

**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 09/08/2009	2. CONTRACT NO. (If any) CPSC-B-00-5125	6. SHIP TO: a. NAME OF CONSIGNEE CONSUMER PRODUCT SAFETY COMMISSION
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3. ORDER NO. 0023	4. REQUISITION/REFERENCE NO. REQ-4310-09-0023	b. STREET ADDRESS DIRECTORATE FOR EPIDEMIOLOGY 4330 EASTWEST HIGHWAY ROOM 604-26
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5. ISSUING OFFICE (Address correspondence to) CONSUMER PRODUCT SAFETY COMMISSION DIV OF PROCUREMENT SERVICES 4330 EAST WEST HWY ROOM 517 BETHESDA MD 20814	c. CITY BETHESDA	d. STATE MD	e. ZIP CODE 20814
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7. TO: GARY L BROWN	f. SHIP VIA
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a. NAME OF CONTRACTOR DECISION DATA COLLECTION INC	8. TYPE OF ORDER
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b. COMPANY NAME	<input type="checkbox"/> a. PURCHASE	<input checked="" type="checkbox"/> b. DELIVERY
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c. STREET ADDRESS 4300 PLANK RD STE 190	REFERENCE YOUR:	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.
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d. CITY FREDERICKSBURG	e. STATE VA	f. ZIP CODE 22407-5724	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.
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9. ACCOUNTING AND APPROPRIATION DATA 09-PS-EXHR-4310-12165-252G	10. REQUISITIONING OFFICE CONSUMER PRODUCT SAFETY COMMISSION
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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 type="checkbox"/> f. EMERGING SMALL BUSINESS	<input type="checkbox"/> g. SERVICE-DISABLED VETERAN-OWNED	12. F.O.B. POINT Destination
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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) 08/30/2009	16. DISCOUNT TERMS Net 30
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**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)
	DUNS Number: [REDACTED] THIS IS CALL 0023 AGAINST THE BLANKET PURCHASE AGREEMENT NUMBER CPSC-B-00-5125 TO PROVIDE TELEPHONE INVESTIGATION SERVICES FOR THE PERIOD OF 01 SEPTEMBER 2009 THROUGH 31 AUGUST 2010 IN ACCORDANCE WITH THE Continued ...					

18. SHIPPING POINT	19. GROSS SHIPPING WEIGHT	20. INVOICE NO.	17(h) TOTAL (Cont. pages)
21. MAIL INVOICE TO:			17(i) GRAND TOTAL
a. NAME	CONSUMER PRODUCT SAFETY COMMISSION		
b. STREET ADDRESS (or P.O. Box)	DIVISION OF FINANCIAL SERVICES 4330 EAST WEST HWY ROOM 522		
c. CITY BETHESDA	d. STATE MD	e. ZIP CODE 20814	\$25,000.00

22. UNITED STATES OF AMERICA BY (Signature) 	23. NAME (Typed) Rudi M. Johnson TITLE. CONTRACTING/ORDERING OFFICER
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**ORDER FOR SUPPLIES OR SERVICES  
SCHEDULE - CONTINUATION**

PAGE NO

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DATE OF ORDER 09/08/2009	CONTRACT NO. CPSC-B-00-5125	ORDER NO. 0023
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ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
0001	<p>ATTACHED TERMS AND CONDITIONS AND THE BLANKET PURCHASE AGREEMENT.</p> <p>CONTRACTOR SHALL FURNISH ALL NECESSARY PERSONNEL, MATERIALS, AND FACILITIES TO CONDUCT COMPUTER ASSISTED TELEPHONIC INTERVIEWS (CATI) OF INJURIES COLLECTED THROUGH THE NATIONAL SURVEILLANCE SYSTEM (NEISS) AS ASSIGNED BY THE PROJECT OFFICER.</p> <p>Computer Assisted Telephone Interviewd (CATI) Investigation Services of injuries collected through the National Surveillance Systems (NEISS) that are associated with various consumer products such as firework, bicycles, and swimming pools, as directed by the project officer.</p> <p>THE CONTRACTOR SHALL VERBALLY REQUEST PERMISSION TO ASK QUESTIONS OF THE VICTIMS OR GUARDIANS AS REQUIRED AND PLACE THEIR RESPONSES ON THE TELEPHONE QUESTIONNAIRE PROVIDED BY THE CPSC PORJECT OFFICER. IF THE VICTIM OR THE GUARDIAN AS REQUIRED GRANSTS PERMISSION, THE CONTRACTOR SHALL MARK ACCEPTANCE BLOCK ON THE TELEPHONE QUESTIONNAIRE. THEN ASK THE VICTIM, PARENT OR GUARDIAN, AS REQUIRED TO RESPOND BY TYPING OR NEATLY PRINTING RESPONSES USING BLACK INK ON THE TELEPHONE QUESTIONNAIRE AND RETURN A COMPLETED SF 182 AT THE NEXT WEEKLY MEETING. IF PERMISSION IS NOT GRANTED, THE CONTRACOTR SHALL NOTIFY THE CPSC PROJECT OFFICER AT THE FOLLOWING WEEKLY MEETING AFTER THE INTERVIEW AND COMPLETE THE SF 182 STATING THE REASON WHY THE VICTIMS WERE UN WILLING TO PARTICIPATE IN THIS STUDY. IF IT IS BECAUSE OF WRONG OR DICONNECTED NUMBERS OR FAILURE TO RETURN MESSAGS, THE CONTRACTOR SHALL RETURN THE INVESTIGATION QUESTIONNAIR AND SF182 TO THE CPSC'S PROJECT OFFICER AT THE NEXT MEETING. THE CPSC'S PROJECT OFFICER WILL PROVIDE TO THE CONTRACTOR THE EPIDEIOLOGICAL INVESTIGATION CASE REPORT AND SF 182, THAT Continued ...</p>	500	EA	50.00	25,000.00	

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

\$25,000.00

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

PAGE NO

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DATE OF ORDER  
09/08/2009

CONTRACT NO.  
CPSC-B-00-5125

ORDER NO.  
0023

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>WILL INCLUDE THE VICTIM'S NAME, ADDRESS, AND TELEPHONE NUMBER AS WELL AS THE EPIDEMIOLOGICAL INVESTIGATION QUESTIONNAIRE.</p> <p>PROJECT OFFICER: JOEL FRIEDMAN DIVISION OF EPDSD TEL: 301-504-7500 EMAIL: jfriedman@cpsc.gov</p> <p>The total amount of award: \$25,000.00. The obligation for this award is shown in box 17(i).</p>					

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

\$0.00