								<u>.</u>			0S
				PPLIES OR SERV	CES						OF PAGES
	i	packages and papers with o	contract and/or or	der numbers.				0.0000.77		1	22
1 DATE OF OF		2. CONTRACT NO (If any) CPSC-N-10-0105			a, NAME	OF CO	ONSIGNEE	6 SHIP TO	J		
02/23/20	10 4				-						
3 ORDER NO.			4. REQUISITION/F		CONSU	JMER	PRODUCT SA	FETY COMM	ISSION		
CONSUMER	R PRODU PROCURE ST WEST	ss correspondence to) ICT SAFETY COMMI MENT SERVICES 'HWY	SSION			F H EAS	AZARD & INJ T WEST HIGH 4-26		SYS		
BETHESDA		814	_		BETHESDA MD 208				e. ZIP CODE 20814		
7. TO DR B	ROBERT	MCCURREN			f. Ship V	IA					·
a. NAME OF CO EMERGENC		R ICIANS MEDICAL	GROUP								
b COMPANY N	IAME				X a. PU	RCHA		TYPE OF ORDER	b. DE		 /
c. STREET ADI	DRESS				REFERE						
2000 GRE		D									
SUITE 30	0				1				subject to	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.	
							ne following on the tern pecified on both sides		issued su		
			e. STATE	f. ZIP CODE	this order	and or	, the attached sheet, if				20814 /ERY ling instructions on the delivery order is tructions contained on of this form and is ct to the terms and
ANN ARBO	R		MI	48105	any, inclui	ding de	elivery as indicated.				
		ROPRIATION DATA					NING OFFICE				
See Sche	_	TION (Check appropriate bo	v(ec))		CONSU	MER	PRODUCT SAI	12. F.O.B. POIN			
a SMA		X b OTHER TH						Destinat			
d. WOM	IEN-OWNED	e. HUBZone		f. EMERGING SMALI	-	V	ISABLED ETERAN-				
		13. PLACE OF		BUSINESS 14. GOVERNMENT B/L NO)	0	WNED		16 0		
a INSPECTION Destinat		b. ACCEPTANCE Destinatio					ON OR BEFORE (1 Multiple				
				17. SCHEDULE (See	reverse for	Rejec	tions)				_
ITEM NO.		SUPPLIES O			QUANTITY		UNIT				
(a)		SUFFLIES U			(c)	(d)	(e)		(f)		
	BASIC (AL ID# 6V67203 CONTRACT: 10/01 ued									17/6
	18. SHIPPI	NG POINT		19. GROSS SHIPPING W	ÆIGHT		20. INVOICE NO				TOT
	a. NAME			JCT SAFETY COM	MTSSTA				007 00		
SEE BILLING						/14		\$87,	987.00		
INSTRUCTIONS ON REVERSE	b STREET (or P O Bo		EAST WEST	NANCIAL SERVI 9 HWY	ICES					GR	
	c. CITY BET	HESDA			d STA		e. ZIP CODE 20814	\$87,	987.00		
22 UNITED AMERICA	STATES OF A BY (Signa	ture)	ris (3.	Kend	ir		23. NAME (Typed) Doris B. TITLE: CONTRACTI		FFICER		
		PRODUCTION							OPTIO		RM 347 (Rev 4/200
PREVIOUS EDITI	ON NOT USA	BLE							Presc	nbed by GS	AVFAR 48 CFR 53 213(

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ORDER FOR SUPPLIES OR SERVICES SCHEDULE - CONTINUATION

PAGE NO

2		

	T: Mark all packages and papers with contract and/or order numbers.					
DATE OF OR	DER CONTRACT NO. 010 CPSC-N-10-0105			ORDER NO) .	
ITEM NO	SUPPLIES/SERVICES	QUANTITY			AMOUNT	QUANTITY
(a)	(b)	(c)	(d)	(e)	(f)	(g)
	Admin Office: CONSUMER PRODUCT SAFETY COMMISSION DIV OF PROCUREMENT SERVICES 4330 EAST WEST HWY ROOM 517 BETHESDA MD 20814 Period of Performance: 10/01/2009 to 09/30/2010					
0001	ESTIMATED QUANTITY NEISS SURVEILLANCE REPORTS AND SPECIAL SURVEY REPORTS IN ACCORDANCE WITH THE ATTACHED STATEMENT OF WORK. MINIMUM QTY: 3,250	13000	EA	6.53	84,890.00	
	MAXIMUM QTY: 16,250 Accounting Info: 10-PS-EXFM-4310-11179-252E Funded: \$84,890.00					
002	ESTIMATED QUANTITY SUPPLEMENTAL/SPECIAL STUDY REPORTS IN ACCORDANCE WITH THE ATTACHED STATEMENT OF WORK.	1900	EA	1.63	3,097.00	
	MINIMUM QTY: 190 MAXIMUM QTY: 1,900 Accounting Info: 10-PS-EXFM-4310-11179-252E Funded: \$3,097.00					
003	OPTION PERIOD: 10/01/10 THRU 09/30/11 ESTIMATED QUANTITY NEISS SURVEILLANCE REPORTS AND SPECIAL SURVEY REPORTS. MINIMUM QTY: 3,250 MAXIMUM QTY: 16,250 Amount: \$84,890.00(Option Line Item) 10/01/2010 Continued	13000	EA	6.53	0.00	
	TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))				\$87,987.00	

ORDER FOR SUPPLIES OR SERVICES SCHEDULE - CONTINUATION

PAGE NO

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23/2010 CPSC-N-10-0105 I NO. SUPPLIES/SERVICES QUANTITY UNIT UNIT AMOUNT ORDERED PRICE	QUANTITY UNIT UNIT AMOUNT ORDERED PRICE	10 CPSC-N-10-0105 SUPPLIES/SERVICES	DATE OF ORD
a) (b) ORDERED (c) PRICE (f) (f) (c) (d) (e) (f)	ORDERED PRICE		ITEM NO.
a) (b) (c) (d) (e) (f) Accounting Info:			
		(d)	(a)
<pre>Funded: \$0.00 \$84,890.00 (Subject to Availability of Funds) \$0.00 (Subject to Availability of Funds) Period of Performance: 10/01/2010 to 09/30/2011 ESTIMATED QUANTITY 190 MAXIMUM QTY: 1,900 Amount: \$3,097.00 (Option Line Item) 10/01/2010 Accounting Info: 11-PS-EXFM-4310-11179-252E Funded: \$0.00 (Subject to Availability of Funds) \$0.00 (Subject to Availability of Funds) Period of Performance: 10/01/2010 to 09/30/2011 The total amount of award: \$175,974.00. The obligation for this award is shown in box 17(1).</pre>	0 1900 EA 1.63 0.00 0 .00. The	Accounting Info: 11-PS-EXFM-4310-11179-2523 Funded: \$0.00 \$84,890.00 (Subject to Availability of Funds) \$0.00 (Subject to Availability of Funds) Period of Performance: 10/01/2010 to 09/30/2011 ESTIMATED QUANTITY SUPPLEMENTAL/SPECIAL STUDY REPORTS. MINIMUM QTY: 190 MAXIMUM QTY: 1,900 Amount: \$3,097.00 (Option Line Item) 10/01/2010 Accounting Info: 11-PS-EXFM-4310-11179-252E Funded: \$0.00 \$3,097.00 (Subject to Availability of Funds) \$0.00 (Subject to Availability of Funds) Period of Performance: 10/01/2010 to 09/30/2011 The total amount of award: \$175,974.00. The obligation for this award is shown in box	(a) 004