

ORDER FOR SUPPLIES OR SERVICES

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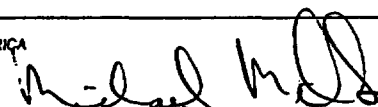
IMPORTANT: Mark all packages and papers with contract and/or order numbers.

BPA NO.

1. DATE OF ORDER 12-12-2003		2. CONTRACT NO. (if any)		6. SHIP TO:	
3. ORDER NO. DR-10-03-166, MOD. 1		4. REQUISITION/REFERENCE NO. ADM-03-166		a. NAME OF CONSIGNEE U.S. Nuclear Regulatory Commission Attn: Ms. Susan Cusseaux	
5. ISSUING OFFICE (Address correspondence to) U.S. Nuclear Regulatory Commission Div of Contracts Two White Flint North - MS T-7-I-2 Washington, DC 20555				b. STREET ADDRESS Mail Stop T-6E27	
7. TO:				c. CITY Washington	d. STATE DC
a. NAME OF CONTRACTOR Sure Fit Security				e. ZIP CODE 20555	
b. COMPANY NAME Attn: Mr. Jim Mullins				f. SHIP VIA	
c. STREET ADDRESS 8213 Fenton Street				8. TYPE OF ORDER	
d. CITY Silver Spring				<input checked="" type="checkbox"/> a. PURCHASE ORDER <input type="checkbox"/> b. DELIVERY/TASK ORDER	
e. STATE MD				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.	
f. ZIP CODE 20912				Except for billing instructions on the reverse, this delivery/task 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.	
9. ACCOUNTING AND APPROPRIATION DATA Job Code: D2362, B&R No. 44015-511304 BOC: 252A, X0200				10. REQUISITIONING OFFICE ADM/DFS/SB	
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"/> d. WOMEN-OWNED					
12. F.O.B. POINT Origin		14. GOVERNMENT B/L NO.		15. DELIVER TO F.O.B. POINT ON OR BEFORE As Previously Stated	
13. PLACE OF		16. DISCOUNT TERMS Net 30			
a. INSPECTION		b. ACCEPTANCE			
		Mr. Michael Mills 301-415-6550			

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)
	Refer to Purchase Order No. DR-10-03-166 dated 5-30-2003 for locksmith services and modify as follows: Increase the obligated amount by \$15,000.00 from \$15,000.00 to \$30,000.00. Previous Obligated Amount: \$15,000.00 Increased Amount: \$15,000.00 Total Obligated Amount: \$30,000.00 All other terms and conditions remain the same.					

SEE BILLING INSTRUCTIONS ON REVERSE	18. SHIPPING POINT		19. GROSS SHIPPING WEIGHT		20. INVOICE NO.		SUBTOTAL	
	21. MAIL INVOICE TO:							17(h) TOTAL (Cont. pages)
	a. NAME U.S. Nuclear Regulatory Commission Payment Team, Mail Stop T-9-H-4							
	b. STREET ADDRESS (or P.O. Box) Attn: (insert contract or order number)							17(i). GRAND TOTAL
c. CITY Washington		d. STATE DC	e. ZIP CODE 20555		Obligated \$15,000.00			
22. UNITED STATES OF AMERICA BY (Signature) 					23. NAME (Typed) Michael Mills			
TITLE: CONTRACTING/ORDERING OFFICER								

OPTIONAL FORM 347 (6/95)

TEMPLATE - ADM001

ADM002