

ORDER FOR SUPPLIES OR SERVICES

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

1. DATE OF ORDER 02/14/2011		2. CONTRACT NO. (If any) DTMA1H05006		6. SHIP TO: a. NAME OF CONSIGNEE U.S. DOT/Maritime Administration	
3. ORDER NO. GA5IAS2011017		4. REQUISITION/REFERENCE NO. MA-PR617-20110230		b. STREET ADDRESS Pacific Division Operations 201 MISSION STREET SUITE 1800	
5. ISSUING OFFICE (Address correspondence to) U.S. DOT/ Maritime Administration Pacific Div. Acquisition Office MAR 380-4 201 Mission Street Suite 1800 San Francisco CA 94105				c. CITY SAN FRANCISCO	
				d. STATE CA	e. ZIP CODE 94105
7. TO: Mitch Walker a. NAME OF CONTRACTOR Interocean American Shipping Corporation b. COMPANY NAME				f. SHIP VIA	
c. STREET ADDRESS 302 Harper Dr Ste 200				8. TYPE OF ORDER <input type="checkbox"/> a. PURCHASE <input checked="" type="checkbox"/> b. DELIVERY	
d. CITY Moorestown				e. STATE NJ	
				f. ZIP CODE 08057-4701	
9. ACCOUNTING AND APPROPRIATION DATA See Schedule				10. REQUISITIONING OFFICE U.S. DOT/Maritime Administration	

11. BUSINESS CLASSIFICATION (Check appropriate box(es)) <input type="checkbox"/> a. SMALL <input type="checkbox"/> d. WOMEN-OWNED					<input checked="" type="checkbox"/> b. OTHER THAN SMALL		<input type="checkbox"/> c. DISADVANTAGED		<input type="checkbox"/> g. SERVICE-DISABLED VETERAN-OWNED		12. F.O.B. POINT Destination	
					<input type="checkbox"/> e. HUBZone		<input type="checkbox"/> f. EMERGING SMALL BUSINESS					
13. PLACE OF a. INSPECTION Destination				b. ACCEPTANCE Destination		14. GOVERNMENT B/L NO.		15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date) 09/30/2011		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)
	PCL OTHER REIMBURSABLES IAS-PCL11-2013A MA-PR617-20110230 Continued ...					

SEE BILLING INSTRUCTIONS ON REVERSE	18. SHIPPING POINT		19. GROSS SHIPPING WEIGHT		20. INVOICE NO.		17(h) TOTAL (Cont. pages)	
	21. MAIL INVOICE TO: a. NAME MARAD A/P INVOICES							\$50,000.00
	b. STREET ADDRESS (or P.O. Box) 6500 SOUTH MACARTHUR BLVD						\$50,000.00	17(i) GRAND TOTAL
	c. CITY OKLAHOMA CITY		d. STATE OK	e. ZIP CODE 73169				

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

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DATE OF ORDER 02/14/2011	CONTRACT NO. DTMA1H05006	ORDER NO. GA5IAS2011017
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ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
0008	<p>Admin Office: U. S. DOT Maritime Administration Pacific Div. Acquisition Office MAR 380.4 201 Mission Street Suite 1800 San Francisco CA 94105</p> <p>Mark For: MV PACIFIC COLLECTOR DOT/MARITIME ADMINISTRATION, DPO 5555 N. CHANNEL AVENUE ATTN: DENNIS GLEAVY, COTR PORTLAND OR 97217-7655</p> <p>Accounting Info: 70XS121710.2011.81112PZPAC.1112000000.25431. 61006600/701112PZPAC000 Period of Performance: 02/14/2011 to 09/30/2011</p> <p>COST REIMBURSABLE FY11 OPER Other Reimbursables A PROJECT IAS-PCL11-2013A</p> <p>The purpose of this project is to provide for other reimbursables as per the ship managers; contract in support of the MDA System Integration.</p> <p>Ship manager to provide reimbursable labor, equipment and material to support NAVAIR / MDA with the integration of the TTS and associated auxiliary systems to the vessel. Support to be provided to NAVAIR / MDA on an as-needed basis as requested by NAVAIR / MDA.</p> <p>The approved business plan budget for this project is \$100,000.</p> <p>Project to be incrementally funded throughout the fiscal year.</p> <p>The total amount of award: \$50,000.00. The obligation for this award is shown in box 17(i).</p>	1	LO	50,000.00	50,000.00	

TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))

\$50,000.00