

ORDER FOR SUPPLIES OR SERVICES

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

BPA NO.

1. DATE OF ORDER FEB 15 2005		2. CONTRACT NO. (If any) GS28F2037D		6. SHIP TO:	
3. ORDER NO. DR-10-05-431		MODIFICATION NO.		a. NAME OF CONSIGNEE U.S. Nuclear Regulatory Commission ATTN: Warehouse	
4. REQUISITION/REFERENCE NO. ADM-10-05-431		5. ISSUING OFFICE (Address correspondence to) U.S. Nuclear Regulatory Commission Div. of Contracts Attn: Sharlene McCubbin Mail Stop T-7-I-2 Washington, DC 20555		b. STREET ADDRESS 5008 Boiling Brook Parkway Receiving Hours: M-F 7:30am - 3:45 pm	
7. TO:		c. CITY Rockville		d. STATE MD	e. ZIP CODE 20852
NAME OF CONTRACTOR NUCRAFT FURNITURE CO 5151 W RIVER DR NE COMSTOCK PARK MI 493211893		f. SHIP VIA		8. TYPE OF ORDER <input type="checkbox"/> a. PURCHASE ORDER <input checked="" type="checkbox"/> b. DELIVERY/TASK ORDER	
9. ACCOUNTING AND APPROPRIATION DATA 31X020C B&R: 540155A2303 BOC: 3121 JCN: D2318 OBLIGATE: \$30,576.00		\$30,576.00		10. REQUISITIONING OFFICE ADM Office of Administration	
11. BUSINESS CLASSIFICATION (Check appropriate box(es)) <input type="checkbox"/> a. SMALL <input checked="" type="checkbox"/> b. OTHER THAN SMALL <input type="checkbox"/> c. DISADVANTAGED <input type="checkbox"/> d. WOMEN-OWNED					
12. F.O.B. POINT Destination		14. GOVERNMENT B/L NO.		15. DELIVER TO F.O.B. POINT ON OR BEFORE 60-90 DAYS	
13. PLACE OF		16. DISCOUNT TERMS NET 30			
a. INSPECTION		b. ACCEPTANCE		FOR INFORMATION CALL: (No collect calls) Sharlene McCubbin 301-415-6565	

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)
	The contractor shall deliver the following office furniture to NRC's warehouse as listed in block 6, in accordance with Nucraft Furniture quote 04031603 dated 2/14/2005.					
1	Two Drawer Lateral File, Item No. 7110-00-NRC-00155 Model X1512, G-13 Oak				\$2,598.00	
2	Three Drawer Lateral File, Item No. 7110-00-NRC-00145 Model X1513, G-13 Oak				\$6,948.00	
3	Four Drawer Lateral File, Item No. 7110-00-NRC-00135 Model X1514, G-13 Oak Shipping and Handling is included in the above price. Project Officer: Bruce Ridgely, (301) 415-2161 GSA Schedule No. GS-28F-2037D DUNS NO. 006012736				\$21,030.00	

SEE BILLING INSTRUCTIONS ON REVERSE	18. SHIPPING POINT		19. GROSS SHIPPING WEIGHT		20. INVOICE NO.		\$30,576.00	SUBTOTAL
	21. MAIL INVOICE TO:							
	a. NAME U.S. Nuclear Regulatory Commission Payment Team, Mail Stop T-9-II-4							
	b. STREET ADDRESS (or P.O. Box) Attn: DR-10-05-431							
c. CITY Washington		d. STATE DC		e. ZIP CODE 20555		\$30,576.00		17(h) TOTAL (Cont. pages)
22. UNITED STATES OF AMERICA BY (Signature) <i>Mary H. Mace</i>						23. NAME (Typed) Mary H. Mace Contracting Officer TITLE: CONTRACTING/ORDERING OFFICER		

TEMPLATE - ADM001

SISP Review Complete

OPTIONAL FORM 347 (8/95)
ADM002

SUPPLEMENTAL INVOICING INFORMATION

If desired, this order (or copy thereof) may be used by the Contractor as the Contractor's invoice, instead of a separate invoice, provided the following statement, (signed and dated) is on (or attached to) the order: "Payment is requested in the amount of \$_____. No other invoice will be submitted." However, if the Contractor wishes to submit an invoice, the following information must be provided: contract number (if any), order number, item number(s), description of supplies or services, sizes, quantities, unit prices, and extended totals. Prepaid shipping costs will be indicated as a separate item on the invoice. Where shipping costs exceed \$10 (except for parcel post), the billing must be supported by a bill of lading or receipt. When several orders are invoiced to an ordering activity during the same billing period, consolidated periodic billings are encouraged.

RECEIVING REPORT

Quantity in the "Quantity Accepted" column on the face of this order has been: Inspected, accepted, received by me and conforms to contract. Items listed below have been rejected for the reasons indicated.

Table with columns: SHIPMENT NUMBER (PARTIAL/FINAL), DATE RECEIVED, SIGNATURE OF AUTHORIZED U.S. GOV'T REP., DATE, TOTAL CONTAINERS, GROSS WEIGHT, RECEIVED AT, TITLE.

REPORT OF REJECTIONS

Table with columns: ITEM NO., SUPPLIES OR SERVICES, UNIT, QUANTITY REJECTED, REASON FOR REJECTION.