

ORDER FOR SUPPLIES OR SERVICES

PAGE 1 OF 5

1. CONTRACT/PURCH. ORDER/ AGREEMENT NO. W91CRB-08-D-0036	2. DELIVERY ORDER/ CALL NO. 0015	3. DATE OF ORDER/ CALL (YYYYMMDD) 2011 Feb 22	4. REQ./PURCH. REQUEST NO. W23MWP10076002	5. PRIORITY
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6. ISSUED BY US ARMY RD&COM ACQ CTR - W91CRB 4118 SUSQUEHANNA AVENUE ABERDEEN PROVING GROUND MD 21005-3013	CODE W91CRB	7. ADMINISTERED BY (if other than 6) SEE ITEM 6	CODE	8. DELIVERY FOR <input checked="" type="checkbox"/> DESTINATION <input type="checkbox"/> OTHER (See Schedule if other)
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9. CONTRACTOR NETWORK MANAGEMENT RESOURCES, INC 201 DEFENSE HIGHWAY ANNAPOLIS MD 21401-8843	CODE 1JQS1	FACILITY 1JQS1	10. DELIVER TO FOB POINT BY (Date) (YYYYMMDD) SEE SCHEDULE	11. MARK IF BUSINESS IS <input type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISADVANTAGED <input type="checkbox"/> WOMEN-OWNED
12. DISCOUNT TERMS Net 30 Days				13. MAIL INVOICES TO THE ADDRESS IN BLOCK See item 15

14. SHIP TO SEE SCHEDULE	CODE	15. PAYMENT WILL BE MADE BY DFAS ROME - HQ0250 325 BROOKS ROAD VPAY SOMARDS ROME NY 13441-4527	CODE HQ0250	MARK ALL PACKAGES AND PAPERS WITH IDENTIFICATION NUMBERS IN BLOCKS 1 AND 2.
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16. TYPE OF ORDER	DELIVERY/ CALL	<input checked="" type="checkbox"/>	This delivery order/call is issued on another Government agency or in accordance with and subject to terms and conditions of above numbered contract. Reference your quote dated Furnish the following on terms specified herein. REF:
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ACCEPTANCE. THE CONTRACTOR HEREBY ACCEPTS THE OFFER REPRESENTED BY THE NUMBERED PURCHASE ORDER AS IT MAY PREVIOUSLY HAVE BEEN OR IS NOW MODIFIED, SUBJECT TO ALL OF THE TERMS AND CONDITIONS SET FORTH, AND AGREES TO PERFORM THE SAME.

NAME OF CONTRACTOR <i>NMR Consulting</i>	SIGNATURE <i>Amber K. Reed</i>	TYPED NAME AND TITLE Amber K. Reed Administrator	DATE SIGNED (YYYYMMDD) 2/23/11
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If this box is marked, supplier must sign Acceptance and return the following number of copies:

17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE
See Schedule

18. ITEM NO.	19. SCHEDULE OF SUPPLIES/ SERVICES	20. QUANTITY ORDERED/ ACCEPTED*	21. UNIT	22. UNIT PRICE	23. AMOUNT
SEE SCHEDULE					

* If quantity accepted by the Government is same as quantity ordered, indicate by X. If different, enter actual quantity accepted below quantity ordered and encircle.	24. UNITED STATES OF AMERICA TEL: 410-306-2677 EMAIL: terry.l.mcbaeus.us.army.mil BY: Terry L. McBee	<i>Terry L. McBee</i> CONTRACTING / ORDERING OFFICER	25. TOTAL \$168,885.86
			26. DIFFERENCES

27a. QUANTITY IN COLUMN 20 HAS BEEN
 INSPECTED RECEIVED ACCEPTED, AND CONFORMS TO THE CONTRACT EXCEPT AS NOTED

b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE	c. DATE (YYYYMMDD)	d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE
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e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE	28. SHIP NO.	29. DO VOUCHER NO.	30. INITIALS
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f. TELEPHONE NUMBER	g. E-MAIL ADDRESS	<input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL	32. PAID BY	33. AMOUNT VERIFIED CORRECT FOR
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36. I certify this account is correct and proper for payment.

a. DATE (YYYYMMDD)	b. SIGNATURE AND TITLE OF CERTIFYING OFFICER	31. PAYMENT <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL	34. CHECK NUMBER
			35. BILL OF LADING NO.

37. RECEIVED AT	38. RECEIVED BY	39. DATE RECEIVED (YYYYMMDD)	40. TOTAL CONTAINERS	41. S/R ACCOUNT NO.	42. S/R VOUCHER NO.
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NAME AND ADDRESS			12. DISCOUNT TERMS Net 30 Days	13. MAIL INVOICES TO THE ADDRESS IN BLOCK See Item 15

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NAME OF CONTRACTOR	SIGNATURE	TYPED NAME AND TITLE	DATE SIGNED (YYYYMMDD)
<input type="checkbox"/> If this box is marked, supplier must sign Acceptance and return the following number of copies:			

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SEE SCHEDULE					

* If quantity accepted by the Government is same as quantity ordered, indicate by X. If different, enter actual quantity accepted below quantity ordered and encircle.	24. UNITED STATES OF AMERICA TEL: 410-306-2677 EMAIL: terry.l.mcbee@us.army.mil BY: Terry L. McBee	<i>Terry L. McBee</i> CONTRACTING / ORDERING OFFICER	25. TOTAL \$168,885.66	26. DIFFERENCES
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a. DATE (YYYYMMDD)	b. SIGNATURE AND TITLE OF CERTIFYING OFFICER			

37. RECEIVED AT	38. RECEIVED BY	39. DATE RECEIVED (YYYYMMDD)	40. TOTAL CONTAINERS	41. S/R ACCOUNT NO.	42. S/R VOUCHER NO.
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Section B - Supplies or Services and Prices

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0001		1	Dollars, U.S.	\$166,885.66	\$166,885.66
	AFPH Conference Support FFP Support the audio-visual and network requirements for the Armed Forces Public Health conference scheduled to be held in Hampton, Virginia, March 2011 FOB: Destination PURCHASE REQUEST NUMBER: W23MWP1007S002				
				NET AMT	\$166,885.66
	ACRN AA CIN: W23MWP1007S0020001				\$166,885.66

Section E - Inspection and Acceptance

INSPECTION AND ACCEPTANCE TERMS

Supplies/services will be inspected/accepted at:

CLIN	INSPECT AT	INSPECT BY	ACCEPT AT	ACCEPT BY
0001	Destination	Government	Destination	Government

Section F - Deliveries or Performance

DELIVERY INFORMATION

CLIN	DELIVERY DATE	QUANTITY	SHIP TO ADDRESS	UIC
0001	POP 07-JAN-2011 TO 15-APR-2011	N/A	N/A FOB: Destination	

Section G - Contract Administration Data

ACCOUNTING AND APPROPRIATION DATA

AA: 9710130188107474248477055G000256873CM32W23MWP1007S00217GFHPS18001

AMOUNT: \$166,885.66

CIN W23MWP1007S0020001: \$166,885.66