

**ORDER FOR SUPPLIES OR SERVICES**

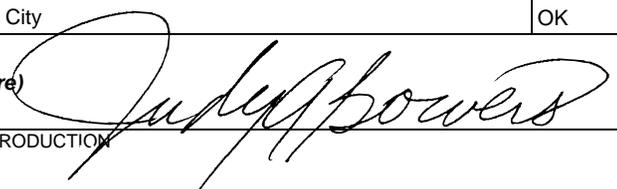
**IMPORTANT: Mark all packages and papers with contract and/or order numbers.**

1. DATE OF ORDER 07/14/2010		2. CONTRACT NO. (If any)		6. SHIP TO: Dr. Joshua Smith		
3. ORDER NO. DTMA1V10378		4. REQUISITION/REFERENCE NO. PRMMA100325		a. NAME OF CONSIGNEE U.S. MERCHANT MARINE ACADEMY		
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 Museum 300 Steamboat Road		
c. CITY King's Point		d. STATE NY	e. ZIP CODE 11024-1699			
7. TO: a. NAME OF CONTRACTOR Jerome Morris				f. SHIP VIA		
b. COMPANY NAME Marine Models				8. TYPE OF ORDER		
c. STREET ADDRESS P. O. Box 517,15 Seven Tree Lane				<input checked="" type="checkbox"/> 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.		<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 Union		e. STATE ME	f. ZIP CODE 04862-0517			
9. ACCOUNTING AND APPROPRIATION DATA 2010 - 70 - X85030 - 006GBMU - SE - 0010 - 00 - 0041800 - - - - - 25215 - 6100 - 6600 -				10. REQUISITIONING OFFICE U.S. MERCHANT MARINE ACADEMY		
11. BUSINESS CLASSIFICATION (Check appropriate box(es)) <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					12. F.O.B. POINT 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					

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>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)  17(i) GRAND TOTAL
	21. MAIL INVOICE TO: Christy Remington				
	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		\$3,000.00

22. UNITED STATES OF AMERICA BY (Signature) 		23. NAME (Typed) Judy A. Bowers 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 07/14/2010	CONTRACT NO.	ORDER NO. DTMA1V10378
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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><i>GB10-054</i></p> <p>Repair Ship Models Contractor will repair shipmodels at the AMMM per the attached Statement of Work FREE shipping</p> <p>Reference Requisition: PRMMA100325</p>	1.00	LOT	3,000.000	3,000.00	

**TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17i) ⇒ \$3,000.00**