

**ORDER FOR SUPPLIES OR SERVICES**

**IMPORTANT: Mark all packages and papers with contract and/or order numbers.** BPA NO.

|  |  |   |  |  |  |
|--|--|---|--|--|--|
| 1. DATE OF ORDER<br>08-23-2005   |  | 2. CONTRACT NO. (if any)                                |  | 6. SHIP TO:  |  |
| 3. ORDER NO<br>DR-04-04-086  |  | MODIFICATION NO.<br>M001                                |  | 4. REQUISITION/REFERENCE NO.<br>RES-04-086   |  |
| 5. ISSUING OFFICE (Address correspondence to)<br>U.S. Nuclear Regulatory Commission<br>Div. of Contracts<br>Attn: Mr. Michael Mills<br>Mail Stop T-7-I-2<br>Washington, DC 20555 |  |   |  | a. NAME OF CONSIGNEE<br>U.S. Nuclear Regulatory Commission<br>Attn: Ms. Harriet Karaginnis   |  |
|  |  |   |  | b. STREET ADDRESS<br>Mail Stop T-9 F31   |  |
|  |  |   |  | c. CITY<br>Washington  |  |
|  |  |   |  | d. STATE<br>DC   |  |
|  |  |   |  | e. ZIP CODE<br>20555   |  |
| 7. TO:   |  |   |  | f. SHIP VIA  |  |
| a. NAME OF CONTRACTOR<br>NORTH AMERICAN TECHNICAL CENTER   |  |   |  | 8. TYPE OF ORDER   |  |
| b. COMPANY NAME  |  |   |  | <input checked="" type="checkbox"/> a. PURCHASE <input type="checkbox"/> b. DELIVERY<br>Reference your _____<br>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. |  |
| c. STREET ADDRESS<br>103 S. GOODWIN AVE. NPRE  |  |   |  | 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.   |  |
| d. CITY<br>URBANA  |  | e. STATE<br>IL  |  | f. ZIP CODE<br>618012901   |  |
| 9. ACCOUNTING AND APPROPRIATION DATA<br>56015111207, Y6059, 252A, 31X0200.560<br>FFS No. RES-C05-053   |  |   |  | 10. REQUISITIONING OFFICE RES<br>\$33,000.00   |  |
| 11. BUSINESS CLASSIFICATION (Check appropriate box(es))  |  |   |  | 12. F.O.B. POINT<br>N/A  |  |
| <input type="checkbox"/> a. SMALL  |  | <input checked="" type="checkbox"/> b. OTHER THAN SMALL |  | <input type="checkbox"/> g. SERVICE-DISABLED VETERAN-OWNED   |  |
| <input type="checkbox"/> d. WOMEN-OWNED  |  | <input type="checkbox"/> e. HUBZone                     |  | <input type="checkbox"/> f. EMERGING SMALL BUSINESS  |  |
| 13. PLACE OF   |  | 14. GOVERNMENT B/L NO.                                  |  | 15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date)  |  |
| a. INSPECTION  |  | b. ACCEPTANCE   |  | As Stated on Orig.   |  |
|  |  |   |  | 16. DISCOUNT TERMS<br>Net 30   |  |

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-04-04-086 dated 9/21/04, for membership fees for full participation in all North American Technical Center, Information System on Occupational Exposure research activities, technical reports and software normally available to regulatory agencies and clerical support; modify as follows:<br><br>1. Exercise Option Year 1 membership at the fixed price of \$33,000.00 and extend the period of performance from September 20, 2004 through September 19, 2006.<br><br>2. Increase the obligated amount by \$33,000.00 from \$30,000.00 to \$63,000.00<br><br>Previous Obligated Amount: \$30,000.00<br>Increased Amount: \$33,000.00<br>New Obligated Total Amount: \$63,000.00<br><br>All other terms and conditions remain the same. |                      |          |                |            |                       |

|   |  |                           |  |  |  |
|---|--|---------------------------|--|--|--|
| 18. SHIPPING POINT  |  | 19. GROSS SHIPPING WEIGHT |  | 20. INVOICE NO.  |  |
| 21. MAIL INVOICE TO:  |  |                           |  |  |  |
| a. NAME<br>U.S. Nuclear Regulatory Commission<br>Payment Team, Mail Stop T-9-H-4        |  |                           |  |  |  |
| b. STREET ADDRESS (or P.O. Box)<br>Attn: (DR-04-04-086)<br>Submit invoices in duplicate |  |                           |  |  |  |
| c. CITY<br>Washington   |  | d. STATE<br>DC            |  | e. ZIP CODE<br>20555   |  |
| 22. UNITED STATES OF AMERICA<br>BY (Signature)<br>                                      |  |                           |  | 23. NAME (Typed)<br>Michael Mills<br>TITLE: CONTRACTING/ORDERING OFFICER |  |

17(h) TOTAL (Cont. pages)

17(i) GRAND TOTAL

\$33,000.00