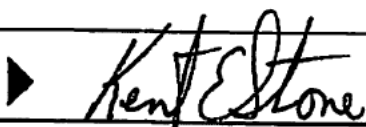


# ORDER FOR SUPPLIES OR SERVICES

PAGE OF PAGES

1 3

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

1. DATE OF ORDER 12/20/2013		2. CONTRACT NO. (If any) HHSN263201000141B		6. SHIP TO: a. NAME OF CONSIGNEE Bldg 101A, Research Triangle Park			
3. ORDER NO. HHSN27300149		4. REQUISITION/REFERENCE NO. 3227870		b. STREET ADDRESS BLDG 101A 111 TW Alexander Dr. PO Box 12233			
5. ISSUING OFFICE (Address correspondence to) National Institutes of Health National Institute of Environmental Health Sciences Research Triangle Park, NC 27709				c. CITY Research Triangle Park		d. STATE NC	e. ZIP CODE 27709
7. TO: PAIGE PECK a. NAME OF CONTRACTOR MDB INC:1108559 b. COMPANY NAME c. STREET ADDRESS 1101 CONNECTICUT AVENUE, NW SUITE 550 d. CITY WASHINGTON				f. SHIP VIA			
e. STATE DC				f. ZIP CODE 200364382			
9. ACCOUNTING AND APPROPRIATION DATA See Schedule				8. TYPE OF ORDER <input type="checkbox"/> a. PURCHASE REFERENCE YOUR:  <input checked="" type="checkbox"/> b. DELIVERY Except for billing instructions on the reverse, this delivery 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.			
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 <input type="checkbox"/> e. HUBZone <input checked="" type="checkbox"/> f. SERVICE-DISABLED <input type="checkbox"/> g. WOMEN-OWNED SMALL BUSINESS (WOSB) ELIGIBLE UNDER THE WOSB PROGRAM <input type="checkbox"/> h. EDWOSB				12. F.O.B. POINT Destination			
13. PLACE OF a. INSPECTION Destination		b. ACCEPTANCE Destination		14. GOVERNMENT B/L NO.		15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date) 12/31/2013	
						16. DISCOUNT TERMS PROMPT PAY	
17. SCHEDULE (See reverse for Rejections)							
ITEM NO. (a)	SUPPLIES OR SERVICES (b)			QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)
	GSA Contract #: GS-00F-0001S MDB: Direct Costs and Fixed Priced Administrative Fees in support of collaboration between NIEHS and Ramazzini Institute; CAN 8010789  Continued ...						
18. SHIPPING POINT		19. GROSS SHIPPING WEIGHT		20. INVOICE NO.		17(h) TOTAL (Cont. pages)	
21. MAIL INVOICE TO: a. NAME Office of Financial Management						\$150,000.00	
b. STREET ADDRESS (or P.O. Box) 2115 E Jefferson St MSC 8500 Suite 4B 432							
c. CITY Bethesda				d. STATE MD	e. ZIP CODE 20892-8500	\$150,000.00	
22. UNITED STATES OF AMERICA BY (Signature) 				23. NAME (Typed) KENT E. STONE TITLE: CONTRACTING/ORDERING OFFICER			

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OPTIONAL FORM 347 (Rev. 2/2013)  
Prescribed by GSA/FAR 48 CFR 53.213(f)

**ORDER FOR SUPPLIES OR SERVICES  
SCHEDULE - CONTINUATION**

PAGE NO

2

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DATE OF ORDER 12/20/2013  
CONTRACT NO. HHSN263201000141B

ORDER NO.  
HHSN27300149

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
1	<p>Admin Office: National Institutes of Health National Institute of Environmental Health Sciences Research Triangle Park, NC 27709 Period of Performance: 07/21/2010 to 07/31/2014</p> <p>Direct Costs in support of collaboration between NIEHS and Ramazzini Institute; CAN 8010789 Delivery To: 101 Product/Service Code: AZ16 Product/Service Description: R&amp;D- OTHER RESEARCH AND DEVELOPMENT (MANAGEMENT/SUPPORT)</p> <p>Project Data: 131520.1.HNV2 NIEHS DIR DIVISION OF INTRAMURAL RESEARCH.252E RESEARCH RELATED INTRAMUR.12/19/2013 Accounting Info: 08026220141DA0.2014.01.V100.HNV1000000 C.E.00178.406.9999.252E.610001.9999.99 99.9999 Funded: \$138,000.00</p>				138,000.00	
2	<p>Fixed Priced Administrative Fees in support of collaboration between NIEHS and Ramazzini Institute; CAN 8010789 Delivery To: 101 Product/Service Code: AZ16 Product/Service Description: R&amp;D- OTHER RESEARCH AND DEVELOPMENT (MANAGEMENT/SUPPORT)</p> <p>Project Data: 131520.1.HNV2 NIEHS DIR DIVISION OF INTRAMURAL RESEARCH.252E RESEARCH RELATED INTRAMUR.12/19/2013 Accounting Info: 08026220141DA0.2014.01.V100.HNV1000000 C.E.00178.406.9999.252E.610001.9999.99 Continued ...</p>				12,000.00	

TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))

\$150,000.00

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OPTIONAL FORM 348 (Rev. 4/2005)

Prescribed by GSA FAR (48 CFR) 53.213(f)

ORDER FOR SUPPLIES OR SERVICES  
SCHEDULE - CONTINUATION

PAGE NO

3

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

DATE OF ORDER

CONTRACT NO.

12/20/2013

HHSN263201000141B

ORDER NO.

HHSN27300149

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
99.9999	Funded: \$12,000.00					
TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))					\$0.00	