| NRC FORM 662 U.S. NUCLEAR REGULATORY COMMISSION (10-2000)  AWARD OF INTERAGENCY AGREEMENT   |             |                      | 1 DATE OF ISSUE 2 AGREEMENT NUMBER 3 MOD NO  1 AGENCY LOCATOR NO. 5. B & R NUMBER 6. JOB CODE |  |              |         |                      |
|---|-------------|----------------------|---|--|--------------|---------|----------------------|
|   |             |                      | 31000001  | 1  | 1555         |         | 6. JOB CODE<br>L1335 |
|   |             |                      | 7 BOC   |  | NT IDENTIFIC |         |                      |
|   |             |                      | 25314 KQ 70020185   |  |              |         |                      |
| 9 ISSUED BY   |             |                      | 10 NAME AND ADDRESS (   |  |              |         |                      |
| U.S. NUCLEAR REGULATORY COMMISSION<br>WASHINGTON, DC 20555-0001   |             |                      | U.S. Office of Personnel Management/EMDC/MDC 101 Lowe Drive                                   |  |              |         |                      |
| PROJECT MANAGER OFFICE  |             |                      | Shepherdstown,  | WV 254   | 43           |         |                      |
| Constance Schum EDO   |             |                      |   | _  |              |         |                      |
| TELEPHONE NUMBER  | FACSIMILE N |                      | TELEPHONE NUMBER  | FACSIMILE NUMBER                               |              |         |                      |
| 301-415-1717 301-415-2162   |             |                      | 304-870-801   | 304-870-8001<br>12 AGREEMENT PERFORMANCE PERIO |              |         |                      |
| EDO Contract Support  |             |                      |   | BEGIN  | 13/2002      | END     | 14/2002              |
|   | 13.         | OBLIGATION AVAIL     | ABILITY PROVIDED BY   |  | 13/2002      | . 00/   | 14/2002              |
| A THE ACTION  |             |                      | NOILITT TROTIDED D  | •  |              | 19      | OX.60                |
| A. THIS ACTION     B. TOTAL PLACED PRIOR TO   | THIS ACT    | ION WITH THE BERE    |   |  |              | 1,760   |                      |
| UNDER THIS JOB CODE F   |             |                      |   | )N   | \$           | ··      | 0                    |
| C. TOTAL ORDERS TO DATE   | FOR THIS    | JOB CODE FOR THIS    | FISCAL YEAR   |  | \$           |         |                      |
| D TOTAL ORDERS TO DATE  | FOR THIS    | AGREEMENT            |   |  | \$           |         | 0                    |
| 14. ATTA  | CHMENTS     |                      | 15. SECURITY  |  |              |         |                      |
| THE FOLLOWING ATTACHMENTS ARE MADE A PART OF THIS AGREEMENT   |             |                      | WORK ON THIS AGREEMENT INVOLVES CLASSIFIED INFORMATION  |  |              |         |                      |
| STATEMENT OF WORK  ADDITIONAL TERMS AND CONDITIONS  |             |                      | WORK ON THIS AGREEMENT INVOLVES SENSITIVE UNCLASSIFIED INFORMATION                            |  |              |         |                      |
| ✓ OTHER (Specify) See #17. Remarks below  |             |                      | WORK ON THIS AGREEMENT IS UNCLASSIFIED  |  |              |         |                      |
|   |             |                      | AND NOT SENSIT  | IVE  |              |         |                      |
| 16. FEE BILLABLE UNDER 10   |             |                      | NO (4)  |  |              |         |                      |
| 17 REMARKS  | (a)         | 3-15                 | 8, G  | 0,0  |              |         | i                    |
| Services include meeting spa  | ice, lodgin | g, meals (6/13 lunch | /dinner, 6/14 breakfa   | ast/lünch                                      | ) and supp   | ort ser | vices (AV            |
| equipment, Internet access computers, long distance telephone usage, copies, faxes, and supplies for 8 participants. Services provided by/conducted at the Eastern Mgmt Development Ctr in Shepherdstown, WV. |             |                      |   |  | , wv.        |         |                      |
| 18. AUTI  | HORITY TO   | ENTER INTO INTERA    | GENCY AGREEMENT   | (Check o                                       | nly one)     |         |                      |
| ENERGY REORGANIZATION ACT OF 1974, AS AMENDED   |             |                      | TI OTHER (Specify)  |  |              |         |                      |
| THE ECONOMY ACT OF 1932   |             |                      | 5 USC 1304 & USC 4101-4119  |  |              |         |                      |
| THE CLINGER-COHEN ACT OF 1996 5 USC 1304 & USC 4101-4119  |             |                      |   |  |              |         |                      |
| 19. ADVANCE PAYMENT IS NOT AUTHORIZED  20. ESTIMATED COST FOR FULL PER  |             |                      | S AUTHORIZED (Requires approval by Director, DAF/OCFO)  |  |              |         |                      |
| FY 2002 FY  | STIMATED    | FY                   | FY FORMANCE OF THIS   | FY   | EN I         | DTAL    |                      |
| \$ <del>1,760</del> 1902 \$   | 0           | \$ 0                 | \$ 0 \$   | ·  | \$           |         | 760                  |
| 21. CERTIFICATION OF FUNDS  |             |                      |   |  |              |         |                      |
| This certifies that funds in the amount cited in Block 13.A. are available in the current fiscal year allotment for work authorized by this agreement.  |             |                      |   |  |              |         |                      |
| FUNDS CERTIFICATION OF ICIAL (Typed Name)  Virginia S. Bolding Lee Markette Signature  Virginia S. Bolding Lee Markette Signature   |             |                      |   |  |              |         |                      |
| 22. SIGNATURES; (, / / )  |             |                      |   |  |              |         |                      |
| NRC ISSUING AUTHORITY (Typed Name and Title)  Mary H. Mace, Contracting Officer   |             |                      | SIGNATURE   | NINFE  | DATE         | 6/11/   | /02                  |
| SERVICING AGENCY OFFICIAL/DESIGNEE (Typed Name and Title) Gary E. Gibson, Project Officer   |             |                      | SIGNATURE   | W  | DATE         |         | 3-02                 |
| uary L. arbson, Projec  | LL UITIC    | er"                  | 1X MUUTON   | سيسي   |              | 15-15   | 7 U U                |

NRC FORM 662 (10-2000)
TEMPLATE-ADMOC

, T. .

PRINTED ON RECYCLED PAPER

This form was designed using InForms
#Dmo2

| inc contacts.   |   |  |  |
|---|---|--|--|
| TECHNCAL:   |   |  |  |
| FULL NAME   | ADDRESS   |  |  |
| TELEPHONE NUMBER  | _   |  |  |
| , rest notice notice in   |   |  |  |
| ADMINISTRATIVE:   |   |  |  |
| FULL NAME   | ADDRESS   |  |  |
| Constance Schum   | U.S. NRC  |  |  |
| TELEPHONE NUMBER  | Washington, D.C. 20555  |  |  |
| 301-415-1717  | Transmigeon, Diei 20000   |  |  |
|   |   |  |  |
| OTHER AGENCY'S CONTACTS:  |   |  |  |
| TECHNCAL:   |   |  |  |
| FULL NAME   | ADDRESS   |  |  |
| TELEPHONE NUMBER  | _   |  |  |
| TELEPHONE NOMBER  |   |  |  |
| A DEBINICED A TIVE  |   |  |  |
| ADMINISTRATIVE:   | ADDRESS   |  |  |
| Gary E. Gibson  | US OPM/EMDC/MDC   |  |  |
| TELEPHONE NUMBER  |   |  |  |
| 304-870-8017  | 101 Lowe Drive, Shepherdstown, WV 25443   |  |  |
|   | agreement, forward to NRC on a (check one):  other basis, an original and three copies of Standard Form   |  |  |
| 1081 in accordance with the Treasury the OPAC system. Send reimburseme  | Fiscal Requirements Manual, Bulletin No. 78-09, or, if possible, bill monthly througent requests to the following address:  |  |  |
| Financial Operations Branch Mail Stop: T-9 E2 Division of Accounting and Finance Office of the Chief Financial Officer U.S. Nuclear Regulatory Commission Washington, DC 20555-0001 |   |  |  |
| Any NRC funds remaining unexpended otherwise notified by NRC.   | d at the end of a fiscal year may be carried over into future fiscal years unless   |  |  |
| REPORTING REQUIREMENTS: Substatus reports on a (check one):   | mit reports to the NRC in accordance with the statement of work. Submit financial   |  |  |
| monthly quarterly   | other basis. These reports shall contain a brief letter   |  |  |
| applicable: (1) staff effort; (2) travel; (3) category: (a) costs for the previous mother remainder of the NRC obligated fur  | penditure of NRC funds. This report shall address the following categories, as ) equipment and supplies; and (4) subcontract costs. Each report shall include by nth; (b) cumulative costs and uncosted obligations to date; and (c) projections for nds. The first monthly report shall provide the initial projections, and subsequent ojections or indicate "no change in the cost and uncosted expenditure projection." |  |  |

NEC CONTACTS.

Submit these reports to the NRC Technical Contact by the 20th day of the month following the reporting period.

**TERMINATING THE AGREEMENT:** This agreement may be unilaterally terminated by either party generally upon 30 days' written notice to the other party. NRC will pay its share of any project expenses up to the termination date. Any expenses incurred in terminating this agreement will be paid by the party terminating the agreement. Any unexpended funds shall be returned to the NRC.

| NRC-02-01   | U.S. Office of Pr  | ersonnel Management   | OPAR HER Only                      |  |  |
|---|--|---|------------------------------------|--|--|
| 1. FY:<br>02  |  | t or Advance of Funds<br>reen Federal Agencles  | 2. Estimated Amount:<br>\$1,760.00 |  |  |
| 3. REQUESTING AGENCY  |  | 4 PERFORMING AGENCY   |                                    |  |  |
| 3a Name and Address:<br>Nuclear Regulator Commission<br>11555 Rockville Pike<br>Rockville, MD 20852   |  | 4a. Name and Address: U.S. Office of Personnel Management/EMDC/MDC 101 Lowe Drive Shepherdstown, WV 25443 |                                    |  |  |
| 3b. Program Office Contact Name and<br>Constance Schum, 301-415-1717  | Telephone Number:  | 4b. Program Office Contact Name and Telephone Number: Gary E. Gibson 304/870-8017                         |                                    |  |  |
| 3c. Finance Office Contact Name and T   | elephone Number;   | 4c. Finance Office Contact Name and Telephone Number: Janet White 304/870-8013                            |                                    |  |  |
| 5. Services to be Performed (attach additional page(s) if necessary):  Meeting space, lodging, meals, breaks and support services (including A/V equipment, internet access computers, long distance telephone usage, copies, faxes, and supplies) for 8 overnight and one day participants for the night of June 13, 2002. Meals will include lunch and dinner on June 13, 2002 and continue through lunch on June 14, 2002. These services will be provided by and conducted at the Eastern Management Development Center in Shepherdstown, WV.  The Clarion hotel's Jefferson Board Room will be used as the meeting room. |  |   |                                    |  |  |
| 6. Statutory Authorization:   | 5 USC 1304 & USC 4101-4  | 1119  |                                    |  |  |
| 7. Correspondence Attached: (Condition  | ns of Agreement)   |   |                                    |  |  |
| 8. Period of Agreement Effective  | 10/01/01   | Expiration 09/30/02   |                                    |  |  |
| 9. Method of Payment:   | X - OPAC/SIBAC (Require  | es ALC, See Blocks 12b and 13b)  Other (Explain):   | [VINO GOO] 0801 32                 |  |  |
| 10. Timing of Payment:  | Reimbursement (At Actu   |   | A -4                               |  |  |
| 11. Timing of Billing:  |  |   |                                    |  |  |
| 11. Illiang or county.  | Monthly Other (Explain): on  | Quarterly   | On Completion                      |  |  |
| 12 FINANCING (REQUESTING AGENCY)  |  | 13 FINANCING (PERFORMING  | AGENCYI                            |  |  |
| Appropriation Title:  | COURT IN THE PROPERTY OF THE P | Appropriation Symbol Appropriation Title:   | N/A<br>N/A                         |  |  |
| ☐ Salaries and Expenses ☐ Trust   |  | □ Salarles and Expenses □ Trust   |                                    |  |  |
| ☐ Mulli/No Year ☐   |  | X Mulli/No Year   |                                    |  |  |
| b. Agency Location Code (ALC):  | , y  | b. Agency Location Code (ALC); 24-00-0001   |                                    |  |  |
| c. Agency Accounting Datan  |  | c Index Code/Project Code/Function Code/Object Class:<br>MN410B   |                                    |  |  |
| 14 AUTHORIZED SIGNATURE (REQUESTING   | <b>ACENCY</b>  | 15. AUJUIDRIZED SIGNAMIRE PL  | FRETTIMING AGENCY)                 |  |  |
| Exteres C Sellen  | 10/5/02  | Prograffinnativa.   | La 6/3/02                          |  |  |
| Typed/Printed Name and Title:<br>Constance Schum<br>Program Assistant, EDO  | , ,  | Typed/Printed Name and Title:<br>Janet White, Administrative Of<br>OEMD/EMDC                              | ,                                  |  |  |
| Contracting signature,  Aday H A Ale  | Date: / / / / / / / / / / / / / / / / / / /  | Finance Sangure:  | P 0 2 / 02                         |  |  |
| Typed/Printed Name and Tiple:  Mary H. Mace, Contracting  | Officer  | Typed/Printed Name and Title Ann Ludwig, Custom Coordinator OFAD  |                                    |  |  |

| NRC FORM 662 U.S. NUI<br>(10-2000)   |   | 2 AGREEMENT                       | NUMBER                      | 13 MOD NO     |                  |  |
|--|---|-----------------------------------|-----------------------------|---------------|------------------|--|
|  |   | 4 AGENCY LOCATOR NO               | <u>ELX)-0</u>               | <u> </u>      |                  |  |
| AWARD OF INTERA  | 31000001  | 5 B&R NUMBER                      |                             | 6 JOB CODE    |                  |  |
| İ  | 7. BOC  | B. DOCUMENT ID                    | -547105<br>DENTIFICATION NO | L1335         |                  |  |
| 9 ISSUED BY  | 7. BOC 253A B. DOCUMENT IDENTIFICATION NUMBER RQ 70020185 |                                   |                             |               |                  |  |
| U.S. NUCLEAR REGUL   | 10. NAME AND ADDRESS OF SERVICING AGENCY                  |                                   |                             |               |                  |  |
| WASHINGTON, DC 20:   | U.S. Office of Personnel Management/EMDC/MDC              |                                   |                             |               |                  |  |
|  | 101 Lowe Drive  |                                   |                             |               |                  |  |
| PROJECT MANAGER OFFICE   |   | Shepherdstown, V                  | WV 25443                    |               |                  |  |
| Constance Schum TELEPHONE NUMBER   | EDO   |                                   |                             |               |                  |  |
| 301-415-1717   | FACSIMILE NUMBER  | TELEPHONE NUMBER FACSIMILE NUMBER |                             |               |                  |  |
| 11. JOB CODE TITLE   | 301-415-2162  | 304-870-8017 304-870-8001         |                             |               | 3001             |  |
| EDO Contract Support   |   | 12. AGREEI<br>BEGIN               | MENT PERFORMA               | ANCE PERIOD   |                  |  |
|  |   |                                   | 06/13/2                     |               | /14/2002         |  |
|  | 13. OBLIGATION AVAIL                                      | ABILITY PROVIDED BY               | 00/10/2                     | 16            | 14/2002          |  |
| A. THIS ACTION   |   |                                   |                             | (CO) 19       | <del>03'00</del> |  |
|  |   |                                   | \$                          |               | 1,760°           |  |
| B. TOTAL PLACED PRIOR TO<br>UNDER THIS JOB CODE F  | ORMING ORGANIZATION                                       | IZATION \$                        |                             | 0             |                  |  |
| C. TOTAL ORDERS TO DATE  | FISCAL YEAR   | \$                                |                             |               |                  |  |
| D. TOTAL ORDERS TO DATE  |   |                                   | \$                          |               | 0                |  |
| 14. ATTA   | CHMENTS   |                                   | 15. SECURITY                |               |                  |  |
| THE FOLLOWING ATTACHMENTS ARE N  | MADE A PART OF THIS AGREEMENT                             | MODE ON THE AC                    | D55145150000000             |               |                  |  |
| STATEMENT OF WORK  | WORK ON THIS AG CLASSIFIED INFOR                          | HEEMENT INVO                      | OLVES                       | i             |                  |  |
| ADDITIONAL TERMS AND CO  | WORK ON THIS AG<br>SENSITIVE UNCLAS                       | REEMENT INVO                      | OLVES                       |               |                  |  |
| OTHER (Specify) See #17  | WORK ON THIS AGREEMENT IS UNCLASSIFIED AND NOT SENSITIVE  |                                   |                             |               |                  |  |
|  |   | AND NOT SENSITIV                  | <u> </u>                    |               |                  |  |
| 16. FEE BILLABLE UNDER 10 (  | _   | ☐ NO                              |                             |               |                  |  |
| 17. REMARKS  | 613-15  | Ø O`                              | (4)                         |               |                  |  |
| Services include meeting spa   | ce, lodging, meals (6/13 lunch                            | /dinner, 6/14 breakfas            | st/Iunch) and               | l support ser | vices (AV        |  |
| equipment, Internet access computers, long distance telephone usage, copies, faxes, and supplies for 8 participants. Services provided by/conducted at the Eastern Mgmt Development Ctr in Shepherdstown, WV.  |   |                                   |                             |               |                  |  |
| participalits. Services provid   | led by/conducted at the Easte                             | ern Mgmt Developmen               | at Ctr in She               | pherdstown,   | WV.              |  |
| 18. AUTH   | IORITY TO ENTER INTO INTERA                               | GENCY AGREEMENT (                 | Check only or               | ne)           |                  |  |
| ENERGY RECOGNIZATION ACT OF 1974, AS AMENDED   |   |                                   |                             |               |                  |  |
| THE ECONOMY ACT OF 1932  THE CLINGER-COHEN ACT OF 1996  5 USC 1304 & USC 4101-4119   |   |                                   |                             |               |                  |  |
|  | 1 1330  | 3 05C 1304 & 0                    | 3C 4101-411                 | .9            |                  |  |
| 9. ADVANCE PAYMENT IS NOT AUTHORIZED IS AUTHORIZED (Requires approval by Director, DAF/OCFO)   |   |                                   |                             | OCFO)         |                  |  |
| 20. ESTIMATED COST FOR FULL PERFORMANCE OF THIS AGREEMENT  |   |                                   |                             |               |                  |  |
| 11 2002 FY   | FY  | FY                                | FY                          | TOTAL         |                  |  |
| - 1,00 f.tom   \$  | İΨ  | \$ 0 .  \$                        | 0                           | \$ 1,         | 760              |  |
| 21. CERTIFICATION OF FUNDS  This certifies that funds in the amount cited in Block 13.A. are available in the current fiscal year allotment for work authorized by this agreement.   |   |                                   |                             |               |                  |  |
| FUNDS CERTIFICATION OFFICIAL (Typed Name)  |   |                                   |                             |               |                  |  |
| Virginia S. Bolding Celen Muller Am Colon Muller 10/0/02   |   |                                   |                             |               |                  |  |
| NRC ISSUING AUTHORITY (Typed Name and Title)  22. SIGNATURES;    SIGNATURE   S |   |                                   |                             |               |                  |  |
| Mary H Mace Contracting Offices  |   |                                   |                             |               |                  |  |
| SERVICING AGENCY OFFICIAL/DESIGNE  | SIGNATURE/  | yuce                              | 6/11/<br>DATE               | 02            |                  |  |
|  | 7/  | 1 1                               | UNIE                        | 1             |                  |  |

| MAC CONTACTS:                                |  |
|--|--|
| TECHNCAL:                                    |  |
| FULL NAME                                    | ADDRESS  |
|  |  |
| TELEPHONE NUMBER                             |  |
|  | •  |
| ADMINISTRATIVE:                              |  |
| FULL NAME                                    | ADDRESS  |
| Constance Schum                              | U.S. NRC   |
| TELEPHONE NUMBER                             |  |
| 301-415-1717                                 | Washington, D.C. 20555   |
|  |  |
| OTHER AGENCY'S CONTACTS:                     |  |
| TECHNCAL:                                    |  |
| FULL NAME                                    | I ADDOCTOR   |
|  | ADDRESS  |
| TELEPHONE NUMBER                             | -  |
|  |  |
| ADMINION                                     |  |
| ADMINISTRATIVE:                              |  |
|  | ADDRESS  |
| Gary E. Gibson TELEPHONE NUMBER              | US OPM/EMDC/MDC  |
| · ·  | 101 Lowe Drive, Shepherdstown, WV 25443  |
| 304-870-8017                                 | ,  |
| BILLING INFORMATION:                         |  |
|  |  |
| To receive reimbursement under this ag       | reement, forward to NRC on a (check one):  |
|  | committee to the on a (check one):   |
| monthly quarterly ot                         | her basis, an original and three copies of Standard Form   |
| 1081 in accordance with the Torrest          |  |
| the OPAC system. Sond roimburgers            | scal Requirements Manual, Bulletin No. 78-09, or, if possible, bill monthly through  |
| the OPAC system. Send reimbursemen           | requests to the following address:   |
| Financial Operations Branch                  |  |
| Mail Stop: T-9 E2                            |  |
| Division of Accounting and Finance           |  |
| Office of the Chief Financial Officer        |  |
| U.S. Nuclear Regulatory Commission           |  |
| Washington, DC 20555-0001                    |  |
| And NEG ( )                                  |  |
| Any INFO funds remaining unexpended a        | at the end of a fiscal year may be carried over into future fiscal years unless  |
| otherwise notified by NRC.                   | Tallio Hodal yours diffeess  |
| REPORTING REQUIREMENTS. Colonia              | the state of the s |
| status reports on a (check one):             | t reports to the NRC in accordance with the statement of work. Submit financial  |
|  |  |
| monthly quarterly oth                        | basis. These reports shall contain a brief letter  |
|  |  |
| status report which summarizes the expe      | enditure of NRC funds. This report shall address the following categories, as  |
| category: (a) scate for the provider (3) e   | quipment and supplies; and (4) subcontract costs. Each report shall include by   |
| the remainder of the NDC obligated to        | h; (b) cumulative costs and uncosted obligations to date; and (c) projections for  |
| reports shall either indicate revised areing | s. The first monthly report shall provide the initial projections, and subsequent  |
| 1 common indicate revised project            | ctions or indicate "no change in the cost and uncosted expenditure projection."  |
| Submit these reports to the NDC Table        | 10.  |

Submit these reports to the NRC Technical Contact by the 20th day of the month following the reporting period.

TERMINATING THE AGREEMENT: This agreement may be unilaterally terminated by either party generally upon 30 days' written notice to the other party. NRC will pay its share of any project expenses up to the termination date. Any expenses incurred in terminating this agreement will be paid by the party terminating the agreement. Any unexpended funds shall be returned to the NRC.

|  |   |  | 70.00  |  |  |
|--|---|--|--|--|--|
| NRC-02-01  | U. S. Office of P   | ersonnel Management  | OPAA IIra Onko   |  |  |
| 1. FY: 02  | Agreement Betw  | or Advance of Funds<br>reen Federal Agencles   | 2. Estimated Amount:<br>\$1,760.00   |  |  |
| 3. REQUESTING AGENCY   | 1   | 4. PERFORMING AGENCY   |  |  |  |
| 3a. Name and Address: Nuclear Regulator Commission 11555 Rockyille Pike Rockyille, MD 20852  |   | 4a. Name and Address: U.S. Office of Personnel Management/EMDC/MDC 101 Lowe Drive Shepherdstown, WV 25443  |  |  |  |
| 3b. Program Office Contact Name and<br>Constance Schum, 301-415-1717   | Telephone Number:   | 4b. Program Office Confact Name and Telephone Number:<br>Gary E. Gibson 304/870-8017   |  |  |  |
| 3c. Finance Office Confact Name and T  | elephone Number:  | 4c. Finance Office Contact Name and Telephone Number:  Janet White 304/870-8013  |  |  |  |
| 5. Services to be Performed (attach add<br>Meeting space, lodging, meals, breaks of<br>telephone usage, copies, faxes, and sup<br>include lunch and dinner on June 13, 200<br>conducted at the Eastern Management<br>The Clarlon hotel's Jefferson Board Room  | and support services (incl<br>pikes) for 8 overnight and<br>22 and continue through I<br>Development Center in SI | luding A/V equipment, internet of the day participants for the nightened to the second the second to the second the second to th | access computers, long distance<br>tht of June 13, 2002. Meals will<br>prvices will be provided by and |  |  |
| 6. Statutory Authorization:  | 5 USC 1304 & USC 4101-4   | 119  |  |  |  |
| 7. Correspondence Attached: (Condition   | s of Agreement)   |  |  |  |  |
| 8. Period of Agreement Effective   | 10/01/01  | Expiration 09/30/02  |  |  |  |
| 9. Method of Payment:  | X - OPAC/SIBAC (Require   | es ALC, See Blocks 12b and 13b)  | (vino dod) 0801 42   |  |  |
| 10. Timing of Payment:   | Reimbursement (At Actu  | Other (Explain):   |  |  |  |
| 11. Timing of Billing:   | Monthly   |  | Advance  |  |  |
| and the state of t | Other (Explain): on   | Quarterly  | On Completion  |  |  |
| 12 FINANCING (REQUESTING AGENCY)   |   | 13 FINANCING (PERFORMING   | AGENCY   |  |  |
| Appropriation Title:   |   | Appropriation timbel Appropriation Title:  | N/A<br>N/A   |  |  |
| Salaries and Expenses Trust  |   | ☐ Salaries and Expenses  | □ Trusf  |  |  |
| Mulli/No Year  |   | X Mudi/No Your   |  |  |  |
| b. Agency Location Code (ALC):   | 8   | b. Agency Location Code (ALC<br>24-00-0001   | );<br>   |  |  |
| c. Agency Accounting Datan   |   | c. Index Code/Project Code/F<br>MN4108   | unclion Code/Object Class:   |  |  |
| 14 AUTHORIZED SIGNATURE (REQUESTING  | ACENCY .  | 15 AUTOBIZED SIGNAZORE PE  | BETTRAING AGENCY   |  |  |
| Program Gonati ira.  | 6/5/02  | Tays in  | 6/3/02   |  |  |
| Typed/Printed Name and Title:<br>Constance Schum<br>Program Assistant, EDO   |   | Typed/Printed Name and Title:<br>Janet White, Administrative Off<br>OEMD/EMDC  |  |  |  |
| Contracting Signature:  May Male   | Date: ( )   | Finance Ignature:  LUCLU L   | Dorte! /3/02   |  |  |
| Mary H. Mace, Contracting Officer  |   | Typed/Printed Name and Title Ann Ludwig, Custom Coording OEMD  | tor  |  |  |