City OK 73125		17(J) NEW TOT. \$19,280.90	17(K) PREV. TOT. \$33,293.76	17(i) MOD TOTAL (\$14,012.86)

22. UNITED STATES OF AMERICA BY (Signature)	23. NAME (Typed) Bruce Markman TITLE: CONTRACTING/ORDERING OFFICER
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<b>Line Item Summary</b>	<b>Document Number</b> BPC09000008/0001	<b>Title</b> Port of Guam Expansion Audit	<b>Page</b> 2 of 2
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**Total Funding:** \$19,280.90

FYs	Fund	Budget Org	Sub	Object Class	Sub	Program	Cost Org	Sub	Proj/Job No.	Sub	Reporting Category
<b>Division</b>		<b>Closed FYs</b>		<b>Cancelled Fund</b>							

Line Item Number	Description	(Start date to End date)	Quantity	Unit of Issue	Unit Price	Total Cost
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The purpose of this modification is to close the BPA Call BPC09000008 and deobligate the remaining funds.

A. Change the price of the Call from \$33,293.76 by \$14,012.86 to read \$19,280.90.

B. Deobligate remaining funds in the amount of \$14,012.86.

0001	Port of Guam Expansion Program Audits	(04/29/2009 to 05/13/2009)	0.00	JOB	(\$14,012.86)	(\$14,012.86)
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Change in Funding, Unit Price

1. Provide an audit report of the cost proposal submitted by Integrated Concepts and Research Corporation, Shaw Environmental and Infrastructure, Inc., EA Science and Technology, Inc., and AECOM USA, Inc. for the Port of Guam Expansion Program project.
2. Discuss and attempt to resolve questioned costs with MARAD Contracting Officer (CO) prior to preparing final reports of audit.
3. Review the contractor's proposal for Cost Realism. Emphasis should be given to Direct Labor Categories, Labor Rates, Labor Hours, Indirect Rates, Profit rate, Proposed Tax, and Other Direct Costs.
4. Discuss audit findings with the contractor.
5. Prepare the report of audit.

(See attached IAO)

Ref Req No: PR500090018

Funding Information:

2009 - 70 - X1750 - RA08089 - 2G - HCSV - - 0000 - 151000 -  
 - 25105 - - - - -  
 -14,012.86

**Previous Total:** \$33,293.76  
**Modification Total:** (\$14,012.86)  
**Grand Total:** \$19,280.90  
 (Includes Discounts)