

# ORDER FOR SUPPLIES OR SERVICES

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

1. DATE OF ORDER 10/18/2005	2. CONTRACT NO. (if any) GS-23F-0387K	6. SHIP TO:			
3. ORDER NO. HSBP1006F09215		4. REQUISITION/REFERENCE NO. 0020016575		a. NAME OF CONSIGNEE  See Attached Delivery Schedule	
5. ISSUING OFFICE (Address correspondence to) Department of Homeland Security Customs and Border Protection 1300 Pennsylvania Ave NW NP 1310 Washington DC 20229				b. STREET ADDRESS	
c. CITY			d. STATE	e. ZIP CODE	
7. TO:					
a. NAME OF CONTRACTOR CHOICEPOINT BUSINESS GOVT SERVICES			8. TYPE OF ORDER		
b. COMPANY NAME Attn: Heather McDade			<input type="checkbox"/> a. PURCHASE - 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.		
c. STREET ADDRESS 11350 RANDOM HILLS RD STE 240			<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.		
d. CITY FAIRFAX		e. STATE VA	f. ZIP CODE 22030		
9. ACCOUNTING AND APPROPRIATION DATA					
CONTRACTOR TIN: 581798708					
12. F.O.B. POINT Destination					
13. PLACE OF		14. GOVERNMENT B/L NO.		15. DELIVER TO F.O.B POINT ON OR BEFORE (Date)	
a. INSPECTION Destination	b. ACCEPTANCE Destination			10/01/2005	
16. DISCOUNT TERMS Net					

**17. SCHEDULE (See reverse for Rejections)**

ITEM NO. (a)	SUPPLIES OR SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QTY Acctpt (g)
00010	FY06 Autotrack Access	1.00	AU	<b>(b) (4)</b>	<b>(b) (4)</b>	

SEE BILLING INSTRUCTIONS ON REVERSE	18. SHIPPING POINT	19. GROSS SHIPPING WEIGHT	20. INVOICE NO.		17(h) TOT. (Cont. pages)  \$0.00
	21. MAIL INVOICE TO:				
	a. NAME DHS - Customs & Border Protection		National Finance Center		17(i) GRAND TOTAL  \$300,000.00
	b. STREET ADDRESS (or P.O. Box) PO Box 68908				
c. CITY	d. STATE IN	e. ZIP CODE 46268			
22. UNITED STATES OF AMERICA		23. NAME (Typed) Arthur S. Cooper III			
BY (Signature)		TITLE: CONTRACTING/ORDERING OFFICER			

(b) (6)

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**Federal Tax Exempt ID: 72-0408780**

**NOTES:**

1. The Office of International Affairs (INA), Container Security Initiative Division has a requirement for access to the Autotrack website on an unlimited basis for (b) (4) CSI Ports across the world. This requirement also includes integrated XML access to ChoicePoint data via standard person/business searches. The (b) (4) CSI Port locations to be identified by the designated CBP/INA point of contact (see 5. below).

**INITIAL/BASE PERIOD**

The rate for this order is (b) (4) \$300,000.00, for the performance period October 1, 2005 through September 30, 2006.

Note: In reference to ChoicePoint quote dated September 26, 2005, the above pricing is valid for the base period above plus two options years (i.e., 10/1/2006 - 9/30/2007, 10/1/2007 - 9/30/2007, if exercised).

**2. Option to Extend the Term of the Contract.**

(a) The Government may extend the term of this contract by written notice to the Contractor within 30 days prior to the expiration date of the existing contract period or within 30 days after expiration of the existing contract period, or after funds for the Fiscal Year become available, whichever date is later, provided, that the Government shall give the Contractor a preliminary written notice of its intent to extend at least 60 days before the contract expires. The preliminary notice does not commit the Government to an extension.

(b) If the Government exercises this option, the extended contract shall be considered to include this option provision.

(c) The total duration of this contract, including the exercise of any options under this clause, shall not exceed 3 years.

Note: The exercise of any option periods is contingent upon the Contractor retaining its contract (or follow-on contract) for the items/services ordered, with GSA.

**3. Please e-mail copies of the monthly invoices to:**

(b) (6) via: (b) (6) @dhs.gov

4. Also, one copy of the invoice to the Contract Administrator (see 6. below) at (b) (6) @dhs.gov

5. Please contact INA point of contact (b) (6), Program Analyst, Container Security Initiative Division at (b) (6); E-mail address: (b) (6) @dhs.gov.

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**NOTES:**

6. Contract Administrator: On behalf of the Government, this acquisition is being administered by:

Thomas E. Jones, Contract Specialist  
Customs & Border Protection  
Contracting & Procurement Branch (CBPCAP)  
7701 N. Stemmons Freeway, 2nd floor  
Dallas, TX 75247  
Phone#: (b) (6); Fax#: (b) (6)  
e-mail address: (b) (6)@dhs.gov

For assistance regarding this acquisition, please contact the Contract Administrator, or in his absence the Contracting Officer ((b) (6)@dhs.gov, # (b) (6)).

**ITEMS AND PRICES, DELIVERY SCHEDULE AND ACCOUNTING DATA  
FOR  
DELIVERY ORDER: HSBP1006F09215**

**SCHEDULE OF SUPPLIES/SERVICES**

**Item Number: 00010    Line Item (Priced/Information/Option): P**  
**Supplies/Services: FY06 Autotrack Access**

Qty	Unit	Unit Price	Ext. Price
1	AU	(b) (4)	(b) (4)

**Total Funded Contract Value: \$300,000.0000**

**ACCOUNTING AND APPROPRIATION INFORMATION**

**Item: 00010    6100.2525USCSGLCS0900890000ZIAB06400AP03**  
**170102525                    Amount \$300,000.0000**

**DELIVERY SCHEDULE**

Item	Quantity	Instructions:		
		Delivery Date	Recipient	Unloading PT.
00010	1	10/01/2005		

Contractor's Acknowledgement of Receipt and Acceptance of Delivery/Task Order:

The Contractor is requested to acknowledge receipt and acceptance of this order (#HSBP1006F09215) by signing in the space below and returning a signed copy of this page to Thomas Jones, Contract Administrator via fax at (b) (6) (or via Email at (b) (6)@dhs.gov), within two (2) calendar days after the date of receipt of order. Upon acknowledgement of receipt of the order, the Contractor is encouraged to commence performance in accordance with the terms of the order.

In the event that the Contractor does not agree to accept the order and perform/deliver the ordered services/items in accordance with its terms and conditions and those of the Contract under which this order is placed, the Contractor is urged to contact the Contract Administrator to discuss and resolve any issues (see name, address, phone number, and Email address above).

\_\_\_\_\_  
Contractor's Signature or Signature of Authorized Official:

Date Signed: \_\_\_\_\_

\_\_\_\_\_  
Name and Title of Official Signing/Acknowledging this order:

Phone #: \_\_\_\_\_