

ORDER FOR SUPPLIES OR SERVICES

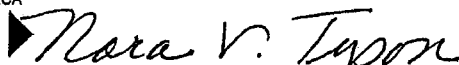
PAGE OF PAGES

1 4

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

1. DATE OF ORDER 01/29/2009		2. CONTRACT NO. (If any)		6. SHIP TO:	
3. ORDER NO. HSP233200900135P		4. REQUISITION/REFERENCE NO. 09EOIG007129		8. NAME OF CONSIGNEE HHS/OIG/OI	
5. ISSUING OFFICE (Address correspondence to) DHHS/PSC/SAS/DAM PARKLAWN BUILDING, ROOM 5-101 5600 FISHERS LANE ROCKVILLE MD 20857				b. STREET ADDRESS COHEN BUILDING, ROOM 5409 330 INDEPENDENCE AVE., S.W.	
				c. CITY WASHINGTON	e. ZIP CODE 20201
7. TO: GLENNA WHITE				f. SHIP VIA	
a. NAME OF CONTRACTOR COLT DEFENSE LLC					
b. COMPANY NAME				8. TYPE OF ORDER	
c. STREET ADDRESS P. O. BOX 118 860-244-1362				<input checked="" type="checkbox"/> a. PURCHASE REFERENCE YOUR: <input 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 HARTFORD		e. STATE CT	f. ZIP CODE 061410118		
9. ACCOUNTING AND APPROPRIATION DATA See Schedule				10. REQUISITIONING OFFICE HHS/OIG/OI	
11. BUSINESS CLASSIFICATION (Check appropriate box(es))				12. F.O.B. POINT Destination	
<input type="checkbox"/> a. SMALL <input type="checkbox"/> d. WOMEN-OWNED <input checked="" type="checkbox"/> b. OTHER THAN SMALL <input type="checkbox"/> e. HUBZone <input type="checkbox"/> c. DISADVANTAGED <input type="checkbox"/> f. EMERGING SMALL BUSINESS <input type="checkbox"/> g. SERVICE-DISABLED VETERAN-OWNED					
13. PLACE OF		14. GOVERNMENT B/L NO.		15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date) 03/20/2009	
a. INSPECTION estation		b. ACCEPTANCE Destination		16. DISCOUNT TERMS 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)
	Tax ID Number: 32-0031950 DUNS Number: 121396217 If you have any questions regarding this order, please contact Nora V. Tyson at (301) 443-5229. Continued ...					
18. SHIPPING POINT		19. GROSS SHIPPING WEIGHT		20. INVOICE NO.		17(h) TOTAL (Cont. pages)
21. MAIL INVOICE TO:						
a. NAME		PSC/FMS (301) 443-3020				\$8,821.25
b. STREET ADDRESS (or P.O. Box)		PARKLAWN BUILDING, ROOM 16A-12 5600 FISHERS LANE				\$8,821.25
c. CITY ROCKVILLE		d. STATE MD	e. ZIP CODE 20857			
22. UNITED STATES OF AMERICA BY (Signature) 				23. NAME (Typed) NORA V. TYSON TITLE: CONTRACTING/ORDERING OFFICER		17(i) GRAND TOTAL

AUTHORIZED FOR LOCAL REPRODUCTION
PREVIOUS EDITION NOT USABLE

PROGRAM OFFICE

OPTIONAL FORM 347 (Rev. 3/2005)
Prescribed by GSA/FAR 48 CFR 53.213(e)

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

PAGE OF PAGES

3

4

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

DATE OF ORDER CONTRACT NO.

01/29/2009

ORDER NO.

HHSP233200900135P

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY ORDERED (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)	QUANTITY ACCEPTED (G)
1	<p>Point of Contact: Lydia Spalding Telephone: 202-205-9045</p> <p>(b)(7)e</p> <p>(b)(7)e, (b)(4) = (b)(4)</p> <p>11% EXCISE TAX = (b)(7)e, (b)(4)</p> <p>SHIPPING AND HANDLING = (b)(4)</p> <p>TOTAL: \$8,821.25</p> <p>Accounting Info: 7590128 CAN: 1991402 Obj. Class: 26834 FY: 2009 Funded: \$6,527.72</p> <p>Accounting Info: 7590128 CAN: 19999BP Obj. Class: 26834 FY: 2009 Funded: \$1,323.19</p> <p>Accounting Info: 75X0128 CAN: 19999FK Obj. Class: 26834 FY: 2009 Funded: \$970.34</p> <p>949 INVOICE INFORMATION/CLAUSES INCORPORATED BY REFERENCE</p> <p>1. Invoice Information</p> <p>In addition to the information required by 52.232-25 (Prompt Payment), your invoice must contain the following: Tax Identification Number (Employer's Identification Number) or Social Security Number.</p> <p>2. Clauses incorporated by reference (FAR 52.252-2) Feb 1998)</p> <p>This contract incorporated one or more clauses by reference, with the same force and effect as if they were given in full text. Upon request, the Contracting Officer will make their full text available. Also, the full text of a clause may be accessed electronically at this address: http://www.acqnet.gov/far</p> <p>Federal Acquisition Regulation (48 CFR Chapter 1) Clauses</p> <p>FAR 52.204-7 Central Contractor Registration (Apr 2008)</p> <p>Continued ...</p>				8,821.25	

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

NSN 7540-01-152-8082

503-46-101

PROGRAM OFFICE

OPTIONAL FORM 346 (Rev. 6/95)
Prescribed by GSA
FAR (48 CFR) 53.213(c)


ORDER FOR SUPPLIES OR SERVICES

PAGE OF PAGES

1

4

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

1. DATE OF ORDER 12/13/2007		2. CONTRACT NO. (If any)		6. SHIP TO: a. NAME OF CONSIGNEE HHS/OIG/OI				
3. ORDER NO. HHSP233200800074P		4. REQUISITION/REFERENCE NO. 08EOIG005567		b. STREET ADDRESS COHEN BUILDING, ROOM 5409 330 INDEPENDENCE AVE, S.W. ATTN: ED LANDICHO 202-345-7600 INSIDE DELIVERY ONLY				
5. ISSUING OFFICE (Address correspondence to) DHHS/PSC/SAS/DAM PARKLAWN BUILDING, ROOM 5-101 5600 FISHERS LANE ROCKVILLE MD 20857		c. CITY WASHINGTON		d. STATE DC	e. ZIP CODE 20201			
7. TO: GLENNA WHITE		f. SHIP VIA						
a. NAME OF CONTRACTOR COLT DEFENSE LLC		b. TYPE OF ORDER <input checked="" type="checkbox"/> a. PURCHASE <input type="checkbox"/> b. DELIVERY						
b. COMPANY NAME		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 P. O. BOX 118 8602441364		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 HARTFORD	e. STATE CT	f. ZIP CODE 061410118						
9. ACCOUNTING AND APPROPRIATION DATA See Schedule		10. REQUISITIONING OFFICE HHHS/OIG/OI						
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				
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) 12/13/2007				
				16. DISCOUNT TERMS 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)
	Tax ID Number: 32-0031950 DUNS Number: 121396217 Suggested UFMS#: P233200800074P Questions concerning this order may be referred to Mr. Chris Ganey (301) 443-4379. Continued ...							
SEE BILLING INSTRUCTIONS ON REVERSE								
18. SHIPPING POINT		19. GROSS SHIPPING WEIGHT		20. INVOICE NO.		17(h) TOTAL (Cont. pages)		
21. MAIL INVOICE TO:								
a. NAME		PSC/FMS (301) 443-3020				\$9,950.08		
b. STREET ADDRESS (or P.O. Box)		PARKLAWN BUILDING, ROOM 16A-12 5600 FISHERS LANE						17(i) GRAND TOTAL
c. CITY ROCKVILLE		d. STATE MD	e. ZIP CODE 20857		\$9,950.08			
22. UNITED STATES OF AMERICA BY (Signature) 				23. NAME (Typed) CHRIS GANEY TITLE: CONTRACTING/ORDERING OFFICER				

AUTHORIZED FOR LOCAL REPRODUCTION
PREVIOUS EDITION NOT USABLEOPTIONAL FORM 347 (Rev. 3/2005)
Prescribed by GSA/FAR 48 CFR 53.213(e)

If desired, this order (or a 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 service, 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.

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

REPORT OF REJECTIONS

OPTIONAL FORM 347 (Rev. 3/2005) (BACK)

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

PAGE OF PAGES

3

4

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

DATE OF ORDER

CONTRACT NO.

ORDER NO.

12/13/2007

HHSP233200800074P

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY ORDERED (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)	QUANTITY ACCEPTED (G)
1	<p>INSIDE DELIVERY ONLY.</p> <p>(b)(7)e</p> <p>(b)(7)e</p> <p>(b)(7)e, (b)(4) = (b)(4)</p> <p>11% EXCISE TAX = (b)(4), (b)(7)e</p> <p>SHIPPING AND HANDLING = (b)(4)</p> <p>TOTAL: \$9950.08</p> <p>Accounting Info: 7580128 CAN: 1994881 Obj. Class: 26834 FY: 2008 Funded: \$1,492.54</p> <p>Accounting Info: 7580128 CAN: 1991338 Obj. Class: 26834 FY: 2008 Funded: \$6,965.00</p> <p>Accounting Info: 75X0128 CAN: 1992350 Obj. Class: 26834 FY: 2008 Funded: \$1,492.54</p> <p>929 INVOICE INFORMATION/CLAUSES INCORPORATED BY REFERENCE</p> <p>1. INVOICE INFORMATION</p> <p>IN ADDITION TO THE INFORMATION REQUIRED BY 52.232-25 (PROMPT PAYMENT), YOUR INVOICE MUST CONTAIN THE FOLLOWING: TAX IDENTIFICATION NUMBER (EMPLOYER'S IDENTIFICATION NUMBER) OR SOCIAL SECURITY NUMBER.</p> <p>2. CLAUSES INCORPORATED BY REFERENCE (FAR 52.252-2) (FEB 1998)</p> <p>THIS CONTRACT INCORPORATES ONE OR MORE CLAUSES BY REFERENCE, WITH THE SAME FORCE AND EFFECT AS IF THEY WERE GIVEN IN FULL TEXT. UPON REQUEST, THE CONTRACTING OFFICER WILL MAKE THEIR FULL TEXT AVAILABLE. ALSO, THE FULL TEXT OF A CLAUSE MAY BE ACCESSED ELECTRONICALLY AT THIS ADDRESS: HTTP://WWW.ACQNET.GOV/FAR</p> <p>FEDERAL ACQUISITION REGULATION (48 CFR CHAPTER 1) CLAUSES</p> <p>FAR 52.204-7 CENTRAL CONTRACTOR REGISTRATION (JUL 2006)</p> <p>FAR 52.212-4 CONTRACT TERMS AND CONDITIONS - COMMERCIAL ITEMS (FEB 2007)</p> <p>FAR 52.232-33 PAYMENT BY ELECTRONIC FUNDS TRANSFER - CENTRAL CONTRACTOR</p> <p>Continued ...</p>				9,950.08	

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

ORDER FOR SUPPLIES OR SERVICES

PAGE OF PAGES

SCHEDULE - CONTINUATION

4

4

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

DATE OF ORDER

CONTRACT NO.

ORDER NO.

12/13/2007

HHSP233200800074P

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY ORDERED (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)	QUANTITY ACCEPTED (G)
949	<p>REGISTRATION (OCT 2003)</p> <p>INVOICE INFORMATION/CLAUSES INCORPORATED BY REFERENCE</p> <p>1. INVOICE INFORMATION</p> <p>IN ADDITION TO THE INFORMATION REQUIRED BY 52.232-25 (PROMPT PAYMENT), YOUR INVOICE MUST CONTAIN THE FOLLOWING: TAX IDENTIFICATION NUMBER (EMPLOYER'S IDENTIFICATION NUMBER) OR SOCIAL SECURITY NUMBER.</p> <p>2. CLAUSES INCORPORATED BY REFERENCE (FAR 52.252-2) (FEB 1998)</p> <p>THIS CONTRACT INCORPORATES THE FOLLOWING CLAUSES BY REFERENCE WITH THE SAME FORCE AND EFFECT AS IF THEY WERE GIVEN IN FULL TEXT. UPON REQUEST, THE CONTRACTING OFFICER WILL MAKE THEIR FULL TEXT AVAILABLE. ALSO, THE FULL TEXT OF A CLAUSE MAY BE ACCESSED ELECTRONICALLY AT THIS ADDRESS: HTTP://WWW.ARNET.GOV/FAR</p> <p>FEDERAL ACQUISITION REGULATION (48 CFR CHAPTER 1) CLAUSES</p> <p>FAR 52.204-7 CENTRAL CONTRACTOR REGISTRATION (JUL 2006)</p> <p>FAR 52.213-4 TERMS AND CONDITIONS -- SIMPLIFIED ACQUISITIONS (OTHER THAN COMMERCIAL ITEMS) (MAR 2007)</p> <p>FAR 52.232-33 PAYMENT BY ELECTRONIC FUNDS TRANSFER - CENTRAL CONTRACTOR REGISTRATION (OCT 2003)</p> <p>FAR 52.243-1 CHANGES - FIXED PRICE (AUG 1987)</p> <p>The total amount of award: \$9,950.08. The obligation for this award is shown in box 17(i).</p>					

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

SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEM <small>OFFEROR TO COMPLETE BLOCKS 12, 17, 23, 24, & 30</small>				1. REQUISITION NUMBER OS66361		PAGE OF 1 5	
2. CONTRACT NO.		3. AWARD/ EFFECTIVE DATE 07/14/2011		4. ORDER NUMBER HHSP233201100378P		5. SOLICITATION NUMBER	
7. FOR SOLICITATION INFORMATION CALL:		a. NAME PATRICK PURTILL		b. TELEPHONE NUMBER (No collect calls) 301-443-3535		8. OFFER DUE DATE/LOCAL TIME	
9. ISSUED BY DHHS/PSC/SAS/DAM Parklawn Building, Room 5C-18 5600 Fishers Lane Rockville MD 20857		CODE DAM		10. THIS ACQUISITION IS <input checked="" type="checkbox"/> UNRESTRICTED OR <input type="checkbox"/> SET ASIDE: % FOR: <div style="display: flex; justify-content: space-between;"> <div> NAICS: 332994 SIZE STANDARD: 1,000 </div> <div> <input type="checkbox"/> SMALL BUSINESS <input type="checkbox"/> HUBZONE SMALL BUSINESS <input type="checkbox"/> SERVICE-DISABLED VETERAN-OWNED SMALL BUSINESS </div> <div> <input type="checkbox"/> EMERGING SMALL BUSINESS <input type="checkbox"/> SOLE SOURCE <input type="checkbox"/> 8(A) </div> </div>			
11. DELIVERY FOR FOB DESTINATION UNLESS BLOCK IS MARKED <input type="checkbox"/> SEE SCHEDULE		12. DISCOUNT TERMS		13a. THIS CONTRACT IS A RATED ORDER UNDER DPAS (15 CFR 700) <input type="checkbox"/>		13b. RATING	
15. DELIVER TO OS-OIG-HQ Cohen Building 330 Independence Ave, SW Washington DC 20201		CODE OS-OIG-HQ		16. ADMINISTERED BY DHHS/PSC/SAS/DAM Parklawn Bldg., Room 5C-18 5600 Fishers Lane Rockville MD 20857		CODE DAM	
17a. CONTRACTOR/OFFEROR GLOCK INC 236788 GLOCK INC 6000 HIGHLANDS PKWY 6000 HIGHLANDS PKWY SE SMYRNA GA 300827204		CODE 236788 FACILITY CODE		18a. PAYMENT WILL BE MADE BY PSC/FMS 5600 Fishers Lane Parklawn Building, Room 16A-12 Rockville MD 20857		CODE FMS	
TELEPHONE NO.				18b. SUBMIT INVOICES TO ADDRESS SHOWN IN BLOCK 18a UNLESS BLOCK BELOW IS CHECKED <input type="checkbox"/> SEE ADDENDUM			
<input type="checkbox"/> 17b. CHECK IF REMITTANCE IS DIFFERENT AND PUT SUCH ADDRESS IN OFFER							
19. ITEM NO.	20. SCHEDULE OF SUPPLIES/SERVICES			21. QUANTITY	22. UNIT	23. UNIT PRICE	24. AMOUNT
	Tax ID Number: 58-1652822 DUNS Number: 148099450 Questions concerning this order may be referred to Patrick Purtill at (301) 443-3535 or patrick.purtill@psc.hhs.gov. Please reference the order number. For technical questions, please contact Lydia Spalding at (202) 205-9045 or (Use Reverse and/or Attach Additional Sheets as Necessary)						
25. ACCOUNTING AND APPROPRIATION DATA See schedule						26. TOTAL AWARD AMOUNT (For Govt. Use Only) \$16,000.00	
<input type="checkbox"/> 27a. SOLICITATION INCORPORATES BY REFERENCE FAR 52.212-1, 52.212-4, FAR 52.212-3 AND 52.212-5 ARE ATTACHED. ADDEND <input checked="" type="checkbox"/> 27b. CONTRACT/PURCHASE ORDER INCORPORATES BY REFERENCE FAR 52.212-4, FAR 52.212-5 IS ATTACHED. ADDENDA						<input type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED. <input type="checkbox"/> ARE <input checked="" type="checkbox"/> ARE NOT ATTACHED.	
<input type="checkbox"/> 28. CONTRACTOR IS REQUIRED TO SIGN THIS DOCUMENT AND RETURN COPIES TO ISSUING OFFICE. CONTRACTOR AGREES TO FURNISH AND DELIVER ALL ITEMS SET FORTH OR OTHERWISE IDENTIFIED ABOVE AND ON ANY ADDITIONAL SHEETS SUBJECT TO THE TERMS AND CONDITIONS SPECIFIED HEREIN.				<input checked="" type="checkbox"/> 29. AWARD OF CONTRACT REF. _____ OFFER DATED _____ YOUR OFFER ON SOLICITATION (BLOCK 5), INCLUDING ANY ADDITIONS OR CHANGES WHICH ARE SET FORTH HEREIN, IS ACCEPTED AS TO ITEMS:			
30a. SIGNATURE OF OFFEROR/CONTRACTOR				31a. UNITED STATES OF AMERICA (SIGNATURE OF CONTRACTING OFFICER) 			
30b. NAME AND TITLE OF SIGNER (Type or print)			30c. DATE SIGNED	31b. NAME OF CONTRACTING OFFICER (Type or print) ROSANNA BROWNING		31c. DATE SIGNED 07/14/2011	

AUTHORIZED FOR LOCAL REPRODUCTION
PREVIOUS EDITION IS NOT USABLE

STANDARD FORM 1449 (REV. 3/2006)
Prescribed by GSA - FAR (48 CFR) 53.212

19. ITEM NO.	20. SCHEDULE OF SUPPLIES/SERVICES	21. QUANTITY	22. UNIT	23. UNIT PRICE	24. AMOUNT
1	lydia.spalding@oig.hhs.gov. Capitol Police Contract #TSB200700001 Delivery: 60 Days After Award (b)(7)e (b)(7)e = \$16,000.00 Amount: \$12,480.00 Accounting Info: 2011.1994944.26834 Appr. Yr.: 2011 CAN: 1994944 Object Class: 26834 Funded: \$12,480.00 Amount: \$2,560.00 Accounting Info: 2011.19999BP.26834 Appr. Yr.: 2011 CAN: 19999BP Object Class: 26834 Funded: \$2,560.00 Amount: \$960.00 Accounting Info: 2011.1995352.26834 Appr. Yr.: 2011 CAN: 1995352 Object Class: 26834 Continued ...				16,000.00

32a. QUANTITY IN COLUMN 21 HAS BEEN

ACCEPTED, AND CONFORMS TO THE CONTRACT, EXCEPT AS

☐ RECEIVED☐ INSPECTED☐ NOTED:

32b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE

32c. DATE

32d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE

32e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE

32f. TELEPHONE NUMBER OF AUTHORIZED GOVERNMENT REPRESENTATIVE

32g. E-MAIL OF AUTHORIZED GOVERNMENT REPRESENTATIVE

33. SHIP NUMBER

34. VOUCHER NUMBER

35. AMOUNT VERIFIED
CORRECT FOR

36. PAYMENT

37. CHECK NUMBER

☐ PARTIAL ☐ FINAL☐ COMPLETE ☐ PARTIAL ☐ FINAL

38. S/R ACCOUNT NUMBER

39. S/R VOUCHER NUMBER

40. PAID BY

41a. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT

42a. RECEIVED BY (Print)

41b. SIGNATURE AND TITLE OF CERTIFYING OFFICER

41c. DATE

42b. RECEIVED AT (Location)

42c. DATE REC'D (YY/MM/DD)

42d. TOTAL CONTAINERS

CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED

HHSP233201100378P

PAGE OF

3

5

NAME OF OFFEROR OR CONTRACTOR

GLOCK INC 236788

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>Funded: \$960.00</p> <p>INVOICE INFORMATION/CLAUSES INCORPORATED BY REFERENCE</p> <p>1. INVOICE INFORMATION</p> <p>THE CONTRACTOR SHALL SUBMIT AN ORIGINAL INVOICE INCLUDING SUPPORTING DOCUMENTATION TO THE ADDRESS SHOWN IN BLOCK 18, OR VIA EMAIL AT PSC_INVOICES@PSC.HHS.GOV. THE INVOICE SHOULD ALSO BE EMAILED TO Lydia Spalding at lydia.spalding@oig.hhs.gov AND PATRICK PURTILL AT PATRICK.PURTILL@PSC.HSS.GOV. THE STATUS OF PAYMENT CAN BE OBTAINED BY CALLING (301) 443-3020.</p> <p>IN ORDER TO VERIFY THAT WE ARE MAKING PAYMENT TO THE CORRECT BANK ACCOUNT, WE REQUIRE THAT YOU REFERENCE THE TAXPAYER IDENTIFICATION (TIN), DUNS AND THE CORRECT BANKING INFORMATION (ABA) ON ALL INVOICES, IN ADDITION TO THE INFORMATION REQUIRED BY FAR 52.212-4(G), INVOICE. THIS WILL ENSURE PROPER PAYMENT.</p> <p>2. FAR CLAUSES</p> <p>CLAUSES INCORPORATED BY REFERENCE (FAR 52.252-2) (FEB 1998)</p> <p>This contract incorporates one or more clauses by reference, with the same force and effect as if they were given in full text. Upon request, the Contracting Officer will make their full text available. Also, the full text of a clause may be accessed electronically at this/these address(es): FAR: HTTP://WWW.ACQUISITION.GOV/FAR; HHSAR: HTTP://WWW.HHS.GOV/ASFR/OGAPA/ACQUISITION.</p> <p>(a) FEDERAL ACQUISITION REGULATION (48 CFR CHAPTER 1) CLAUSES</p> <p>FAR 52.204-7 Central Contractor Registration (APR 2008)</p> <p>(b) Health and Human Services Acquisition Regulation (48 CFR Chapter 3) clauses</p> <p>HHSAR 352.231-71, Pricing of adjustments (January 2001)</p> <p>The total amount of award: \$16,000.00. The obligation for this award is shown in box 26.</p>				



UNITED STATES CAPITOL POLICE
OFFICE OF FINANCIAL MANAGEMENT

July 13, 2011

TO: Patrick Purtill
Contracting Specialist
U.S. Department of Health and Human Services

FROM: Dewayne W. Chamberlain
Contract Specialist
United States Capitol Police

Subject: Approval to Utilize USCP Contract CO TSB200700001

This is in reference to your email dated June 30 2011 requesting permission to utilize the United States Capitol Police contract, CO TSB200600001. This is to notify you that your request is hereby approved. The following actions/limitations are in affect:

- 1) The following items are authorized to be purchased under this request
 - a.. (b)(7)e Each
- 2) A copy of this notice is to accompany your order to Glock,
- 3) You must furnish this office with a copy of your Delivery Order when it is placed

If you have any questions please let me know.

Sincerely

Brett L. Blake
Contracting Officer

Cc: Contract File

GLOCK, Inc.**U.S.A.****PERFECTION**

GLOCK, Inc.
P.O. Box 369
Smyrna, Georgia 30081 U.S.A.

Fax. (678) 303.1054

Tel. (770) 319.4763

Harris Couch
Federal Contract Officer
GLOCK, INC.
Email: harris.couch@glock.us

U.S. Department of Health & Human Services
330 C Street SW Room 5300
Washington, DC 20201

Date
Quote No.
Valid From
Valid To

6/3/2011
001-00-3835139
6/3/2011
12/30/2011

PH (b)(6) & (7)(c)
FX: (202) 690-6166
Cell: (b)(6) & (7)(c)
ATTN: (b)(6) & (7)(c)
Title: Special Agent
Email (b)(6) & (7)(c) oig.hhs.gov

QUOTATION

DELIVERY	DELIVERY VIA	F.O.B	TERMS
60 Days ARO	Best Way	Destination	Net 30

Quantity	Description	Cost	Extension
(b)(7)e	(b)(7)e		\$16,000.00

- Prices are due and payable NET 30 days for each invoice
- Trade-in pistols must be in good, serviceable working order
- Deductions made if trade-ins are damaged or not as specified.
- Trade-in or exchange pistols must be complete with three magazines, working night sights, grips, & in original box, unless otherwise noted.
- Trade-in or exchange pistols must be turned in within 30 days after receipt of new GLOCKS, unless other arrangements have been made and approved.
- All firearms traded to GLOCK, Inc. are subject to being refurbished and sold to other Federally Licensed firearms distributors.
- There is a **Limited Lifetime Warranty on GLOCK guns & parts, including postage, labor and replacement parts.**
- **USE FACTORY AMMUNITION ONLY**

Grand Total: \$16,000.00

W. Harris Couch
Authorized Signature

June 3, 2011

**FAR 52.212-5 CONTRACT TERMS AND CONDITIONS REQUIRED TO IMPLEMENT STATUTES OR
EXECUTIVE ORDERS—COMMERCIAL ITEMS (May 2011)**

(a) The Contractor shall comply with the following Federal Acquisition Regulation (FAR) clauses, which are incorporated in this contract by reference, to implement provisions of law or Executive orders applicable to acquisitions of commercial items:

(1) 52.222-50, Combating Trafficking in Persons (Feb 2009) (22 U.S.C. 7104(g)).

___ Alternate I (Aug 2007) of 52.222-50 (22 U.S.C. 7104(g)).

(2) 52.233-3, Protest After Award (AUG 1996) (31 U.S.C. 3553).

(3) 52.233-4, Applicable Law for Breach of Contract Claim (OCT 2004) (Pub. L. 108-77, 108-78).

(b) The Contractor shall comply with the FAR clauses in this paragraph (b) that the Contracting Officer has indicated as being incorporated in this contract by reference to implement provisions of law or Executive orders applicable to acquisitions of commercial items:

[Contracting Officer check as appropriate.]

___ (1) 52.203-6, Restrictions on Subcontractor Sales to the Government (Sept 2006), with Alternate I (Oct 1995) (41 U.S.C. 253g and 10 U.S.C. 2402).

___ (2) 52.203-13, Contractor Code of Business Ethics and Conduct (Apr 2010) (Pub. L. 110-252, Title VI, Chapter 1 (41 U.S.C. 251 note)).

___ (3) 52.203-15, Whistleblower Protections under the American Recovery and Reinvestment Act of 2009 (June 2010) (Section 1553 of Pub. L. 111-5). (Applies to contracts funded by the American Recovery and Reinvestment Act of 2009.)

___ (4) 52.204-10, Reporting Executive Compensation and First-Tier Subcontract Awards (Jul 2010) (Pub. L. 109-282) (31 U.S.C. 6101 note).

___ (5) 52.204-11, American Recovery and Reinvestment Act—Reporting Requirements (Jul 2010) (Pub. L. 111-5).

Attachment A

__ (6) 52.209-6, Protecting the Government's Interest When Subcontracting with Contractors Debarred, Suspended, or Proposed for Debarment (DEC 2010) (31 U.S.C. 6101 note). (Applies to contracts over \$30,000). (Not applicable to subcontracts for the acquisition of commercially available off-the-shelf items).

__ (7) 52.209-10, Prohibition on Contracting with Inverted Domestic Corporations (section 740 of Division C of Pub. L. 111-117, section 743 of Division D of Pub. L. 111-8, and section 745 of Division D of Pub. L. 110-161).

__ (8) 52.219-3, Notice of Total HUBZone Set-Aside or Sole-Source Award (Jan 2011) (15 U.S.C. 657a).

__ (9) 52.219-4, Notice of Price Evaluation Preference for HUBZone Small Business Concerns (JAN 2011) (if the offeror elects to waive the preference, it shall so indicate in its offer) (15 U.S.C. 657a).

__ (10) [Reserved]

__ (11)(i) 52.219-6, Notice of Total Small Business Set-Aside (June 2003) (15 U.S.C. 644).

__ (ii) Alternate I (Oct 1995) of 52.219-6.

__ (iii) Alternate II (Mar 2004) of 52.219-6.

__ (12)(i) 52.219-7, Notice of Partial Small Business Set-Aside (June 2003) (15 U.S.C. 644).

__ (ii) Alternate I (Oct 1995) of 52.219-7.

__ (iii) Alternate II (Mar 2004) of 52.219-7.

__ (13) 52.219-8, Utilization of Small Business Concerns (Jan 2011) (15 U.S.C. 637(d)(2) and (3)).

__ (14)(i) 52.219-9, Small Business Subcontracting Plan (Jan 2011) (15 U.S.C. 637(d)(4)).

__ (ii) Alternate I (Oct 2001) of 52.219-9.

__ (iii) Alternate II (Oct 2001) of 52.219-9.

__ (iv) Alternate III (Jul 2010) of 52.219-9.

__ (15) 52.219-14, Limitations on Subcontracting (Dec 1996) (15 U.S.C. 637(a)(14)).

__ (16) 52.219-16, Liquidated Damages—Subcon-tracting Plan (Jan 1999) (15 U.S.C. 637(d)(4)(F)(i)).

Attachment A

___ (17)(i) 52.219-23, Notice of Price Evaluation Adjustment for Small Disadvantaged Business Concerns (OCT 2008) (10 U.S.C. 2323) (if the offeror elects to waive the adjustment, it shall so indicate in its offer).

___ (ii) Alternate I (June 2003) of 52.219-23.

___ (18) 52.219-25, Small Disadvantaged Business Participation Program—Disadvantaged Status and Reporting (Dec 2010) (Pub. L. 103-355, section 7102, and 10 U.S.C. 2323).

___ (19) 52.219-26, Small Disadvantaged Business Participation Program—Incentive Subcontracting (Oct 2000) (Pub. L. 103-355, section 7102, and 10 U.S.C. 2323).

X (20) 52.219-27, Notice of Total Service-Disabled Veteran-Owned Small Business Set-Aside (May 2004) (15 U.S.C. 657 f).

___ (21) 52.219-28, Post Award Small Business Program Rerepresentation (Apr 2009) (15 U.S.C. 632(a)(2)).

___ (22) 52.219-29 Notice of Total Set-Aside for Economically Disadvantaged Women-Owned Small Business (EDWOSB) Concerns (Apr 2011).

___ (23) 52.219-30 Notice of Total Set-Aside for Women-Owned Small Business (WOSB) Concerns Eligible Under the WOSB Program (Apr 2011).

X (24) 52.222-3, Convict Labor (June 2003) (E.O. 11755).

X (25) 52.222-19, Child Labor—Cooperation with Authorities and Remedies (Jul 2010) (E.O. 13126).

X (26) 52.222-21, Prohibition of Segregated Facilities (Feb 1999).

X (27) 52.222-26, Equal Opportunity (Mar 2007) (E.O. 11246).

___ (28) 52.222-35, Equal Opportunity for Veterans (Sep 2010)(38 U.S.C. 4212).

X (29) 52.222-36, Affirmative Action for Workers with Disabilities (Oct 2010) (29 U.S.C. 793).

___ (30) 52.222-37, Employment Reports on Veterans (SEP 2010) (38 U.S.C. 4212).

Attachment A

___ (31) 52.222-40, Notification of Employee Rights Under the National Labor Relations Act (Dec 2010) (E.O. 13496).

___ (32) 52.222-54, Employment Eligibility Verification (JAN 2009). (Executive Order 12989). (Not applicable to the acquisition of commercially available off-the-shelf items or certain other types of commercial items as prescribed in 22.1803.)

___ (33)(i) 52.223-9, Estimate of Percentage of Recovered Material Content for EPA-Designated Items (May 2008) (42 U.S.C. 6962(c)(3)(A)(ii)). (Not applicable to the acquisition of commercially available off-the-shelf items.)

___ (ii) Alternate I (May 2008) of 52.223-9 (42 U.S.C. 6962(i)(2)(C)). (Not applicable to the acquisition of commercially available off-the-shelf items.)

___ (34) 52.223-15, Energy Efficiency in Energy-Consuming Products (DEC 2007) (42 U.S.C. 8259b).

___ (35)(i) 52.223-16, IEEE 1680 Standard for the Environmental Assessment of Personal Computer Products (DEC 2007) (E.O. 13423).

___ (ii) Alternate I (DEC 2007) of 52.223-16.

X (36) 52.223-18, Contractor Policy to Ban Text Messaging While Driving (SEP 2010) (E.O. 13513).

___ (37) 52.225-1, Buy American Act—Supplies (Feb 2009) (41 U.S.C. 10a-10d).

___ (38)(i) 52.225-3, Buy American Act—Free Trade Agreements—Israeli Trade Act (June 2009) (41 U.S.C. 10a-10d, 19 U.S.C. 3301 note, 19 U.S.C. 2112 note, 19 U.S.C. 3805 note, Pub. L. 108-77, 108-78, 108-286, 108-302, 109-53, 109-169, 109-283, and 110-138).

___ (ii) Alternate I (Jan 2004) of 52.225-3.

___ (iii) Alternate II (Jan 2004) of 52.225-3.

___ (39) 52.225-5, Trade Agreements (AUG 2009) (19 U.S.C. 2501, *et seq.*, 19 U.S.C. 3301 note).

X (40) 52.225-13, Restrictions on Certain Foreign Purchases (June 2008) (E.O.'s, proclamations, and statutes administered by the Office of Foreign Assets Control of the Department of the Treasury).

Attachment A

___ (41) 52.226-4, Notice of Disaster or Emergency Area Set-Aside (Nov 2007) (42 U.S.C. 5150).

___ (42) 52.226-5, Restrictions on Subcontracting Outside Disaster or Emergency Area (Nov 2007) (42 U.S.C. 5150).

___ (43) 52.232-29, Terms for Financing of Purchases of Commercial Items (Feb 2002) (41 U.S.C. 255(f), 10 U.S.C. 2307(f)).

___ (44) 52.232-30, Installment Payments for Commercial Items (Oct 1995) (41 U.S.C. 255(f), 10 U.S.C. 2307(f)).

X (45) 52.232-33, Payment by Electronic Funds Transfer—Central Contractor Registration (Oct 2003) (31 U.S.C. 3332).

___ (46) 52.232-34, Payment by Electronic Funds Transfer—Other than Central Contractor Registration (May 1999) (31 U.S.C. 3332).

___ (47) 52.232-36, Payment by Third Party (Feb 2010) (31 U.S.C. 3332).

___ (48) 52.239-1, Privacy or Security Safeguards (Aug 1996) (5 U.S.C. 552a).

___ (49)(i) 52.247-64, Preference for Privately Owned U.S.-Flag Commercial Vessels (Feb 2006) (46 U.S.C. Appx. 1241(b) and 10 U.S.C. 2631).

___ (ii) Alternate I (Apr 2003) of 52.247-64.

(c) The Contractor shall comply with the FAR clauses in this paragraph (c), applicable to commercial services, that the Contracting Officer has indicated as being incorporated in this contract by reference to implement provisions of law or Executive orders applicable to acquisitions of commercial items:

[Contracting Officer check as appropriate.]

___ (1) 52.222-41, Service Contract Act of 1965 (Nov 2007) (41 U.S.C. 351, *et seq.*).

___ (2) 52.222-42, Statement of Equivalent Rates for Federal Hires (May 1989) (29 U.S.C. 206 and 41 U.S.C. 351, *et seq.*).

___ (3) 52.222-43, Fair Labor Standards Act and Service Contract Act—Price Adjustment (Multiple Year and Option Contracts) (Sep 2009) (29 U.S.C. 206 and 41 U.S.C. 351, *et seq.*).

___ (4) 52.222-44, Fair Labor Standards Act and Service Contract Act—Price Adjustment (Sep 2009) (29 U.S.C. 206 and 41 U.S.C. 351, *et seq.*).

___ (5) 52.222-51, Exemption from Application of the Service Contract Act to Contracts for Maintenance, Calibration, or Repair of Certain Equipment—Requirements (Nov 2007) (41 351, *et seq.*).

___ (6) 52.222-53, Exemption from Application of the Service Contract Act to Contracts for Certain Services—Requirements (Feb 2009) (41 U.S.C. 351, *et seq.*).

___ (7) 52.226-6, Promoting Excess Food Donation to Nonprofit Organizations (Mar 2009) (Pub. L. 110-247).

___ (8) 52.237-11, Accepting and Dispensing of \$1 Coin (Sept 2008) (31 U.S.C. 5112(p)(1)).

(d) *Comptroller General Examination of Record.* The Contractor shall comply with the provisions of this paragraph (d) if this contract was awarded using other than sealed bid, is in excess of the simplified acquisition threshold, and does not contain the clause at 52.215-2, Audit and Records—Negotiation.

(1) The Comptroller General of the United States, or an authorized representative of the Comptroller General, shall have access to and right to examine any of the Contractor's directly pertinent records involving transactions related to this contract.

(2) The Contractor shall make available at its offices at all reasonable times the records, materials, and other evidence for examination, audit, or reproduction, until 3 years after final payment under this contract or for any shorter period specified in FAR Subpart 4.7, Contractor Records Retention, of the other clauses of this contract. If this contract is completely or partially terminated, the records relating to the work terminated shall be made available for 3 years after any resulting final termination settlement. Records relating to appeals under the disputes clause or to litigation or the settlement of claims arising under or relating to this contract shall be made available until such appeals, litigation, or claims are finally resolved.

(3) As used in this clause, records include books, documents, accounting procedures and practices, and other data, regardless of type and regardless of form. This does not require the

Attachment A

Contractor to create or maintain any record that the Contractor does not maintain in the ordinary course of business or pursuant to a provision of law.

(e)(1) Notwithstanding the requirements of the clauses in paragraphs (a), (b), (c), and (d) of this clause, the Contractor is not required to flow down any FAR clause, other than those in this paragraph (e)(1) in a subcontract for commercial items. Unless otherwise indicated below, the extent of the flow down shall be as required by the clause—

(i) 52.203-13, Contractor Code of Business Ethics and Conduct (Apr 2010) (Pub. L. 110-252, Title VI, Chapter 1 (41 U.S.C. 251 note)).

(ii) 52.219-8, Utilization of Small Business Concerns (Dec 2010) (15 U.S.C. 637(d)(2) and (3)), in all subcontracts that offer further subcontracting opportunities. If the subcontract (except subcontracts to small business concerns) exceeds \$650,000 (\$1.5 million for construction of any public facility), the subcontractor must include 52.219-8 in lower tier subcontracts that offer subcontracting opportunities.

(iii) [Reserved]

(iv) 52.222-26, Equal Opportunity (Mar 2007) (E.O. 11246).

(v) 52.222-35, Equal Opportunity for Veterans (Sep 2010) (38 U.S.C. 4212).

(vi) 52.222-36, Affirmative Action for Workers with Disabilities (Oct 2010) (29 U.S.C. 793).

(vii) 52.222-40, Notification of Employee Rights Under the National Labor Relations Act (Dec 2010) (E.O. 13496). Flow down required in accordance with paragraph (f) of FAR clause 52.222-40.

(viii) 52.222-41, Service Contract Act of 1965 (Nov 2007) (41 U.S.C. 351, *et seq.*).

(ix) 52.222-50, Combating Trafficking in Persons (Feb 2009) (22 U.S.C. 7104(g)).

____ Alternate I (Aug 2007) of 52.222-50 (22 U.S.C. 7104(g)).

(x) 52.222-51, Exemption from Application of the Service Contract Act to Contracts for Maintenance, Calibration, or Repair of Certain Equipment-Requirements (Nov 2007) (41 U.S.C. 351, *et seq.*).

Attachment A

(xi) 52.222-53, Exemption from Application of the Service Contract Act to Contracts for Certain Services-Requirements (Feb 2009) (41 U.S.C. 351, *et seq.*).

(xii) 52.222-54, Employment Eligibility Verification (JAN 2009).

(xiii) 52.226-6, Promoting Excess Food Donation to Nonprofit Organizations (Mar 2009) (Pub. L. 110-247). Flow down required in accordance with paragraph (e) of FAR clause 52.226-6.

(xiv) 52.247-64, Preference for Privately Owned U.S.-Flag Commercial Vessels (Feb 2006) (46 U.S.C. Appx. 1241(b) and 10 U.S.C. 2631). Flow down required in accordance with paragraph (d) of FAR clause 52.247-64.

(2) While not required, the contractor may include in its subcontracts for commercial items a minimal number of additional clauses necessary to satisfy its contractual obligations.

(End of clause)

SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEM OFFEROR TO COMPLETE BLOCKS 12, 17, 23, 24, & 30				1. REQUISITION NUMBER OS62885		PAGE OF 1 3	
2. CONTRACT NO.		3. AWARD/ EFFECTIVE DATE 05/04/2011	4. ORDER NUMBER HHSP233201100067M		5. SOLICITATION NUMBER		6. SOLICITATION ISSUE DATE
7. FOR SOLICITATION INFORMATION CALL:		a. NAME PATRICK PURTILL		b. TELEPHONE NUMBER (No collect calls) 301-443-3535		8. OFFER DUE DATE/LOCAL TIME	
9. ISSUED BY DHHS/PSC/SAS/DAM Parklawn Building, Room 5C-18 5600 Fishers Lane Rockville MD 20857			CODE DAM		10. THIS ACQUISITION IS <input checked="" type="checkbox"/> UNRESTRICTED OR <input type="checkbox"/> SET ASIDE: % FOR: <div style="display: flex; justify-content: space-between;"> <div> NAICS: 332994 SIZE STANDARD: 1,000 </div> <div> <input type="checkbox"/> SMALL BUSINESS <input type="checkbox"/> HUBZONE SMALL BUSINESS <input type="checkbox"/> SERVICE-DISABLED VETERAN-OWNED SMALL BUSINESS </div> <div> <input type="checkbox"/> EMERGING SMALL BUSINESS <input type="checkbox"/> SOLE SOURCE <input type="checkbox"/> 8(A) </div> </div>		
11. DELIVERY FOR FOB DESTINATION UNLESS BLOCK IS MARKED <input type="checkbox"/> SEE SCHEDULE		12. DISCOUNT TERMS		13a. THIS CONTRACT IS A RATED ORDER UNDER DPAS (15 CFR 700) <input type="checkbox"/>		13b. RATING	
15. DELIVER TO Cohen Building 330 Independence Ave, SW Washington DC 20201		CODE OS-OIG-HQ		16. ADMINISTERED BY DHHS/PSC/SAS/DAM Parklawn Bldg., Room 5C-18 5600 Fishers Lane Rockville MD 20857		CODE DAM	
17a. CONTRACTOR/ OFFEROR GLOCK INC 236788 6000 HIGHLANDS PKWY SE SMYRNA GA 300827204		CODE 236788 FACILITY CODE		18a. PAYMENT WILL BE MADE BY PSC/FMS 5600 Fishers Lane Parklawn Building, Room 16A-12 Rockville MD 20857		CODE FMS	
TELEPHONE NO.				17b. CHECK IF REMITTANCE IS DIFFERENT AND PUT SUCH ADDRESS IN OFFER			
18b. SUBMIT INVOICES TO ADDRESS SHOWN IN BLOCK 18a UNLESS BLOCK BELOW IS CHECKED <input type="checkbox"/> SEE ADDENDUM							
19. ITEM NO.	20. SCHEDULE OF SUPPLIES/SERVICES			21. QUANTITY	22. UNIT	23. UNIT PRICE	24. AMOUNT
	Tax ID Number: 58-1652822 DUNS Number: 148099450 If you have any questions regarding this contract please contact Patrick Purtill at (301) 443-3535 or patrick.purtill@psc.hhs.gov. For technical questions please contact Lydia Spalding at (202) 205-9045 or lydia.spalding@oig.hhs.gov. (Use Reverse and/or Attach Additional Sheets as Necessary)						
25. ACCOUNTING AND APPROPRIATION DATA See schedule						26. TOTAL AWARD AMOUNT (For Govt. Use Only) \$2,880.00	
<input type="checkbox"/> 27a. SOLICITATION INCORPORATES BY REFERENCE FAR 52.212-1, 52.212-4, FAR 52.212-3 AND 52.212-5 ARE ATTACHED. ADDEND <input type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED. <input checked="" type="checkbox"/> 27b. CONTRACT/PURCHASE ORDER INCORPORATES BY REFERENCE FAR 52.212-4. FAR 52.212-5 IS ATTACHED. ADDENDA <input type="checkbox"/> ARE <input checked="" type="checkbox"/> ARE NOT ATTACHED.							
<input type="checkbox"/> 28. CONTRACTOR IS REQUIRED TO SIGN THIS DOCUMENT AND RETURN COPIES TO ISSUING OFFICE. CONTRACTOR AGREES TO FURNISH AND DELIVER ALL ITEMS SET FORTH OR OTHERWISE IDENTIFIED ABOVE AND ON ANY ADDITIONAL SHEETS SUBJECT TO THE TERMS AND CONDITIONS SPECIFIED HEREIN.				<input checked="" type="checkbox"/> 29. AWARD OF CONTRACT REF. _____ OFFER DATED _____ YOUR OFFER ON SOLICITATION (BLOCK 5), INCLUDING ANY ADDITIONS OR CHANGES WHICH ARE SET FORTH HEREIN, IS ACCEPTED AS TO ITEMS:			
30a. SIGNATURE OF OFFEROR/CONTRACTOR				31a. UNITED STATES OF AMERICA (SIGNATURE OF CONTRACTING OFFICER) 			
30b. NAME AND TITLE OF SIGNER (Type or print)		30c. DATE SIGNED		31b. NAME OF CONTRACTING OFFICER (Type or print) ROSANNA BROWNING		31c. DATE SIGNED 05/04/2011	

AUTHORIZED FOR LOCAL REPRODUCTION
PREVIOUS EDITION IS NOT USABLE

STANDARD FORM 1449 (REV. 3/2005)
Prescribed by GSA - FAR (48 CFR) 63.212

19. ITEM NO.	20. SCHEDULE OF SUPPLIES/SERVICES	21. QUANTITY	22. UNIT	23. UNIT PRICE	24. AMOUNT
	Delivery: 05/18/2011 This contract contains multiple CLINS solely for the purpose of accounting for multiple funding sources.				
1	Purchase (b)(7)e (b)(7)e Accounting Info: 2011.1994944.31935 Appr. Yr.: 2011 CAN: 1994944 Object Class: 31935 Funded: \$1,782.30				1,782.30
2	CAN 19999BP Accounting Info: 2011.19999BP.31935 Appr. Yr.: 2011 CAN: 19999BP Object Class: 31935 Funded: \$365.60				365.60
3	CAN 1995352 Continued ...				137.10

32a. QUANTITY IN COLUMN 21 HAS BEEN

☐ RECEIVED☐ INSPECTEDACCEPTED, AND CONFORMS TO THE CONTRACT, EXCEPT AS
☐ NOTED:

32b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE

32c. DATE

32d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE

32e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE

32f. TELEPHONE NUMBER OF AUTHORIZED GOVERNMENT REPRESENTATIVE

32g. E-MAIL OF AUTHORIZED GOVERNMENT REPRESENTATIVE

33. SHIP NUMBER

34. VOUCHER NUMBER

35. AMOUNT VERIFIED
CORRECT FOR

36. PAYMENT

37. CHECK NUMBER

☐ PARTIAL ☐ FINAL☐ COMPLETE ☐ PARTIAL ☐ FINAL

38. S/R ACCOUNT NUMBER

39. S/R VOUCHER NUMBER

40. PAID BY

41a. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT

42a. RECEIVED BY (Print)

41b. SIGNATURE AND TITLE OF CERTIFYING OFFICER

41c. DATE

42b. RECEIVED AT (Location)

42c. DATE REC'D (YY/MM/DD)

42d. TOTAL CONTAINERS

CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED
HHSP233201100067MPAGE OF
3 3NAME OF OFFEROR OR CONTRACTOR
GLOCK INC 236788

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	Accounting Info: 2011.1995352.31935 Appr. Yr.: 2011 CAN: 1995352 Object Class: 31935 Funded: \$137.10				
4	CAN 1994944 Accounting Info: 2011.1994944.31935 Appr. Yr.: 2011 CAN: 1994944 Object Class: 31935 Funded: \$464.10				464.10
5	CAN - 19999BP Accounting Info: 2011.19999BP.31935 Appr. Yr.: 2011 CAN: 19999BP Object Class: 31935 Funded: \$95.20				95.20
6	CAN - 1995352 Accounting Info: 2011.1995352.31935 Appr. Yr.: 2011 CAN: 1995352 Object Class: 31935 Funded: \$35.70 The total amount of award: \$2,880.00. The obligation for this award is shown in box 26.				35.70

SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEM OFFEROR TO COMPLETE BLOCKS 12, 17, 23, 24, & 30				1. REQUISITION NUMBER OS52072		PAGE OF 1 4	
2. CONTRACT NO.		3. AWARD/ EFFECTIVE DATE	4. ORDER NUMBER HHSP233201100043P		5. SOLICITATION NUMBER		6. SOLICITATION ISSUE DATE
7. FOR SOLICITATION INFORMATION CALL:		a. NAME JUAN BAEZ		b. TELEPHONE NUMBER (No collect calls) 301-443-2367		8. OFFER DUE DATE/LOCAL TIME	
9. ISSUED BY DHHS/PSC/SAS/DAM Parklawn Building, Room 5C-18 5600 Fishers Lane MD Rockville 20857			CODE DAM		10. THIS ACQUISITION IS <input checked="" type="checkbox"/> UNRESTRICTED OR <input type="checkbox"/> SET ASIDE: % FOR: <div style="display: flex; justify-content: space-between;"> <div> NAICS: 332994 SIZE STANDARD: 1,000 </div> <div> <input type="checkbox"/> SMALL BUSINESS <input type="checkbox"/> HUBZONE SMALL BUSINESS <input type="checkbox"/> SERVICE-DISABLED VETERAN-OWNED SMALL BUSINESS </div> <div> <input type="checkbox"/> EMERGING SMALL BUSINESS <input type="checkbox"/> SOLE SOURCE <input type="checkbox"/> 8(A) </div> </div>		
11. DELIVERY FOR FOB DESTINATION UNLESS BLOCK IS MARKED <input type="checkbox"/> SEE SCHEDULE		12. DISCOUNT TERMS		13a. THIS CONTRACT IS A RATED ORDER UNDER DPAS (15 CFR 700) <input type="checkbox"/>		13b. RATING	
15. DELIVER TO OS-OIG-HQ Cohen Building 330 Independence Ave, SW Washington DC 20201		CODE OS-OIG-HQ		18. ADMINISTERED BY DHHS/PSC/SAS/DAM Parklawn Bldg., Room 5C-18 5600 Fishers Lane MD Rockville 20857		CODE DAM	
17a. CONTRACTOR/ OFFEROR GLOCK INC 236788 GLOCK INC 6000 HIGHLANDS PKWY 6000 HIGHLANDS PKWY SE GA SMYRNA 300827204		CODE 236788 FACILITY CODE		18a. PAYMENT WILL BE MADE BY FMS 5600 FISHERS LANE PARKLAWN BUILDING ROOM 16A-12 ROCKVILLE MD 20857		CODE FMS	
TELEPHONE NO.				17b. CHECK IF REMITTANCE IS DIFFERENT AND PUT SUCH ADDRESS IN OFFER			
19b. SUBMIT INVOICES TO ADDRESS SHOWN IN BLOCK 18a UNLESS BLOCK BELOW IS CHECKED <input type="checkbox"/> SEE ADDENDUM							
19. ITEM NO.	20. SCHEDULE OF SUPPLIES/SERVICES		21. QUANTITY	22. UNIT	23. UNIT PRICE	24. AMOUNT	
	Tax ID Number: 58-1652822 DUNS Number: 148099450 GLOCK PISTOLS U.S. Capitol Police Contract TSB200700001 For any questions regarding this order, please contact Juan D. Baez, Contracting Officer, at 301-443-2367 or juan.baez@psc.gov. For technical questions, please contact (b)(6) & (7)(c) Special Agent, at (b)(6) & (7)(c) or (b)(6) & (7)(c) @oig.hhs.gov. (Use Reverse and/or Attach Additional Sheets as Necessary)						
25. ACCOUNTING AND APPROPRIATION DATA See schedule					26. TOTAL AWARD AMOUNT (For Govt. Use Only) \$40,000.00		
<input type="checkbox"/> 27a. SOLICITATION INCORPORATES BY REFERENCE FAR 52.212-1, 52.212-4. FAR 52.212-3 AND 52.212-5 ARE ATTACHED. ADDEND <input type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED. <input checked="" type="checkbox"/> 27b. CONTRACT/PURCHASE ORDER INCORPORATES BY REFERENCE FAR 52.212-4. FAR 52.212-5 IS ATTACHED. ADDENDA <input type="checkbox"/> ARE <input checked="" type="checkbox"/> ARE NOT ATTACHED.					<input type="checkbox"/> 28. CONTRACTOR IS REQUIRED TO SIGN THIS DOCUMENT AND RETURN COPIES TO ISSUING OFFICE. CONTRACTOR AGREES TO FURNISH AND DELIVER ALL ITEMS SET FORTH OR OTHERWISE IDENTIFIED ABOVE AND ON ANY ADDITIONAL SHEETS SUBJECT TO THE TERMS AND CONDITIONS SPECIFIED HEREIN.		
<input checked="" type="checkbox"/> 29. AWARD OF CONTRACT REF. _____ OFFER DATED _____ YOUR OFFER ON SOLICITATION (BLOCK 5), INCLUDING ANY ADDITIONS OR CHANGES WHICH ARE SET FORTH HEREIN, IS ACCEPTED AS TO ITEMS:							
30a. SIGNATURE OF OFFEROR/CONTRACTOR				31a. UNITED STATES OF AMERICA (SIGNATURE OF CONTRACTING OFFICER) 			
30b. NAME AND TITLE OF SIGNER (Type or print)		30c. DATE SIGNED		31b. NAME OF CONTRACTING OFFICER (Type or print) JUAN BAEZ		31c. DATE SIGNED 11/10/2010	

AUTHORIZED FOR LOCAL REPRODUCTION
PREVIOUS EDITION IS NOT USABLE

STANDARD FORM 1449 (REV. 3/2006)
Prescribed by GSA - FAR (48 CFR) 53.212

19. ITEM NO.	20. SCHEDULE OF SUPPLIES/SERVICES	21. QUANTITY	22. UNIT	23. UNIT PRICE	24. AMOUNT							
	In accordance with the terms and conditions of U.S. Capitol Police Contract TSB200700001 and Glock Quote 001-00-2977617 dtd 10/8/2010, the following items are ordered:											
	<table border="1"> <thead> <tr> <th>Item</th> <th>Qty</th> <th>Price</th> <th>Ext. Price</th> </tr> </thead> <tbody> <tr> <td>(b)(7)e</td> <td></td> <td></td> <td>\$40,000.000</td> </tr> </tbody> </table>	Item	Qty	Price	Ext. Price	(b)(7)e			\$40,000.000			
Item	Qty	Price	Ext. Price									
(b)(7)e			\$40,000.000									
	Delivery: 11/21/2010 Period of Performance: 11/10/2010 to 11/30/2010											
1	Glock Order via U.S. Capitol Police Contract TSB200700001 Amount: \$31,200.00 Accounting Info: 2011.1994944.31935 Appr. Yr.: 2011 CAN: 1994944 Object Class: 31935 Funded: \$31,200.00 Amount: \$6,400.00 Accounting Info: 2011-19999BP-31935 Appr. Yr.: 2011 CAN: 19999BP Object Class: 31935 Funded: \$6,400.00 Amount: \$2,400.00 Accounting Info: 2011-1995352-31935 Appr. Yr.: 2011 CAN: 1995352 Object Class: 31935 Continued ...				40,000.00							

32a. QUANTITY IN COLUMN 21 HAS BEEN

ACCEPTED, AND CONFORMS TO THE CONTRACT, EXCEPT AS

☐ RECEIVED☐ INSPECTED☐ NOTED:

32b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE

32c. DATE

32d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE

32e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE

32f. TELEPHONE NUMBER OF AUTHORIZED GOVERNMENT REPRESENTATIVE

32g. E-MAIL OF AUTHORIZED GOVERNMENT REPRESENTATIVE

33. SHIP NUMBER

34. VOUCHER NUMBER

35. AMOUNT VERIFIED
CORRECT FOR

36. PAYMENT

37. CHECK NUMBER

☐ PARTIAL ☐ FINAL☐ COMPLETE ☐ PARTIAL ☐ FINAL

38. S/R ACCOUNT NUMBER

39. S/R VOUCHER NUMBER

40. PAID BY

41a. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT

42a. RECEIVED BY (Print)

41b. SIGNATURE AND TITLE OF CERTIFYING OFFICER

41c. DATE

42b. RECEIVED AT (Location)

42c. DATE REC'D (YY/MM/DD)

42d. TOTAL CONTAINERS

STANDARD FORM 1449 (REV. 3/2005) BACK

CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED

HHSP233201100043P

PAGE OF

3

4

NAME OF OFFEROR OR CONTRACTOR

GLOCK INC 236788

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	Funded: \$2,400.00 Period of Performance: 11/10/2010 to 12/31/2010 The total amount of award: \$40,000.00. The obligation for this award is shown in box 26.				

NSN 7540-01-162-8067

OPTIONAL FORM 336 (4-88)
Sponsored by GSA
FAR (48 CFR) 53.110

ORDER FOR SUPPLIES OR SERVICES

PAGE OF PAGES

1 2

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

1. DATE OF ORDER 08/13/2010		2. CONTRACT NO. (If any) HHSP23320100001EI		6. SHIP TO: a. NAME OF CONSIGNEE US-DHHS-OIG			
3. ORDER NO. HHSP23337005T		4. REQUISITION/REFERENCE NO. OS41519					
5. ISSUING OFFICE (Address correspondence to) DHHS/PSC/SAS/DAM Parklawn Building, Room 5-101 5600 Fishers Lane Rockville MD 20857				b. STREET ADDRESS 330 C STREET, SW SWITZER BUILDING, RM 5325 WASHINGTON DC 20201-0001			
				c. CITY WASHINGTON	e. ZIP CODE 20201-0001		
7. TO: a. NAME OF CONTRACTOR GOLDBELT WOLF, LLC 1356287				f. SHIP VIA			
b. COMPANY NAME				8. TYPE OF ORDER <input type="checkbox"/> a. PURCHASE <input checked="" type="checkbox"/> b. DELIVERY			
c. STREET ADDRESS GOLDBELT WOLF, LLC 5500 CHEROK 5500 CHEROKEE AVE STE 100				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.			
d. CITY ALEXANDRIA		e. STATE VA	f. ZIP CODE 223122357	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.			
9. ACCOUNTING AND APPROPRIATION DATA See Schedule				10. REQUISITIONING OFFICE DHHS/PSC/SAS/DAM			
11. BUSINESS CLASSIFICATION (Check appropriate box(es)) <input type="checkbox"/> a. SMALL <input type="checkbox"/> b. OTHER THAN SMALL <input type="checkbox"/> c. DISADVANTAGED <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				12. F.O.B. POINT Destination			
13. PLACE OF a. INSPECTION Destination		14. GOVERNMENT B/L NO. b. ACCEPTANCE Destination		15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date) 08/20/2010			
16. DISCOUNT TERMS							
17. SCHEDULE (See reverse for Rejections)							
ITEM NO. (a)	SUPPLIES OR SERVICES (b)			QUANTITY ORDERED (c)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	Tax ID Number: 42-1730084 DUNS Number: 806914482 GOLDBELT WOLF- LWRCI Weapons Order for NTOS, OIG For any quesitons regarding this order, please contact Juan D. Baez, Contracting Officer, at 301-443-2367 or juan.baez@psc.gov. Continued ...						
18. SHIPPING POINT		19. GROSS SHIPPING WEIGHT		20. INVOICE NO.		17(h) TOTAL (Cont. pages)	
21. MAIL INVOICE TO:							
a. NAME FMS						\$25,250.48	
b. STREET ADDRESS 5600 FISHERS LANE (or P.O. Box) PARKLAWN BUILDING ROOM 16A-12							
c. CITY ROCKVILLE						\$25,250.48	
d. STATE MD							
e. ZIP CODE 20857							
22. UNITED STATES OF AMERICA BY (Signature)				Electronically Signed 08/16/2010		23. NAME (Typed) JUAN (. BAEZ TITLE: CONTRACTING/ORDERING OFFICER	

ORDER FOR SUPPLIES OR SERVICES

PAGE NO

SCHEDULE - CONTINUATION

2

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

DATE OF ORDER

CONTRACT NO.

ORDER NO.

08/13/2010

HHSP23320100001EI

HHSP23337005T

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	For technical questions, please contact (b)(6) & (7)(c), Special Agent at (b)(6) & (7)(c) or (b)(6) & (7)(c)@oig.hhs.gov.					
	In accordance with the terms and conditions of Contract HHSP23320100001EI, the following items are order:					
	CLIN PART # PRICE QTY TOTAL					
	0025 (b)(7)e, (b)(4)					
	0101					
	0102					
	0103					
	0104					
	0105					
	0106					
	TOTAL \$25,250.48					
	Period of Performance: 06/18/2010 to 06/17/2015					
1	LWRC INTERNATIONAL				25,250.48	
	Accounting Info: 2010-1991338-31935 Appr. Yr.: 2010 CAN: 1991338 Object Class: 31935 Funded: \$18,432.85 Accounting Info: 2010-1994881-31935 Appr. Yr.: 2010 CAN: 1994881 Object Class: 31935 Funded: \$5,050.10 Accounting Info: 2010-19999EJ-31935 Appr. Yr.: 2010 CAN: 19999EJ Object Class: 31935 Funded: \$1,767.53					
	The total amount of award: \$25,250.48. The obligation for this award is shown in box 17(i).					

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

\$25,250.48

AUTHORIZED FOR LOCAL REPRODUCTION
PREVIOUS EDITION NOT USABLE

OPTIONAL FORM 348 (Rev. 4/2006)

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

ORDER FOR SUPPLIES OR SERVICES

PAGE OF PAGES

1 4

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

1. DATE OF ORDER 01/28/2009 2. CONTRACT NO. (if any) 6. SHIP TO: a. NAME OF CONSIGNEE

3. ORDER NO. HHSP233200900127P 4. REQUISITION/REFERENCE NO. 09EOIG007114 HHS/OIG/OI

5. ISSUING OFFICE (Address correspondence to) DHHS/PSC/SAS/DAM PARKLAWN BUILDING, ROOM 5-101 5600 FISHERS LANE ROCKVILLE MD 20857 b. STREET ADDRESS ATTN: (b)(6) & (7)(c) (b)(6) & (7)(c) 330 INDEPENDENCE AVE., S.W. COHEN BUILDING, ROOM 5409 c. CITY WASHINGTON d. STATE DC e. ZIP CODE 20201

7. TO: HARRIS COUCH a. NAME OF CONTRACTOR GLOCK, INC. f. SHIP VIA

b. COMPANY NAME c. STREET ADDRESS 6000 HIGHLANDS PARKWAY P.O. BOX 369 770-319-4763 8. TYPE OF ORDER ☒ a. PURCHASE ☐ b. DELIVERY 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.

d. CITY SMYRNA e. STATE GA f. ZIP CODE 30082 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.

9. ACCOUNTING AND APPROPRIATION DATA See Schedule 10. REQUISITIONING OFFICE HHHS/OIG/OI

11. BUSINESS CLASSIFICATION (Check appropriate box(es)) ☐ a. SMALL ☒ b. OTHER THAN SMALL ☐ c. DISADVANTAGED ☐ d. WOMEN-OWNED ☐ e. HUBZone ☐ f. EMERGING SMALL BUSINESS ☐ g. SERVICE-DISABLED VETERAN-OWNED 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) 30 Days After Award 16. DISCOUNT TERMS 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)
	Tax ID Number: 58-1652822 DUNS Number: 148099450 ***NOTE: Please contact project officer S/A (b)(6) & (7)(c) 72 hours prior order/delivery*** Continued ...					

18. SHIPPING POINT	19. GROSS SHIPPING WEIGHT	20. INVOICE NO.	17(h) TOTAL (Cont. pages)
21. MAIL INVOICE TO:			
a. NAME	PSC/FMS (301) 443-3020	\$27,000.00	17(i) GRAND TOTAL
b. STREET ADDRESS (or P.O. Box)	PARKLAWN BUILDING, ROOM 16A-12 5600 FISHERS LANE		
c. CITY	ROCKVILLE	\$27,000.00	
d. STATE	MD	20857	

22. UNITED STATES OF AMERICA BY (Signature) 23. NAME (Typed) WILLIAM LI TITLE: CONTRACTING/ORDERING OFFICER

AUTHORIZED FOR LOCAL REPRODUCTION PREVIOUS EDITION NOT USABLE

OPTIONAL FORM 347 (Rev. 2/2005) Prescribed by GSA/FAR 48 CFR 53.211(a)

If desired, this order (or a 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 service, 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.

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

SHIPMENT NUMBER	PARTIAL		DATE RECEIVED	SIGNATURE OF AUTHORIZED U.S. GOV'T REP.	DATE
	FINAL				
TOTAL CONTAINERS		GROSS WEIGHT	RECEIVED AT	TITLE	

[illegible]

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

PAGE OF PAGES

3

4

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

DATE OF ORDER

CONTRACT NO.

ORDER NO.

01/28/2009

HHSP233200900127P

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY ORDERED (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)	QUANTITY ACCEPTED (G)
1	<p>IF YOU HAVE ANY QUESTIONS REGARDING THIS ORDER, PLEASE CONTACT EPE PACANTARA ON 301-443-7076.</p> <p>To Purchase the following (b)(7)e</p> <p>Purchasing (b)(7)e</p> <p>(b)(7)e</p> <p>US CAPITOL POLICE CONTRACT #: TSB200700001</p> <p>Details:</p> <p>(b)(7)e, (b)(4)</p> <p>Total cost: \$16,000.00</p> <p>(b)(7)e, (b)(4)</p> <p>Total cost: \$11,000.00</p> <p>***Price include Shipping and Handling to Inside Delivery***</p> <p>Amount: \$19,980.00 Accounting Info: 7590128 CAN: 1991402 Obj. Class: 31935 FY: 2009 Funded: \$19,980.00</p> <p>Amount: \$4,050.00 Accounting Info: 7590128 CAN: 19999BP Obj. Class: 31935 FY: 2009 Funded: \$4,050.00</p> <p>Amount: \$2,970.00 Accounting Info: 7590128 CAN: 19999FK Obj. Class: 31935 FY: 2009 Funded: \$2,970.00</p> <p>900 PROJECT OFFICER AUTHORITY</p> <p>The Project Officer S/A (b)(6) & (7)(c) is hereby designated to monitor the performance of this order on behalf of the Government. The Project Officer will provide no supervisory or instructional assistance to Contractor personnel. The Project Officer's function is primarily to provide the Contractor Continued ...</p>				27,000.00	

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

NSN 7640-01-152-8082

505-40-101

OPTIONAL FORM 348 (Rev. 8/95)

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

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

PAGE OF PAGES

4

4

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

DATE OF ORDER CONTRACT NO.

01/28/2009

ORDER NO.

RHSP233200900127P

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY ORDERED (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)	QUANTITY ACCEPTED (G)
	<p>with working data. The Project Officer is not empowered to make any commitments, nor authorized to make any changes which affect prices, terms, or delivery as specified on this order. Any such proposed changes shall be brought to the immediate attention of the Ordering Officer for action. The acceptance of any change by the Contractor without specific approval and written consent of the Ordering Officer will be at the Contractor's own risk.</p> <p>920 MANUFACTURER'S WARRANTY Manufacturer's standard commercial warranty is in effect for the above item(s) beginning with the date of installation. Warranty is in effect.</p> <p>929 INVOICE INFORMATION/CLAUSES INCORPORATED BY REFERENCE</p> <p>1. INVOICE INFORMATION</p> <p>IN ADDITION TO THE INFORMATION REQUIRED BY 52.232-25 (PROMPT PAYMENT), YOUR INVOICE MUST CONTAIN THE FOLLOWING: TAX IDENTIFICATION NUMBER (EMPLOYER'S IDENTIFICATION NUMBER) OR SOCIAL SECURITY NUMBER.</p> <p>"IN ORDER TO VERIFY THAT WE ARE MAKING PAYMENT TO THE CORRECT BANK ACCOUNT, WE REQUIRE THAT YOU REFERENCE THE TIN, DUNS AND THE CORRECT BANKING INFORMATION (ABA) ON ALL INVOICES. THIS WILL ENSURE PROPER PAYMENT."</p> <p>2. CLAUSES INCORPORATED BY REFERENCE (FAR 52.252-2) (FEB 1998)</p> <p>THIS CONTRACT INCORPORATES ONE OR MORE CLAUSES BY REFERENCE, WITH THE SAME FORCE AND EFFECT AS IF THEY WERE GIVEN IN FULL TEXT. UPON REQUEST, THE CONTRACTING OFFICER WILL MAKE THEIR FULL TEXT AVAILABLE. ALSO, THE FULL TEXT OF A CLAUSE MAY BE ACCESSED ELECTRONICALLY AT THIS ADDRESS: HTTP://WWW.ACQNET.GOV/FAR</p> <p>FEDERAL ACQUISITION REGULATION (48 CFR CHAPTER 1) CLAUSES</p> <p>FAR 52.204-7 CENTRAL CONTRACTOR REGISTRATION (APR 2004)</p> <p>FAR 52.212-4 CONTRACT TERMS AND CONDITIONS - COMMERCIAL ITEMS (FEB 2007)</p> <p>FAR 52.232-33 PAYMENT BY ELECTRONIC FUNDS TRANSFER - CENTRAL CONTRACTOR REGISTRATION (OCT 2003)</p> <p>The total amount of award: \$27,000.00. The obligation for this award is shown in box 17(1).</p>					

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

NSN 7840-01-152-8082

503-49-101

OPTIONAL FORM 348 (Rev. 08/95)
Prescribed by GSA
FAR (48 CFR) 53.213(c)

pd.

GLOCK, Inc.

USA



GLOCK, Inc. Post Office Box 369
Smyrna, Georgia 30081 USA

Tel. (770) 432-1202
Fax (770) 433-8719

US Health & Human Svcs - Rockvill
Parklawn Bldg, Room 16A-12
5600 Fishers Lane
Rockville, MD
20857

Customer : 30139
FFL No. : Law Enforcement Agency
Tax Number :
Del. Terms : Free on board
Del. Date : 02/17/2009
Forw. Agent: Fedex 2Day (D&I)
Customer PO: PO #HHSP233200900006A
Attn : (b)(6) & (7)(c)

Delivery Address:

US Health & Human Svcs Washington
Federal Bldg, Cohen Bldg
400 Independence Avenue, SW
Suite #5409
Washington, DC

INVOICE

COPY

Invoice No	Date	Order Number	Contact	Page
SLS/ 472471	02/17/2009	391925	176	1

Pos	Deliv	Item Number	Price/Unit	Discount	Total Price
No.	Qty.	Item Description	USD		

** NOTE TO SHIPPER: PLEASE CONTACT PROJECT OFFICER S/A (b)(6) & (b)(7)(c)
(b)(6) & (b)(7)(c) 72 HOURS PRIOR TO DELIVERY **

US HHS Order No.: PO #HHSP233200900006A
US HHS Contract No.: 58200700001
US HHS Ref./Req. No.: 056010007114

Each pistol comes equipped with six magazines

FOB: Destination

Send payment to the attention of:
Bob Elliott
Chief Manager

Notify the following individual in
event of defective invoice:
Donna McClure
(70-432-1202 x6212

1 58-067-08-9M 21808
FEDERAL TAX PAYER ID# 58 1652822
SA STATE SALES TAX# 038 04 33264 2

Copy Forward:

0.00



GLOCK, Inc.

USA

Invoice No.	Date	Order Number	Contact	Page
SLS/ 472870	02/17/2009	391925	176	2

Pos	Deliv	Item Number	Price/Unit	Discount	Total Price
No.	Qty.	Item Description	USD		

Carry Forward: 0.00

5	(b)(7)e	(b)(7)e			16,000.00
---	---------	---------	--	--	-----------

(b)(7)e

Goods	FAE1	Total USD
16,000.00	Paid	16,000.00

Payment : Net 30 Days

Should there be any discrepancies with your order, please contact customer service immediately.

GLOCK, Inc.

USA



GLOCK, Inc. Post Office Box 369
Smyrna Georgia 30081 USA

Tel (770) 432 1202
Fax (770) 433 8719

US Health & Human Svcs - Rockville
Parklawn Bldg, Room 16A-12
5600 Fishers Lane
Rockville, MD
20857

Customer : 30139
Ref. No. : Law Enforcement Agency
Inv. Number :
Del. Terms : Free on board
Del. Date : 02/16/2009
Forw. Agent: Fedex 2day (DHL)
Customer PO: PO #HHSP233200-00000000
Attn : (b)(6) & (7)(c)

INVOICE

***COPY**

Office Address:
3110 11th Street, NW
1st Floor
Independence Building
Suite #440
Washington, DC

Invoice No.	Date	Order Number	Contract	Unit
SLS 172	02/16/2009	391925	176	

Part	Qty	Item Number	Price/Unit	Contract	Unit Price
No.	Qty.	Item Description	USD		

** NOTE TO SHIPPING: PLEASE CONTACT PROJECT OFFICER S/A (b)(6) & (b)(7)(c)
(b)(6) & (b)(7)(c) 72 HOURS PRIOR TO DELIVERY **

US HHS Order No.: PO #H-SP2332009000066
US HHS Contract No.: 5B200700001
US HHS Ref./Req. No.: 09E016007114

Each product comes equipped with six magazines

FOB: Destination

Send payment to the attention of:
Bob Elliott
Credit Manager

Verify the following immediately in
event of defective invoice:
Date of Receipt
(770) 432 1202 (770) 433 8719

1 58 067 08 9M 21808
FEDERAL TAX PAYER ID# 58-1652822
GA STATE SALES TAX# 033-24 33264 2

Copy to Project



GLOCK, Inc.

USA

Invoice No.	Date	Order Number	Contact	Page
SLS/ 472715	02/16/2009	391925	176	2

Pos	Deliv	Item Number	Price/Unit	Discount	Total Price
No.	Qty.	Item Description	USD		

Carry Forward: 0.00

10	(b)(7)e	f.o.c.			
15	(b)(7)e				11,000.00

Goods
11,000.00

Total USD
11,000.00

Payment : Net 30 Days

Should there be any discrepancies with your order, please contact customer service immediately.

SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEM OFFEROR TO COMPLETE BLOCKS 12, 17, 23, 24, & 30				1. REQUISITION NUMBER OS16500		PAGE OF 1 5	
2. CONTRACT NO.		3. AWARD/ EFFECTIVE DATE		4. ORDER NUMBER HHSP233200900226A		5. SOLICITATION NUMBER	
7. FOR SOLICITATION INFORMATION CALL:		a. NAME KIA MYLES		b. TELEPHONE NUMBER (No collect calls) 301-443-3086		8. OFFER DUE DATE/LOCAL TIME	
9. ISSUED BY DHHS/PSC/SAS/DAM Parklawn Building, Room 5-101 5600 Fishers Lane Rockville MD 20857				10. THIS ACQUISITION IS <input checked="" type="checkbox"/> UNRESTRICTED OR <input type="checkbox"/> SET ASIDE: % FOR: <div style="display: flex; justify-content: space-between;"> <div> NAICS: 332994 SIZE STANDARD: 1,000 </div> <div> <input type="checkbox"/> SMALL BUSINESS <input type="checkbox"/> HUBZONE SMALL BUSINESS <input type="checkbox"/> SERVICE-DISABLED VETERAN-OWNED SMALL BUSINESS </div> <div> <input type="checkbox"/> EMERGING SMALL BUSINESS <input type="checkbox"/> SOLE SOURCE <input type="checkbox"/> 8(A) </div> </div>			
11. DELIVERY FOR FOB DESTINATION UNLESS BLOCK IS MARKED <input type="checkbox"/> SEE SCHEDULE		12. DISCOUNT TERMS		13a. THIS CONTRACT IS A RATED ORDER UNDER DPAS (15 CFR 700) <input type="checkbox"/>		13b. RATING	
15. DELIVER TO SA (b)(6) & (7)(c) US DHHS OIG - OI 330 C St., SW, Room 5300 (b)(6) & (7)(c) Washington DC 20201		CODE OS-OIG-HQ		16. ADMINISTERED BY DHHS/PSC/SAS/DAM Parklawn Bldg., Room 5-101 5600 Fishers Lane Rockville MD 20857		CODE DAM	
17a. CONTRACTOR/OFFEROR GLOCK INC 236788 Attn: Harris Couch GLOCK INC 6000 HIGHLANDS PKWY SE SMYRNA GA 30082-7204		CODE 236788 FACILITY CODE		18a. PAYMENT WILL BE MADE BY FMS 5600 FISHERS LANE PARKLAWN BUILDING ROOM 16A-12 ROCKVILLE MD 20857		CODE FMS	
TELEPHONE NO. 770-319-4763				17b. CHECK IF REMITTANCE IS DIFFERENT AND PUT SUCH ADDRESS IN OFFER			
				18b. SUBMIT INVOICES TO ADDRESS SHOWN IN BLOCK 18a UNLESS BLOCK BELOW IS CHECKED <input type="checkbox"/> SEE ADDENDUM			
19. ITEM NO.	20. SCHEDULE OF SUPPLIES/SERVICES			21. QUANTITY	22. UNIT	23. UNIT PRICE	24. AMOUNT
1	Tax ID Number: 58-1652822 DUNS Number: 148099450 If you have any questions regarding this contract please contact Kia Myles 301-443-3086. Delivery: 90 Days After Award United States Capitol Police Contract CO TSB200700001 Continued ... (Use Reverse and/or Attach Additional Sheets as Necessary)						147,800.00
25. ACCOUNTING AND APPROPRIATION DATA See schedule						26. TOTAL AWARD AMOUNT (For Govt. Use Only) \$147,800.00	
<input type="checkbox"/> 27a. SOLICITATION INCORPORATES BY REFERENCE FAR 52.212-1, 52.212-4. FAR 52.212-3 AND 52.212-5 ARE ATTACHED. ADDEND <input type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED. <input type="checkbox"/> 27b. CONTRACT/PURCHASE ORDER INCORPORATES BY REFERENCE FAR 52.212-4. FAR 52.212-5 IS ATTACHED. ADDENDA <input type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED.						<input checked="" type="checkbox"/> 29. AWARD OF CONTRACT REF. _____ OFFER DATED _____ YOUR OFFER ON SOLICITATION (BLOCK 5), INCLUDING ANY ADDITIONS OR CHANGES WHICH ARE SET FORTH HEREIN, IS ACCEPTED AS TO ITEMS:	
28. CONTRACTOR IS REQUIRED TO SIGN THIS DOCUMENT AND RETURN COPIES TO ISSUING OFFICE. CONTRACTOR AGREES TO FURNISH AND DELIVER ALL ITEMS SET FORTH OR OTHERWISE IDENTIFIED ABOVE AND ON ANY ADDITIONAL SHEETS SUBJECT TO THE TERMS AND CONDITIONS SPECIFIED HEREIN.							
30a. SIGNATURE OF OFFEROR/CONTRACTOR				31a. UNITED STATES OF AMERICA (SIGNATURE OF CONTRACTING OFFICER)			
30b. NAME AND TITLE OF SIGNER (Type or print)		30c. DATE SIGNED		31b. NAME OF CONTRACTING OFFICER (Type or print) DONALD S. HADRICK		31c. DATE SIGNED	

19. ITEM NO.	20. SCHEDULE OF SUPPLIES/SERVICES	21. QUANTITY	22. UNIT	23. UNIT PRICE	24. AMOUNT
	- GLOCK QUOTE No. 001-00-1590373				
	(b)(7)e, (b)(4)				
	Total \$38,720.00				
	(b)(7)e, (b)(4)				
	- GLOCK QUOTE No. 001-0182524				
	(b)(7)e, (b)(4)				
	Total \$64,000.00				
	(b)(7)e, (b)(4)				
	Continued ...				

32a. QUANTITY IN COLUMN 21 HAS BEEN

☐ RECEIVED☐ INSPECTED☐ NOTED:

ACCEPTED, AND CONFORMS TO THE CONTRACT, EXCEPT AS

32b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE

32c. DATE

32d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE

32e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE

32f. TELEPHONE NUMBER OF AUTHORIZED GOVERNMENT REPRESENTATIVE

32g. E-MAIL OF AUTHORIZED GOVERNMENT REPRESENTATIVE

33. SHIP NUMBER

34. VOUCHER NUMBER

35. AMOUNT VERIFIED
CORRECT FOR

36. PAYMENT

37. CHECK NUMBER

☐ PARTIAL ☐ FINAL☐ COMPLETE ☐ PARTIAL ☐ FINAL

38. S/R ACCOUNT NUMBER

39. S/R VOUCHER NUMBER

40. PAID BY

41a. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT

42a. RECEIVED BY (Print)

41b. SIGNATURE AND TITLE OF CERTIFYING OFFICER

41c. DATE

42b. RECEIVED AT (Location)

42c. DATE REC'D (YY/MM/DD)

42d. TOTAL CONTAINERS

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED HHSP233200900226A	PAGE	OF
		3	5

NAME OF OFFEROR OR CONTRACTOR
GLOCK INC 236788

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
(b)(4), (b)(7)e					
Continued ...					

CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED

HHSP233200900226A

PAGE OF

4

5

NAME OF OFFEROR OR CONTRACTOR

GLOCK INC 236788

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	(b)(4), (b)(7)e				
	Amount: \$49,720.00 Accounting Info: 2009-1991402-26834 Appr. Yr.: 2009 CAN: 1991402 Object Class: 26834 Funded: \$49,720.00				
	Amount: \$86,310.40 Accounting Info: 2009-1991402-26834 Appr. Yr.: 2009 CAN: 1991402 Object Class: 26834 Funded: \$86,310.40				
	Amount: \$10,788.80 Accounting Info: 2009-19999LH-26834 Appr. Yr.: 2009 CAN: 19999LH Object Class: 26834 Funded: \$10,788.80				
	Amount: \$980.80 Accounting Info: 2009-19999BP-26834 Appr. Yr.: 2009 CAN: 19999BP Object Class: 26834 Funded: \$980.80 Continued ...				

CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED
HHSP233200900226APAGE OF
5 5

NAME OF OFFEROR OR CONTRACTOR

GLOCK INC 236788

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
900	PROJECT OFFICER AUTHORITY The Project Officer (b)(6) & (b)(7)(c) is hereby designated to monitor the performance of this order on behalf of the Government. The Project Officer will provide no supervisory or instructional assistance to Contractor personnel. The Project Officer's function is primarily to provide the Contractor with working data. The Project Officer is not empowered to make any commitments, nor authorized to make any changes which affect prices, terms, or delivery as specified on this order. Any such proposed changes shall be brought to the immediate attention of the Ordering Officer for action. The acceptance of any change by the Contractor without specific approval and written consent of the Ordering Officer will be at the Contractor's own risk.				
929	INVOICE INFORMATION/CLAUSES INCORPORATED BY REFERENCE 1. INVOICE INFORMATION IN ADDITION TO THE INFORMATION REQUIRED BY 52.232-25 (PROMPT PAYMENT), YOUR INVOICE MUST CONTAIN THE FOLLOWING: TAX IDENTIFICATION NUMBER (EMPLOYER'S IDENTIFICATION NUMBER) OR SOCIAL SECURITY NUMBER. IN ORDER TO VERIFY THAT WE ARE MAKING PAYMENT TO THE CORRECT BANK ACCOUNT, WE REQUIRE THAT YOU REFERENCE THE TIN, DUNS AND THE CORRECT BANKING INFORMATION (ABA) ON ALL INVOICES. THIS WILL ENSURE PROPER PAYMENT. 2. CLAUSES INCORPORATED BY REFERENCE (FAR 52.252-2) (FEB 1998) THIS CONTRACT INCORPORATES ONE OR MORE CLAUSES BY REFERENCE, WITH THE SAME FORCE AND EFFECT AS IF THEY WERE GIVEN IN FULL TEXT. UPON REQUEST, THE CONTRACTING OFFICER WILL MAKE THEIR FULL TEXT AVAILABLE. ALSO, THE FULL TEXT OF A CLAUSE MAY BE ACCESSED ELECTRONICALLY AT THIS ADDRESS: HTTP://WWW.ACQNET.GOV/FAR FEDERAL ACQUISITION REGULATION (48 CFR CHAPTER 1) CLAUSES FAR 52.204-7 CENTRAL CONTRACTOR REGISTRATION (APR 2008) FAR 52.212-4 CONTRACT TERMS AND CONDITIONS - COMMERCIAL ITEMS (MAR 2009) FAR 52.232-33 PAYMENT BY ELECTRONIC FUNDS TRANSFER - CENTRAL CONTRACTOR REGISTRATION (OCT 2003)				
920	MANUFACTURER'S WARRANTY Manufacturer's standard commercial warranty is in effect for the above item(s) ning with the date of installation. Warranty is in effect. The total amount of award: \$147,800.00. The obligation for this award is shown in box 26.				

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT		1. CONTRACT ID CODE		PAGE OF PAGES 1 4	
2. AMENDMENT/MODIFICATION NO. 0001		3. EFFECTIVE DATE 05/12/2010		4. REQUISITION/PURCHASE REQ. NO.	
5. PROJECT NO. (If applicable)		6. ISSUED BY CODE DAM DHHS/PSC/SAS/DAM Parklawn Building, Room 5-101 5600 Fishers Lane Rockville MD 20857		7. ADMINISTERED BY (If other than Item 6) CODE DAM DHHS/PSC/SAS/DAM Parklawn Bldg., Room 5-101 5600 Fishers Lane Rockville MD 20857	
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code) GLOCK INC 236788 Attn: Harris Couch GLOCK INC 6000 HIGHLANDS PKWY SE 770-319-4763 SMYRNA GA 30082-7204		(x)		9A. AMENDMENT OF SOLICITATION NO.	
CODE 236788		FACILITY CODE		9B. DATED (SEE ITEM 11)	
		x		10A. MODIFICATION OF CONTRACT/ORDER NO. HHSP233200900226A	
				10B. DATED (SEE ITEM 13) 09/25/2009	

11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS

☐ The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers ☐ is extended. ☐ is not extended.
Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By separate letter or telegram which includes a reference to the solicitation and amendment numbers. FAILURE OF YOUR ACKNOWLEDGEMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If by virtue of this amendment you desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified.

12. ACCOUNTING AND APPROPRIATION DATA (If required) Net Decrease: -\$4,520.00
See Schedule

13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.

CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.
	B. THE ABOVE NUMBERED CONTRACT/ORDER IS MODIFIED TO REFLECT THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation date, etc.) SET FORTH IN ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).
X	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF: FAR 52.212-4 Contract Terms and Conditions- Commercial Items, (c) Changes (Mar 2009)
	D. OTHER (Specify type of modification and authority)

E. IMPORTANT: Contractor ☐ is not. ☒ is required to sign this document and return 1 copies to the issuing office.

14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)

Tax ID Number: 58-1652822

DUNS Number: 148099450

Pursuant to FAR 52.212-4 Contract Terms and Conditions-Commercial Items, (c) Changes (Mar 2009), the subject purchase order is hereby modified to reflect changes in pricing.

- GLOCK QUOTE No. 001-00-1590373

(b)(7)(e), (b)(4)

(b)(7)(e), (b)(4)

Except as provided herein, all terms and conditions of the document referenced in Item 9A or 10A, as heretofore changed, remains unchanged and in full force and effect.

15A. NAME AND TITLE OF SIGNER (Type or print)		16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print) DONALD S. HADRICK	
15B. CONTRACTOR/OFFEROR (Signature of person authorized to sign)	15C. DATE SIGNED	16B. UNITED STATES OF AMERICA (Signature of Contracting Officer)	16C. DATE SIGNED

NSN 7540-01-152-8070
Previous edition unusable

STANDARD FORM 30 (REV. 10-83)
Prescribed by GSA
FAR (48 CFR) 53.243

NAME OF OFFEROR OR CONTRACTOR
GLOCK INC 236788

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	line item total is changed from \$11,000 to the new line item total-\$10,000.				
	The corrected Purchase Order amount is \$143,280.00.				
	Delivery: 90 Days After Award				
	Delivery Location Code: OS-OIG-HQ				
	SA (b)(7)(e), (b)(6) & (7)(c)				
	US DHHS OIG - OI				
	330 C St., SW, Room 5300				
	(b)(7)(e), (b)(6) & (7)(c)				
	Washington DC 20201 US				
	FOB: Destination				
	Change Item 1 to read as follows (amount shown is the obligated amount):				
1	United States Capitol Police Contract CO TSB200700001				-4,520.00
	- GLOCK QUOTE No. 001-00-1590373				
	(b)(7)(e), (b)(4)				
	Total \$38,720.00				
	(b)(7)(e), (b)(4)				
	- GLOCK QUOTE No. 001-0182524				
	(b)(7)(e), (b)(7)e				
	(b)(7)(e), (b)(7)e				
	(b)(7)(e), (b)(4)				
	Continued ...				

NAME OF OFFEROR OR CONTRACTOR
GLOCK INC 236788

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	(b)(4), (b)(7)e				
	Amount: \$45,200.00 Accounting Info: 2009-1991402-26834 Appr. Yr.: 2009 CAN: 1991402 Object Class: 26834 Funded: -\$4,520.00				
	Amount: \$86,310.40 Accounting Info: 2009-1991402-26834 Appr. Yr.: 2009 CAN: 1991402 Object Class: 26834 Funded: \$0.00				
	Amount: \$10,788.80 Accounting Info: 2009-19999LH-26834 Appr. Yr.: 2009 CAN: 19999LH Object Class: 26834 Funded: \$0.00				
	Amount: \$980.80 Accounting Info: 2009-19999BP-26834 Appr. Yr.: 2009 CAN: 19999BP Object Class: 26834 Funded: \$0.00				

ORDER FOR SUPPLIES OR SERVICES

PAGE OF PAGES

1

1

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

1. DATE OF ORDER 09/18/2001		2. CONTRACT NO. (if any) J-FBI-97-052		6. SHIP TO:	
3. ORDER NO. SA-01-0379		4. REQUISITION/REFERENCE NO. IGB0000014		a. NAME OF CONSIGNEE OIG/O/Attn (b)(6) & (7)(c) (b)(6) & (7)(c)	
5. ISSUING OFFICE (Address correspondence to) Dept. of Health and Human Services Office of Acquisition Management Room 443H, HHH Building. 200 Independence Ave., SW Washington DC 20201				b. STREET ADDRESS 330 Independence Ave., SW Room 5409 (Inside Delivery Only)	
				c. CITY Washington	d. STATE DC
				e. ZIP CODE 20201	
				f. SHIP VIA	
7. TO:				8. TYPE OF ORDER	
a. CONTRACTOR NAME: Glock, Inc. Attn: Jim Shortill P.O. Box 369 ADDRESS: Smyrna, GA 30082-5194				<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. <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.	
9. ACCOUNTING AND APPROPRIATION DATA 1991336 75-7518393.001 \$126,400.00 1994877 7510128 \$33,800.00 O/C 26,BZ CONTRACT TIN: 58-1652822				10. REQUISITIONING OFFICE Office of Inspector General Office of Investigations 11. BUSINESS CLASSIFICATION (Check appropriate box(es)) <input type="checkbox"/> SMALL <input checked="" type="checkbox"/> OTHER THAN SMALL <input type="checkbox"/> DISADVANTAGED <input type="checkbox"/> WOMEN-OWNED	
13. PLACE OF		14. GOVERNMENT B/L NO.		15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date) 12/31/2001	
a. INSPECTION Destination	b. ACCEPTANCE Destination			16. DISCOUNT TERMS N/A	

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)
0001	(b)(7)e INSIDE DELIVERY ONLY - Contractor is to contact (b)(6) & (b)(7)(c) at (b)(6) & (b)(7)(c) PRIOR to shipping.	(b)(7)e	ea	(b)(4)	\$160,000.00	

SEE BILLING INSTRUCTIONS ON REVERSE	18. SHIPPING POINT		19. GROSS SHIPPING WEIGHT		20. INVOICE NO.		17(h) TOT. (Cont. pages)
	21. MAIL INVOICE TO:						
	a. NAME Division of Fiscal Services, PSC Phone:301-443-3020						
	b. STREET ADDRESS (or P.O. Box) Room 16A12, Parkdawn Building 5600 Fishers Lane						
	c. CITY Rockville		d. STATE MD	e. ZIP CODE 20857		\$160,000.00	17(i) GRAND TOTAL

22. UNITED STATES OF AMERICA

23. NAME (Typed)

BY (Signature)

Gaynel M. Abadie
CONTRACTING/ORDERING OFFICERAUTHORIZED FOR LOCAL REPRODUCTION
Previous edition not usableOPTIONAL FORM 347 (REV. 6/95)
Prescribed by GSA/FAR 48 CFR 53.213 (e)

ORDER FOR SUPPLIES OR SERVICES

PAGE OF PAGES

1 6

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

1. DATE OF ORDER 05/22/2012		2. CONTRACT NO. (If any) HHSP23320100001EI		6. SHIP TO: a. NAME OF CONSIGNEE OS-OIG-HQ	
3. ORDER NO. HHSP23337077T		4. REQUISITION/REFERENCE NO. OS89257		b. STREET ADDRESS Cohen Building 330 Independence Ave, SW Washington DC 20201	
5. ISSUING OFFICE (Address correspondence to) DHHS/PSC/SAS/DAM Parklawn Building, Room 5C-18 5600 Fishers Lane Rockville MD 20857				c. CITY Washington	d. STATE DC
7. TO: a. NAME OF CONTRACTOR GOLDBELT WOLF, LLC 1356287				f. SHIP VIA	
b. COMPANY NAME				8. TYPE OF ORDER <input type="checkbox"/> a. PURCHASE <input checked="" type="checkbox"/> b. DELIVERY	
c. STREET ADDRESS GOLDBELT WOLF, LLC 5500 CHEROK 5500 CHEROKEE AVE STE 100				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.	
d. CITY ALEXANDRIA		e. STATE VA	f. ZIP CODE 223122357	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.	
9. ACCOUNTING AND APPROPRIATION DATA See Schedule				10. REQUISITIONING OFFICE DHHS/PSC/SAS/DAM	
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. 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	
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) 120 Days After Award	
				16. DISCOUNT TERMS	

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)
	Tax ID Number: 42-1730084 DUNS Number: 806914482 This is a FIRM FIXED PRICE CONTRACT Questions concerning this order may be referred to Joe Pirrone at Continued ...					
18. SHIPPING POINT		19. GROSS SHIPPING WEIGHT		20. INVOICE NO.		17(h) TOTAL (Cont. pages)
21. MAIL INVOICE TO:						
a. NAME PSC/FMS		\$208,336.50				17(i) GRAND TOTAL
b. STREET ADDRESS (or P.O. Box) PSC_invoices@psc.hhs.gov						
c. CITY		d. STATE	e. ZIP CODE	\$208,336.50		

22. UNITED STATES OF AMERICA BY (Signature) 	23. NAME (Typed) DONALD S. HADRICK TITLE: CONTRACTING/ORDERING OFFICER
---	--

AUTHORIZED FOR LOCAL REPRODUCTION
PREVIOUS EDITION NOT USABLE

OPTIONAL FORM 347 (Rev. 2/2012)
Prescribed by GSAR 48 CFR 53.219(i)

ORDER FOR SUPPLIES OR SERVICES

PAGE NO

SCHEDULE - CONTINUATION

2

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

DATE OF ORDER

CONTRACT NO.

ORDER NO.

05/22/2012

HHSP23320100001EI

HHSP23337077T

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
1	<p>Joseph.pirrone@psc.hhs.gov or on (301)443-9367.</p> <p>All product pricing is per BASE Contract Price List with effective date of April 25, 2012.</p> <p>Period of Performance: 06/18/2010 to 06/17/2015</p> <p>Goldbelt Wolf, LLC supplies as per Sales Quote Number GBW.12-Q-HHSGLK-01, dated April 26, 2012.</p> <p>(See Attached Price Quote of One (1) page)</p> <p>Questions concerning the shipping/delivery and package labeling identification shall be directed to (b)(6) & (7)(c) at (b)(6) & (7)(c) @oig.hhs.gov or on (b)(6) & (7)(c)</p> <p>NOTICE TO THE GOVERNMENT OF DELAYS</p> <p>In the event the Contractor encounters difficulty in either meeting performance requirements, anticipates difficulty in complying with contract delivery schedule or date, or has knowledge that any actual or potential situation is delaying or threatens to delay the timely performance of this contract, the Contractor shall immediately notify the CO, and the COR, in writing, giving pertinent details. This provision shall not be construed as a waiver by the Government of any delivery schedule or date or of any rights or remedies provided by law or under this contract.</p> <p>Amount: \$149,375.07 Accounting Info: 2012.1994944.26834 Appr. Yr.: 2012 CAN: 1994944 Object Class: 26834 Funded: \$149,375.07</p> <p>Amount: \$30,641.04 Accounting Info: 2012.19999BP.26834 Appr. Yr.: 2012 CAN: 19999BP Object Class: 26834 Funded: \$30,641.04</p> <p>Amount: \$11,490.39 Accounting Info: 2012.1996352.26834 Appr. Yr.: 2012 CAN: 1996352 Object Class: 26834 Funded: \$11,490.39</p> <p>Amount: \$13,127.40 Continued ...</p>				208,336.50	
TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))					\$208,336.50	

AUTHORIZED FOR LOCAL REPRODUCTION
PREVIOUS EDITION NOT USABLE

OPTIONAL FORM 348 (Rev. 4/2009)
Prescribed by GSA FPMR (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
05/22/2012

CONTRACT NO.

HHSP23320100001EI

ORDER NO.

HHSP23337077T

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>Accounting Info: 2012.1994944.26834 Appr. Yr.: 2012 CAN: 1994944 Object Class: 26834 Funded: \$13,127.40</p> <p>Amount: \$2,692.80 Accounting Info: 2012.19999BP.26834 Appr. Yr.: 2012 CAN: 19999BP Object Class: 26834 Funded: \$2,692.80</p> <p>Amount: \$1,009.80 Accounting Info: 2012.1996352.26834 Appr. Yr.: 2012 CAN: 1996352 Object Class: 26834 Funded: \$1,009.80</p> <p>INVOICE SUBMISSION</p> <p>The Contractor shall submit invoices once per month. A complete invoice with all required back-up documentation shall be sent electronically, via email, to:</p> <p>1. Contract Specialist via DAM mailbox: pscsas.invoices@psc.hhs.gov AND joseph.pirrone@psc.hhs.gov</p> <p>2. Contracting Officer's Representative (COR, (b)(6) & (7)(c) at (b)(6) & (7)(c)@oig.hhs.gov</p> <p>3. Financial Management Service (FMS): psc_invoices@psc.hhs.gov</p> <p>The subject line of your email invoice submission shall contain the contract number, contract line item number, the order number, if applicable, and the number of invoices.</p> <p>The Contractor shall send one email per contract per month. The email may have multiple invoices for the contract. Invoices must be in the following formats: PDF, TIFF, or Word. No Excel formats will be accepted. The electronic file cannot contain multiple invoices; example, 10 invoices requires 10 separate files (PDF or TIFF or Word).</p> <p>Invoices shall be submitted in accordance with the contract terms, i.e. payment schedule, progress payments, partial payments, deliverables, etc.</p> <p>All calls concerning contract payment shall be directed to the Contract Specialist.</p> <p>In accordance with FAR 52.212-4, Contract Terms and Conditions - Commercial Items, a proper invoice must include the following items:</p> <p>FAR 52.212-4(g) Invoice. Continued ...</p>					

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

\$0.00

AUTHORIZED FOR LOCAL REPRODUCTION
PREVIOUS EDITION NOT USABLE

OPTIONAL FORM 348 (Rev. 4/2008)
Prescribed by GSA FAR (48 CFR) 53.212(b)

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

PAGE NO

4

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

DATE OF ORDER
05/22/2012

CONTRACT NO.
HHSP23320100001ET

ORDER NO.
HHSP23337077T

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>(1) The Contractor shall submit an original invoice and three copies (or electronic invoice, if authorized) to the address designated in the contract to receive invoices. An invoice must include:</p> <p>(i) Name and address of the Contractor;</p> <p>(ii) Invoice date and number;</p> <p>(iii) Contract number, contract line item number and, if applicable, the order number;</p> <p>(iv) Description, quantity, unit of measure, unit price and extended price of the items delivered;</p> <p>(v) Shipping number and date of shipment, including the bill of lading number and weight of shipment if shipped on Government bill of lading;</p> <p>(vi) Terms of any discount for prompt payment offered;</p> <p>(vii) Name and address of official to whom payment is to be sent;</p> <p>(viii) Name, title, and phone number of person to notify in event of defective invoice; and</p> <p>(ix) Taxpayer Identification Number (TIN). The Contractor shall include its TIN on the invoice only if required elsewhere in this contract.</p> <p>(x) Electronic funds transfer (EFT) banking information.</p> <p>(A) The Contractor shall include EFT banking information on the invoice only if required elsewhere in this contract.</p> <p>(B) If EFT banking information is not required to be on the invoice, in order for the invoice to be a proper invoice, the Contractor shall have submitted correct EFT banking information in accordance with the applicable solicitation provision, contract clause (e.g., 52.232-33, Payment by Electronic Funds Transfer - Central Contractor Registration, or 52.232-34, Payment by Electronic Funds Transfer - Other Than Central Contractor Registration), or applicable agency procedures.</p> <p>(C) EFT banking information is not required if the Government waived the requirement to pay by EFT.</p> <p>(2) Invoices will be handled in accordance with the Prompt Payment Act (31 U.S.C. 3903) and Office of Management and Budget (OMB) prompt payment regulations at 5 CFR Part 1315.</p> <p>Continued ...</p>					

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

\$0.00

AUTHORIZED FOR LOCAL REPRODUCTION
PREVIOUS EDITION NOT USABLE

OPTIONAL FORM 348 (Rev. 4/2008)
Prescribed by GSA FPMR (48 CFR) 53.215(f)

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

PAGE NO

5

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

DATE OF ORDER
05/22/2012

CONTRACT NO.
HHSP23320100001EI

ORDER NO.
HHSP23337077T

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>Additionally, the FMS requires the contractor to include its Dunn and Bradstreet Number (DUNS) on each invoice.</p> <p>In accordance with OMB Memorandum, M-11-32, Agencies shall make payments to small businesses as soon as practicable, with the goal of making payments within 15 days of receipt of a proper invoice. If a small business contractor is not paid within this (15 day) accelerated period, the contractor will not be given a late-payment interest penalty. Interest penalties, as prescribed by the Prompt Payment Act, remain unchanged by means of this memorandum.</p> <p>All small businesses shall label all invoices as "Small Business".</p> <p>In accordance with the requirements of the Debt Collection Improvement Act of 1996, all payments under this order will be made by electronic funds transfer (EFT). The Contractor shall provide financial institution information to the Finance Office designated above in accordance with FAR 52.232-33 Payment by Electronic Funds Transfer - Central Contractor Registration.</p>					

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

\$0.00

AUTHORIZED FOR LOCAL REPRODUCTION
PREVIOUS EDITION NOT USABLE

OPTIONAL FORM 348 (Rev. 4/2008)
Prescribed by GSA FAR (48 CFR) 53.2130



GOLDBELT WOLF™
Quality without Compromise. Commitment without Boundaries.
Alaska Native 8(a) SDB

5500 Cherokee Avenue, Suite 100
Alexandria, VA 22312
Tel: 703-584-8889
www.goldbeltwolf.com

SALES QUOTE

QUOTE TO: (b)(6) & (7)(c)

National Training & Emergency Operations Branch
Department of Health & Human Services
Office of Inspector General

DATE: April 26, 2012

QUOTE #: GBW-12-Q-HHSGLK-01

SOLICITATION NUMBER: DHHS-OIG (b)(7)e RFQ

DHHS POC: (b)(6) & (7)(c)

PHONE:

EMAIL: doig.hhs.gov

GOLDBELT WOLF POC: Chris Cook

PHONE: (703) 584-8889 x261

EMAIL: chris.cook@goldbeltwolf.com

120 Days ARO	TBD	30 Days Net	DHHS-OIG Glock 23 RFQ
12510	(b)(7)e	(b)(7)e	(b)(7)e
12530	(b)(7)e	(b)(7)e	(b)(7)e
Chris Cook			TOTAL \$ 208,336.50

CERTIFIED BY:

Please contact Customer Service at 703-584-8889 with any questions or concerns.

THANK YOU FOR YOUR BUSINESS!

42-1730084	806914482	4W8U6
------------	-----------	-------

ORDER FOR SUPPLIES OR SERVICES

PAGE OF PAGES

1 2

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

1. DATE OF ORDER 04/19/2011		2. CONTRACT NO. (If any) HHSP23320100001EI		6. SHIP TO:	
3. ORDER NO. HHSP23337018T		4. REQUISITION/REFERENCE NO. OS62026		a. NAME OF CONSIGNEE US DHHS-OIG	
5. ISSUING OFFICE (Address correspondence to) DHHS/PSC/SAS/DAM Parklawn Building, Room 5-101 5600 Fishers Lane Rockville MD 20857				b. STREET ADDRESS 330 C Street, SW Switzer Building Washington DC 20201	
				c. CITY Washington	e. ZIP CODE 20201
7. TO:				f. SHIP VIA	
a. NAME OF CONTRACTOR GOLDBELT WOLF, LLC 1356287					
b. COMPANY NAME				8. TYPE OF ORDER	
c. STREET ADDRESS GOLDBELT WOLF, LLC 5500 CHEROK 5500 CHEROKEE AVE STE 100				<input type="checkbox"/> a. PURCHASE <input checked="" type="checkbox"/> b. DELIVERY 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.	
d. CITY ALEXANDRIA		e. STATE VA	f. ZIP CODE 223122357		
9. ACCOUNTING AND APPROPRIATION DATA See Schedule				10. REQUISITIONING OFFICE DHHS/PSC/SAS/DAM	
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					
13. PLACE OF		14. GOVERNMENT B/L NO.		15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date) 04/26/2011	
a. INSPECTION Destination	b. ACCEPTANCE Destination			16. DISCOUNT TERMS	

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)
	Tax ID Number: 42-1730084 DUNS Number: 806914482 Questions concerning this order may be referred to Patrick Purtill on (301) 443-3535. Please reference the order number in Block 3 when Continued ...					

SEE BILLING INSTRUCTIONS ON REVERSE	18. SHIPPING POINT		19. GROSS SHIPPING WEIGHT		20. INVOICE NO.		17(h) TOTAL (Cont. pages)		
	21. MAIL INVOICE TO:								
	a. NAME DHHS/PSC/SAS/DAM						\$12,625.24		
	b. STREET ADDRESS (or P.O. Box) Parklawn Building, Room 5C-18 5600 Fishers Lane								
c. CITY Rockville						d. STATE MD	e. ZIP CODE 20857	\$12,625.24	17(i) GRAND TOTAL

22. UNITED STATES OF AMERICA BY (Signature)

Rosanna Browning

23. NAME (Typed)
ROSANNA BROWNING
TITLE: CONTRACTING/ORDERING OFFICER

AUTHORIZED FOR LOCAL REPRODUCTION
PREVIOUS EDITION NOT USABLE

OPTIONAL FORM 347 (Rev. 4/2008)
Prescribed by GSA/FAR 48 CFR 53.213(e)

ORDER FOR SUPPLIES OR SERVICES
SCHEDULE - CONTINUATION

PAGE NO

2

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

DATE OF ORDER
04/19/2011

CONTRACT NO.
HHSP23320100001EI

ORDER NO.
HHSP23337018T

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)																																								
1	<p>calling. For technical questions, please contact (b)(6) & (7)(c) Special Agent, at (b)(6) & (7)(c) or (b)(6) & (7)(c) @oig.hhs.gov. Period of Performance: 06/18/2010 to 06/17/2015</p> <p>This contract contains multiple CLINS solely for the purpose of accounting for multiple funding sources.</p> <p>(b)(7)e (rifles and related equipment(b)(7)e of each) as follows:</p> <table><tr><th>CLIN</th><th>Part #</th><th>Description</th><th>Price</th><th>Ext. Price</th></tr><tr><td>0025</td><td>(b)(7)e, (b)(4)</td><td></td><td></td><td></td></tr><tr><td>0101</td><td></td><td></td><td></td><td></td></tr><tr><td>0102</td><td></td><td></td><td></td><td></td></tr><tr><td>0103</td><td></td><td></td><td></td><td></td></tr><tr><td>0104</td><td></td><td></td><td></td><td></td></tr><tr><td>0105</td><td></td><td></td><td></td><td></td></tr><tr><td>0106</td><td></td><td></td><td></td><td></td></tr></table> <p>Accounting Info: 2011.1994966.26834 Appr. Yr.: 2011 CAN: 1994966 Object Class: 26834 Funded: \$9,847.69</p>	CLIN	Part #	Description	Price	Ext. Price	0025	(b)(7)e, (b)(4)				0101					0102					0103					0104					0105					0106								9,847.69	
CLIN	Part #	Description	Price	Ext. Price																																										
0025	(b)(7)e, (b)(4)																																													
0101																																														
0102																																														
0103																																														
0104																																														
0105																																														
0106																																														
2	<p>CAN 1994881</p> <p>Accounting Info: 2011.1994881.26834 Appr. Yr.: 2011 CAN: 1994881 Object Class: 26834 Funded: \$2,020.04</p>				2,020.04																																									
3	<p>CAN 1995350</p> <p>Accounting Info: 2011.1995350.26834 Appr. Yr.: 2011 CAN: 1995350 Object Class: 26834 Funded: \$757.51</p>				757.51																																									

AUTHORIZED FOR LOCAL REPRODUCTION
PREVIOUS EDITION NOT USABLE

OPTIONAL FORM 348 (Rev. 4/2000)
Prescribed by GSA FAR (48 CFR) 53.213(f)

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT		1. CONTRACT ID CODE		PAGE OF PAGES 1 3	
2. AMENDMENT/MODIFICATION NO. 0001		3. EFFECTIVE DATE 08/19/2011		4. REQUISITION/PURCHASE REQ. NO. OS71440	
6. ISSUED BY DHHS/PSC/SAS/DAM Parklawn Building, Room 5-101 5600 Fishers Lane Rockville MD 20857		CODE DAM		5. PROJECT NO. (If applicable) 7. ADMINISTERED BY (If other than Item 6) DHHS/PSC/SAS/DAM Parklawn Bldg., Room 5-101 5600 Fishers Lane Rockville MD 20857	
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code) GOLDBELT WOLF, LLC 1356287 GOLDBELT WOLF, LLC 5500 CHEROK 5500 CHEROKEE AVE STE 100 ALEXANDRIA VA 223122357		(x)		9A. AMENDMENT OF SOLICITATION NO. 9B. DATED (SEE ITEM 11)	
CODE 1356287		FACILITY CODE		10A. MODIFICATION OF CONTRACT/ORDER NO. HHSP23320100001EI HHSP23337018T 10B. DATED (SEE ITEM 13) 04/19/2011	

11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS

☐ The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers ☐ is extended. ☐ is not extended.
Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By separate letter or telegram which includes a reference to the solicitation and amendment numbers. FAILURE OF YOUR ACKNOWLEDGEMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If by virtue of this amendment you desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified.

12. ACCOUNTING AND APPROPRIATION DATA (If required)
See Schedule Net Increase: \$497.40

13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.

CHECK ONE X	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A. FAR 43.202
	B. THE ABOVE NUMBERED CONTRACT/ORDER IS MODIFIED TO REFLECT THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation date, etc.) SET FORTH IN ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:
	D. OTHER (Specify type of modification and authority)

E. IMPORTANT: Contractor ☒ is not. ☐ is required to sign this document and return _____ 0 copies to the issuing office.

14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)

Tax ID Number: 42-1730084


DUNS Number: 806914482

Questions concerning this order may be referred to Patrick Purtill at (301) 443-3535.
Please reference the order number in Block 3 when calling.

For technical questions, please contact Lydia Spalding at (202) 205-9045 or
lydia.spalding@oig.hhs.gov.

Continued ...

Except as provided herein, all terms and conditions of the document referenced in Item 9A or 10A, as heretofore changed, remains unchanged and in full force and effect.

15A. NAME AND TITLE OF SIGNER (Type or print)		16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print) ROSANNA BROWNING	
15B. CONTRACTOR/OFFEROR (Signature of person authorized to sign)	15C. DATE SIGNED	16B. UNITED STATES OF AMERICA  (Signature of Contracting Officer)	16C. DATE SIGNED 08/19/2011

NSN 7540-01-152-8070
Previous edition unusable

STANDARD FORM 30 (REV. 10-83)
Prescribed by GSA
FAR (48 CFR) 53.243

NAME OF OFFEROR OR CONTRACTOR
GOLDBELT WOLF, LLC 1356287

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)										
	<p>Reason for Modification: This modification is to correct the original purchase order to properly identify the goods required and to add funding to cover the difference in costs.</p> <p>The above numbered task order is modified as follows:</p> <p>1) the rifles ordered are changed from (b)(7)e to:</p> <table><tr><td>CLIN</td><td>Part #</td><td>Price</td><td>Qty.</td><td>Ext. Price</td></tr><tr><td>10012</td><td>(b)(7)e, (b)(4)</td><td></td><td></td><td></td></tr></table> <p>Description: (b)(7)e (b)(7)e</p> <p>2) the amount of (b)(4) is added to the above numbered task order to reflect the difference in price of the corrected rifles required.</p> <p>Delivery: 09/02/2011 Delivery Location Code: OS-OIG-HQ Cohen Building 330 Independence Ave, SW Washington DC 20201 US</p> <p>Period of Performance: 08/19/2011 to 09/18/2011</p> <p>Add Item 4 as follows:</p>	CLIN	Part #	Price	Qty.	Ext. Price	10012	(b)(7)e, (b)(4)							
CLIN	Part #	Price	Qty.	Ext. Price											
10012	(b)(7)e, (b)(4)														
4	<p>Modification to clarify goods required and add necessary funding.</p> <p>Amount: \$387.97 Accounting Info: 2011.1994944.26834 Appr. Yr.: 2011 CAN: 1994944 Object Class: 26834 Funded: \$387.97</p> <p>Amount: \$79.59 Accounting Info: 2011.19999BP.26834 Appr. Yr.: 2011 CAN: 19999BP Object Class: 26834 Funded: \$79.59</p> <p>Amount: \$29.84 Accounting Info: 2011.1995352.26834 Appr. Yr.: 2011 CAN: 1995352 Object Class: 26834 Continued ...</p>				497.40										

CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED
HHSP23320100001EI/HHSP23337018T/0001

PAGE	OF
3	3

NAME OF OFFEROR OR CONTRACTOR
GOLDBELT WOLF, LLC 1356287

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	Funded: \$29.84				

ORDER FOR SUPPLIES OR SERVICES

PAGE OF PAGES

1

2

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

1. DATE OF ORDER 08/13/2010		2. CONTRACT NO. (If any) HHSP23320100001EI		6. SHIP TO: a. NAME OF CONSIGNEE US-DHHS-OIG	
3. ORDER NO. HHSP23337005T		4. REQUISITION/REFERENCE NO. OS41519			
5. ISSUING OFFICE (Address correspondence to) DHHS/PSC/SAS/DAM Parklawn Building, Room 5-101 5600 Fishers Lane Rockville MD 20857				b. STREET ADDRESS 330 C STREET, SW SWITZER BUILDING, RM 5325 WASHINGTON DC 20201-0001	
				c. CITY WASHINGTON	d. STATE DC
				e. ZIP CODE 20201-0001	
7. TO: a. NAME OF CONTRACTOR GOLDBELT WOLF, LLC 1356287				f. SHIP VIA	
b. COMPANY NAME				8. TYPE OF ORDER <input type="checkbox"/> a. PURCHASE <input checked="" type="checkbox"/> b. DELIVERY	
c. STREET ADDRESS GOLDBELT WOLF, LLC 5500 CHEROK 5500 CHEROKEE AVE STE 100				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.	
d. CITY ALEXANDRIA		e. STATE VA	f. ZIP CODE 223122357		
9. ACCOUNTING AND APPROPRIATION DATA See Schedule				10. REQUISITIONING OFFICE DHHS/PSC/SAS/DAM	

11. BUSINESS CLASSIFICATION (Check appropriate box(es)) <input type="checkbox"/> a. SMALL <input type="checkbox"/> b. OTHER THAN SMALL <input type="checkbox"/> c. DISADVANTAGED <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						12. F.O.B. POINT Destination		
13. PLACE OF a. INSPECTION Destination			14. GOVERNMENT B/L NO. b. ACCEPTANCE Destination		15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date) 08/20/2010		16. DISCOUNT TERMS	

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)
	Tax ID Number: 42-1730084 DUNS Number: 806914482 GOLDBELT WOLF- LWRCI Weapons Order for NTOS, OIG For any quesitons regarding this order, please contact Juan D. Baez, Contracting Officer, at 301-443-2367 or juan.baez@psc.gov. Continued ...					

SEE BILLING INSTRUCTIONS ON REVERSE	18. SHIPPING POINT		19. GROSS SHIPPING WEIGHT		20. INVOICE NO.		17(h) TOTAL (Cont. pages)		
	21. MAIL INVOICE TO:								
	a. NAME FMS						\$25,250.48		
	b. STREET ADDRESS 5600 FISHERS LANE (or P.O. Box) PARKLAWN BUILDING ROOM 16A-12								
c. CITY ROCKVILLE						d. STATE MD	e. ZIP CODE 20857	\$25,250.48	17(i) GRAND TOTAL

22. UNITED STATES OF

AMERICA BY (Signature)

Electronically Signed 08/16/2010

23. NAME (Typed)

JUAN (. BAEZ

TITLE: CONTRACTING/ORDERING OFFICER

ORDER FOR SUPPLIES OR SERVICES
SCHEDULE - CONTINUATION

PAGE NO
2

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

DATE OF ORDER 08/13/2010	CONTRACT NO. HHSP23320100001EI	ORDER NO. HHSP23337005T
-----------------------------	-----------------------------------	----------------------------

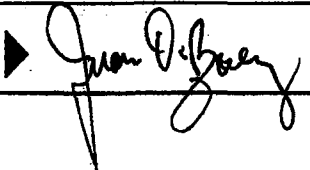
ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)																																													
	For technical questions, please contact (b)(6) & (7)(c) Special Agent at (b)(6) & (7)(c) or (b)(6) & (7)(c) oig.hhs.gov. In accordance with the terms and conditions of Contract HHSP23320100001EI, the following items are order: <table><tr><td>CLIN</td><td>PART #</td><td>PRICE</td><td>QTY</td><td>TOTAL</td></tr><tr><td>0025</td><td>(b)(7)e, (b)(4)</td><td></td><td></td><td></td></tr><tr><td>0101</td><td></td><td></td><td></td><td></td></tr><tr><td>0102</td><td></td><td></td><td></td><td></td></tr><tr><td>0103</td><td></td><td></td><td></td><td></td></tr><tr><td>0104</td><td></td><td></td><td></td><td></td></tr><tr><td>0105</td><td></td><td></td><td></td><td></td></tr><tr><td>0106</td><td></td><td></td><td></td><td></td></tr><tr><td colspan="4">TOTAL</td><td>\$25,250.48</td></tr></table> Period of Performance: 06/18/2010 to 06/17/2015	CLIN	PART #	PRICE	QTY	TOTAL	0025	(b)(7)e, (b)(4)				0101					0102					0103					0104					0105					0106					TOTAL				\$25,250.48					
CLIN	PART #	PRICE	QTY	TOTAL																																															
0025	(b)(7)e, (b)(4)																																																		
0101																																																			
0102																																																			
0103																																																			
0104																																																			
0105																																																			
0106																																																			
TOTAL				\$25,250.48																																															
1	LWRC INTERNATIONAL Accounting Info: 2010-1991338-31935 Appr. Yr.: 2010 CAN: 1991338 Object Class: 31935 Funded: \$18,432.85 Accounting Info: 2010-1994881-31935 Appr. Yr.: 2010 CAN: 1994881 Object Class: 31935 Funded: \$5,050.10 Accounting Info: 2010-19999EJ-31935 Appr. Yr.: 2010 CAN: 19999EJ Object Class: 31935 Funded: \$1,767.53 The total amount of award: \$25,250.48. The obligation for this award is shown in box 17(i).				25,250.48																																														

ORDER FOR SUPPLIES OR SERVICES

PAGE OF PAGES

1 2

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

1. DATE OF ORDER 07/28/2010		2. CONTRACT NO. (If any) HHSP23320100001EI		6. SHIP TO:	
3. ORDER NO. HHSP23337003T		4. REQUISITION/REFERENCE NO. OS41524		a. NAME OF CONSIGNEE OS-OIG-HQ	
5. ISSUING OFFICE (Address correspondence to) DHHS/PSC/SAS/DAM Parklawn Building, Room 5-101 5600 Fishers Lane Rockville MD 20857				b. STREET ADDRESS COHEN BLDG 330 INDEPENDENCE AVE, SW WASHINGTON DC 20201-0003	
				c. CITY WASHINGTON	d. STATE DC
				e. ZIP CODE 20201-0003	
7. TO:				f. SHIP VIA	
a. NAME OF CONTRACTOR GOLDBELT WOLF, LLC 1356287				8. TYPE OF ORDER	
b. COMPANY NAME				<input type="checkbox"/> a. PURCHASE <input checked="" type="checkbox"/> b. DELIVERY	
c. STREET ADDRESS GOLDBELT WOLF, LLC 5500 CHEROK 5500 CHEROKEE AVE STE 100				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.	
d. CITY ALEXANDRIA		e. STATE VA	f. ZIP CODE 223122357		
9. ACCOUNTING AND APPROPRIATION DATA See Schedule				10. REQUISITIONING OFFICE DHHS/PSC/SAS/DAM	
11. BUSINESS CLASSIFICATION (Check appropriate box(es))				12. F.O.B. POINT Destination	
<input 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					
13. PLACE OF		14. GOVERNMENT B/L NO.		15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date) 08/07/2010	
a. INSPECTION Destination	b. ACCEPTANCE Destination			16. DISCOUNT TERMS	
17. SCHEDULE (See reverse for Rejections)					
ITEM NO. (a)	SUPPLIES OR SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)
	Tax ID Number: 42-1730084 DUNS Number: 806914482 Goldbelt Wolf, LLC- LWRCI Weapons Order for NTOS, OIG For any questions regarding this order, please contact Juan D. Baez, Contracting Officer, at 301-443-2367 or juan.baez@psc.gov. Continued ...				
18. SHIPPING POINT		19. GROSS SHIPPING WEIGHT		20. INVOICE NO.	
21. MAIL INVOICE TO:					
a. NAME FMS				\$42,066.20	
b. STREET ADDRESS (or P.O. Box) 5600 FISHERS LANE PARKLAWN BUILDING ROOM 16A-12				\$42,066.20	
c. CITY ROCKVILLE		d. STATE MD	e. ZIP CODE 20857		
22. UNITED STATES OF AMERICA BY (Signature) 				23. NAME (Typed) JUAN (. BAEZ TITLE: CONTRACTING/ORDERING OFFICER	

AUTHORIZED FOR LOCAL REPRODUCTION
PREVIOUS EDITION NOT USABLE

OPTIONAL FORM 347 (Rev. 4/2006)
Prescribed by GSA/FAR 48 CFR 53.213(g)

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

PAGE NO

2

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

DATE OF ORDER
07/28/2010

CONTRACT NO.
HHSP23320100001EI

ORDER NO.

HHSP23337003T

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
1	<p>For technical questions and to coordinate delivery, please contact Special Agent, at (b)(6) & (7)(c) @oig.hhs.gov.</p> <p>In accordance with the terms and conditions of Contract HHSP23320100001EI, the following items are ordered:</p> <p>CLIN Part # Price QTY Total</p> <p>0023 (b)(7)e, (b)(4)</p> <p>0103</p> <p>0104</p> <p>0105</p> <p>Period of Performance: 06/18/2010 to 06/17/2015</p> <p>LWRC INTERNATIONAL -- 1991338</p> <p>Amount: \$30,708.33</p> <p>Accounting Info:</p> <p>2010-1991338-31935 Appr. Yr.: 2010 CAN: 1991338 Object Class: 31935</p> <p>Funded: \$30,708.33</p> <p>Amount: \$8,413.24</p> <p>Accounting Info:</p> <p>2010-1994881-31935 Appr. Yr.: 2010 CAN: 1994881 Object Class: 31935</p> <p>Funded: \$8,413.24</p> <p>Amount: \$2,944.63</p> <p>Accounting Info:</p> <p>2010-19999EJ-31935 Appr. Yr.: 2010 CAN: 19999EJ Object Class: 31935</p> <p>Funded: \$2,944.63</p> <p>The total amount of award: \$42,066.20. The obligation for this award is shown in box 17(i).</p>				42,066.20	

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

\$42,066.20

AUTHORIZED FOR LOCAL REPRODUCTION
PREVIOUS EDITION NOT USABLE

OPTIONAL FORM 348 (Rev. 4/2008)
Prescribed by GSA FAR (48 CFR) 53.213(f)

ORDER FOR SUPPLIES OR SERVICES						PAGE OF PAGES	
IMPORTANT: Mark all packages and papers with contract and/or order numbers.						1	2
1. DATE OF ORDER 07/13/2010		2. CONTRACT NO. (If any) HHSP23320100001E1		6. SHIP TO:			
3. ORDER NO. HHSP23337002T		4. REQUISITION/REFERENCE NO. OS41488		a. NAME OF CONSIGNEE US-DHHS-OIG			
5. ISSUING OFFICE (Address correspondence to) DHHS/PSC/SAS/DAM Parklawn Building, Room 5-101 5600 Fishers Lane Rockville MD 20857				b. STREET ADDRESS 330 C STREET, SW SWITZER BLDG, RM 5325 WASHINGTON DC 20201-0001			
				c. CITY WASHINGTON		d. STATE DC	e. ZIP CODE 20201-0001
7. TO:				f. SHIP VIA			
a. NAME OF CONTRACTOR GOLDBELT WOLF, LLC 1356287				8. TYPE OF ORDER			
b. COMPANY NAME				<input type="checkbox"/> a. PURCHASE <input checked="" type="checkbox"/> b. DELIVERY			
c. STREET ADDRESS GOLDBELT WOLF, LLC 5500 CHEROK 5500 CHEROKEE AVE STE 100				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.			
d. CITY ALEXANDRIA		e. STATE VA	f. ZIP CODE 223122357		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.		
9. ACCOUNTING AND APPROPRIATION DATA See Schedule				10. REQUISITIONING OFFICE DHHS/PSC/SAS/DAM			
11. BUSINESS CLASSIFICATION (Check appropriate box(es))						12. F.O.B. POINT Destination	
<input type="checkbox"/> a. SMALL <input type="checkbox"/> b. OTHER THAN SMALL <input type="checkbox"/> c. DISADVANTAGED <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) 08/07/2010		16. DISCOUNT TERMS	
a. INSPECTION Destination		b. ACCEPTANCE Destination					
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)	
	Tax ID Number: 42-1730084 DUNS Number: 806914482 Goldbelt Wolf, LLC- LWRCI Weapons Order for NTOS, OIG For any questions regarding this order, please contact Juan D. Baez, Contracting Officer, at 301-443-2367 or juan.baez@psc.gov. Continued ...						
18. SHIPPING POINT		19. GROSS SHIPPING WEIGHT		20. INVOICE NO.		17(h) TOTAL (Cont. pages)	
21. MAIL INVOICE TO:							
a. NAME FMS						\$40,011.12	
b. STREET ADDRESS (or P.O. Box) 5600 FISHERS LANE PARKLAWN BUILDING ROOM 16A-12							
c. CITY ROCKVILLE		d. STATE MD	e. ZIP CODE 20857		\$40,011.12		17(i) GRAND TOTAL
22. UNITED STATES OF AMERICA BY (Signature)				23. NAME (Typed) JUAN (. BAEZ TITLE: CONTRACTING/ORDERING OFFICER			

AUTHORIZED FOR LOCAL REPRODUCTION
PREVIOUS EDITION NOT USABLE

OPTIONAL FORM 347 (Rev. 4/2000)
Prescribed by GSA/FAR 48 CFR 53.219(c)

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

PAGE NO

2

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

DATE OF ORDER
07/13/2010

CONTRACT NO.
HHSP23320100001EI

ORDER NO.
HHSP23337002T

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)																																																							
	<p>For technical questions, please contact (b)(6) & (7)(c) Special Agent at (b)(6) & (7)(c) or (b)(6) & (7)(c) @oig.hhs.gov.</p> <p>In accordance with the terms and conditions of Contract HHSP23320100001EI, the following items are ordered:</p> <table><tr><th>CLIN</th><th>Part #</th><th>Price</th><th>QTY</th><th>Total</th></tr><tr><td>0053</td><td>(b)(7)e, (b)(4)</td><td></td><td></td><td></td></tr><tr><td>0101</td><td></td><td></td><td></td><td></td></tr><tr><td>0102</td><td></td><td></td><td></td><td></td></tr><tr><td>0103</td><td></td><td></td><td></td><td></td></tr><tr><td>0104</td><td></td><td></td><td></td><td></td></tr><tr><td>0105</td><td></td><td></td><td></td><td></td></tr><tr><td>0106</td><td></td><td></td><td></td><td></td></tr><tr><td>0107</td><td></td><td></td><td></td><td></td></tr><tr><td>0110</td><td></td><td></td><td></td><td></td></tr><tr><td>0111</td><td></td><td></td><td></td><td></td></tr></table> <p>TOTAL \$40,011.12</p>	CLIN	Part #	Price	QTY	Total	0053	(b)(7)e, (b)(4)				0101					0102					0103					0104					0105					0106					0107					0110					0111									
CLIN	Part #	Price	QTY	Total																																																									
0053	(b)(7)e, (b)(4)																																																												
0101																																																													
0102																																																													
0103																																																													
0104																																																													
0105																																																													
0106																																																													
0107																																																													
0110																																																													
0111																																																													
1	<p>LWRC INTERNATIONAL</p> <p>Amount: \$29,208.12</p> <p>Accounting Info: 2010.1991402.26834 Appr. Yr.: 2010 CAN: 1991402 Object Class: 26834</p> <p>Funded: \$29,208.12</p> <p>Amount: \$8,002.22</p> <p>Accounting Info: 2010-19999BP-26834 Appr. Yr.: 2010 CAN: 19999BP Object Class: 26834</p> <p>Funded: \$8,002.22</p> <p>Amount: \$2,800.78</p> <p>Accounting Info: 2010-19999FK-26834 Appr. Yr.: 2010 CAN: 19999FK Object Class: 26834</p> <p>Funded: \$2,800.78</p> <p>The total amount of award: \$40,011.12. The obligation for this award is shown in box 17(i).</p>				40,011.12																																																								
TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))					\$40,011.12																																																								

AUTHORIZED FOR LOCAL REPRODUCTION
PREVIOUS EDITION NOT USABLE

OPTIONAL FORM 348 (Rev. 4/2008)
Prescribed by GSA FPMR (41 CFR) 101-11.6

ORDER FOR SUPPLIES OR SERVICES

PAGE OF PAGES

1 2

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

1. DATE OF ORDER 06/25/2010	2. CONTRACT NO. (If any) HHSP23320100001EI	6. SHIP TO: a. NAME OF CONSIGNEE Attn: SA (b)(6) & (7)(c)
3. ORDER NO. HHSP23337002T	4. REQUISITION/REFERENCE NO. OS38280	

5. ISSUING OFFICE (Address correspondence to) DHHS/PSC/SAS/DAM Parklawn Building, Room 5-101 5600 Fishers Lane Rockville MD 20857	b. STREET ADDRESS DHHS NTOS, OIG, 330 C St. SW, # 5300 Switzer Building Washington DC 20201	c. CITY Washington	d. STATE DC	e. ZIP CODE 20201
---	---	-----------------------	----------------	----------------------

7. TO: a. NAME OF CONTRACTOR GOLDBELT WOLF, LLC 1356287	f. SHIP VIA
---	-------------

b. COMPANY NAME c. STREET ADDRESS GOLDBELT WOLF, LLC 5500 CHEROK 5500 CHEROKEE AVE STE 100	8. TYPE OF ORDER <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.	<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 ALEXANDRIA	e. STATE VA	f. ZIP CODE 223122357

9. ACCOUNTING AND APPROPRIATION DATA See Schedule	10. REQUISITIONING OFFICE DHHS/PSC/SAS/DAM
--	---

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
---	---------------------------------

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) 07/25/2010	16. DISCOUNT TERMS
--	------------------------------	------------------------	--	--------------------

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)
	Tax ID Number: 42-1730084 DUNS Number: 806914482 LWRC -- (b)(7)(e) ORDER For any questions regarding this order, please contact Juan D. Baez at 301-443-2367 or juan.baez@psc.gov. Continued ...					

18. SHIPPING POINT	19. GROSS SHIPPING WEIGHT	20. INVOICE NO.	17(h) TOTAL (Cont. pages)
21. MAIL INVOICE TO: a. NAME FMS b. STREET ADDRESS 5600 FISHERS LANE PARKLAWN BUILDING ROOM 16A-12 c. CITY ROCKVILLE d. STATE MD e. ZIP CODE 20857			
			17(i) GRAND TOTAL

22. UNITED STATES OF AMERICA BY (Signature) 	23. NAME (Typed) JUAN (. BAEZ TITLE: CONTRACTING/ORDERING OFFICER
---	---

AUTHORIZED FOR LOCAL REPRODUCTION
PREVIOUS EDITION NOT USABLE

OPTIONAL FORM 347 (Rev. 4/2008)
Prescribed by GSA/FAR 48 CFR 83.213(e)

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

PAGE NO

2

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

DATE OF ORDER
06/25/2010

CONTRACT NO.
HHSP23320100001EI

ORDER NO.
HHSP23337002T

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	For any technical questions, please contact SA (b)(6) & (7)(c) at (b)(6) & (7)(c) or (b)(6) & (7)(c) @oig.hhs.gov. This order is for the purchase of (b)(7)e with Accessories, per the attached quote. Period of Performance: 06/18/2010 to 06/17/2015					
1	LWRC -- (b)(7)e -- 1991402 Accounting Info: 2010-1991402-26834 Appr. Yr.: 2010 CAN: 1991402 Object Class: 26834 Funded: \$324,535.08				(b)(4)	
2	LWRC -- (b)(7)e -- 19999BP Accounting Info: 2010.19999BP.26834 Appr. Yr.: 2010 CAN: 19999BP Object Class: 26834 Funded: \$88,913.72				(b)(4)	
3	LWRC -- (b)(7)e -- 19999FK Accounting Info: 2010.19999FK.26834 Appr. Yr.: 2010 CAN: 19999FK Object Class: 26834 Funded: \$31,119.80 The total amount of award: \$444,568.60. The obligation for this award is shown in box 17(i).				(b)(4)	

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

\$444,568.60

AUTHORIZED FOR LOCAL REPRODUCTION
PREVIOUS EDITION NOT USABLE

OPTIONAL FORM 348 (Rev. 4/2005)

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

ORDER FOR SUPPLIES OR SERVICES

PAGE OF PAGES

1 4

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

1. DATE OF ORDER 06/17/2005		2. CONTRACT NO. (If any)		6. SHIP TO: a. NAME OF CONSIGNEE DHHS/OIG/OI				
3. ORDER NO. HHSP233200500212A		4. REQUISITION/REFERENCE NO. 05EOIG002673		b. STREET ADDRESS (b)(6) & (7)(c) 330 INDEPENDENCE AVE, SW COHEN BUILDING, RM 5409				
5. ISSUING OFFICE (Address correspondence to) DHHS/PSC/SAS/DAM PARKLAWN BUILDING, ROOM 5-101 5600 FISHERS LANE ROCKVILLE MD 20857		c. CITY WASHINGTON		d. STATE DC	e. ZIP CODE 20201			
7. TO: JAMES SHORTHILL		f. SHIP VIA						
a. NAME OF CONTRACTOR GLOCK, INC.		8. TYPE OF ORDER <input checked="" 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 sheets, if any, including delivery as indicated. <input 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.						
b. COMPANY NAME								
c. STREET ADDRESS 6000 HIGHLANDS PARKWAY								
d. CITY SMYRNA	e. STATE GA	f. ZIP CODE 30082						
9. ACCOUNTING AND APPROPRIATIONS DATA See Schedule		10. REQUISITIONING OFFICE HHHS/OIG/OI						
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		13. PLACE OF a. INSPECTION Destination		14. GOVERNMENT B/L/NO.				
		b. ACCEPTANCE Destination		15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date) 08/01/2005				
				16. DISCOUNT TERMS 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)
	Tax ID Number: 581652822 DUNS Number: 148099450 **NOTE: Please contact project officer S/A (b)(6) & (7)(c) 72 hours prior order/delivery** Continued ...							
18. SHIPPING POINT		19. GROSS SHIPPING WEIGHT		20. INVOICE NO.		17(h). TOTAL (Cont. pages)		
21. MAIL INVOICE TO: a. NAME PSC/FMS (301) 443-3020						\$45,400.00		
b. STREET ADDRESS (or P.O. Box) PARKLAWN BUILDING, ROOM 16A-12 5600 FISHERS LANE								
c. CITY ROCKVILLE		d. STATE MD	e. ZIP CODE 20857			\$45,400.00		
22. UNITED STATES OF AMERICA BY (Signature)				23. NAME (Typed) DARREN JANSEN TITLE: CONTRACTING/ORDERING OFFICER			17(i). GRAND TOTAL	

NSN 7540-01-152-8083

PREVIOUS EDITION NOT USABLE

OPTIONAL FORM 347 (Rev. 6/95)

Prescribed by GSA/FAR (48 CFR) 53.213(e)

SUPPLEMENTAL INVOICING INFORMATION

If desired, this order (or a 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 service, 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 this contract. Items listed below have been rejected for the reasons indicated.

SHIPMENT NUMBER	PARTIAL FINAL	DATE RECEIVED 8/22/05	SIG (b)(6) & (7)(c)	DATE 8/30/05
TOTAL CONTAINERS	GROSS WEIGHT	RECEIVED AT WASHINGTON, DC	TITLE SPECIAL AGENT	

REPORT OF REJECTIONS

ITEM NO.	SUPPLIES OR SERVICES	UNIT	QUANTITY REJECTED	REASON FOR REJECTION
VENDOR NAME: GLOCK, INC.				
PO#: HHS P233 2005 00212 A				
BPA#: N/A				
PROJECT OFFICER: JIM SHORTHILL				
AMOUNT DUE: \$2,000.00			** RELEASE FUNDS **	
AUTHORIZED BY: (b)(6) & (7)(c)				
CAN'S AMOUNT				
05-1994881		-	\$400	
05-1991338		-	\$1,600	
(OC# 2684)				

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

PAGE OF PAGES

3

4

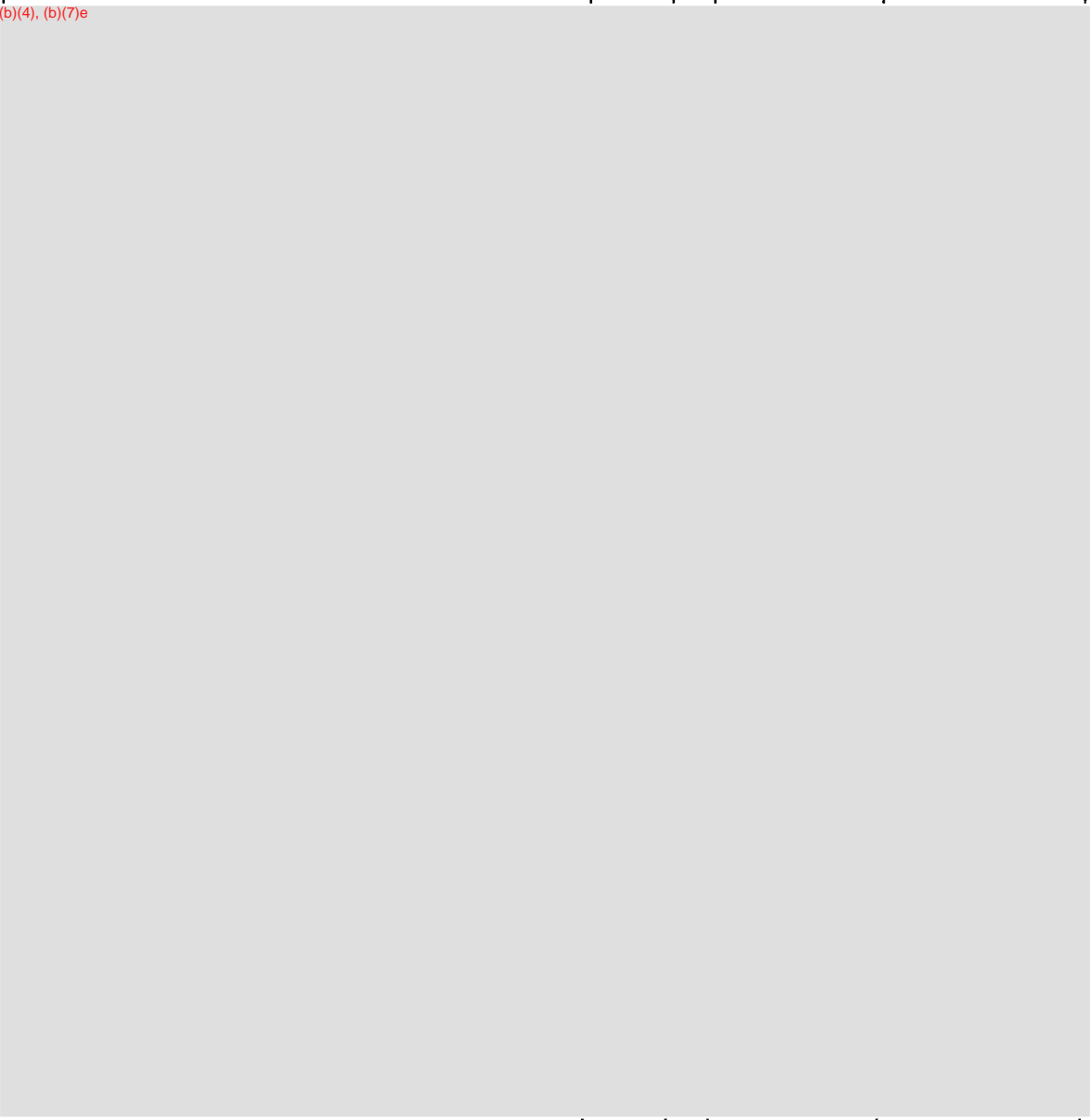
IMPORTANT: Mark all packages and papers with contract and/or order numbers.

DATE OF ORDER CONTRACT NO.

06/17/2005

ORDER NO.

HHSP233200500212A

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY ORDERED (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)	QUANTITY ACCEPTED (G)
1	<p>To Purchase under contract number P38571C183 (United States Capital Police) the following:</p> <p>(b)(4), (b)(7)e</p>  <p>Price include Shipping and Handling to Inside Delivery.</p> <p>Continued ...</p>					

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

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

PAGE OF PAGES

4

4

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

DATE OF ORDER
06/17/2005

CONTRACT NO.

ORDER NO.

HHSP233200500212A

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY ORDERED (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)	QUANTITY ACCEPTED (G)
	<p>Accounting Info: 7550128 CAN: 1991338 Obj. Class: 268Y FY: 2005 Funded: \$36,320.00 Accounting Info: 7550128 CAN: 1994881 Obj. Class: 268Y FY: 2005 Funded: \$9,080.00</p> <p>IF YOU HAVE ANY QUESTIONS REGARDING THIS ORDER, PLEASE CONTACT DARREN JANSEN ON 301-443-1857.</p> <p>920 MANUFACTURER`S WARRANTY Manufacturer`s standard commercial warranty is in effect for the above item(s) beginning with the date of installation. Warranty is in effect.</p> <p>929 INVOICE INFORMATION/CLAUSES INCORPORATED BY REFERENCE</p> <p>1. INVOICE INFORMATION IN ADDITION TO THE INFORMATION REQUIRED BY 52.232-25 (PROMPT PAYMENT), YOUR INVOICE MUST CONTAIN THE FOLLOWING: TAX IDENTIFICATION NUMBER (EMPLOYER'S IDENTIFICATION NUMBER) OR SOCIAL SECURITY NUMBER.</p> <p>2. CLAUSES INCORPORATED BY REFERENCE (FAR 52.252-2) (FEB 1998) THIS CONTRACT INCORPORATES ONE OR MORE CLAUSES BY REFERENCE, WITH THE SAME FORCE AND EFFECT AS IF THEY WERE GIVEN IN FULL TEXT. UPON REQUEST, THE CONTRACTING OFFICER WILL MAKE THEIR FULL TEXT AVAILABLE. ALSO, THE FULL TEXT OF A CLAUSE MAY BE ACCESSED ELECTRONICALLY AT THIS ADDRESS: HTTP://WWW.ARNET.GOV/FAR</p> <p>FEDERAL ACQUISITION REGULATION (48 CFR CHAPTER 1) CLAUSES</p> <p>FAR 52.204-7 CENTRAL CONTRACTOR REGISTRATION (OCT 2003)</p> <p>FAR 52.232-33 PAYMENT BY ELECTRONIC FUNDS TRANSFER - CENTRAL CONTRACTOR REGISTRATION (OCT 2003)</p> <p>943 COMMERCIAL ITEMS THE FOLLOWING CLAUSE IS HEREBY INCORPORATED BY REFERENCE WITH THE SAME FORCE AND EFFECT AS IF IT WERE GIVEN IN FULL TEXT. UPON REQUEST, THE CONTRACTING OFFICER WILL MAKE THE FULL TEXT AVAILABLE. ALSO, THE FULL TEXT OF A CLAUSE MAY BE ACCESSED ELECTRONICALLY AT THIS ADDRESS: HTTP://WWW.ARNET.GOV/FAR FAR 52.212-4 CONTRACT TERMS AND CONDITIONS - COMMERCIAL ITEMS (OCT 2003)</p> <p>Total amount of award: \$45,400.00. The obligation for this award is shown in box 17(i).</p>					

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

SUPPLEMENTAL INVOICING INFORMATION

If desired, this order (or a 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 service, 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 this contract. Items listed below have been rejected for the reasons indicated.

SHIPMENT NUMBER	PARTIAL FINAL	DATE RECEIVED 8/10/05	(b)(6) & (7)(c)	DATE 8/11/05
TOTAL CONTAINERS	GROSS WEIGHT	RECEIVED AT WASH., DC	TITLE SPECIAL AGENT	

REPORT OF REJECTIONS

ITEM NO.	SUPPLIES OR SERVICES	UNIT	QUANTITY REJECTED	REASON FOR REJECTION
	VENDOR NAME: GLOCK, INC.			Missing Item:
	PO#: HHSP23320050212A			(5) (b)(7)e
	BPA#: N/A			
	PROJECT OFFICER: JIM SHORTHILL			Items Received:
	RELEASE FUNDS		8/30/05	(b)(7)e
	AMOUNT DUE: \$43,400.00			
	AUTHORIZED BY:	(b)(6) & (7)(c)		
	CAN'S			
	05-1994881 - \$8,680.00			
	05-1991338 - \$34,720.00			
	(OC# - 268Y)			
	CORRECTED COPY			

ORDER FOR SUPPLIES OR SERVICES

PAGE OF PAGES

1

4

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

1. DATE OF ORDER 08/06/2004		2. CONTRACT NO. (If any) USCP38571C0183		6. SHIP TO: a. NAME OF CONSIGNEE HHS/OIG/OI				
3. ORDER NO. HHSP233200400029W		4. REQUISITION/REFERENCE NO. 04EOIG001828		b. STREET ADDRESS COHEN BUILDING, ROOM 5409 330 INDEPENDENCE AVE., S.W.				
5. ISSUING OFFICE (Address correspondence to) DHHS/PSC/SAS/DAM (202) 205-0625 ROOM 311-B, HHH BLDG 200 INDEPENDENCE AVE, S.W. WASHINGTON DC 20201				c. CITY WASHINGTON		d. STATE DC	e. ZIP CODE 20201	
7. TO: JAMES SHORTILL, CONTRACT OFFICER				f. SHIP VIA				
a. NAME OF CONTRACTOR GLOCK, INC.				8. TYPE OF ORDER				
b. COMPANY NAME				<input type="checkbox"/> a. PURCHASE REFERENCE YOUR:		<input checked="" type="checkbox"/> b. DELIVERY		
c. STREET ADDRESS 6000 HIGHLANDS PARKWAY				Please furnish the following on the terms and conditions specified on both sides of this order and on the attached sheets, if any, including delivery as indicated.		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 SMYRNA		e. STATE GA	f. ZIP CODE 30082					
9. ACCOUNTING AND APPROPRIATIONS DATA See Schedule				10. REQUISITIONING OFFICE HHHS/OIG/OI				
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		13. PLACE OF a. INSPECTION Destination		14. GOVERNMENT B/L/NO.		15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date) 08/16/2004		
		b. ACCEPTANCE Destination				16. DISCOUNT TERMS 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)
	Tax ID Number: 581652822 DUNS Number: 148099450 Questions concerning this order may be referred to Raleigh Tanner on (202) 260-8856. Please reference the order number in Block 3 when calling. Continued ...							
18. SHIPPING POINT		19. GROSS SHIPPING WEIGHT		20. INVOICE NO.		17(h). TOTAL (Cont. pages)		
21. MAIL INVOICE TO:								
a. NAME PSC/FMS (301) 443-3020						\$41,090.00		
b. STREET ADDRESS (or P.O. Box) PARKLAWN BUILDING, ROOM 16A-12 5600 FISHERS LANE								
c. CITY ROCKVILLE		d. STATE MD	e. ZIP CODE 20857			\$41,090.00		
22. UNITED STATES OF AMERICA BY (Signature)				23. NAME (Typed) RALEIGH TANNER TITLE: CONTRACTING/ORDERING OFFICER				

ORIGINAL SIGNED

NSN 7540-01-152-8083

PREVIOUS EDITION NOT USABLE

PROGRAM

OPTIONAL FORM 347 (Rev. 6/95)

Prescribed by GSA/FAR (48 CFR) 53.213(e)

ORDER FOR SUPPLIES OR SERVICES
SCHEDULE - CONTINUATION

PAGE OF PAGES

3

4

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

DATE OF ORDER

CONTRACT NO.

08/06/2004

USCP38571C0183

ORDER NO.

HHSP233200400029W

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY ORDERED (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)	QUANTITY ACCEPTED (G)
-----------------	--------------------------	----------------------------	-------------	----------------------	---------------	-----------------------------

1

(b)(4), (b)(7)e

INSIDE DELIVERY TO:

Room 5409, 330 Independence Avenue, S. W.
Washington, D. C. 20201

SEE COMPLETE ADDRESS IN BLOCK SEVEN (7) OF PURCHASE ORDER, FIRST PAGE.

Project Officer:

(b)(6) & (b)(7)(c)

Accounting Info:

7540128 CAN: 1991338 Obj. Class: 268Z FY: 2004

Funded: \$32,872.00

Accounting Info:

7540128 CAN: 1994881 Obj. Class: 268Z FY: 2004

Funded: \$8,218.00

Continued ...

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

ORDER FOR SUPPLIES OR SERVICES
SCHEDULE - CONTINUATION

PAGE OF PAGES

4

4

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

DATE OF ORDER CONTRACT NO.

08/06/2004 USCP38571C0183

ORDER NO.

HHSP233200400029W

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY ORDERED (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)	QUANTITY ACCEPTED (G)
900	<p>PROJECT OFFICER AUTHORITY</p> <p>The Project Officer listed above is hereby designated to monitor the performance of this order on behalf of the Government. The Project Officer will provide no supervisory or instructional assistance to Contractor personnel. The Project Officer's function is primarily to provide the Contractor with working data. The Project Officer is not empowered to make any commitments, nor authorized to make any changes which affect prices, terms, or delivery as specified on this order. Any such proposed changes shall be brought to the immediate attention of the Ordering Officer for action. The acceptance of any change by the Contractor without specific approval and written consent of the Ordering Officer will be at the Contractor's own risk.</p>					
929	<p>INVOICE INFORMATION/CLAUSES INCORPORATED BY REFERENCE</p> <p>1. INVOICE INFORMATION</p> <p>IN ADDITION TO THE INFORMATION REQUIRED BY 52.232-25 (PROMPT PAYMENT), YOUR INVOICE MUST CONTAIN THE FOLLOWING: TAX IDENTIFICATION NUMBER (EMPLOYER'S IDENTIFICATION NUMBER) OR SOCIAL SECURITY NUMBER.</p> <p>2. CLAUSES INCORPORATED BY REFERENCE (FAR 52.252-2) (FEB 1998)</p> <p>THIS CONTRACT INCORPORATES ONE OR MORE CLAUSES BY REFERENCE, WITH THE SAME FORCE AND EFFECT AS IF THEY WERE GIVEN IN FULL TEXT. UPON REQUEST, THE CONTRACTING OFFICER WILL MAKE THEIR FULL TEXT AVAILABLE. ALSO, THE FULL TEXT OF A CLAUSE MAY BE ACCESSED ELECTRONICALLY AT THIS ADDRESS: HTTP://WWW.ARNET.GOV/FAR</p> <p>FEDERAL ACQUISITION REGULATION (48 CFR CHAPTER 1) CLAUSES</p> <p>FAR 52.232-33 PAYMENT BY ELECTRONIC FUNDS TRANSFER - CENTRAL CONTRACTOR REGISTRATION (OCT 2003)</p> <p>Total amount of award: \$41,090.00. The obligation for this award is shown in box 17(i).</p>					

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

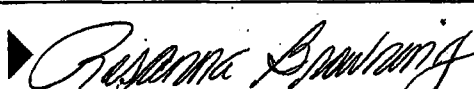
ORDER FOR SUPPLIES OR SERVICES

PAGE OF PAGES

1

2

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

1. DATE OF ORDER 03/23/2012		2. CONTRACT NO. (If any) HHSP23320110006WB		6. SHIP TO:		
3. ORDER NO. HHSP23337004		4. REQUISITION/REFERENCE NO. OS85494		a. NAME OF CONSIGNEE OS-OIG-HQ		
5. ISSUING OFFICE (Address correspondence to) DHHS/PSC/SAS/DAM Parklawn Building, Room 5C-18 5600 Fishers Lane Rockville MD 20857				b. STREET ADDRESS Cohen Building 330 Independence Ave, SW		
				c. CITY Washington	e. ZIP CODE 20201	
7. TO:				f. SHIP VIA		
a. NAME OF CONTRACTOR TRIPLE CANOPY INC 1370657				8. TYPE OF ORDER		
b. COMPANY NAME				<input type="checkbox"/> a. PURCHASE		
c. STREET ADDRESS 12018 SUNRISE VALLEY DR STE 140				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.		
d. CITY RESTON				e. STATE VA	f. ZIP CODE 201913432	
9. ACCOUNTING AND APPROPRIATION DATA See Schedule				10. REQUISITIONING OFFICE DHHS/PSC/SAS/DAM		
11. BUSINESS CLASSIFICATION (Check appropriate box(es)) <input 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. SERVICE-DISABLED <input type="checkbox"/> g. WOMEN-OWNED SMALL BUSINESS (WOSB) ELIGIBLE UNDER THE WOMEN-OWNED SMALL BUSINESS PROGRAM <input type="checkbox"/> h. ECONOMICALLY DISADVANTAGED WOMEN-OWNED SMALL BUSINESS (EDWOSB)				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		16. DISCOUNT TERMS		
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)
	GSA Contract #: GS-07F-5499R Tax ID Number: 20-0206630 DUNS Number: 138129692 Questions regarding this order may be Continued ...					
18. SHIPPING POINT		19. GROSS SHIPPING WEIGHT		20. INVOICE NO.		17(h) TOTAL (Cont. pages)
21. MAIL INVOICE TO:						
a. NAME DHHS/PSC/SAS/DAM				\$31,161.04		17(i) GRAND TOTAL
b. STREET ADDRESS (or P.O. Box) Parklawn Building, Room 5-101 5600 Fishers Lane Rockville MD 20857				\$31,161.04		
c. CITY Rockville		d. STATE MD	e. ZIP CODE 20857			
22. UNITED STATES OF AMERICA BY (Signature) 				23. NAME (Typed) ROSANNA BROWNING TITLE: CONTRACTING/ORDERING OFFICER		

AUTHORIZED FOR LOCAL REPRODUCTION
PREVIOUS EDITION NOT USABLE

OPTIONAL FORM 347 (Rev. 5/2011)
Prescribed by GSA/FAR 48 CFR 53.213(i)

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

PAGE NO

2

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

DATE OF ORDER
03/23/2012

CONTRACT NO.
HHSP23320110006WB

ORDER NO.
HHSP23337004

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	referred to Shanelle Jackson at (301) 443-2367 or Shanelle.Jackson@psc.hhs.gov. Please reference the order number. For technical questions, please contact (b)(6) & (7)(c) at (b)(6) & (7)(c) or oig.hhs.gov. Questions regarding payment should be referred to the payment office at (301) 443-3020.					
1	(b)(7)e Training April 24, 2012-April 26, 2012 Accounting Info: 2012.1994966.25232 Appr. Yr.: 2012 CAN: 1994966 Object Class: 25232 Funded: \$24,305.61				24,305.61	
2	CAN 1994881 Accounting Info: 2012.1994881.25232 Appr. Yr.: 2012 CAN: 1994881 Object Class: 25232 Funded: \$4,985.77.				4,985.77	
3	CAN 1996352 Accounting Info: 2012.1996352.25232 Appr. Yr.: 2012 CAN: 1996352 Object Class: 25232 Funded: \$1,869.66 The total amount of award: \$31,161.04. The obligation for this award is shown in box 17(i).				1,869.66	
TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))					\$31,161.04	

AUTHORIZED FOR LOCAL REPRODUCTION
PREVIOUS EDITION NOT USABLE

OPTIONAL FORM 348 (Rev. 4/2006)
Prescribed by GSA FPMR (48 CFR) 53.213(f)



INVOICE

Triple Canopy Inc.
12018 Sunrise Valley Drive
Suite 140
Reston, VA 20191
(703) 673-5000

Page: 1

Invoice #: BRTP0003
Date: 5/29/2012

COIR

(b)(6) & (7)(c)

National Training Coordination, Special Programs
U.S. Department of Health and Human Services
Office of Investigations, OIG
330 C Street, SW
Switzer Building, Suite 2400
Washington, DC 20201

(b)(6) & (7)(c)

Contract Value: \$ 31,161.04
Contract Funding: \$ 31,161.04
Period of Performance: 4/24/2012 - 04/26/2012

		GSA Contract No.		Contract No.		Order No.		Terms															
		GS-07F-5499R		HHSP23320110006WB		HHSP23337004		Net 30 days															
Item Number	Description	Qty (days)	Unit	Unit Price	Period of Performance	Amount	Cumulative Amount																
1	Basic Rifle Training Program (BRTP)	1	LO	\$ 31,161.04	4/24/2012 - 4/26/2012	\$ 31,161.04	\$ 31,161.04																
<table><tr><td>CAN</td><td>OC</td><td>AMOUNT</td><td>RECEIPT #</td></tr><tr><td>1994966</td><td>25232</td><td>\$24,305.61</td><td>57957</td></tr><tr><td>1994881</td><td>25232</td><td>\$4,985.77</td><td></td></tr><tr><td>1996350</td><td>25232</td><td>\$1,869.99</td><td></td></tr></table> <p>OKAY TO PAY; LYDIA SPALDING; 202-205-9045; 06/08/12</p>								CAN	OC	AMOUNT	RECEIPT #	1994966	25232	\$24,305.61	57957	1994881	25232	\$4,985.77		1996350	25232	\$1,869.99	
CAN	OC	AMOUNT	RECEIPT #																				
1994966	25232	\$24,305.61	57957																				
1994881	25232	\$4,985.77																					
1996350	25232	\$1,869.99																					

Subtotal: \$ 31,161.04 \$ 31,161.04

Total: \$ 31,161.04 \$ 31,161.04

Bank/Wire Information:

Account Name: Triple Canopy Inc.
Account #: (b)(4)
ABA #: 026009593
Bank Name: Bank of America
SWIFT Code: BOFAUS3N
Tax Identification Number: Triple Canopy Inc. 20-0206630
DUNS Number: 138129692

Signature

Tim Lyle

ORDER FOR SUPPLIES OR SERVICES

PAGE OF PAGES

1

2

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

1. DATE OF ORDER

02/14/2012

2. CONTRACT NO. (if any)

HHSP23320110006WB

6. SHIP TO:

a. NAME OF CONSIGNEE

3. ORDER NO.

HHSP23337003

4. REQUISITION/REFERENCE NO.

OS83107

OS-OIG-HQ

5. ISSUING OFFICE (Address correspondence to)

DHHS/PSC/SAS/DAM

Parklawn Building, Room 5C-18

5600 Fishers Lane

Rockville MD 20857

b. STREET ADDRESS

Cohen Building

330 Independence Ave, SW

c. CITY

Washington

d. STATE

DC

e. ZIP CODE

20201

7. TO:

a. NAME OF CONTRACTOR

TRIPLE CANOPY INC 1370657

f. SHIP VIA

8. TYPE OF ORDER

b. COMPANY NAME

c. STREET ADDRESS

12018 SUNRISE VALLEY DR STE 140

☐ a. PURCHASE

REFERENCE YOUR:

☒ b. DELIVERY

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.

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

RESTON

e. STATE

VA

f. ZIP CODE

201913432

9. ACCOUNTING AND APPROPRIATION DATA

See Schedule

10. REQUISITIONING OFFICE

DHHS/PSC/SAS/DAM

11. BUSINESS CLASSIFICATION (Check appropriate box(es))

☐ a. SMALL☒ b. OTHER THAN SMALL☐ c. DISADVANTAGED☐ d. WOMEN-OWNED☐ e. HUBZone☐ f. SERVICE-DISABLED☐ g. WOMEN-OWNED SMALL BUSINESS (WOSB)
ELIGIBLE UNDER THE WOMEN-OWNED
SMALL BUSINESS PROGRAM☐ h. ECONOMICALLY DISADVANTAGED WOMEN-OWNED
SMALL BUSINESS (EDWOSB)

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)

03/26/2012

16. DISCOUNT TERMS

a. INSPECTION

Destination

b. ACCEPTANCE

Destination

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)
	GSA Contract #: GS-07F-5499R Tax ID Number: 20-0206630 DUNS Number: 138129692 Questions concerning this order may be referred to Robert Bowman at (301) 443-0705 or robert.bowman@psc.hhs.gov. Continued ...					

18. SHIPPING POINT

19. GROSS SHIPPING WEIGHT

20. INVOICE NO.

21. MAIL INVOICE TO:

a. NAME

DHHS/PSC/SAS/DAM

\$101,272.88

b. STREET ADDRESS
(or P.O. Box)Parklawn Building, Room 5-101
5600 Fishers Lane
Rockville MD 20857

\$101,272.88

c. CITY

Rockville

d. STATE

MD

e. ZIP CODE

20857

17(h)
TOTAL
(Cont.
pages)17(i)
GRAND
TOTALSEE BILLING
INSTRUCTIONS
ON REVERSE

22. UNITED STATES OF

AMERICA BY (Signature)

Electronically Signed 02/14/2012

23. NAME (Typed)

ROSANNA BROWNING

TITLE: CONTRACTING/ORDERING OFFICER

ORDER FOR SUPPLIES OR SERVICES
SCHEDULE - CONTINUATION

PAGE NO

2

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

DATE OF ORDER

CONTRACT NO.

ORDER NO.

02/14/2012

HHSP23320110006WB

HHSP23337003

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)							
	<p>Please reference the order number.</p> <p>For technical questions, please contact (b)(6) & (7)(c) at (b)(6) & (7)(c) or (b)(6) & (7)(c) @oig.hhs.gov.</p> <p>Questions regarding payment should be referred to the payment office at 301-443-3020.</p> <p>Basic Rifle Training Program</p> <table><tr><td>Description</td><td>Price Per Class</td><td>Qty</td><td>Ext. Price</td></tr><tr><td>Basic Rifle Training</td><td>\$101,272.88</td><td>1</td><td>\$101,272.88</td></tr></table> <p>The Basic Rifle Training Program is to be held March 26, 2012 through March 30, 2012. Period of Performance: 03/26/2012 to 03/30/2012</p>	Description	Price Per Class	Qty	Ext. Price	Basic Rifle Training	\$101,272.88	1	\$101,272.88				
Description	Price Per Class	Qty	Ext. Price										
Basic Rifle Training	\$101,272.88	1	\$101,272.88										
1	<p>BASIC RIFLE - 1994966</p> <p>Accounting Info: 2012.1994966.25232 Appr. Yr.: 2012 CAN: 1994966 Object Class: 25232 Funded: \$78,992.85</p>				78,992.85								
2	<p>BASIC RIFLE - 1994881</p> <p>Accounting Info: 2012.1994881.25232 Appr. Yr.: 2012 CAN: 1994881 Object Class: 25232 Funded: \$16,203.66</p>				16,203.66								
3	<p>BASIC RIFLE - 1996352</p> <p>Accounting Info: 2012.1996352.25232 Appr. Yr.: 2012 CAN: 1996352 Object Class: 25232 Funded: \$6,076.37</p>				6,076.37								
	<p>The total amount of award: \$101,272.88. The obligation for this award is shown in box 17(i).</p>												
TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))					\$101,272.88								

AUTHORIZED FOR LOCAL REPRODUCTION
PREVIOUS EDITION NOT USABLE

OPTIONAL FORM 348 (Rev. 4/2006)
Prescribed by GSA FAR (48 CFR) 53.213(f)



INVOICE

Triple Canopy Inc.
12018 Sunrise Valley Drive
Suite 140
Reston, VA 20191
(703) 673-5000

Page: 1

Invoice #: B RTP0002
Date: 4/2/2012

FOIR

(b)(6) & (7)(c)

National Training Coordination, Special Programs
U.S. Department of Health and Human Services
Office of Investigations, OIG
330 C Street, SW
Switzer Building, Suite 2400
Washington, DC 20201

(b)(6) & (7)(c)

Contract Value: \$ 101,272.88
Contract Funding: \$ 101,272.88
Period of Performance: 3/26/2012 - 03/30/2012

			GSA Contract No.	Contract No.	Order No.	Terms																									
			GS-07F-5499R	HHSP23320110006WB	HHSP23337003	Net 30 days																									
Item Number	Description	Qty (days)	Unit	Unit Price	Period of Performance	Amount	Cumulative Amount																								
1	Basic Rifle Training Program (B RTP)	1	LO	101,272.88	3/26/2012 - 3/30/2012	\$ 101,272.88	\$ 101,272.88																								
<table><tr><td>CAN #</td><td>OC</td><td>AMOUNT</td><td>RECEIPT #</td></tr><tr><td>1994966</td><td>25232</td><td>\$78,992.85</td><td>55929</td></tr><tr><td>1994881</td><td>25232</td><td>\$16,203.66</td><td></td></tr><tr><td>1996352</td><td>25232</td><td>\$ 6,076.37</td><td></td></tr><tr><td colspan="4">OKAY TO PAY; LYDIA SPALDING 202-205-9045</td></tr><tr><td colspan="4">04/03/2012</td></tr></table>								CAN #	OC	AMOUNT	RECEIPT #	1994966	25232	\$78,992.85	55929	1994881	25232	\$16,203.66		1996352	25232	\$ 6,076.37		OKAY TO PAY; LYDIA SPALDING 202-205-9045				04/03/2012			
CAN #	OC	AMOUNT	RECEIPT #																												
1994966	25232	\$78,992.85	55929																												
1994881	25232	\$16,203.66																													
1996352	25232	\$ 6,076.37																													
OKAY TO PAY; LYDIA SPALDING 202-205-9045																															
04/03/2012																															

Subtotal: \$ 101,272.88 \$ 101,272.88

Total: \$ 101,272.88 \$ 101,272.88

Bank/Wire Information:

Account Name: Triple Canopy Inc.

Account #: (b)(4)

ABA #: 026009593

Bank Name: Bank of America

SWIFT Code: BOFAUS3N

Tax Identification Number: Triple Canopy Inc. 20-0206630

DUNS Number: 138129692

Signature

Tim Lyle

ORDER FOR SUPPLIES OR SERVICES

PAGE OF PAGES

1

2

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

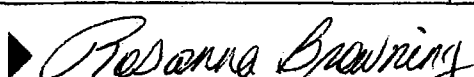
1. DATE OF ORDER 09/28/2011		2. CONTRACT NO. (if any) HHSP23320110006WB		6. SHIP TO: a. NAME OF CONSIGNEE Cohen Building	
3. ORDER NO. HHSP23337002		4. REQUISITION/REFERENCE NO. OS74825		b. STREET ADDRESS 330 Independence Ave, SW Washington DC 20201	
5. ISSUING OFFICE (Address correspondence to) DHHS/PSC/SAS/DAM Parklawn Building, Room 5C-18 5600 Fishers Lane Rockville MD 20857				c. CITY Washington	d. STATE DC
				e. ZIP CODE 20201	
7. TO: a. NAME OF CONTRACTOR TRIPLE CANOPY INC 1370657				f. SHIP VIA	
b. COMPANY NAME				8. TYPE OF ORDER	
c. STREET ADDRESS 12018 SUNRISE VALLEY DR STE 140				<input type="checkbox"/> a. PURCHASE <input checked="" type="checkbox"/> b. DELIVERY 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.	
d. CITY RESTON		e. STATE VA	f. ZIP CODE 201913432	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.	
9. ACCOUNTING AND APPROPRIATION DATA See Schedule				10. REQUISITIONING OFFICE DHHS/PSC/SAS/DAM	

11. BUSINESS CLASSIFICATION (Check appropriate box(es))						12. F.O.B. POINT Destination
<input type="checkbox"/> a. SMALL	<input checked="" type="checkbox"/> b. OTHER THAN SMALL	<input type="checkbox"/> c. DISADVANTAGED	<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) 10/30/2011		
a. INSPECTION Destination	b. ACCEPTANCE Destination			16. DISCOUNT TERMS		

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)
	GSA Contract #: GS-07F-5499R Tax ID Number: 20-0206630 DUNS Number: 138129692 Questions concerning this order may be Continued ...					

18. SHIPPING POINT		19. GROSS SHIPPING WEIGHT		20. INVOICE NO.		17(h) TOTAL (Cont. pages)
21. MAIL INVOICE TO:						
a. NAME PSC/FMS		\$101,272.88				17(i) GRAND TOTAL
b. STREET ADDRESS (or P.O. Box) 5600 Fishers Lane Parklawn Building, Room 16A-12						
c. CITY Rockville		d. STATE MD	e. ZIP CODE 20857		\$101,272.88	

22. UNITED STATES OF AMERICA BY (Signature) 	23. NAME (Typed) ROSANNA BROWNING TITLE: CONTRACTING/ORDERING OFFICER
--	---

AUTHORIZED FOR LOCAL REPRODUCTION
PREVIOUS EDITION NOT USABLE

OPTIONAL FORM 347 (Rev. 4/2006)
Prescribed by GSA/FAR 48 CFR 53.213(e)

ORDER FOR SUPPLIES OR SERVICES
SCHEDULE - CONTINUATION

PAGE NO

2

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

DATE OF ORDER

CONTRACT NO.

09/28/2011

HHSP23320110006WB

ORDER NO.

HHSP23337002

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>referred to Patrick Purtill at (301) 443-3535 or patrick.purtill@psc.hhs.gov. Please reference the order number.</p> <p>For technical questions, please contact (b)(6) & (7)(c) at (b)(6) & (7)(c) or oig.hhs.gov.</p> <p>Questions regarding payment should be referred to the payment office at 301-443-3020.</p> <p>Period of Performance: 09/28/2011 to 09/27/2016</p>					
1	<p>Basic Rifle Training Program</p> <p>Description Price Per Class Qty Ext. Price Basic Rifle Training \$101,272.88 1 \$101,272.88</p> <p>The Basic Rifle Training Program is to be held October 30, 2011 through November 4, 2011.</p> <p>Amount: \$60,763.73 Accounting Info: 2011.1994966.25232 Appr. Yr.: 2011 CAN: 1994966 Object Class: 25232 Funded: \$60,763.73</p> <p>Amount: \$40,509.15 Accounting Info: 2011.1994881.25232 Appr. Yr.: 2011 CAN: 1994881 Object Class: 25232 Funded: \$40,509.15 Period of Performance: 09/28/2011 to 11/05/2011</p> <p>The total amount of award: \$101,272.88. The obligation for this award is shown in box 17(i).</p>				101,272.88	

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

\$101,272.88

AUTHORIZED FOR LOCAL REPRODUCTION
PREVIOUS EDITION NOT USABLE

OPTIONAL FORM 348 (Rev. 4/2008)

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



INVOICE

Triple Canopy Inc.
12018 Sunrise Valley Drive
Suite 140
Reston, VA 20191
(703) 673-5000

Page: 1

Invoice #: (b)(7)e 0001
Date: 12/22/2011

COIR

(b)(6) & (7)(c)

National Training Coordination, Special Programs
U.S. Department of Health and Human Services
Office of Investigations, OIG
330 C Street, SW
Switzer Building, Suite 2400
Washington, DC 20201

(b)(6) & (7)(c)

Contract Value: \$ 101,272.88
Contract Funding: \$ 101,272.88
Period of Performance: 9/28/2011 - 11/05/2011

GSA Contract No.	Contract No.	Order No.	Terms
GS-07F-5499R	HHSP23320110006WB	HHSP23337002	Net 30 days

Item Number	Description	Qty (days)	Unit	Unit Price	Period of Performance	Amount	Cumulative Amount																				
1	Basic Rifle Training Program (B RTP)	1	LO	101,272.88	9/28/2011 - 11/5/2011	\$ 101,272.88	\$ 101,272.88																				
<table><tr><td>CAN#</td><td>OC</td><td>AMOUNT</td><td>RECEIPT #</td></tr><tr><td>1994866</td><td>25232</td><td>\$60,763.73</td><td>52925</td></tr><tr><td>1994881</td><td>25232</td><td>\$40,509.15</td><td>52925</td></tr><tr><td colspan="4">OKAY TO PAY, LYDIA SPALDING; 01/04/2012</td></tr><tr><td colspan="4">202-205-9045</td></tr></table>								CAN#	OC	AMOUNT	RECEIPT #	1994866	25232	\$60,763.73	52925	1994881	25232	\$40,509.15	52925	OKAY TO PAY, LYDIA SPALDING; 01/04/2012				202-205-9045			
CAN#	OC	AMOUNT	RECEIPT #																								
1994866	25232	\$60,763.73	52925																								
1994881	25232	\$40,509.15	52925																								
OKAY TO PAY, LYDIA SPALDING; 01/04/2012																											
202-205-9045																											

Bank/Wire Information:

Account Name: Triple Canopy Inc.
Account # (b)(4)
ABA #: 026009593
Bank Name: Bank of America
SWIFT Code: BOFAUS3N
Tax Identification Number: Triple Canopy Inc. 20-0206630
DUNS Number: 138129692

Subtotal: \$ 101,272.88 \$ 101,272.88

Total: \$ 101,272.88 \$ 101,272.88

Signature

Tim Lyle

SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEM <small>OFFEROR TO COMPLETE BLOCKS 12, 17, 23, 24, & 30</small>				1. REQUISITION NUMBER OS63721		PAGE OF 1 7	
CONTRACT NO. S-07F-5499R		3. AWARD/ EFFECTIVE DATE 06/15/2011		4. ORDER NUMBER HHSP233201100256G		5. SOLICITATION NUMBER	
7. FOR SOLICITATION INFORMATION CALL:		a. NAME PATRICK PURTILL		b. TELEPHONE NUMBER (No collect calls) 301-443-3535		8. OFFER DUE DATE/LOCAL TIME	
9. ISSUED BY DHHS/PSC/SAS/DAM Parklawn Building, Room 5C-18 5600 Fishers Lane Rockville MD 20857		CODE DAM		10. THIS ACQUISITION IS <input checked="" type="checkbox"/> UNRESTRICTED OR <input type="checkbox"/> SET ASIDE: % FOR: <div style="display: flex; justify-content: space-between;"> <div> <small>NAICS: 611699</small> <small>SIZE STANDARD:</small> <small>\$7.0</small> </div> <div> <input type="checkbox"/> SMALL BUSINESS <input type="checkbox"/> HUBZONE SMALL BUSINESS <input type="checkbox"/> SERVICE-DISABLED VETERAN-OWNED SMALL BUSINESS </div> <div> <input type="checkbox"/> EMERGING SMALL BUSINESS <input type="checkbox"/> SOLE SOURCE <input type="checkbox"/> e(A) </div> </div>			
11. DELIVERY FOR FDS DESTINATION UNLESS BLOCK IS MARKED <input type="checkbox"/> SEE SCHEDULE		12. DISCOUNT TERMS		13a. THIS CONTRACT IS A RATED ORDER UNDER DPAS (15 CFR 700) <input type="checkbox"/>		13b. RATING	
15. DELIVER TO OS-OIG-HQ Cohen Building 330 Independence Ave, SW Washington DC 20201		CODE OS-OIG-HQ		16. ADMINISTERED BY DHHS/PSC/SAS/DAM Parklawn Bldg., Room 5C-18 5600 Fishers Lane Rockville MD 20857		CODE DAM	
17a. CONTRACTOR/ OFFEROR TRIPLE CANOPY INC 1370657 12018 SUNRISE VALLEY DR STE 140 RESTON VA 201913432		CODE 1370657 FACILITY CODE		18a. PAYMENT WILL BE MADE BY PSC/FMS 5600 Fishers Lane Parklawn Building, Room 16A-12 Rockville MD 20857		CODE FMS	
TELEPHONE NO.							
<input type="checkbox"/> 17b. CHECK IF REMITTANCE IS DIFFERENT AND PUT SUCH ADDRESS IN OFFER				18b. SUBMIT INVOICES TO ADDRESS SHOWN IN BLOCK 18a UNLESS BLOCK BELOW IS CHECKED <input type="checkbox"/> SEE ADDENDUM			
18. ITEM NO.	20. SCHEDULE OF SUPPLIES/SERVICES			21. QUANTITY	22. UNIT	23. UNIT PRICE	24. AMOUNT
	Tax ID Number: 20-0206630 DUNS Number: 138129692 This contract contains multiple CLINs solely for the purpose of accounting for multiple funding sources. For any questions regarding this contract please contact Patrick D. Purtill at (301) 443-3535 or at patrick.purtill@psc.hhs.gov. (Use Reverse and/or Attach Additional Sheets as Necessary)						
25. ACCOUNTING AND APPROPRIATION DATA See schedule						26. TOTAL AWARD AMOUNT (For Govt. Use Only) \$101,905.88	
<input type="checkbox"/> 27a. SOLICITATION INCORPORATES BY REFERENCE FAR 52.212-1, 52.212-4. FAR 52.212-3 AND 52.212-5 ARE ATTACHED. ADDEND <input type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED. <input checked="" type="checkbox"/> 27b. CONTRACT/PURCHASE ORDER INCORPORATES BY REFERENCE FAR 52.212-4. FAR 52.212-5 IS ATTACHED. ADDENDA <input checked="" type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED.							
<input type="checkbox"/> 28. CONTRACTOR IS REQUIRED TO SIGN THIS DOCUMENT AND RETURN COPIES TO ISSUING OFFICE. CONTRACTOR AGREES TO FURNISH AND DELIVER ALL ITEMS SET FORTH OR OTHERWISE IDENTIFIED ABOVE AND ON ANY ADDITIONAL SHEETS SUBJECT TO THE TERMS AND CONDITIONS SPECIFIED HEREIN.				<input checked="" type="checkbox"/> 29. AWARD OF CONTRACT REF. _____ OFFER DATED _____ YOUR OFFER ON SOLICITATION (BLOCK 5), INCLUDING ANY ADDITIONS OR CHANGES WHICH ARE SET FORTH HEREIN, IS ACCEPTED AS TO ITEMS:			
30a. SIGNATURE OF OFFEROR/CONTRACTOR				31a. UNITED STATES OF AMERICA (SIGNATURE OF CONTRACTING OFFICER) 			
0b. NAME AND TITLE OF SIGNER (Type or print)		30c. DATE SIGNED		31b. NAME OF CONTRACTING OFFICER (Type or print) ROSANNA BROWNING		31c. DATE SIGNED 06/15/2011	

AUTHORIZED FOR LOCAL REPRODUCTION
PREVIOUS EDITION IS NOT USABLE

STANDARD FORM 1449 (REV. 3/2005)
Prescribed by GSA - FAR (48 CFR) 53.212

19. ITEM NO.	20. SCHEDULE OF SUPPLIES/SERVICES	21. QUANTITY	22. UNIT	23. UNIT PRICE	24. AMOUNT
	<p>For technical questions please contact (b)(6) & (b)(7)(c) or at (b)(6) & (b)(7)(c) @oig.hhs.gov.</p> <p>Questions regarding payment should be referred to the payment office at (301) 443-3020.</p> <p>Delivery: 06/20/2011 Period of Performance: 06/20/2011 to 06/24/2011</p>				
1	<p>Basic Rifle Training Program - 1994996</p> <p>See attached Statement of Work (incorporated into this contract).</p> <p>Amount: \$79,486.59</p> <p>Accounting Info: 2011.1994966.25232 Appr. Yr.: 2011 CAN: 1994966 Object Class: 25232 Funded: \$79,486.59</p> <p>Amount: \$16,304.94</p> <p>Accounting Info: 2011.1994881.25232 Appr. Yr.: 2011 CAN: 1994881 Object Class: 25232 Funded: \$16,304.94</p> <p>Amount: \$6,114.35</p> <p>Accounting Info: Continued ...</p>				101,905.88

32a. QUANTITY IN COLUMN 21 HAS BEEN

☐ RECEIVED☐ INSPECTEDACCEPTED, AND CONFORMS TO THE CONTRACT, EXCEPT AS
☐ NOTED:

32b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE

32c. DATE

32d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE

32e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE

32f. TELEPHONE NUMBER OF AUTHORIZED GOVERNMENT REPRESENTATIVE

32g. E-MAIL OF AUTHORIZED GOVERNMENT REPRESENTATIVE

33. SHIP NUMBER

34. VOUCHER NUMBER

35. AMOUNT VERIFIED
CORRECT FOR

36. PAYMENT

37. CHECK NUMBER

☐ PARTIAL ☐ FINAL☐ COMPLETE ☐ PARTIAL ☐ FINAL

38. S/R ACCOUNT NUMBER

39. S/R VOUCHER NUMBER

40. PAID BY

41a. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT

42a. RECEIVED BY (Print)

41b. SIGNATURE AND TITLE OF CERTIFYING OFFICER

41c. DATE

42b. RECEIVED AT (Location)

42c. DATE REC'D (YY/MM/DD)

42d. TOTAL CONTAINERS

CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED
GS-07F-5499R/HHSP233201100256G

PAGE 3 OF 7

NAME OF OFFEROR OR CONTRACTOR

TRIPLE CANOPY INC 1370657

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>2011.1995350.25232 Appr. Yr.: 2011 CAN: 1995350 Object Class: 25232 Funded: \$6,114.35</p> <p>INVOICE INFORMATION/CLAUSES INCORPORATED BY REFERENCE</p> <p>1. INVOICE INFORMATION The contractor shall submit an original invoice including supporting documentation to the address shown in block 18, or via email at psc_invoices@psc.hhs.gov. The invoice should also be emailed to Patrick D. Purtill at patrick.purtill@psc.hhs.gov and (b)(6) & (b)(7)(c) at (b)(6) & (b)(7)(c) oig.hhs.gov. The status of payment can be obtained by calling (301) 443-3020.</p> <p>In order to verify that we are making payment to the correct bank account, we require that you reference the taxpayer identification number (TIN), DUNS Number, and the correct banking information (ABA) on all invoices in addition to the information required by FAR 52.212-4(g). This will ensure proper payment.</p> <p>2. CLAUSES INCORPORATED BY REFERENCE (FAR 52.252-2) (FEB 1998) This contract incorporates one or more clauses by reference, with the same force and effect as if they were given in full text. Upon request, the contracting officer will make their full text available. Also, the full text of a clause may be accessed electronically at this address: FAR: http://www.acquisition.gov/far; HHSAR: http://www.hhs.gov/asfr/ogapa/acquisition</p> <p>a) FEDERAL ACQUISITION REGULATION (48 CFR CHAPTER 1) CLAUSES FAR 52.204-7 Central Contractor Registration (April 2008) FAR 52.212-4 Contract Terms and Conditions Commercial Items (June 2010)</p> <p>b) Health and Human Services Acquisition Regulation (48 CFR Chapter 3) clauses HHSAR 352.231-71, Pricing of adjustments (January 2001)</p>				

NSN 7540-01-152-8067

OPTIONAL FORM 336 (4-88)
Sponsored by GSA
FAR (48 CFR) 53.110

STATEMENT OF WORK
U.S. Department of Health & Human Services
Office of Investigations

1. BACKGROUND

The Department of Health and Human Services (HHS) is the United States government's principal agency for protecting the health of all Americans and providing essential human services, especially for those who are least able to help themselves.

HHS represents almost a quarter of all federal outlays, and it administers more grant dollars than all other federal agencies combined. HHS' Medicare program is the nation's largest health insurer, handling more than 1 billion claims per year. Medicare and Medicaid together provide health care insurance for one in four Americans.

HHS works closely with state and local governments, and many HHS-funded services are provided at the local level by state or county agencies, or through private sector grantees. The Department's programs are administered by 11 operating divisions, including eight agencies in the U.S. Public Health Service and three human services agencies. The department includes more than 300 programs, covering a wide spectrum of activities. In addition to the services they deliver, the HHS programs provide for equitable treatment of beneficiaries nationwide, and they enable the collection of national health and other data.

The Department of Health and Human Services, Office of Investigations, protects the integrity of the programs administered by HHS. The Office of Investigations (OI) conducts criminal, civil, and administrative investigations of fraud and misconduct related to HHS programs, operations, and employees, utilizing state of the art technologies and law enforcement tools. Additionally, OI provides protective services to the Secretary and participates in the Department's continuity of operations program as well as full range of public safety and security incident management activities.

The success of OI hinges on the training coordinated by the National Training Operations Staff (NTOS). NTOS is tasked with delivering the most up to date training to the special agents in the field. The tactical training proposed by this contract will enhance the enforcement capabilities of OI's special agents.

2. PURPOSE

The staff of the DHHS/OI/NTOS has facilitated an agency wide distribution of (b)(7)e [REDACTED] These (b)(7)e [REDACTED]

programs. Additionally, the contractor must have the facilities and staff to ensure the Department has the ability to ensure ongoing refresher training is available.

(b)(7)e

A large rectangular area of the document is redacted, indicated by a light gray background.

B RTP training course. The July Strike Force Operations are the culmination of several ongoing investigations and necessarily involve the participation of other local, state and federal entities that have no "long gun capability," such as the Medicaid Fraud Control Unit (MFCU). The completion of the B RTP course is a vital requirement to ensure that OIG can execute and support the Strike Force Operations with the level of security and safety to federal, state and civilian personnel required to complete its mission.

3. SPECIFIC TASKS—BASIC RIFLE TRAINING PROGRAM (B RTP)

(b)(7)e

A large rectangular area of the document is redacted, indicated by a light gray background.

(b)(7)e

A rectangular area of the document is redacted, indicated by a light gray background.

(b)(7)e

A large rectangular area of the document is redacted, indicated by a light gray background.

(b)(7)e

(b)(7)e

4. ORDER TYPE

The government intends to award a firm fixed price contract for one Basic Rifle Training Program to be completed no later than June 24, 2011.

5. PERIOD OF PERFORMANCE

The period of agreement shall be Contract Award to June 24, 2011.

6. SECURITY REQUIREMENTS

The contractor agrees to comply with HHS-OIG/OI/NTOS's security provisions, including designated category of safe-guarded positions and position sensitivity designations to ensure the adequate safeguard of agency information being accessed by the contractor. All data, information, analysis, results, and requirements will be turned over to DHHS. All contract personnel may be subject to satisfactory completion of appropriate personnel suitability/security investigations. All contractor staff that will be performing work on this contract must be U.S. citizens and identified prior to commencement of the contract. All contractor staff that will be performing work on this contract will be required to sign Non-Disclosure Agreements with the U.S. government.

7. GOVERNMENT FURNISHED RESOURCES

HHS-OIG/NTOS will provide all weapons, ammunition and personal equipment necessary for the training. Any equipment or items that are considered training material or are directly associated with the training facility must be provided by the contractor.

8. AUTHORITIES OF GOVERNMENT PERSONNEL

Notwithstanding the Contractor's responsibility for total management during the performance of this contract, the administration of the contract will require coordination between the Government and the Contractor. The following individuals will be the Government's points of contact during performance of the contract.

1. Contracting Officer

All contract administration shall be done by:

Rosanna Browning, Contracting Officer,
Program Support Center, Division of Acquisition Management,
5600 Fishers Lane,
Parklawn Building, Room 5-101,
Rockville, MD 20857.

Phone:

Fax: (301)443-8488

All communications pertaining to contractual and/or administrative matters under the contract shall be sent to the address above and to the attention of: Patrick Purtill, Contract Specialist, – (301) 443-3535.

Note: The PSC Contracting Officer is the only individual authorized to modify this requirement.

2. Project Officer/COTR

(b)(6) & (7)(c)

HHS/OIG/NTOS

330 C Street, S.W.

Switzer Building, Room 5300

Washington, DC 20201

(b)(6) & (7)(c)

Email: (b)(6) & (7)(c) @oig.hhs.gov

3. PROJECT OFFICER AUTHORITY

The Project Officer (b)(6) & (7)(c) is hereby designated to monitor the performance of this order on behalf of the Government. The Project Officer will provide no supervisory or instructional assistance to Contractor personnel. The Project Officer's function is primarily to provide the Contractor with working data. The Project Officer is not empowered to make any commitments, nor authorized to make any changes which affect prices, terms, or delivery as specified on this order. Any such proposed changes shall be brought to the immediate attention of the Contracts Officer for action. The acceptance of any change by the Contractor without specific approval and written consent of the Ordering Officer will be at the Contractor's own risk.

**FAR 52.212-5 CONTRACT TERMS AND CONDITIONS REQUIRED TO IMPLEMENT STATUTES OR
EXECUTIVE ORDERS—COMMERCIAL ITEMS (APR 2011)**

(a) The Contractor shall comply with the following Federal Acquisition Regulation (FAR) clauses, which are incorporated in this contract by reference, to implement provisions of law or Executive orders applicable to acquisitions of commercial items:

(1) 52.222-50, Combating Trafficking in Persons (Feb 2009) (22 U.S.C. 7104(g)).

___ Alternate I (Aug 2007) of 52.222-50 (22 U.S.C. 7104(g)).

(2) 52.233-3, Protest After Award (AUG 1996) (31 U.S.C. 3553).

(3) 52.233-4, Applicable Law for Breach of Contract Claim (OCT 2004) (Pub. L. 108-77, 108-78).

(b) The Contractor shall comply with the FAR clauses in this paragraph (b) that the Contracting Officer has indicated as being incorporated in this contract by reference to implement provisions of law or Executive orders applicable to acquisitions of commercial items:

[Contracting Officer check as appropriate.]

___ (1) 52.203-6, Restrictions on Subcontractor Sales to the Government (Sept 2006), with Alternate I (Oct 1995) (41 U.S.C. 253g and 10 U.S.C. 2402).

___ (2) 52.203-13, Contractor Code of Business Ethics and Conduct (Apr 2010) (Pub. L. 110-252, Title VI, Chapter 1 (41 U.S.C. 251 note)).

___ (3) 52.203-15, Whistleblower Protections under the American Recovery and Reinvestment Act of 2009 (June 2010) (Section 1553 of Pub. L. 111-5). (Applies to contracts funded by the American Recovery and Reinvestment Act of 2009.)

___ (4) 52.204-10, Reporting Executive Compensation and First-Tier Subcontract Awards (Jul 2010) (Pub. L. 109-282) (31 U.S.C. 6101 note).

___ (5) 52.204-11, American Recovery and Reinvestment Act—Reporting Requirements (Jul 2010) (Pub. L. 111-5).

___ (6) 52.209-6, Protecting the Government's Interest When Subcontracting with Contractors Debarred, Suspended, or Proposed for Debarment (DEC 2010) (31 U.S.C. 6101

note). (Applies to contracts over \$30,000). (Not applicable to subcontracts for the acquisition of commercially available off-the-shelf items).

___ (7) 52.219-3, Notice of Total HUBZone Set-Aside or Sole-Source Award (Jan 2011) (15 U.S.C. 657a).

___ (8) 52.219-4, Notice of Price Evaluation Preference for HUBZone Small Business Concerns (JAN 2011) (if the offeror elects to waive the preference, it shall so indicate in its offer) (15 U.S.C. 657a).

___ (9) [Reserved]

___ (10)(i) 52.219-6, Notice of Total Small Business Set-Aside (June 2003) (15 U.S.C. 644).

___ (ii) Alternate I (Oct 1995) of 52.219-6.

___ (iii) Alternate II (Mar 2004) of 52.219-6.

___ (11)(i) 52.219-7, Notice of Partial Small Business Set-Aside (June 2003) (15 U.S.C. 644).

___ (ii) Alternate I (Oct 1995) of 52.219-7.

___ (iii) Alternate II (Mar 2004) of 52.219-7.

___ (12) 52.219-8, Utilization of Small Business Concerns (Jan 2011) (15 U.S.C. 637(d)(2) and (3)).

___ (13)(i) 52.219-9, Small Business Subcontracting Plan (Jan 2011) (15 U.S.C. 637(d)(4)).

___ (ii) Alternate I (Oct 2001) of 52.219-9.

___ (iii) Alternate II (Oct 2001) of 52.219-9.

___ (iv) Alternate III (Jul 2010) of 52.219-9.

___ (14) 52.219-14, Limitations on Subcontracting (Dec 1996) (15 U.S.C. 637(a)(14)).

___ (15) 52.219-16, Liquidated Damages—Subcon-tracting Plan (Jan 1999) (15 U.S.C. 637(d)(4)(F)(i)).

___ (16)(i) 52.219-23, Notice of Price Evaluation Adjustment for Small Disadvantaged Business Concerns (OCT 2008) (10 U.S.C. 2323) (if the offeror elects to waive the adjustment, it shall so indicate in its offer).

___ (ii) Alternate I (June 2003) of 52.219-23.

___ (17) 52.219-25, Small Disadvantaged Business Participation Program—Disadvantaged Status and Reporting (Dec 2010) (Pub. L. 103-355, section 7102, and 10 U.S.C. 2323).

___ (18) 52.219-26, Small Disadvantaged Business Participation Program—Incentive Subcontracting (Oct 2000) (Pub. L. 103-355, section 7102, and 10 U.S.C. 2323).

___ (19) 52.219-27, Notice of Total Service-Disabled Veteran-Owned Small Business Set-Aside (May 2004) (15 U.S.C. 657 f).

X (20) 52.219-28, Post Award Small Business Program Rerepresentation (Apr 2009) (15 U.S.C. 632(a)(2)).

___ (21) 52.219-29 Notice of Total Set-Aside for Economically Disadvantaged Women-Owned Small Business (EDWOSB) Concerns (Apr 2011).

___ (22) 52.219-30 Notice of Total Set-Aside for Women-Owned Small Business (WOSB) Concerns Eligible Under the WOSB Program (Apr 2011).

X (23) 52.222-3, Convict Labor (June 2003) (E.O. 11755).

X (24) 52.222-19, Child Labor—Cooperation with Authorities and Remedies (Jul 2010) (E.O. 13126).

X (25) 52.222-21, Prohibition of Segregated Facilities (Feb 1999).

X (26) 52.222-26, Equal Opportunity (Mar 2007) (E.O. 11246).

___ (27) 52.222-35, Equal Opportunity for Veterans (Sep 2010) (38 U.S.C. 4212).

X (28) 52.222-36, Affirmative Action for Workers with Disabilities (Oct 2010) (29 U.S.C. 793).

___ (29) 52.222-37, Employment Reports on Veterans (SEP 2010) (38 U.S.C. 4212).

___ (30) 52.222-40, Notification of Employee Rights Under the National Labor Relations Act (Dec 2010) (E.O. 13496).

___ (31) 52.222-54, Employment Eligibility Verification (JAN 2009). (Executive Order 12989). (Not applicable to the acquisition of commercially available off-the-shelf items or certain other types of commercial items as prescribed in 22.1803.)

___ (32)(i) 52.223-9, Estimate of Percentage of Recovered Material Content for EPA-Designated Items (May 2008) (42 U.S.C. 6962(c)(3)(A)(ii)). (Not applicable to the acquisition of commercially available off-the-shelf items.)

___ (ii) Alternate I (May 2008) of 52.223-9 (42 U.S.C. 6962(i)(2)(C)). (Not applicable to the acquisition of commercially available off-the-shelf items.)

___ (33) 52.223-15, Energy Efficiency in Energy-Consuming Products (DEC 2007) (42 U.S.C. 8259b).

___ (34)(i) 52.223-16, IEEE 1680 Standard for the Environmental Assessment of Personal Computer Products (DEC 2007) (E.O. 13423).

___ (ii) Alternate I (DEC 2007) of 52.223-16.

X (35) 52.223-18, Contractor Policy to Ban Text Messaging While Driving (SEP 2010) (E.O. 13513).

___ (36) 52.225-1, Buy American Act—Supplies (Feb 2009) (41 U.S.C. 10a-10d).

___ (37)(i) 52.225-3, Buy American Act—Free Trade Agreements—Israeli Trade Act (June 2009) (41 U.S.C. 10a-10d, 19 U.S.C. 3301 note, 19 U.S.C. 2112 note, 19 U.S.C. 3805 note, Pub. L. 108-77, 108-78, 108-286, 108-302, 109-53, 109-169, 109-283, and 110-138).

___ (ii) Alternate I (Jan 2004) of 52.225-3.

___ (iii) Alternate II (Jan 2004) of 52.225-3.

___ (38) 52.225-5, Trade Agreements (AUG 2009) (19 U.S.C. 2501, *et seq.*, 19 U.S.C. 3301 note).

X(39) 52.225-13, Restrictions on Certain Foreign Purchases (June 2008) (E.O.'s, proclamations, and statutes administered by the Office of Foreign Assets Control of the Department of the Treasury).

___ (40) 52.226-4, Notice of Disaster or Emergency Area Set-Aside (Nov 2007) (42 U.S.C. 5150).

___ (41) 52.226-5, Restrictions on Subcontracting Outside Disaster or Emergency Area (Nov 2007) (42 U.S.C. 5150).

___ (42) 52.232-29, Terms for Financing of Purchases of Commercial Items (Feb 2002) (41 U.S.C. 255(f), 10 U.S.C. 2307(f)).

___ (43) 52.232-30, Installment Payments for Commercial Items (Oct 1995) (41 U.S.C. 255(f), 10 U.S.C. 2307(f)).

X (44) 52.232-33, Payment by Electronic Funds Transfer—Central Contractor Registration (Oct 2003) (31 U.S.C. 3332).

___ (45) 52.232-34, Payment by Electronic Funds Transfer—Other than Central Contractor Registration (May 1999) (31 U.S.C. 3332).

___ (46) 52.232-36, Payment by Third Party (Feb 2010) (31 U.S.C. 3332).

___ (47) 52.239-1, Privacy or Security Safeguards (Aug 1996) (5 U.S.C. 552a).

___ (48)(i) 52.247-64, Preference for Privately Owned U.S.-Flag Commercial Vessels (Feb 2006) (46 U.S.C. Appx. 1241(b) and 10 U.S.C. 2631).

___ (ii) Alternate I (Apr 2003) of 52.247-64.

(c) The Contractor shall comply with the FAR clauses in this paragraph (c), applicable to commercial services, that the Contracting Officer has indicated as being incorporated in this contract by reference to implement provisions of law or Executive orders applicable to acquisitions of commercial items:

[Contracting Officer check as appropriate.]

___ (1) 52.222-41, Service Contract Act of 1965 (Nov 2007) (41 U.S.C. 351, et seq.).

___ (2) 52.222-42, Statement of Equivalent Rates for Federal Hires (May 1989) (29 U.S.C. 206 and 41 U.S.C. 351, *et seq.*).

___ (3) 52.222-43, Fair Labor Standards Act and Service Contract Act—Price Adjustment (Multiple Year and Option Contracts) (Sep 2009) (29 U.S.C. 206 and 41 U.S.C. 351, *et seq.*).

___ (4) 52.222-44, Fair Labor Standards Act and Service Contract Act—Price Adjustment (Sep 2009) (29 U.S.C. 206 and 41 U.S.C. 351, *et seq.*).

___ (5) 52.222-51, Exemption from Application of the Service Contract Act to Contracts for Maintenance, Calibration, or Repair of Certain Equipment—Requirements (Nov 2007) (41 U.S.C. 351, *et seq.*).

___ (6) 52.222-53, Exemption from Application of the Service Contract Act to Contracts for Certain Services—Requirements (Feb 2009) (41 U.S.C. 351, *et seq.*).

___ (7) 52.226-6, Promoting Excess Food Donation to Nonprofit Organizations (Mar 2009) (Pub. L. 110-247).

___ (8) 52.237-11, Accepting and Dispensing of \$1 Coin (Sept 2008) (31 U.S.C. 5112(p)(1)).

(d) *Comptroller General Examination of Record*. The Contractor shall comply with the provisions of this paragraph (d) if this contract was awarded using other than sealed bid, is in excess of the simplified acquisition threshold, and does not contain the clause at 52.215-2, Audit and Records—Negotiation.

(1) The Comptroller General of the United States, or an authorized representative of the Comptroller General, shall have access to and right to examine any of the Contractor's directly pertinent records involving transactions related to this contract.

(2) The Contractor shall make available at its offices at all reasonable times the records, materials, and other evidence for examination, audit, or reproduction, until 3 years after final payment under this contract or for any shorter period specified in FAR Subpart 4.7, Contractor Records Retention, of the other clauses of this contract. If this contract is completely or partially terminated, the records relating to the work terminated shall be made available for 3 years after any resulting final termination settlement. Records relating to appeals under the disputes clause or to litigation or the settlement of claims arising under or relating to this contract shall be made available until such appeals, litigation, or claims are finally resolved.

(3) As used in this clause, records include books, documents, accounting procedures and practices, and other data, regardless of type and regardless of form. This does not require the Contractor to create or maintain any record that the Contractor does not maintain in the ordinary course of business or pursuant to a provision of law.

(e)(1) Notwithstanding the requirements of the clauses in paragraphs (a), (b), (c), and (d) of this clause, the Contractor is not required to flow down any FAR clause, other than those in this paragraph (e)(1) in a subcontract for commercial items. Unless otherwise indicated below, the extent of the flow down shall be as required by the clause—

(i) 52.203-13, Contractor Code of Business Ethics and Conduct (Apr 2010) (Pub. L. 110-252, Title VI, Chapter 1 (41 U.S.C. 251 note)).

(ii) 52.219-8, Utilization of Small Business Concerns (Dec 2010) (15 U.S.C. 637(d)(2) and (3)), in all subcontracts that offer further subcontracting opportunities. If the subcontract (except subcontracts to small business concerns) exceeds \$650,000 (\$1.5 million for construction of any public facility), the subcontractor must include 52.219-8 in lower tier subcontracts that offer subcontracting opportunities.

(iii) [Reserved]

(iv) 52.222-26, Equal Opportunity (Mar 2007) (E.O. 11246).

(v) 52.222-35, Equal Opportunity for Veterans (Sep 2010) (38 U.S.C. 4212).

(vi) 52.222-36, Affirmative Action for Workers with Disabilities (Oct 2010) (29 U.S.C. 793).

(vii) 52.222-40, Notification of Employee Rights Under the National Labor Relations Act (Dec 2010) (E.O. 13496). Flow down required in accordance with paragraph (f) of FAR clause 52.222-40.

(viii) 52.222-41, Service Contract Act of 1965 (Nov 2007) (41 U.S.C. 351, *et seq.*).

(ix) 52.222-50, Combating Trafficking in Persons (Feb 2009) (22 U.S.C. 7104(g)).

___ Alternate I (Aug 2007) of 52.222-50 (22 U.S.C. 7104(g)).

(x) 52.222-51, Exemption from Application of the Service Contract Act to Contracts for Maintenance, Calibration, or Repair of Certain Equipment-Requirements (Nov 2007) (41 U.S.C. 351, et seq.).

(xi) 52.222-53, Exemption from Application of the Service Contract Act to Contracts for Certain Services-Requirements (Feb 2009) (41 U.S.C. 351, et seq.).

(xii) 52.222-54, Employment Eligibility Verification (JAN 2009).

(xiii) 52.226-6, Promoting Excess Food Donation to Nonprofit Organizations (Mar 2009) (Pub. L. 110-247). Flow down required in accordance with paragraph (e) of FAR clause 52.226-6.

(xiv) 52.247-64, Preference for Privately Owned U.S.-Flag Commercial Vessels (Feb 2006) (46 U.S.C. Appx. 1241(b) and 10 U.S.C. 2631). Flow down required in accordance with paragraph (d) of FAR clause 52.247-64.

(2) While not required, the contractor may include in its subcontracts for commercial items a minimal number of additional clauses necessary to satisfy its contractual obligations.

(End of clause)



INVOICE

Triple Canopy Inc.
12018 Sunrise Valley Drive
Suite 140
Reston, VA 20191
(703) 673-5000

Page: 1

Invoice #: DHHS04
Date: 8/8/2011

Sold To:
DHHS/PSC/SAS/DAM
Parklawn Building, Room 5C-18
5600 Fishers Lane
Rockville MD 20857

Contract Value: \$ 101,905.88
Contract Funding: \$ 101,905.88
Period of Performance: 06/20/2011 - 06/24/2011

Contract No.		Order No.		Terms			
GS-07F-5499R		HHSP233201100256G		Net 30 days			
Item Number	Description	Qty (days)	Unit	Unit Price	Period of Performance	Amount	Cumulative Amount
1	Basic Rifle Training Program	1	Lot	101,905.88	06/20/2011 - 06/24/2011	\$ 101,905.88	\$ 101,905.88
						<u>Receipt #</u>	
1994966	25232	\$ 79,486.59				49046	
1994881	25232	\$ 16,304.94					
1995350	25232	\$ 6,114.35					
OKay to pay 08/30/11							
Lydia Spaulding 202-205-9045							

Bank/Wire Information:

Account Name: Triple Canopy Inc.

Account #: (b)(4)

ABA #: 061000104

Bank Name: Sun Trust Bank Atlanta, GA USA

SWIFT Code: SNTRUS3A

Tax Identification Number: Triple Canopy Inc. 20-0206630

Signature

Joy Christy

Subtotal: \$ 101,905.88 \$ 101,905.88

Total: \$ 101,905.88 \$ 101,905.88

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 04/07/2011		2. CONTRACT NO. (If any) GS-07F-5499R		6. SHIP TO:				
3. ORDER NO. HHSP233201100190G		4. REQUISITION/REFERENCE NO. OS60550		a. NAME OF CONSIGNEE OS-OIG-HQ				
5. ISSUING OFFICE (Address correspondence to) DHHS/PSC/SAS/DAM Parklawn Building, Room 5C-18 5600 Fishers Lane Rockville MD 20857				b. STREET ADDRESS Cohen Building 330 Independence Ave, SW Washington DC 20201		c. CITY Washington		
				d. STATE DC		e. ZIP CODE 20201		
7. TO:				f. SHIP VIA				
a. NAME OF CONTRACTOR TRIPLE CANOPY INC 1370657				8. TYPE OF ORDER				
b. COMPANY NAME				<input type="checkbox"/> a. PURCHASE		<input checked="" type="checkbox"/> b. DELIVERY		
c. STREET ADDRESS TRIPLE CANOPY INC 12018 SUNRIS 12018 SUNRISE VALLEY DR STE 140				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.		
d. CITY RESTON				e. STATE VA		f. ZIP CODE 201913432		
9. ACCOUNTING AND APPROPRIATION DATA See Schedule				10. REQUISITIONING OFFICE SPALDING LYDIA (OS0)				
11. BUSINESS CLASSIFICATION (Check appropriate box(es))				12. F.O.B. POINT				
<input type="checkbox"/> a. SMALL <input type="checkbox"/> b. OTHER THAN SMALL <input type="checkbox"/> c. DISADVANTAGED <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)		16. DISCOUNT TERMS		
a. INSPECTION Destination		b. ACCEPTANCE Destination						
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)
	Tax ID Number: 20-0206630 DUNS Number: 138129692 BASIC RIFLE TRAINING - APRIL 2011 CLASS Period of Performance: 04/11/2011 to 04/15/2011 Continued ...							
18. SHIPPING POINT		19. GROSS SHIPPING WEIGHT		20. INVOICE NO.				17(h) TOTAL (Cont. pages)
21. MAIL INVOICE TO:								
a. NAME DHHS/PSC/SAS/DAM						\$101,905.88		
b. STREET ADDRESS (or P.O. Box) Parklawn Building, Room 5C-18 5600 Fishers Lane								17(i) GRAND TOTAL
c. CITY Rockville		d. STATE MD		e. ZIP CODE 20857		\$101,905.88		
22. UNITED STATES OF AMERICA BY (Signature)				23. NAME (Typed) DONALD S. HADRICK TITLE: CONTRACTING/ORDERING OFFICER				

ORDER FOR SUPPLIES OR SERVICES

PAGE NO

SCHEDULE - CONTINUATION

2

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

DATE OF ORDER

CONTRACT NO.

ORDER NO.

04/07/2011

GS-07F-5499R

HHSP233201100190G

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
1	<p>Firearm safety training April 11-15, 2011.</p> <p>See attached.</p> <p>Price: (b)(4)</p> <p>Number of Participants: (b)(4)</p> <p>Total Cost; 101,905.88</p> <p>Amount: \$79,486.53</p> <p>Accounting Info: 2011.1994966.25232 Appr. Yr.: 2011 CAN: 1994966 Object Class: 25232 Funded: \$79,486.53</p> <p>Amount: \$16,305.00</p> <p>Accounting Info: 2011.1994881.25232 Appr. Yr.: 2011 CAN: 1994881 Object Class: 25232 Funded: \$16,305.00</p> <p>Amount: \$6,114.35</p> <p>Accounting Info: 2011.1995350.25232 Appr. Yr.: 2011 CAN: 1995350 Object Class: 25232 Funded: \$6,114.35</p> <p>900 PROJECT OFFICER AUTHORITY</p> <p>The Project Officer (b)(6) & (b)(7)(c) is hereby designated to monitor the performance of this order on behalf of the Government. The Project Officer will provide no supervisory or instructional assistance to Contractor personnel. The Project Officer's function is primarily to provide the Contractor with working data. The Project Officer is not empowered to make any commitments, nor authorized to make any changes which affect prices, terms, or delivery as specified on this order. Any such proposed changes shall be brought to the immediate attention of the Ordering Officer for action. The acceptance of any change by the Contractor without specific approval and written consent of the Ordering Officer will be at the Contractor's own risk.</p> <p>929 INVOICE INFORMATION/CLAUSES INCORPORATED BY REFERENCE</p> <p>1. INVOICE INFORMATION</p> <p>IN ADDITION TO THE INFORMATION REQUIRED BY 52.232-25 (PROMPT PAYMENT), YOUR INVOICE MUST CONTAIN THE FOLLOWING: TAX IDENTIFICATION NUMBER (EMPLOYER'S IDENTIFICATION NUMBER) OR SOCIAL SECURITY NUMBER.</p> <p>Continued ...</p>				101,905.88	

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

\$101,905.88

AUTHORIZED FOR LOCAL REPRODUCTION
PREVIOUS EDITION NOT USABLE

OPTIONAL FORM 348 (Rev. 4/2006)
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.

ORDER NO.

04/07/2011

GS-07F-5499R

HHSP233201100190G

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>2. CLAUSES INCORPORATED BY REFERENCE (FAR 52.252-2) (FEB 1998)</p> <p>THIS CONTRACT INCORPORATES ONE OR MORE CLAUSES BY REFERENCE, WITH THE SAME FORCE AND EFFECT AS IF THEY WERE GIVEN IN FULL TEXT. UPON REQUEST, THE CONTRACTING OFFICER WILL MAKE THEIR FULL TEXT AVAILABLE. ALSO, THE FULL TEXT OF A CLAUSE MAY BE ACCESSED ELECTRONICALLY AT THIS ADDRESS: HTTPS://WWW.ACQUISITION.GOV/FAR</p> <p>FEDERAL ACQUISITION REGULATION (48 CFR CHAPTER 1) CLAUSES</p> <p>FAR 52.204-7 CENTRAL CONTRACTOR REGISTRATION (APR 2008)</p> <p>FAR 52.212-4 CONTRACT TERMS AND CONDITIONS - COMMERCIAL ITEMS (JUN 2010)</p> <p>FAR 52.232-33 PAYMENT BY ELECTRONIC FUNDS TRANSFER - CENTRAL CONTRACTOR REGISTRATION (OCT 2003)</p>					

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

\$0.00

AUTHORIZED FOR LOCAL REPRODUCTION
PREVIOUS EDITION NOT USABLE

OPTIONAL FORM 348 (Rev. 4/2008)
Prescribed by GSA FAR (48 CFR) 53.213(f)



INVOICE

RECEIVED

2011 JUL 20 P 3:41

Triple Canopy Inc.
12018 Sunrise Valley Drive
Suite 140
Reston, VA 20191
(703) 673-5000

Page: 1

FINANCIAL OPERATIONS
PROCEDURES

Invoice #: DHHS03
Date: 5/23/2011

Sold To:
DHHS/PSC/SAS/DAM
Parklawn Building, Room 5C-18
5600 Fishers Lane
Rockville MD 20857

Contract Value: \$ 101,905.88
Contract Funding: \$ 101,905.88
Period of Performance: 4/11/2011 - 4/15/2012

Contract No.		Order No.		Terms			
GS-07F-5499R		HHSP233201100190G		Net 30 days			
Item Number	Description	Qty (days)	Unit	Unit Price	Period of Performance	Amount	Cumulative Amount
1	Firearm safety training April 11-15, 2011.	(b)(7)e	EA	(b)(4)	04/11/2011-04/15/2011	\$ 101,905.88	\$ 101,905.88
						<u>receipt</u> #	
						48273	
1994966	25232			\$79,486.59			
1994881	25232			\$ 16,304.94			
1995350	25232			\$ 6,114.35			
Okay to pay							
Lydia Spalding 08/05/11							

Bank/Wire Information:

Account Name: Triple Canopy Inc.

Account #: (b)(4)

ABA #: 061000104

Bank Name: Sun Trust Bank Atlanta, GA USA

SWIFT Code: SNTRUS3A

Tax Identification Number: Triple Canopy Inc. 20-0206630

Signature

Tim Lyle

Subtotal: \$ 101,905.88 \$ 101,905.88

Total: \$ 101,905.88 \$ 101,905.88

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 03/09/2011		2. CONTRACT NO. (If any)		6. SHIP TO:				
3. ORDER NO. HHSP233201100191P		4. REQUISITION/REFERENCE NO. OS57800		a. NAME OF CONSIGNEE OS-OIG-HQ				
5. ISSUING OFFICE (Address correspondence to) DHHS/PSC/SAS/DAM Parklawn Building, Room 5C-18 5600 Fishers Lane Rockville MD 20857				b. STREET ADDRESS Cohen Building 330 Independence Ave, SW				
				c. CITY Washington	d. STATE DC	e. ZIP CODE 20201		
7. TO:				f. SHIP VIA				
a. NAME OF CONTRACTOR TRIPLE CANOPY INC 1370657				8. TYPE OF ORDER				
b. COMPANY NAME				<input checked="" type="checkbox"/> a. PURCHASE		<input type="checkbox"/> b. DELIVERY		
c. STREET ADDRESS TRIPLE CANOPY INC 2250 CORPORA 2250 CORPORATE PARK DR, STE 300				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.		
d. CITY HERNDON				e. STATE VA	f. ZIP CODE 201714835			
9. ACCOUNTING AND APPROPRIATION DATA See Schedule				10. REQUISITIONING OFFICE DHHS/PSC/SAS/DAM				
11. BUSINESS CLASSIFICATION (Check appropriate box(es))				12. F.O.B. POINT				
<input type="checkbox"/> a. SMALL <input type="checkbox"/> d. WOMEN-OWNED <input checked="" type="checkbox"/> b. OTHER THAN SMALL <input type="checkbox"/> e. HUBZone <input type="checkbox"/> c. DISADVANTAGED <input type="checkbox"/> f. EMERGING SMALL BUSINESS <input type="checkbox"/> g. SERVICE-DISABLED VETERAN-OWNED				Destination				
13. PLACE OF		14. GOVERNMENT B/L NO.		15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date) 03/21/2011		16. DISCOUNT TERMS		
a. INSPECTION Destination		b. ACCEPTANCE Destination						
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)
	Tax ID Number: 20-0206630 DUNS Number: 138129692 Questions concerning this order may be referred to John McKeever at 301 443-7905 and/or john.mckeever@hhs.psc.gov. Period of Performance: 03/21/2011 to 03/25/2011 Continued ...							
18. SHIPPING POINT		19. GROSS SHIPPING WEIGHT		20. INVOICE NO.				17(h) TOTAL (Cont. pages)
21. MAIL INVOICE TO:								
a. NAME FMS						\$101,905.88		
b. STREET ADDRESS (or P.O. Box)		5600 FISHERS LANE PARKLAWN BUILDING ROOM 16A-12						17(i) GRAND TOTAL
c. CITY ROCKVILLE		d. STATE MD	e. ZIP CODE 20857			\$101,905.88		
22. UNITED STATES OF AMERICA BY (Signature)				23. NAME (Typed) PATRICK A. JOY TITLE: CONTRACTING/ORDERING OFFICER				

AUTHORIZED FOR LOCAL REPRODUCTION
PREVIOUS EDITION NOT USABLEOPTIONAL FORM 347 (Rev. 4/2006)
Prescribed by GSAR 48 CFR 83.213(e)

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

PAGE NO

2

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

DATE OF ORDER

CONTRACT NO.

ORDER NO.

HHSP233201100191P

03/09/2011

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
1	Line Item 1 to provide firearm safety training March 21-25, 2011. Accounting Info: 2011.1994966.25232 Appr. Yr.: 2011 CAN: 1994966 Object Class: 25232 Funded: (b)(4)				(b)(4)	
2	Line item 2 to provide firearm safety training March 21-25, 2011. Accounting Info: 2011.1994881.25232 Appr. Yr.: 2011 CAN: 1994881 Object Class: 25232 Funded: \$(b)(4)					
3	Line item 3 to provide firearm safety training March 21-25, 2011. Accounting Info: 2011.1995350.25232 Appr. Yr.: 2011 CAN: 1995350 Object Class: 25232 Funded: (b)(4)					
4	Line item 4 to provide firearm safety training March 21-25, 2011. Accounting Info: 2011.1994966.25232 Appr. Yr.: 2011 CAN: 1994966 Object Class: 25232 Funded: (b)(4)					
5	Line item 5 to provide firearm safety training March 21-25, 2011. Accounting Info: 2011.1994881.25232 Appr. Yr.: 2011 CAN: 1994881 Object Class: 25232 Funded: \$(b)(4)					
	Continued ...					

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

\$98,848.70

AUTHORIZED FOR LOCAL REPRODUCTION
PREVIOUS EDITION NOT USABLE

OPTIONAL FORM 348 (Rev. 4/2006)
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
03/09/2011

CONTRACT NO.

ORDER NO.

HHSP233201100191P

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
6	<p>Line item 6 to provide firearm safety training March 21-25, 2011.</p> <p>Accounting Info: 2011.1995350.25232 Appr. Yr.: 2011 CAN: 1995350 Object Class: 25232 Funded: (b)(4)</p> <p>900 PROJECT OFFICER AUTHORITY The Project Officer: (b)(6) & (b)(7)(c) is hereby designated to monitor the performance of this order on behalf of the Government. The Project Officer will provide no supervisory or instructional assistance to Contractor personnel. The Project Officer's function is primarily to provide the Contractor with working data. The Project Officer is not empowered to make any commitments, nor authorized to make any changes which affect prices, terms, or delivery as specified on this order. Any such proposed changes shall be brought to the immediate attention of the Ordering Officer for action. The acceptance of any change by the Contractor without specific approval and written consent of the Ordering Officer will be at the Contractor's own risk.</p> <p>929 INVOICE INFORMATION/CLAUSES INCORPORATED BY REFERENCE</p> <p>1. INVOICE INFORMATION</p> <p>IN ADDITION TO THE INFORMATION REQUIRED BY 52.232-25 (PROMPT PAYMENT), YOUR INVOICE MUST CONTAIN THE FOLLOWING: TAX IDENTIFICATION NUMBER (EMPLOYER'S IDENTIFICATION NUMBER) OR SOCIAL SECURITY NUMBER.</p> <p>2. CLAUSES INCORPORATED BY REFERENCE (FAR 52.252-2) (FEB 1998)</p> <p>THIS CONTRACT INCORPORATES ONE OR MORE CLAUSES BY REFERENCE, WITH THE SAME FORCE AND EFFECT AS IF THEY WERE GIVEN IN FULL TEXT. UPON REQUEST, THE CONTRACTING OFFICER WILL MAKE THEIR FULL TEXT AVAILABLE. ALSO, THE FULL TEXT OF A CLAUSE MAY BE ACCESSED ELECTRONICALLY AT THIS ADDRESS: HTTPS://WWW.ACQUISITION.GOV/FAR</p> <p>FEDERAL ACQUISITION REGULATION (48 CFR CHAPTER 1) CLAUSES</p> <p>FAR 52.204-7 CENTRAL CONTRACTOR REGISTRATION (APR 2008)</p> <p>FAR 52.212-4 CONTRACT TERMS AND CONDITIONS - COMMERCIAL ITEMS (JUN 2010)</p> <p>FAR 52.232-33 PAYMENT BY ELECTRONIC FUNDS TRANSFER - CENTRAL CONTRACTOR REGISTRATION (OCT 2003)</p> <p>The total amount of award: \$101,905.88. The obligation for this award is shown in box 17(i).</p>				(b)(4)	

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

\$3,057.18

AUTHORIZED FOR LOCAL REPRODUCTION
PREVIOUS EDITION NOT USABLE

OPTIONAL FORM 348 (Rev. 4/2006)
Prescribed by GSA FAR (48 CFR) 53.213(f)



INVOICE

RECEIVED

2012 MAY 31 A 8:23

FINANCIAL OPERATIONS
PSC/DHHS

Triple Canopy Inc.
12018 Sunrise Valley Drive
Suite 140
Reston, VA 20191
(703) 673-5000

Page: 1

Invoice #: DHHS02
Date: 5/23/2011

Bill To:
DHHS/PSC/SAS/DAM
Parklawn Building, Room 5C-18
5600 Fishers Lane
Rockville MD 20857

Contract Value: \$ 101,905.88
Contract Funding: \$ 101,905.88
Period of Performance: 3/21/2011 - 3/25/2012

Order No. HHSP233201100191P Terms Net 30 days

Item Number	Description	Qty (days)	Unit	Unit Price	Period of Performance	Amount	Cumulative Amount
1	Line item 1 to provide firearm safety training March 21-25, 2011.	(b)(4)			03/21/2011-03/25/2011	\$ (b)(4)	
2	Line item 2 to provide firearm safety training March 21-25, 2011.				03/21/2011-03/25/2011	\$	
3	Line item 3 to provide firearm safety training March 21-25, 2011.				03/21/2011-03/25/2011	\$	
4	Line item 4 to provide firearm safety training March 21-25, 2011.				03/21/2011-03/25/2011	\$	
5	Line item 5 to provide firearm safety training March 21-25, 2011.				03/21/2011-03/25/2011	\$	
6	Line item 6 to provide firearm safety training March 21-25, 2011.				03/21/2011-03/25/2011	\$	

Bank/Wire Information: Subtotal: \$ 101,905.88 \$ 101,905.88

Account Name: Triple Canopy Inc.

Account #: (b)(4)

Total: \$ 101,905.88 \$ 101,905.88

ABA #: 061000104

Bank Name: Sun Trust Bank Atlanta, GA USA

SWIFT Code: SNTRUS3A

Tax Identification Number: Triple Canopy Inc. 20-0206630

Signature Tim Lyle

Receipt # 46189

1994966 25232 \$79,486.59
1994881 25232 \$16,304.94
1995350 25232 \$ 6,114.35

okay to pay
Lydia Spalding

6/3/11
202-205-9045

SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEM OFFEROR TO COMPLETE BLOCKS 12, 17, 23, 24, & 30				1. REQUISITION NUMBER OS52064		PAGE OF 1 3	
2. CONTRACT NO.		3. AWARD/ EFFECTIVE DATE		4. ORDER NUMBER HHSP233201100012A		5. SOLICITATION NUMBER 11-233-SOL-00016	
						6. SOLICITATION ISSUE DATE 11/02/2010	
7. FOR SOLICITATION INFORMATION CALL:		8. NAME JUAN BAEZ		9. TELEPHONE NUMBER (No collect calls) 301-443-2367		10. OFFER DUE DATE/LOCAL TIME ET	
9. ISSUED BY DHHS/PSC/SAS/DAM Parklawn Building, Room 5C-18 5600 Fishers Lane MD Rockville 20857		CODE DAM		10. THIS ACQUISITION IS <input checked="" type="checkbox"/> UNRESTRICTED OR <input type="checkbox"/> SET ASIDE: % FOR: <div style="display: flex; justify-content: space-between;"> <div> NAICS: 561210 SIZE STANDARD: \$35.5 </div> <div> <input type="checkbox"/> SMALL BUSINESS <input type="checkbox"/> HUBZONE SMALL BUSINESS <input type="checkbox"/> SERVICE-DISABLED VETERAN-OWNED SMALL BUSINESS </div> <div> <input type="checkbox"/> EMERGING SMALL BUSINESS <input type="checkbox"/> SOLE SOURCE <input type="checkbox"/> 8(A) </div> </div>			
11. DELIVERY FOR FOB DESTINATION UNLESS BLOCK IS MARKED <input type="checkbox"/> SEE SCHEDULE		12. DISCOUNT TERMS		13a. THIS CONTRACT IS A RATED ORDER UNDER OPAS (15 CFR 700) <input type="checkbox"/> 13a		13b. RATING	
15. DELIVER TO OS-OIG-HQ Cohen Building 330 Independence Ave, SW Washington DC 20201		CODE OS-OIG-HQ		10. ADMINISTERED BY DHHS/PSC/SAS/DAM Parklawn Bldg., Room 5C-18 5600 Fishers Lane MD Rockville 20857			
17a. CONTRACTOR/ OFFEROR TRIPLE CANOPY INC 1370657 TRIPLE CANOPY INC 2250 CORPORA 2250 CORPORATE PARK DR, STE 300 VA HERNDON 201714835		CODE 1370657 FACILITY CODE		18a. PAYMENT WILL BE MADE BY FMS 5600 FISHERS LANE PARKLAWN BUILDING ROOM 16A-12 ROCKVILLE MD 20857			
TELEPHONE NO.				18b. SUBMIT INVOICES TO ADDRESS SHOWN IN BLOCK 18a UNLESS BLOCK BELOW IS CHECKED <input type="checkbox"/> SEE ADDENDUM			
<input type="checkbox"/> 17b. CHECK IF REMITTANCE IS DIFFERENT AND PUT SUCH ADDRESS IN OFFER							
19. ITEM NO.		20. SCHEDULE OF SUPPLIES/SERVICES		21. QUANTITY		22. UNIT	
		23. UNIT PRICE		24. AMOUNT			
		Tax ID Number: 20-0206630 DUNS Number: 138129692 Basic Rifle Training Program This Task Order is authorized for the GSA Federal Supply Schedule GSA MAS 84 SIN 246 52 for the Basic Rifle Training Program for the Office of Inspector General, Department of Health and Human Services (HHS) in accordance with the results of RFQ 11-233-SOL-00016 issued on 11/2/2010. Pricing is in accordance with terms, and conditions through the vendor's GSA Schedule Contract GS-07F-5499R and the Contractor's revised quote dtd 11/10/2010. (Use Reverse and/or Attach Additional Sheets as Necessary)					
25. ACCOUNTING AND APPROPRIATION DATA See schedule		26. TOTAL AWARD AMOUNT (For Govt. Use Only) \$74,140.50					
<input type="checkbox"/> 27a. SOLICITATION INCORPORATES BY REFERENCE FAR 52.212-1, 52.212-4, FAR 52.212-3 AND 52.212-5 ARE ATTACHED. ADDEND		<input type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED.					
<input checked="" type="checkbox"/> 27b. CONTRACT/PURCHASE ORDER INCORPORATES BY REFERENCE FAR 52.212-4, FAR 52.212-5 IS ATTACHED. ADDENDA		<input type="checkbox"/> ARE <input checked="" type="checkbox"/> ARE NOT ATTACHED.					
<input type="checkbox"/> 28. CONTRACTOR IS REQUIRED TO SIGN THIS DOCUMENT AND RETURN COPIES TO ISSUING OFFICE. CONTRACTOR AGREES TO FURNISH AND DELIVER ALL ITEMS SET FORTH OR OTHERWISE IDENTIFIED ABOVE AND ON ANY ADDITIONAL SHEETS SUBJECT TO THE TERMS AND CONDITIONS SPECIFIED HEREIN.		<input checked="" type="checkbox"/> 29. AWARD OF CONTRACT REF. OFFER DATED YOUR OFFER ON SOLICITATION (BLOCK 6), INCLUDING ANY ADDITIONS OR CHANGES WHICH ARE SET FORTH HEREIN, IS ACCEPTED AS TO ITEMS:					
30a. SIGNATURE OF OFFEROR/CONTRACTOR 		30b. UNITED STATES OF AMERICA (SIGNATURE OF CONTRACTING OFFICER) 					
30b. NAME AND TITLE OF SIGNER (Type or print) Lawrence Hyde, VP Business Operations		30c. DATE SIGNED 11/24/2010		31b. NAME OF CONTRACTING OFFICER (Type or print) JUAN BAEZ		31c. DATE SIGNED	

AUTHORIZED FOR LOCAL REPRODUCTION
PREVIOUS EDITION IS NOT USABLE

STANDARD FORM 1449 (REV. 3/2006)
Prescribed by GSA - FAR (48 CFR) 53.212

10. ITEM NO.	20. SCHEDULE OF SUPPLIES/SERVICES	21. QUANTITY	22. UNIT	23. UNIT PRICE	24. AMOUNT								
	<p>For any questions regarding this order, please contact Juan D. Baez at 301-443-2367 or juan.baez@psc.gov.</p> <p>For technical questions, please contact (b)(6) & (b)(7)(c), Special Agent, at (b)(6) & (7)(c) or (b)(6) & (7)(c) oig.hhs.gov.</p> <p>Period of Performance: 11/28/10-12/4/2010</p> <table border="1"> <thead> <tr> <th>Qty</th> <th>UI</th> <th>Price</th> <th>Extended</th> </tr> </thead> <tbody> <tr> <td>B RTP Course</td> <td>(b)(4)</td> <td></td> <td>\$74,140.50</td> </tr> </tbody> </table> <p>Delivery of services will occur at Contractor's facility at</p> <p>Triple Canopy JESTC Facility 1400 West Irene Road Zachery, LA 70791 Delivery: 11/28/2010 Period of Performance: 11/22/2010 to 12/15/2010</p>	Qty	UI	Price	Extended	B RTP Course	(b)(4)		\$74,140.50				
Qty	UI	Price	Extended										
B RTP Course	(b)(4)		\$74,140.50										
1	<p>Basic Rifle Training Program PoP: 11/28/10-12/4/2010</p> <p>Amount: \$57,829.59 Accounting Info: 2011-1994966-25232 Appr. Yr.: 2011 CAN: 1994966 Object Class: 25232 Funded: \$57,829.59</p> <p>Amount: \$11,862.48 Continued ...</p>				74,140.50								

32a. QUANTITY IN COLUMN 21 HAS BEEN

☐ RECEIVED☐ INSPECTEDACCEPTED, AND CONFORMS TO THE CONTRACT, EXCEPT AS
☐ NOTED:

32b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE

32c. DATE

32d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE

32e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE

32f. TELEPHONE NUMBER OF AUTHORIZED GOVERNMENT REPRESENTATIVE

32g. E-MAIL OF AUTHORIZED GOVERNMENT REPRESENTATIVE

33. SHIP NUMBER

34. VOUCHER NUMBER

35. AMOUNT VERIFIED
CORRECT FOR

36. PAYMENT

37. CHECK NUMBER

☐ PARTIAL ☐ FINAL☐ COMPLETE ☐ PARTIAL ☐ FINAL

38. S/R ACCOUNT NUMBER

39. S/R VOUCHER NUMBER

40. PAID BY

41a. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT

42a. RECEIVED BY (Print)

41b. SIGNATURE AND TITLE OF CERTIFYING OFFICER

41c. DATE

42b. RECEIVED AT (Location)

42c. DATE REC'D (YY/MM/DD)

42d. TOTAL CONTAINERS

STANDARD FORM 1449 (REV. 3/2005) BACK

CONTINUATION SHEET

 REFERENCE NO. OF DOCUMENT BEING CONTINUED
 RHSP233201100012A

 PAGE OF
 3 3

NAME OF OFFEROR OR CONTRACTOR

TRIPLE CANOPY INC 1370657

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	Accounting Info: 2011-1994881-25232 Appr. Yr.: 2011 CAN: 1994881 Object Class: 25232 Funded: \$11,862.48 Amount: \$4,448.43 Accounting Info: 2011-1995350-25232 Appr. Yr.: 2011 CAN: 1995350 Object Class: 25232 Funded: \$4,448.43 The total amount of award: \$74,140.50. The obligation for this award is shown in box 26.				

NSN 7540-01-152-8087

 OPTIONAL FORM 330 (4-88)
 Sponsored by GSA
 FAR (48 CFR) 83.110

Triple Canopy Inc.
12018 Sunrise Valley Drive
Suite 140
Reston, VA 20191
(703)673-5000

Invoice
RECEIVED

2011 JAN 19 A 10:50

Page: 1

Invoice #: DHHS01
Date: 01/13/2011

Sold To

FMS
5600 Fishers Lane
Parklawn Building
Room 16A-12
Rockville, MD 20857

EMERGENCY OPERATIONS

Order No.		Terms		Subscription No.	
HHSP233201100012A		Net 30 days		11-233-SOL-00016	
Description	Quantity	Unit	Unit Price	Amount	
Basic Rifle Training Program Course	(b)(4)	EA	(b)(4)	11/22/2010-12/04/2010	\$74,140.50

CAN

1994966

1994881

1995350

AMOUNT

\$57,829.59

\$11,862.48

\$4,448.43

UC

25232

25232

25232

RECEIPT #

42418

Okay to pay
Lydia Spaulding 1/31/11
202-205-9045

Wire Instructions:
Bank Name: SunTrust Bank, Atlanta GA
Swift Code: SNTRUS3A
Routing #: 061000104
Account Name: Triple Canopy, Inc
Account #: (b)(4)

Subtotal \$74,140.50

Printed: Tim Lyle

Signature:



Balance

\$74,140.50

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 09/28/2011		2. CONTRACT NO. (If any) HHSP23320110006WB		6. SHIP TO:			
3. ORDER NO.		4. REQUISITION/REFERENCE NO.		a. NAME OF CONSIGNEE Indicated on call			
5. ISSUING OFFICE (Address correspondence to) DHHS/PSC/SAS/DAM Parklawn Building, Room 5C-18 5600 Fishers Lane Rockville MD 20857				b. STREET ADDRESS			
				c. CITY	d. STATE	e. ZIP CODE	
7. TO:				f. SHIP VIA			
a. NAME OF CONTRACTOR TRIPLE CANOPY INC 1370657				8. TYPE OF ORDER			
b. COMPANY NAME				<input type="checkbox"/> a. PURCHASE REFERENCE YOUR:		<input 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.	
c. STREET ADDRESS 12018 SUNRISE VALLEY DR STE 140				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.			
d. CITY RESTON		e. STATE VA	f. ZIP CODE 201913432				
9. ACCOUNTING AND APPROPRIATION DATA Indicated on call				10. REQUISITIONING OFFICE DHHS/PSC/SAS/DAM			
11. BUSINESS CLASSIFICATION (Check appropriate box(es))				12. F.O.B. POINT Destination			
<input type="checkbox"/> a. SMALL <input type="checkbox"/> d. WOMEN-OWNED <input checked="" type="checkbox"/> b. OTHER THAN SMALL <input type="checkbox"/> e. HUBZone <input type="checkbox"/> c. DISADVANTAGED <input type="checkbox"/> f. EMERGING SMALL BUSINESS <input type="checkbox"/> g. SERVICE-DISABLED VETERAN-OWNED							
13. PLACE OF		14. GOVERNMENT B/L NO.		15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date) Indicated on call		16. DISCOUNT TERMS	
a. INSPECTION Destination	b. ACCEPTANCE Destination						
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)
	GSA Contract #: GS-07F-5499R Tax ID Number: 20-0206630 DUNS Number: 138129692 BLANKET PURCHASE AGREEMENT (BPA) FOR BASIC Continued ...						
18. SHIPPING POINT		19. GROSS SHIPPING WEIGHT		20. INVOICE NO.		17(h) TOTAL (Cont. pages)	
21. MAIL INVOICE TO:							
a. NAME Indicated on call						\$0.00	
b. STREET ADDRESS (or P.O. Box)							
c. CITY						d. STATE	e. ZIP CODE
						\$0.00	
22. UNITED STATES OF AMERICA BY (Signature)				23. NAME (Typed) ROSANNA BROWNING TITLE: CONTRACTING/ORDERING OFFICER			

AUTHORIZED FOR LOCAL REPRODUCTION
PREVIOUS EDITION NOT USABLE

OPTIONAL FORM 347 (Rev. 4/2008)
Prescribed by GSA/FAR 48 CFR 53.213(e)

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

PAGE NO

2

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

DATE OF ORDER CONTRACT NO.

09/28/2011 HHSP23320110006WB

ORDER NO.

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>RIFLE TRAINING (BRTP) AND RIFLE TACTICS CYCLE TRAINING (RTCT) TO SUPPORT THE DEPARTMENT OF HEALTH AND HUMAN SERVICES (HHS)/OFFICE OF INVESTIGATIONS (OI)/NATIONAL TRAINING AND OPERATIONS STAFF'S (NTEOB) ONGOING PROTECTIVE AND INVESTIGATIVE OPERATIONS.</p> <p>The contractor shall provide training under this BPA in accordance with the statement of work (SOW) in the attached addendum and individual task orders issued under this BPA.</p> <p>The contractor's quote submissions (Volume I: Technical Quote and Volume III: Price Quote) are incorporated into the BPA. Should a dispute arise between the contractor's quote and the Government's SOW, the SOW shall take precedence.</p> <p>Period of Performance: 09/28/2011 to 09/27/2016</p>					

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

\$0.00

AUTHORIZED FOR LOCAL REPRODUCTION
PREVIOUS EDITION NOT USABLE

OPTIONAL FORM 348 (Rev. 4/2006)
Prescribed by GSA FAR (48 CFR) 53.213(f)

**BEST VALUE
BLANKET PURCHASE AGREEMENT
FEDERAL SUPPLY SCHEDULE**

Department of Health and Human Services (DHHS)
Program Support Center (PSC)
Division of Acquisition Management (DAM)

In the spirit of the Federal Acquisition Streamlining Act, DHHS/PSC/DAM and Triple Canopy, Inc. enter into a cooperative agreement to further reduce the administrative costs of acquiring commercial items from the General Services Administration (GSA) Federal Supply Schedule 084 Contract

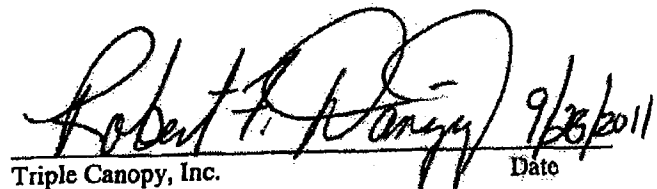
GS-07F-5499R.

Federal Supply Schedule contract BPAs eliminate contracting and open market costs such as: search for sources; the development of technical documents, solicitations and the evaluation of offers. Teaming Arrangements are permitted with Federal Supply Schedule Contractors in accordance with Federal Acquisition Regulation (FAR) 9.6.

This BPA will further decrease costs, reduce paperwork, and save time by eliminating the need for repetitive, individual purchases from the schedule contract. The end result is to create a purchasing mechanism for the ordering activity that works better and costs less.

Signatures


DHHS/PSC/DAM Date


Triple Canopy, Inc. Date

**Robert F. Danzig
Director of Contracts**

**BLANKET PURCHASE AGREEMENT (BPA) FOR
“NTEOB BASIC RIFLE TRAINING PROGRAM (BRTP) AND
RIFLE TACTICS CYCLE TRAINING (RTCT).”**

SECTION A. – BPA - SUPPLIES OR SERVICES AND PRICES/COSTS

A.1 CONSIDERATION AND PAYMENT

OFFERORS ARE REQUESTED TO PROVIDE A FIXED PRICE FOR THE BASIC RIFLE TRAINING PROGRAM AND THE RIFLE TACTICS CYCLE TRAINING FOR EACH PERIOD OF THE BPA (BASE AND OPTION PERIODS).

The contractor shall provide services to support the Department of Health and Human Services, Office of Investigations (OI), National Training and Operations Staff (NTEOB) by providing a Basic Rifle Training Program (BRTP) for up to 22 students per class and a Rifle Tactics Cycle Training (RTCT) for up to sixteen students per class to its Special Agents.

<u>YEAR 1</u>	Price Per Class
Basic Rifle Training Program	(b)(4)
Rifle Tactics Cycle Training	
<u>YEAR 2</u>	
Basic Rifle Training Program	
Rifle Tactics Cycle Training	
<u>YEAR 3</u>	
Basic Rifle Training Program	
Rifle Tactics Cycle Training	
<u>YEAR 4</u>	
Basic Rifle Training Program	
Rifle Tactics Cycle Training	
<u>YEAR 5</u>	
Basic Rifle Training Program	
Rifle Tactics Cycle Training	
BPA CEILING	\$1,300,000.00

B. BPA DESCRIPTION/BACKGROUND/OBJECTIVE/STATEMENT OF WORK

B.1 BPA DESCRIPTION

This Blanket Purchase Agreement (BPA) is authorized in accordance with the General Services Administration (GSA) Schedule 84 (TOTAL SOLUTIONS FOR LAW ENFORCEMENT, SECURITY, FACILITIES MANAGEMENT, FIRE, RESCUE, CLOTHING, MARINE CRAFT AND EMERGENCY/DISASTER RESPONSE). All task orders placed under this BPA are subject to the terms and conditions of the GSA schedule contract.

The Government is not obligated to issue any orders against this BPA. Additionally, at its discretion, the Government may use any other methods of acquisition available to obtain the services identified in this BPA.

Firm-Fixed-Price task orders will be issued.

B.2. BACKGROUND

The Department of Health and Human Services, Office of Investigations (OI), National Training and Operations Staff (NTEOB) have facilitated an agency wide distribution of (b)(7)e

(b)(7)e

B.3 OBJECTIVE

The purpose of this acquisition is to support the Department of Health and Human Services, Office of Investigations (OI), National Training and Operations Staff (NTEOB) by providing a Basic Rifle Training Program (BRTTP) and Rifle Tactics Cycle Training (RTCT) to its Special Agents.

B.4 STATEMENT OF WORK (SOW)

B.4.1 Overview

The contractor shall facilitate a Basic Rifle Training Program (BRTTP) and a Rifle Tactics Cycle Training (RTCT) for the Department of Health and Human Services, Office of Inspector General. The contractor must have a successful track record of working with the federal government on projects similar to the BRTTP and RTCT. The specific task related to each of these items is listed below:

(b)(7)e

5. Provide four hours of TCCC training for the twenty-two students attending the BRTP.
6. Provide a ratio of one instructor for every four students attending BRTP.
7. Provide a minimum of one person that is qualified as a paramedic or higher.
8. Provide access to a qualified armorer that has experience with (b)(7)e
9. Provide water during the entire training cycle.
10. Provide the following training materials:
 - a. Cardboard targets
 - b. Target stands and holders
 - c. Staples or any item that will ensure the target is affixed to the cardboard and target stand.
 - d. 12 orange traffic cones.
 - e. 2 Vicking Tactical Barricades
 - f. Consumable products such as, but not limited to: Windows, Breachable Doors, door knobs, Diversionary devices, and junk cars.
11. Administer the (b)(7)e assessment. (See Attachment A)
12. The contractor must supply shipping and receiving support that ensures the security of the BRTP equipment upon receiving as well as return shipping to HHS following the course completion.
13. The contractor must supply a complete administrative layout of the course to include but not limited to: Course Outline, Syllabus, Assessment Scores, and Student Performance Breakdowns.
14. The contractor shall supply a sufficient number of role players to ensure effective training scenarios.

B.4.2.2 Task 2: RIFLE TACTICS CYCLE TRAINING

The Rifle Tactics Cycle Training (RTCT) will provide Special Agents with a complete review of the skills learned at the BRTP while sharpening their ability to safely and effectively deploy an (b)(7)e (b)(7)e during various investigative enforcement operations. In order to accomplish this task, the contractor shall:

1. Develop and host a three and half day, 28+ hour training course to review the following items with up to sixteen Special Agents:

(b)(7)e

Skill Set:

- a. Loading and firing the (b)(7)e while wearing HHS-OIG issued enforcement equipment described as, but not limited to: (b)(7)e

(b)(7)e

performance, evaluating the quality of services provided by the Contractor, and performing final inspection and acceptance of all deliverables.

B.6 PERIOD/PLACE OF PERFORMANCE and DELIVERABLES

B.6.1. Term of the Blanket Purchase Agreement

The term of the BPA shall be From September 28, 2011 through September 27, 2016.

B.6.2. Deliverable Date

The dates for training will be specified in each individual task order.

B.6.3. Place of Performance

The Contractor shall perform the services required under the BPA at the location specified in each individual task order.

B.6.4 Observance of Federal Holidays

No services shall be performed at any Government site or deliveries made on the Federal holidays listed below. When a deliverable due date occurs on a weekend or Federal holiday, the deliverable will be due on the following Government business day.

	Holiday	Date
1	New Year's Day	January 1 st
2	Inauguration Day	January 20, 2013
3	Martin Luther King's Birthday	Third Monday in January
4	President's Day	Third Monday in February
5	Memorial Day	Last Monday in May
6	Independence Day	July 4 th *
7	Labor Day	First Monday in September
8	Columbus Day	Second Monday in October
9	Veteran's Day	November 11 th *
10	Thanksgiving Day	Fourth Thursday in November
11	Christmas Day	December 25 th *

* If the date falls on a Saturday, the Government holiday is the preceding Friday. If the date falls on a Sunday, the Government holiday is the following Monday.

B.6.5 Deliverable Schedule

Over this course of this agreement, the NTEOB preliminarily plans to run the following BRTP courses by fiscal year:

FY 2011	BRTP Courses
FY2012	BRTP Courses
FY 2014	BRTP Course
FY 2016	BRTP Course

Over the course of this agreement, the NTEOB preliminarily plans to run the following RTCT courses by fiscal year:

FY2012	RTCT
FY2013	RTCT
FY2014	RTCT
FY2015	RTCT
FY2016	RTCT

The NTEOB would like to issue one task order for a BRTP class before the end of FY2011.

However, this is only an estimate and not a guarantee of work. The Government is not obligated to issue any orders against this BPA. Additionally, at its discretion, the Government may use any other methods of acquisition available to obtain the services identified in this BPA.

Task Requirement	Due Date
Meet with the National Program Coordinator for Special Programs, National Training and Emergency Operations Branch (NTEOB)	One day after effective date of the Contract
Meet with the Special Agent in Charge of the National Training and Emergency Operations Branch (NTEOB)	Within one week of the effective date of the contract
Present a completed syllabus to NTEOB, for the Basic Rifle Training Program (BRTP) and the Rifle Tactics Recycle Course (RTRC)	Within two weeks of the effective date of the contract
Conduct a BRTP course	As set forth in individual task orders
Conduct a RTRC course	As set forth in individual task orders. The Government anticipates during November 2011 and then as required by the COTR, but not to exceed five during a Fiscal Year beginning FY2012 and continuing until the contract expires.
Meet, discuss and improve the curriculums of BRTP and RTRC with the Special Programs Coordinator, NTEOB and other representatives selected by NTEOB	As required by the COTR

B.7 BPA ADMINISTRATION DATA

B.7.1 Authorization of Government Personnel

Notwithstanding the Contractor's responsibility for total management during the performance of this BPA, the administration of the BPA will require maximum coordination between the Government and the Contractor. The following individuals will be the Government's points of contact during the performance of task orders issued under the BPA:

B.7.1.1 Contract Specialist

All BPA administration shall be performed by Patrick D. Purtill, Contract Specialist, Division of Acquisition Management, Parklawn Building, Room 5C-18, 5600 Fishers Lane, Rockville, Maryland 20857, (301) 443-3535, patrick.purtill@psc.hhs.gov.

B.7.1.2 Contracting Officer

The PSC Contracting Officer is the only individual authorized to modify this BPA. The Contracting Officer responsible for administrative and contractual issues concerning this BPA is:

Rosanna Browning
HHS/Program Support Center
Division of Acquisition Management, SAS
5600 Fishers Lane, Room 5C-18 Parklawn
Rockville, Maryland 20857
Phone: (301) 443-6931 Fax: (301) 443-8488
Email: rosanna.browning@psc.hhs.gov

B.7.1.3 Contracting Officer's Technical Representative (COTR) Appointment and Authority

The name and address of the COTR assigned to this project is:

(b)(6) & (7)(c)

National Training Coordinator, Special Programs
U.S. Department of Health and Human Services
Office of Investigations, OIG
330 C Street, SW
Switzer Building, Suite 2400
Washington, DC 20201
Phone: (b)(7)e, (b)(6) & (7)(c)
Email: (b)(7)e, (b)(6) & (7)(c) @oig.hhs.gov

B.7.2 Invoice Submission

B.7.2.1 Upon the completion of each task order, the contractor shall submit one original invoice complete with all required back-up documentation to the Contract Specialist, Patrick D. Purtill, at patrick.purtill@psc.hhs.gov or sent by U.S. mail and addressed as follows:

DHHS/Program Support Center
Division of Acquisition Management, SAS
Attn: Patrick D. Purtill
Parklawn Building, Room 5C-18
Rockville, Maryland 20857

B.7.2.2 One complete copy of each invoice with backup documentation shall be emailed to the COTR. Reference section B.7.1.3 for the COTR's email address.

B.7.2.3 A hard copy of each invoice with all required back-up documentation shall be sent directly to the Finance Office for payment or an electronic copy of all invoices with all back-up documentation may be e-mailed to PSC_Invoices@psc.hhs.gov. It is the responsibility of the Contractor to verify that the Finance Office has received their invoice. Calls concerning contract payment shall be directed to the general help-line number on (301) 443-3020. The address for the Finance Office responsible for payment is:

DHHS/Program Support Center
Financial Management Services/DFO
Commercial Payments Section
Parklawn Building, Room 16A-12
5600 Fishers Lane
Rockville, Maryland 20857
Telephone Number: 301-443-3020

B.7.2.4 The Contractor agrees to include the following information on its invoice:

- a) Contractor's name, invoice number and date;
- b) Task Order Number;
- c) BPA Number;
- d) Dollar amount billed and services rendered;
- e) Payment terms;
- f) Tax identification number;
- g) Signature of an authorized official certifying the voucher to be correct and proper for payment;
- h) Contractor's complete remittance or check mailing address; and
- i) COTR's name and telephone number.

B.7.3 Electronic Transfer of Funds Payment

Pursuant to FAR 52.232-33, Payment by Electronic Funds Transfer - Central Contractor Registration (OCT 2003), the Contractor shall designate a financial institution for receipt of electronic funds transfer payment. The designation shall be submitted in writing to the finance office set forth in OF 347.

B.8 SPECIAL TASK ORDER REQUIREMENTS

B.8.1 Contractor Performance Evaluation

Interim and final evaluations of contractor performance will be prepared on this effort in accordance with FAR Subpart 42.1500. A final performance evaluation will be prepared, by the COTR, at the time of completion of work. In addition to the final evaluation, interim evaluations may be prepared, by the COTR, annually to coincide with the anniversary date of this effort.

Interim and final evaluations will be provided to the Contractor as soon as practicable after completion of the evaluation. The Contractor will be permitted thirty (30) calendar days to review the document and to submit additional information or a rebutting statement. Any disagreement between the parties regarding an evaluation will be referred to an individual one level above the CO, whose decision will be final.

Copies of the evaluations, Contractor responses, and review comments, if any, will be retained as part of the contract file, and may be used to support future award decisions.

B.9 TASK ORDERS

All task orders issued under this BPA are subject to the terms and conditions of the General Services Administration (GSA) Federal Supply Schedule 84 contract. In the event of a conflict between a task

order and the contract, the contract shall take precedence. All changes made to the Contractor's contract will apply to the BPA at the anniversary of the BPA or the conclusion of a current task order should the task order extend beyond the anniversary of the BPA.

The Contractor must maintain its contract with GSA to remain eligible for task orders. The BPA will be reviewed annually to make certain the BPA still represents the best value to the Government. The Government will evaluate the Contractor's performance throughout the year. The results of these performance evaluations will affect the continuation of the BPA.

B.9.1 Procedures For Issuing Task Orders

The Contracting Officer (CO) is the only individual authorized to issue task orders under this BPA. The procedures that shall apply to the issuance of task orders are set forth below.

B.9.1.1 Request for Task Order

Prior to issuing any task order, the CO will coordinate with the contractor on mutually agreed upon dates for trainings, provide locations for the RTCT, and provide a minimum of 45 days before a training is required.

B.9.1.2 Issuance of Task Orders

Performance shall commence when authorized by a written task order.

B.10 GOVERNMENT FURNISHED PROPERTY/EQUIPMENT (GFP/E)

In order to execute the BRTP, the government will provide rifles, ammunition, and other personal equipment for each agent participating in the course. The contractor must provide for the security of this property from the time of receiving the shipment to the time the equipment is shipped back to HHS at the completion of the BRTP course.

B.11 BPA CLAUSES

B.11.1 DEPARTMENT OF HEALTH AND HUMAN SERVICES ACQUISITION REGULATION (HHSAR) (48 CFR CHAPTER 3) CONTRACT CLAUSES

<u>HHSAR Clause No.</u>	<u>Title and Date</u>
1. 352.201-70	Paperwork Reduction Act (JAN 2006)
2. 352.202-1	Definitions (Jan 2006)
3. 352.203-70	Anti-Lobbying (Jan 2006)
4. 352.222-70	Contractor Cooperation in Equal Employment Opportunity (OCT 2009)
5. 352.242-73	Withholding Of Contract Payments (Jan 2006)



Formal Service Proposal

Presented to

**Department of Health & Human Services
Office of Inspector General**

For:

Rifle Training Familiarization Program



Norse Security Group is pleased to present the enclosed proposal to: Department of Health & Human Services Office of Inspector General in direct Support to the Department of Health & Human Services. The points of contact for this proposal are Mr. Todd Triplett for training issues; Ms. Ashley Moser for contractual issues.

**Todd Triplett: Mobile 502.931.1870; Email: tatriplett@nsgglobal.com
Ashley Moser: Mobile 502.299.9871; Email: amoser@nsgglobal.com**

NORSE SECURITY GROUP CORPORATION

Proposal for Services Provided to:

Department of Health & Human Services Office of Inspector General

1. **DATES OF SERVICE:** September 18-20, 2012
2. **SERVICES PROVIDED:** Rifle Familiarization Training Program (RFTP)
28+ Hours, 3.5 Training Days
3. **TRAINING LOCATIONS:** Kansas City, Kansas
4. **STUDENT PROFILE:** 1 to 6, Instructor to Student Ratio
5. **PROPRIETARY INFORMATION:** All training and supplied training materials used by Norse Security Group personnel are considered Norse Proprietary and MAY NOT be copied, duplicated, removed, shared, or transferred to another party by any participant without the written permission of Norse Security Group Corporation.
6. **INFORMATION PROTECTION:** Norse Security Group fully acknowledges the sensitivity associated with Law Enforcement Tactics, Techniques, and Procedures (TTP's) and associated mission areas. NSG-Global will not share any information that may be provided by Department of Health and Human Services or observed through the normal course of training operations. NSG-Global will provide key personnel with **SECRET** Clearance access when required.
7. **OVERVIEW OF SERVICES PROVIDED:**

A. Administrative

1.) **Safety is paramount to successful tactical training** and will always be factored into the planning of dynamic or high-risk training events. Risk will be mitigated through evaluation of each student's progress and ability to perform the Tasks and Standards presented. No student, under any circumstances, will be placed under duress to perform selected drills. This is not designated for attrition; it is intended to bring students to a higher level from experiences gained in their basic program. Any deficiencies will be noted and discussed with DHHS OIG Training supervisors. If a student is deemed "unsafe", then training for that student will be halted until a resolution is determined or the instructor cadre can remediate the deficiency. Non-lethal training of the student will continue to advance other skills required for deployment.

2.) All safety equipment as prescribed by DHHS OIG governing instructions will be donned during tactical training that requires protective equipment. Personal protective equipment and load bearing equipment are to be provided by DHHS OIG.

3.) Medical resources and a solid medical evaluation plan are essential to safeguard against serious injury and to mitigate the risk to all personnel involved in the course. Norse will provide qualified medical support for dynamic training evolutions, to include basic life support medical equipment. A Norse medical representative, training cadre and local emergency medical service units, will

coordinate medical evacuation plans. Both landline and cellular phone service is available from the training range, building, or designated sites; public access roads for emergency vehicles are well-established and have been "rehearsed" by cadre; training field can receive emergency life-flight helicopters.

B. Practical Training:

1.) Norse RFTP course is a three and a half day, 28+ hours training course. It has been designed to enhance the skills in which the Special Agents are taught in a BRTP course. The RFTP will allow Special Agents to practice the tactics learned in a BRTP course as a team that will operate and work together out of the same regional DHHS-OIG office. BRTP tactical skill sets will be utilized throughout the RFTP course. Upon completion of the course the student will have mastered the knowledge to efficiently work as an effective rifle deployment team in various tactical settings. Norse is prepared to provide the Department of Health and Human Services National Training Equipment Operations Branch tactical readiness training for Special Agents assigned to the OIG office. Norse Tactical Instructors are Special Liaison Instructor (b)(7)e certified by the DHHS-OIG NTEOB Office and/or have served in the capacity as a U.S. military Special Operations Forces member with recent field experience that can translate to TTP's required to apply similar TTP's. All training will be conducted in accordance with State, Federal, and local regulations that govern dynamic training evolutions and carry over into DHHS member's daily job requirements.

2.) Training will combine classroom and practical instruction; classroom time will be at a minimum as dynamic tactics will be the focus of the course presentation. Training will focus on the following subjects/areas:

- (b)(7)e
-
-
-
- Final Training Exercise/Standards Test
- Schedule and Objectives will be adjusted as required.

- 8.) **FINANCIAL:** The Norse Security Group Corporation will complete the proposed tasks under a contract based on the services provided by Norse Security Group Subject Matter Experts/Instructors for a fee of:

Instructor Fee (2 Instructors)	X	(b)(4)	(b)(4)
Travel Cost (2 Instructors)	X		

*Travel and expenses are inclusive in the Mobile Training Team package.

Total RTFP Training Cost (2 Instructors)	(b)(4)
---	--------

- 9.) **SUMMARY:** The Norse Security Group Corporation excels at customizing all of its operations and training courses to the specific needs of the client. Qualified unit personnel (Training Cadre) are encouraged to participate as Assistant instructors, following their completion of the course, to improve their experience and teaching capabilities. The methodology behind incorporating the Unit Training Cadre is to "train the trainer" for self-sustainment at the Unit level. This course can be tailored to fit the experience level of the students and adjusted to meet the tactical needs specific to the unit. We look forward to working with your personnel to build a course designed to support your requirements.

Basic Rifle Training Program (BRTTP) Prospective Vendors

The information on this document is not part of the bid process and none of the quotes provided below are based on an actual bid that would be provided by the vendor during the bid process. The document below is for information purposes only.

Triple Canopy, Inc.
2250 Corporate Park Drive
Suite 300
Herndon, VA 20171
(703) 673-5000
DUNS 13-812-9692

Facility – JESTC
Location – Baton Rouge, LA
Total Cost per Class - (b)(4)
Total Cost per Student

Contact:
Tony Frere
Tony Frere
PSS Director of Training, JESTC
Triple Canopy
Cell (b)(6) & (7)(c)
Tony.Frere@triplecanopy.com

Blackwater Training Group or Xe
US Training Facility
Moyock, NC 27958
(252) 435-1840

Facility – US Training Facility
Location – Moyock, NC
Total Cost per Class - (b)(4), (b)(7)e
Total Cost per Student

Contact

William Washburn
Training Coordinator
US Training Center
P: (252) 435-0075 C (b)(6) & (7)(c)
F: (252) 435-0043

wwashburn@ustraining.com
www.ustraining.com

GTI
Research Training Consult
25 E. Fairview Ave. Suite
#215A
Meridian, Idaho 83642
Phone 866 938-5510 Fax 208
938-5507

Facility – Joint Operations Center (JOC)
Location – Barnwell, South Carolina
Total Cost per Class - \$50,200.00 (Based on (b)(7)e)
Total Cost per Student - (b)(4)

Contact:

Scott A. Sailor
Training Coordinator
Government Training Institute
s.sailor@gtitraining.org
866.938.5510 Office
208.938.5507 Fax
(b)(6) & (7)(c) Cell

O’Gara Group Training & Services (EXCLUDED – BID NOT PROVIDED)
700 W. Pete Rose Way
Suite 4N
Cincinnati, OH 45203
Phone: (513) 333-7800
Fax: (513) 333-7804
Email: training@ogaragroup.com

Facility – OTF – M
Location – Montross, Virginia
Total Cost per Class –
Total Cost per Student –

Contact:

Mike Provost
General Manager

O'Gara Training and Services
Montross, Va. 22520
mike.provost@ogaragroup.com
Cell: (b)(6) & (7)(c)
Office: 804-493-1110
Fax: 804-493-1119

ViaGlobal Training Group

One Park Place
Suite 500
Annapolis, MD 21401
Phone: (443) 716-3120
Mobile: (b)(6) & (7)(c)
Email: galdridge@viaglobalgroup.com

Facility – Hillsborough Sheriff's Department's Range
Total Cost per Class –
Total Cost per Student –

Contact:

George W. Aldridge
President
ViaGlobal Training Group
galdridge@viaglobalgroup.com
Phone: (443) 716-3120
Mobile: (b)(6) & (7)(c)

PAST PERFORMANCE QUESTIONNAIRE

Vendor: Triple Canopy

Contract Reference: 11-233-SOL-00016 (B RTP)

Order Number: HHSP23201100012A

Evaluator's Name: (b)(6) & (7)(c)

Agency: Department of Health and Human Services –
Office of Inspector General

Title/Role: Program Manager – COTR

Evaluator's Mailing Address: 330 C Street, SW, Washington DC 20201

Date: 01/25/2012

Phone: (b)(6) & (7)(c)

Fax: 202-401-6428

SIGNATURE: _____

Review of Results:

1. Quality of Solution: Outstanding
Performance Element #1

The vendor provided a unique solution to the issue related to the Agency's Program. The Solution was carefully thought out and researched before presented to HHS-OIG.

2. Effective and Efficient use of Resources Outstanding
Performance Element #2

The vendor utilized every aspect of the facility and incorporated extra resources into the lesson plan at no charge. The facility was set up to deliver success by the vendor.

3. Communication: Outstanding
Performance Element #3

The Project Lead for Triple Canopy was in constant communication with HHS-OIG, and exuded confidence and understanding. In many cases the Project Lead provided critical information that lead to successful outcomes.

4. Timeliness of Performance:
Performance Element #4

Outstanding

Every task was performed in accordance with HHS-OIG's timeline, which speaks volumes about the capability of Triple Canopy.

5. Customer Satisfaction
Performance Element #5

Outstanding

I have not found an agency or vendor that has operated as effectively and efficiently as Triple Canopy. Triple Canopy's professionalism has far exceeded our expectations.

6. Responsiveness and Attentiveness:
Performance Element #6

Outstanding

Triple Canopy was always eager to help HHS-OIG with any issue that was associated with DHHS-OIG. Their prompt response and attentiveness to numerous issues aided our ability to keep within strict timelines.

7. Cost Control
Performance Element #7

Outstanding

Triple Canopy successfully met our cost demand and provided a satisfactory investment that HHS-OIG will enjoy for years to come.

- 8. Would HHS-OIG do business with this Contractor again?** Yes
9. Did HHS-OIG has to resort to any litigation? No

Additional Comments:

If you have any additional follow up questions Regarding Triple Canopy, please feel free to call me.

PAST PERFORMANCE QUESTIONNAIRE

Vendor: Triple Canopy

Contract Reference: 11-233-SOL-00016 (BRTP)

Order Number: HHSP233201100191P

Evaluator's Name: (b)(6) & (7)(c)

Agency: Department of Health and Human Services –
Office of Inspector General

Title/Role: Program Manager – COTR

Evaluator's Mailing Address: 330 C Street, SW, Washington DC 20201

Date: 01/25/2012

Phone: 202-306-6805

Fax: 202-401-6428

SIGNATURE: _____

Review of Results:

1. Quality of Solution: Outstanding
Performance Element #1

The vendor provided a unique solution to the issue related to the Agency's Program. The Solution was carefully thought out and researched before presented to HHS-OIG.

2. Effective and Efficient use of Resources Outstanding
Performance Element #2

The vendor utilized every aspect of the facility and incorporated extra resources into the lesson plan at no charge. The facility was set up to deliver success by the vendor.

3. Communication: Outstanding
Performance Element #3

The Project Lead for Triple Canopy was in constant communication with HHS-OIG, and exuded confidence and understanding. In many cases the Project Lead provided critical information that lead to successful outcomes.

4. Timeliness of Performance:

Outstanding

Performance Element #4

Every task was performed in accordance with HHS-OIG's timeline, which speaks volumes about the capability of Triple Canopy.

5. Customer Satisfaction

Outstanding

Performance Element #5

I have not found an agency or vendor that has operated as effectively and efficiently as Triple Canopy. Triple Canopy's professionalism has far exceeded our expectations.

6. Responsiveness and Attentiveness:

Outstanding

Performance Element #6

Triple Canopy was always eager to help HHS-OIG with any issue that was associated with DHHS-OIG. Their prompt response and attentiveness to numerous issues aided our ability to keep within strict timelines.

7. Cost Control

Outstanding

Performance Element #7

Triple Canopy successfully met our cost demand and provided a satisfactory investment that HHS-OIG will enjoy for years to come.

8. Would HHS-OIG do business with this Contractor again? Yes

9. Did HHS-OIG has to resort to any litigation? No

Additional Comments:

If you have any additional follow up questions Regarding Triple Canopy, please feel free to call me.

SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEM

OFFEROR TO COMPLETE BLOCKS 12, 17, 23, 24, & 30

1. REQUISITION NUMBER

OS52064

PAGE OF

1

3

2. CONTRACT NO.

3. AWARD/
EFFECTIVE DATE

4. ORDER NUMBER

5. SOLICITATION NUMBER
11-233-SOL-000166. SOLICITATION
ISSUE DATE
11/02/20107. FOR SOLICITATION
INFORMATION CALL:a. NAME
JUAN BAEZb. TELEPHONE NUMBER
(No collect calls)
301-443-23678. OFFER DUE DATE/LOCAL TIME
11/05/2010 1300 ET

9. ISSUED BY

CODE

DAM

DHHS/PSC/SAS/DAM
Parklawn Building, Room 5C-18
5600 Fishers Lane
MD
Rockville 20857

10. THIS ACQUISITION IS

☒ UNRESTRICTED OR☐ SET ASIDE:

% FOR:

☐ SMALL BUSINESS☐ EMERGING SMALL
BUSINESS☐ HUBZONE SMALL
BUSINESS☐ SOLE SOURCE

NAICS: 561210

SIZE STANDARD:

\$35.5

☐ SERVICE-DISABLED VETERAN-
OWNED SMALL BUSINESS☐ 8(A)11. DELIVERY FOR FOB DESTINA-
TION UNLESS BLOCK IS
MARKED☐ SEE SCHEDULE

12. DISCOUNT TERMS

☐ 13a. THIS CONTRACT IS A
RATED ORDER UNDER
DPAS (15 CFR 700)

13b. RATING

14. METHOD OF SOLICITATION

☒ IRFQ☐ IFB☐ RFP

15. DELIVER TO

CODE

OS-OIG-HQ

OS-OIG-HQ
Cohen Building
330 Independence Ave, SW
Washington DC 20201

16. ADMINISTERED BY

CODE

DAM

DHHS/PSC/SAS/DAM
Parklawn Bldg., Room 5C-18
5600 Fishers Lane
MD
Rockville 2085717a. CONTRACTOR/
OFFEROR

CODE

FACILITY
CODE

18a. PAYMENT WILL BE MADE BY

CODE

TELEPHONE NO.

☐ 17b. CHECK IF REMITTANCE IS DIFFERENT AND PUT SUCH ADDRESS IN OFFER18b. SUBMIT INVOICES TO ADDRESS SHOWN IN BLOCK 18a UNLESS BLOCK BELOW
IS CHECKED ☐ SEE ADDENDUM19.
ITEM NO.20.
SCHEDULE OF SUPPLIES/SERVICES21.
QUANTITY22.
UNIT23.
UNIT PRICE24.
AMOUNT

Request for Quotation for Basic Rifle Training Program

The Program Support Center (PSC), a federal fee-for-service agency, plans to offer security training services to the Office of Inspector General, Department of Health and Human Services (HHS) through a Task Order Contract via GSA MAS 84 SIN 246 52.

For any questions regarding this order, please contact Juan D. Baez at 301-443-2367 or juan.baez@psc.gov.

For technical questions, please contact (b)(6) & (7)(c), Special Agent, at (b)(6) & (7)(c) or (b)(6) & (7)(c)@oig.hhs.gov.

(Use Reverse and/or Attach Additional Sheets as Necessary)

25. ACCOUNTING AND APPROPRIATION DATA

26. TOTAL AWARD AMOUNT (For Govt. Use Only)

☒ 27a. SOLICITATION INCORPORATES BY REFERENCE FAR 52.212-1, 52.212-4. FAR 52.212-3 AND 52.212-5 ARE ATTACHED. ADDEND ☐ ARE ☒ ARE NOT ATTACHED.☐ 27b. CONTRACT/PURCHASE ORDER INCORPORATES BY REFERENCE FAR 52.212-4. FAR 52.212-5 IS ATTACHED. ADDENDA ☐ ARE ☐ ARE NOT ATTACHED.☒ 28. CONTRACTOR IS REQUIRED TO SIGN THIS DOCUMENT AND RETURN 1 COPIES TO ISSUING OFFICE. CONTRACTOR AGREES TO FURNISH AND DELIVER ALL ITEMS SET FORTH OR OTHERWISE IDENTIFIED ABOVE AND ON ANY ADDITIONAL SHEETS SUBJECT TO THE TERMS AND CONDITIONS SPECIFIED HEREIN.☐ 29. AWARD OF CONTRACT REF. OFFER DATED YOUR OFFER ON SOLICITATION (BLOCK 5), INCLUDING ANY ADDITIONS OR CHANGES WHICH ARE SET FORTH HEREIN, IS ACCEPTED AS TO ITEMS:

30a. SIGNATURE OF OFFEROR/CONTRACTOR

31a. UNITED STATES OF AMERICA (SIGNATURE OF CONTRACTING OFFICER)

30b. NAME AND TITLE OF SIGNER (Type or print)

30c. DATE SIGNED

31b. NAME OF CONTRACTING OFFICER (Type or print)

31c. DATE SIGNED

JUAN (. BAEZ

19. ITEM NO.	20. SCHEDULE OF SUPPLIES/SERVICES	21. QUANTITY	22. UNIT	23. UNIT PRICE	24. AMOUNT
	<p>The National Training and Operations Staff (NTOS), Office of Inspector General (OIG), Health and Human Services (HHS) has a requirement in support of ongoing protective and investigative operations. To ensure that the use of rifles in these operations will be conducted safely and effectively, NTOS requires a vendor that can provide a initiate the Basic Rifle Training Program (B RTP). This program will provide agents with a baseline skill level that exceeds that of standard qualification and familiarization.</p> <p>A qualified vendor must be capable of providing safe training within the confines of an NTOS specified B RTP mission set from November 28, 2010-December 4, 2010. The criteria to be considered as a qualified vendor are:</p> <ul style="list-style-type: none"> - The vendor must have access to a facility containing at a minimum: a pistol range; a rifle range, and a NLT Shoot house facility. - The vendor must agree to adhere to all policies and procedures of DHHS-OIG during the course of training. - The vendor must provide lodging, and preference is given to those vendors having on-site lodging. - The vendor must provide three meals a day for every student. - The vendor must be capable of providing a 4 to 1, student to instructor ratio. <p>Additionally, the Offerors must identify that the meet the following:</p> <ol style="list-style-type: none"> 1. Is the facility ISO 9001 certified? 2. What are the medical assets of the facility? (18D, PA, Paramedic, ect) 3. What are the drive times and Medflight times to the closest trauma one facility? 4. Is the facility regulated by any federal or state entity? 5. Are any of the courses taught at the facility recognized/accredited by any <p>Continued ...</p>				

32a. QUANTITY IN COLUMN 21 HAS BEEN

ACCEPTED, AND CONFORMS TO THE CONTRACT, EXCEPT AS

☐ RECEIVED

☐ INSPECTED

☐ NOTED:

32b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE

32c. DATE

32d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE

32e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE

32f. TELEPHONE NUMBER OF AUTHORIZED GOVERNMENT REPRESENTATIVE

32g. E-MAIL OF AUTHORIZED GOVERNMENT REPRESENTATIVE

33. SHIP NUMBER

34. VOUCHER NUMBER

35. AMOUNT VERIFIED
CORRECT FOR

36. PAYMENT

37. CHECK NUMBER

☐ PARTIAL ☐ FINAL

☐ COMPLETE ☐ PARTIAL ☐ FINAL

38. S/R ACCOUNT NUMBER

39. S/R VOUCHER NUMBER

40. PAID BY

41a. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT

42a. RECEIVED BY (Print)

41b. SIGNATURE AND TITLE OF CERTIFYING OFFICER

41c. DATE

42b. RECEIVED AT (Location)

42c. DATE REC'D (YY/MM/DD)

42d. TOTAL CONTAINERS

CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED
11-233-SOL-00016

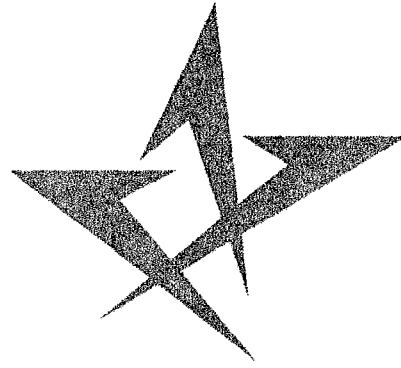
PAGE 3 OF 3

NAME OF OFFEROR OR CONTRACTOR

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>college or university?</p> <p>6. What is the proximity of your facility to a major metropolitan airport?</p> <p>Estimated Number of Students Per Class: 25 Individuals Period of Performance: November 28, 2010-December 4, 2010</p> <p>Price Qty UI Extended</p> <p>B RTP Course EA</p> <p>Delivery of services will occur at Contractor's facility.</p> <p>Evalatuation: The provisions at 52.212-1, Instructions to Offerors ? Commercial (JUN 2008), and 52.212-2, Evaluation - Commercial Items (JAN 1999), apply to this acquisition: (a) The Government will award a contract resulting from this solicitation to the responsible offeror whose offer conforming to the solicitation will be most advantageous to the Government, price and other factors considered. The following factors shall be used to evaluate offers: 1. Delivery Terms and Conditions; 2. Technical Specifications identified within this RFQ; 3. Price. Delivery Terms and Technical Specifications, when combined, are significantly more important than price. (b) Award. The Government will evaluate offers for award purposes. A written notice of award or acceptance of an offer, mailed or otherwise furnished to the successful offeror within the time for acceptance specified in the offer, shall result in a binding contract without further action by either party. Before the offer's specified expiration time, the Government may accept an offer (or part of an offer), whether or not there are negotiations after its receipt, unless a written notice of withdrawal is received before award.</p> <p>PLEASE NOTE THAT ANY AMENDMENTS TO THIS RFQ SHALL BE PROCESSED IN THE SAME MANNER AS THIS SOLICITATION. ALL OFFERS MUST CLEARLY INDICATE THE RFQ NUMBER and be sent to the Juan D. Baez, Contracting Officer, Department of Health and Human Services, Program Support Center, SAS/DAM, Parklawn Building, 5600 Fishers Lane, Room 5-101, Rockville, MD 20857. All quotes must be SUBMITTED NO LATER THAN 1:00 PM EASTERN TIME November 5, 2010 VIA electronic copy to juan.baez@psc.hhs.gov.</p>				
1	Basic Rifle Training Program				

BLACKWATER (MOYOCK, NC)										
CRITERIA	1	2	3	4	5	6	7	8	9	10
TRAINING FACILITY										
QUALITY OF PISTOL RANGE								8		GRASS BURM, ROCK SURFACE
QUALITY OF RIFLE RANGE								8		GRASS BURM, ROCK SURFACE
QUALITY OF DUAL PURPOSE RANGE								8		GRASS BURM, ROCK SURFACE
QUALITY OF CLASSROOMS								8		
QUALITY OF NLT SHOOT HOUSE								8		CONEX BOXES
NIGHT FIRE CAPABILITY								8		
QUALITY OF LIVE FIRE SHOOT HOUSE									9	
QUALITY OF ADDITIONAL NLT STRUCTURES								8		MULTIPLE CONEX STRUCTURES
PROXIMITY TO LODGING										10
PROXIMITY TO CLASSROOMS										10
PROXIMITY TO AIRPORT				4						40 minutes from facility
PROXIMITY TO TRAUMA 1 MEDICAL FACILITY				4						40 minutes from facility
QUALITY OF LODGING						6				2 TO ROOM, 4 SHARE A BATHROOM
QUALITY OF DINNING FACILITY								8		
PROXIMITY OF DINNING FACILITY TO LODGING									9	2 MIN DRIVE
PROXIMITY OF DINNING FACILITY TO TRAINING AO									9	2 MIN DRIVE
ABILITY TO CONDUCT YEAR ROUND TRAINING								8		NORTHEAST NC, DEC - FEB COLD
QUALITY OF AIRPORT						6				NORFOLK INTERNATIONAL
PROXIMITY TO A MAJOR CITY				4						NORFOLK , VIRGINIA BEACH 35 - 40MIN
ISO CERTIFIED										NOT ISO CERTIFIED
REGULATED BY A STATE OR FEDERAL ENTITY										NOT REGULATED
QUALITY OF ARMORY					5					CONEX BOX OR ALARMED ROOM
QUALITY OF AMMUNITION STORAGE DUMP								8		CONEX SECURED
FACILITY SECURITY ASSESSMENT									9	24/7 MONITORED BY PMC
GREEN FRIENDLY						6				SYSTEM IN PLACE BUT NOT ON RANGE
LIABILITY CONCERNS					5					PREVIOUS INCIDENTS (SEE ATTACH)
ON SITE MEDICAL								8		Medical building located near range
INSTRUCTION										

EXPERTISE OF INSTRUCTORS									9		FORMER LEO'S AND MILITARY
PROFESSIONALISM OF STAFF									9		
FLEXIBILITY									10		PAST PERFORMANCE WITH PORT
QUALITY OF SUPPORT STAFF									9		
PROCUREMENT PROCEDURES									10		PAST PERFORMANCE WITH PORT
COLLEGE ACREDITED											
COST											
TUITION							7				(b)(4) PER STUDENT FOR (b)(7)e
											ESTIMATED COST BASED ON
											BW ROM MINUS DHHS-OIG AMMO
											COST.
VENDOR SPECIFICS											
PAST PERFORMANCE									9		PORT HAS HIGH APPROVAL
PUBLIC OPINION			3								ATTACHED TO OVERSEES OPS
CURRENT LITIGATION	1										SEE ATTACHED
TOTAL RATING	1	0	3	12	10	18	7	88	72	40	251



TRIPLE CANOPY

**Presented to
United States Department of Health and Human
Services – Office of Inspector General**

**In Support of
HHS-OIG Basic Rifle Training Program
Training Course**

Rough Order of Magnitude (ROM)

21 October 2010

**Submitted by:
Triple Canopy, Inc.
2250 Corporate Park Drive
Suite 300
Herndon, VA 20171
(703) 673-5000
DUNS 13-812-9692**

Triple Canopy has an active registration on the Central Contractor Registry.



NOTICE FOR HANDLING PROPOSALS

This proposal shall be used and disclosed for evaluation purposes only, and a copy of this notice shall be applied to any reproduction or abstract thereof. Any authorized restrictive notices which the submitted places on this proposal shall also be strictly complied with.

GENERAL INFORMATION

Company: Triple Canopy, Inc.

Company Headquarters: Triple Canopy, Inc.
2250 Corporate Park Drive
Suite 300
Herndon, VA 20171
Triplecanopy.com

DUNS Number: 13-812-9692

Cage Code: 3K6X2

Fed Employer Number: 72-0748100

Line of Business: Integrated Security Solutions

Chief Executive Officer: Ignacio Balderas
Triple Canopy, Inc.
2250 Corporate Park Drive
Suite 300
Herndon, VA 20171
703-673-5000

Key Managers
Authorized to Negotiate and
Commitment Triple Canopy Inc.: Ignacio Balderas, Chief Executive Officer
Kelvin Kai, Chief Operating Officer
Thomas Magnani, Chief Financial Officer
Ray Randall, Sr. Vice President, Strategic Initiatives
Juliet Protas, Sr. Vice President and General Counsel
Scott Wilson, Sr. Vice President, Human Resources

Director of Contracts Robert F. Danzig
Triple Canopy, Inc.
2250 Corporate Park Drive
Suite 300
Herndon, VA 20171
(703) 673-5126
robert.danzig@triplecanopy.com

ROUGH ORDER OF MAGNITUDE

Triple Canopy is pleased to present this rough order of magnitude (ROM) to the Department of Health and Human Services – Office of Inspector General (HHS-OIG) as an estimate to provide training for the HHS-OIG Basic Rifle Training Program. This estimate is for planning and budgetary purposes, and does not commit Triple Canopy to the prices depicted. Triple Canopy is prepared to provide a formal quote at the HHS-OIG's request that will reflect the current prices at the time of the request.

This quote is a total course cost for a maximum of 25 students per course over a 5-day period. We are prepared to offer this course in multiple iterations to the customer's specifications.

Labor	Qty	Days	Daily Price	Subtotal	Total Price
Instructor I	(b)(4)	5	(b)(4)	(b)(4)	
Instructor II		5			
Subtotal Labor					
Other Direct Costs					
Travel Related Prices					
	Instructor Travel				
	Instructor Vehicle Rental				
	Instructor Per Diem				
	Instructor Lodging				
Subtotal Travel Related Prices					
Training Area and Course Related Prices					
	Targets and Support Items				
	Classroom				
	Police House				
	Rifle Range				
	Shoot House				
	Student Housing				
	Student Dining				
	JESTC Medic Pay				
	TEST Fire Course				
	LSP Trooper OT Pay				
	Role Players				
	Training Vehicles/Consumable Vehicles				
Subtotal Training Area and Course Related Prices					\$39,090.00
Total Course Price					\$74,510.00

National Training Operations Staff

The Office of Investigations (OI), National Training Operations Staff (NTOS) is committed to providing quality law enforcement training by utilizing a combination of the most recent strategies and technological advances. NTOS will provide steadfast support to the regional offices as they strive to meet the Office of Inspector General's mounting investigative demands. NTOS is dedicated to ensuring operational readiness by maintaining all necessary emergency and investigative equipment in an operational state. NTOS will constantly strive to maintain a professional atmosphere conducive to meeting the challenges that confront OI Special Agents operating in the field.

HHS-OIG – BRTP VENDOR SELECTION PROCESS

Abstract

The U.S. Department of Health and Human Services (HHS), Office of Inspector General (OIG), Office of Investigations (OI), National Training and Operations Staff (NTOS) presents the following vendor assessment to aid in the selection of a quality vendor for the Basic Rifle Training Program (BRTP). The vendor assessment utilizes a multi-criteria matrix that uniformly grades the critical aspects of the prospective vendors. The National Training and Operations Staff evaluated five prospective vendors. As a result, Triple Canopy received the highest matrix score of 312 and Government Training Institute (GTI) received the lowest score of 162. Based upon the results of the matrix and the responses received from an email questionnaire, NTOS would like to recommend Triple Canopy as the primary vendor for pilot BRTP.

Vendor Assessment

NTOS have facilitated an agency wide distribution of 120 rifle systems. These rifles will be used to support the HHS / OIG, ongoing protective and investigative operations. To ensure these rifles will be utilized safely and effectively, NTOS plans to initiate the Basic Rifle Training Program. The goal of the BRTP is to provide agents with a baseline skill level that exceeds that of standard qualification and familiarization.

The BRTP is a new concept within OI, and therefore poses a myriad of potential concerns for OI as a whole. The most important concern is safety. Given the inherent risks associated with implementing a new weapon system, safe training operations are critical to the success of the program. In order to negate this concern, NTOS' evaluation criteria will assist in identifying a well experienced vendor to conduct the required training. The selected vendor must provide for safe training within the confines of OI's established policies and procedures. The criteria to be considered as a qualified vendor are:

- The vendor must provide a facility that contains at a minimum: a pistol range; a rifle range, and a Non-Lethal Training (NLT) facility.

- The vendor must agree to adhere to all policies and procedures of HHS-OIG during the course of training.
- The vendor must provide lodging, and preference is given to those vendors having on-site lodging.
- The vendor must provide three meals a day for every student.
- The vendor must be capable of providing a 4 to 1, student to instructor ratio.

The criteria above only represent the factors needed to be considered by NTOS, and does not qualify prospective vendors for the vendor assessment process. Based on the above criteria, NTOS has selected five vendors to be evaluated in the BRTP vendor assessment process. The five vendors that qualified for site visits were: the O’Gara Training Group, Blackwater Xe, Triple Canopy, The Government Training Institute (GTI) and ViaGlobal.

The vendor selection process utilized a numerical matrix grading system. The matrix grading system evaluates each prospective vendor in thirty seven different categories. Each of these categories represents an element NTOS has deemed significant to the BRTP. The value applied to each of these categories was derived from the site visits conducted by NTOS. The final results of each evaluation are listed in each vendor’s matrix. (SEE ATTACHED) The final matrix scores are listed below:

- The O’Gara Group – (Score = zero, failed to provide quote)
- The Government Training Institute – (Score = 162)
- Blackwater Xe – (Score = 251)
- Triple Canopy – (Score = 311)
- ViaGlobal – (Score = 243)

In order to enhance the overall effectiveness of the evaluation process, NTOS sent an email to each respective vendor asking for additional information regarding the some of the more important aspects. The list below represents the questions asked of each vendor:

1. Is the facility ISO 9001 certified?
2. What are the medical assets of the facility? (18D, PA, Paramedic, ect)
3. What are the drive times and Medflight times to the closest trauma one facility?
4. Is the facility regulated by any federal or state entity?
5. Are any of the courses taught at the facility recognized/accredited by any college or university?
6. What is the proximity of your facility to major metropolitan airport?

The vendor’s responses to these questions at included in the appendix. Each of these responses can be used to provide an additional perspective about the potential vendor’s ability to provide a safe and productive training environment. Consideration was given to those vendors providing additional medical coverage, as well as those vendors who are regulated by a Federal or State entity.

The pricing quotes received from each of the vendors represent the total cost of hosting a BRTP excluding the cost of the ammunition. The cost break down associated with each vendor is listed below:

The O’Gara Group – (failed to provide quote)

The Government Training Institute –

Total Cost Per Student = (b)(4) Does not include housing)

Blackwater Xe –

Total Cost Per Student = (b)(4) (This figure is an NTOS generated estimate based upon a previous quote minus the open market cost of ammunition. Blackwater failed to provide a final quote after numerous email requests)

Triple Canopy –

Total Cost Per Student = (b)(4)

ViaGlobal –

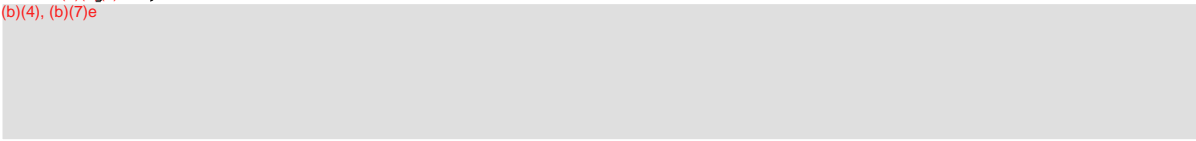
Total Cost Per Student = (b)(4) (Average)

The cost above does not include the cost of ammunition per BRTP class. The ammunition for BRTP is estimated to cost (b)(4). This cost estimate includes both training ammunition and NLT marking cartridges for both the rifle and handgun. A complete cost breakdown for the ammunition has been attached.

Conclusion

The implementation of the Basic Rifle Training Program will provide OI increased capability to effectively carry out missions over the entire spectrum of OI’s responsibilities. In order to provide the safest and most productive training available for the BRTP, the National Training and Operations Staff (NTOS) elected to have a private vendor host the course. NTOS evaluated five prospective vendors to discover the best vendor solution for BRTP. Triple Canopy posted the highest matrix score and provided the most favorable responses to the email questionnaire, and even though Triple Canopy’s cost are marginally higher, they are arguably the safest and most certified vendor to conduct BRTP. Based upon these findings, NTOS has selected Triple Canopy as the primary vendor for BRTP.

Mr (b)(6) &
(b)(7)(c)
(b)(4), (b)(7)e



Day 1

Introductions
Welcome and Safety Brief

(b)(7)e



Day 2

(b)(7)e



Day 3

(b)(7)e



Day 4

(b)(7)e



Day 5

Final Training Exercises

Rough order of magnitude for the course with 14 students would be \$44,900.00 including ammo. Government would supply duty weapons (b)(7)e and all personal tactical gear (belt, holster, magazine holders, body armor, ear & eye protection). We can supply weapons (b)(4) weapon per day) if needed.

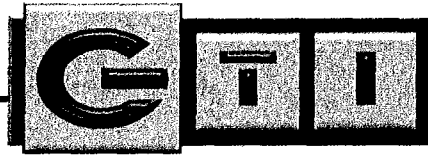
William Washburn
Training Coordinator
US Training Center

P: (252) 435-0075 (b)(6) & (b)(7)(c)

F: (252) 435-0043

wwashburn@ustraining.com

www.ustraining.com



GOVERNMENT TRAINING INSTITUTE

STATEMENT OF CAPABILITIES



For Official Use Only



Table of Contents

Page

Pg 3 - GTI History and Mission

Pg 4 - DHS and Congressional Associations

Pg 4 - Counter Terrorism and Insurgency Experts

Pg 5, 6 - GTI's Joint Operations Center Training Site

Pg 6- Regional Exercise Zone

Pg 6-10 – Training and Exercise Facilitation

- **Pg 6-8 - Irregular Warfare and WMD**
- **Pg 8-9 – Sustainment Training Capabilities**

Pg 10 – Funding/ Contracting Vehicles

Pg 11 – Contact GTI

GTI History

GTI's History

The Government Training Institute (GTI) was founded in 2003 to address the tactical needs of U.S. law enforcement and military with research based training. Currently, over 30 different courses contain a cooperative curriculum base and ongoing research from the staff of GTI with over 400 years of military special operations and law enforcement experience. GTI works directly with law enforcement and military personnel to custom design training curriculum and facilitate training to fit unit specific needs and requirements. GTI courses are offered at either our South Carolina facilities, Smyrna, Delaware, or as Mobile Training Team (MTT) deployments worldwide. GTI also provides focused individual and unit skill set training facilitation and exercise support at offsite military installations and civilian locations globally.

GTI's Mission

"The Government Training Institute is committed to those responsible for our national security, the safety of our citizens and the future of our great nation. Through the most intense and realistic training, thorough and comprehensive research, and honest and ethical consulting, we prepare our country's military, law enforcement and first responders to face all challenges with knowledge and confidence."

GTI's Motto

"Success is NOT by Chance."



U.S. Department of Homeland Security Curriculum

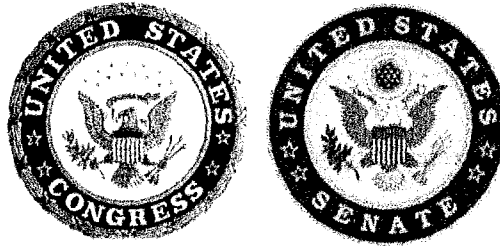
Since 2005, the Government Training Institute has worked with Idaho State University's Institute of Emergency Management (IEM) to construct and deliver U.S. Department of Homeland Security courses. The pre-approved course status through DHS means that state and local homeland security organizations can utilize their federal homeland security grant funds to pay for virtually all aspects of the classes, including tuition, travel, lodging, meals, overtime, and backfill.

GTI has 6 courses on the DHS catalogue, including:

- ID-001-RESP – Type III Advanced SWAT Operations for Terrorist Environments
- ID-002-RESP – Type II Advanced SWAT Operations for Terrorist Environments
- ID-003-RESP – Type I Advanced SWAT Operations for Terrorist Environments
- ID-004-RESP – Immediate Action Teams: Rapid Law Enforcement Tactical Response to Violence and Terrorism in the School Setting
- ID-006-RESP – SWAT – Law Enforcement Tactical Operations for Terrorism Response (Basic Concepts and Tactics)
- ID-008-RESP – Improvised Explosive Devices (IEDs)

Congressional Relations

In 2007, after GTI's president received an invitation from a ranking member of the Senate Armed Services Committee, GTI's personnel briefed selected delegations of the United States Senate and Congress on the preparedness levels of State and Local law enforcement to handle terrorist events. Since then, GTI has worked closely with selected delegations on several issues, including appropriations bills for Close Quarters Battle Research for USSOCOM.



Counterterrorism and Insurgency Experts

GTI staff has twice published chapters on terrorism and law enforcement issues in text that is utilized by staff and students of the United States Military Academy at West Point and think tanks world-wide. The three part volume "Countering Terrorism and Insurgency in the 21st Century – International Perspectives" is edited by PhD. James Forest who is the Director of Terrorism Studies at the US Military Academy at West Point (<http://ctc.usma.edu>). The 2006 contribution involved an analysis of the Achille Lauro Hijacking event and the 2007 chapter *"Combating Terror in US Communities: The SWAT Mission"* summarized how local law enforcement effects national homeland security.

South Carolina Overview

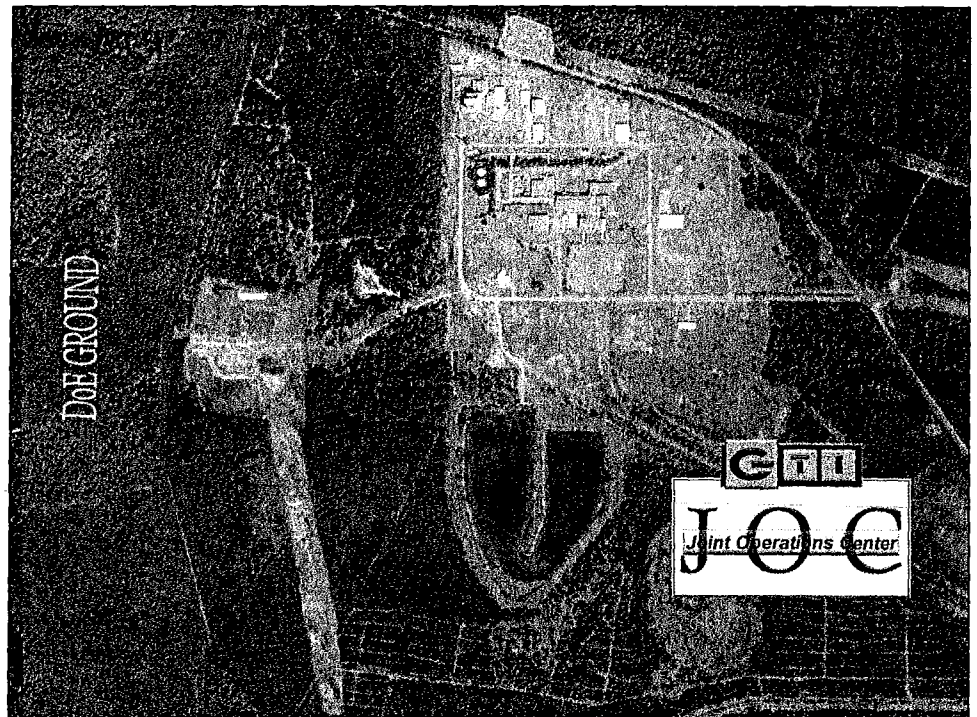
GTI controls in excess of \$1 billion worth of training facility assets in South Carolina. Our South Carolina facilities are strategically located one half way between New York and Miami and within 1 day's drive of over 75% of the United States' population.

Joint Operations Center (JOC), Barnwell, SC

The JOC is North America's only radiologically sterile spent nuclear fuels (SNF) reprocessing station. The facility was originally designed to process spent reactor fuel and recover unused uranium and plutonium for reuse. After construction was completed in 1976, the facility began preoperational testing of the separations and uranium hexafluoride facilities.

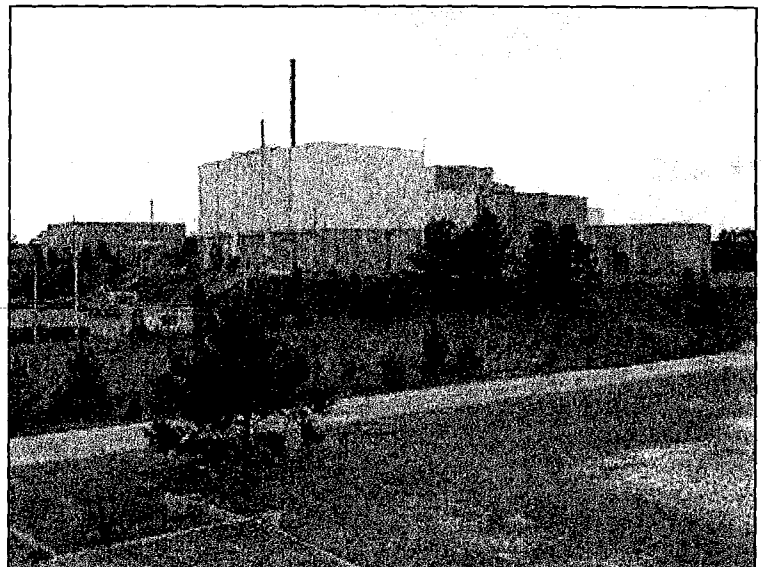
Yesterday's nuclear plant is today's GTI

Joint Operations Center, currently available as our nation's premiere training sites for WMD / CBRNE consequence management forces, DoD GPF and SOF communities, Federal agencies, and Urban Search and Rescue Teams. The GTI JOC has the capability to support extremely complex Full Mission Profile training and exercise events.



The JOC site contains 9 training / exercise structures that total over 450,000 sq. ft. Improvements on the site include:

- 9 Story Structure (UF6)
- 13 Story Structure (Separations)
 - 5 stories above surface
 - 7 stories subsurface
 - Can support rotary wing rooftop landings
- Miles of pipes and large tanks for Fire / USAR / EMS – Confined Space
- 4 Story Rappel Tower with FAST Rope ARMS and Breaching Doors and Windows
- 50 Million gallon pond (app. 22 acres) – capable of Helocast operations



- Certified Helipad
 - MH53 / CH 47 Capable
- Multiple HLZ's
- 22,000 sq. ft. of working office space
- Classroom
- Briefing Room
- 1.5 mile PSD Driving area
- 800 Meter Small Arms Range
- Explosive Breaching Areas
- BATFE Approved HE explosive magazine

Regional Exercise Zone (REZ)

GTI has the ability, for specialized requests relating to IW / UW and WMD related events, to utilize over 5,800 sq. miles of land within South Carolina. When combined with GTI's facilities and 4 military bases within the REZ, we can accommodate nearly every conceivable IW / UW training / exercise event.

Training and Exercise Facilitation

Irregular Warfare and WMD

By utilizing our training facilities alone, or when combined with other military facilities inside of the 5,800 sq. mile Regional Exercise Zone (REZ), GTI's training and exercise programs provide the DoD and Homeland Security agencies the ability to test and exercise:

- All levels of capabilities:
 - Effects
 - Means
 - Methods
- Each Level of Engagement:
 - Strategic
 - Operational
 - Tactical
- Within Various Operational Environments:

- OCONUS
 - Within hostile States and environments
 - Within non-belligerent States and uncertain environments
 - Within friendly States and permissive environments
- CONUS
 - Homeland defense and civil support
- With Different Populations / Actors
 - State
 - Non-State
 - Transnational threats posing irregular challenges
 - Supportive and non-supportive populous
 - Adversarial controlled and non-controlled populous
 - Political struggles with violent and non-violent components
- Preparation of the Environments
 - IPE
 - OPE

GTI's training and exercise programs are specially focused around testing, evaluating and researching nearly every aspect of Irregular Warfare (IW) operations including:

- Insurgency
- Counterinsurgency (COIN)
- Unconventional Warfare (UW)
- Terrorism
- Counter Terrorism (CT)
- SSTR Operations
- Strategic Communications
- Psychological Operations (PSYOP)
- Information Operations (IO)
- Civil Military Operations (CMO)
- Intelligence and Counterintelligence Activities
- Transnational Criminal Activities
- IA / LE Activities focused on Countering Irregular Adversaries

Utilizing North America's only radiologically sterile nuclear facility, training and exercise operations can be conducted with unprecedented levels of realism:

- Offensive Operations

- Operations to locate, seize, secure, render safe, recapture, recover and / or destroy WMD
- Elimination Operations
 - Operations to systematically locate, characterize, secure, disable, and / or destroy a State or non-State actor's WMD program and related capabilities in hostile or uncertain environments
- Interdiction Operations
 - Operations to stop the transit of WMD, delivery systems, associated dual-use technologies, materials, and expertise between States of concern
- IW Operations with WMD focus
- Civil Defense and Support Missions with WMD focus

Sustainment Training Capabilities

GTI can develop mission profile scenarios to support unit training requirements or meet exercise objectives. Vetted, trained, disciplined, and properly supervised role players and OPFOR are available to add realism, provide adversary presence, and when tasked, conduct active patrols and sentry duties. Foreign language speakers with security clearances and foreign weapon systems are available. All structures are short range ammunition and / or man marker cartridge capable.

- Direct Action (DA) Mission Profiles
 - SSE Techniques
 - Critical Infrastructure Targeting
 - Hostage Rescue / Key Personnel Recovery
 - WMD / Sensitive Item Recovery
 - Critical Node Targeting
 - Vehicle Interdiction (air mobile & ground)
 - Explosive, Mechanical and Exothermic Breaching
 - CQC
- Special Reconnaissance (SR) Mission Profiles
 - UAV Integration
 - ISR
 - Observation and Reporting
 - Target Analysis
 - CTR
 - Urban Climbing / Descending
 - Rotor Wing Insertion / Extract
 - Personnel Recovery / Evasion Support

- Target Interdiction
 - High Angle Live Fire
 - Live Fire Sniper Initiated Assaults
 - Urban and Industrial Hides / FFPs
 - 800 Yard Small Arms Range
- Aerial Operations
 - MFF Drop Zones
 - Multiple C5 Capable Strips
 - Multiple MH53 / CH 47 Capable HLZs
 - Rotary Wing Rooftop Landings
- Tactical Intelligence Operations
 - Sensitive Site Exploitation
 - Intelligence Collection
 - Remote Sensor Operations
 - Tactical Information Operations
 - Personnel Recovery / Evasion Support
- TTPs and Equipment Testing
 - Secure environments to conduct a wide variety of TTPs and equipment testing evaluations, and validation
 - CBRNE / EOD operations
 - Night Vision / Electro Optics – The facilities are blackout capable
- Tactical Medicine
 - Live Tissue
 - Cadaver
 - Mass Casualty Triage / Treatment

Funding / Contracting Vehicles

DHS Sponsored Courses and Funding

- ID-001-RESP – Type III Advanced SWAT Operations for Terrorist Environments
- ID-002-RESP – Type II Advanced SWAT Operations for Terrorist Environments
- ID-003-RESP – Type I Advanced SWAT Operations for Terrorist Environments
- ID-004-RESP – Immediate Action Teams: Rapid Law Enforcement Tactical Response to Violence and Terrorism in the School Setting
- ID-006-RESP – SWAT – Law Enforcement Tactical Operations for Terrorism Response (Basic Concepts and Tactics)
- ID-008-RESP – Improvised Explosive Devices (IED's)

Contact:

Alec Sarrazolla

866-938-5510

alec@gtitraining.org

Federal Contracting

DUNS #132095394

CAGE #3HBJ1

NAICS CODES:

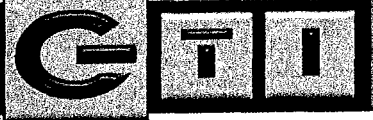
- 531120
- 541690
- 541712
- 541990
- 611430
- 611513
- 611519
- 611699
- 713990
- 928110

Contact:

Scott Sailor

866-938-5510

s.sailor@gtitraining.org



Contact GTI

For Additional Information or Documentation on:

- GTI's Joint Operations Center (JOC) and Usage
- Regional Exercise Zone
- Irregular Warfare Facilitations
- WMD Training Areas
- Sustainment Training
- General Inquiries

Contact:

GOVERNMENT TRAINING INSTITUTE

25 E. Fairview Ave. Suite 215A

Meridian, Idaho 83642

ID Office-866-938-5510

ID Office Fax-(208) 938-5507

South Carolina Office: (803) 793-0057

GTI Center of Excellence (COE)

1349 Locust Ave., Denmark, SC 29042

GTI Joint Operations Center (JOC)

1321 Technology Drive, Barnwell, SC 29812

General Information: info@gtitraining.org

Visit us on the Web: www.gtitraining.org

GTI

Research Training Consult
25 E. Fairview Ave. Suite #215A
Meridian, Idaho 83642
Phone 866 938-5510 Fax 208 938-5507

QUOTE

DATE: SEPTEMBER 30, 2010

TO:

(b)(6) & (7)(c)

Special Agent**National Training Coordinator****Special Programs****Office of Investigations, OIG****U.S. Department of Health and Human Services****Office:** (b)(6) & (7)(c)**Mobile:**

(b)(6) & (7)(c)

@oig.hhs.gov

FROM:**Government Training Institute (GTI)****Scott Sailor****Training Coordinator****Office: (866)938-5510****Mobile: (208)941-6306****s.sailor@gtitraining.org****COMMENTS OR SPECIAL INSTRUCTIONS: QUOTE FOR BASIC RIFLE TRAINING PROGRAM (B RTP).**

Coordinator	P.O. NUMBER	REQUISITIONER	SHIPPED VIA	F.O.B. POINT	TERMS
Sailor, Scott	TBD	(b)(6) & (7)(c)		SC	Net 30

QUANTITY	DESCRIPTION	UNIT PRICE	TOTAL
	Tuition for B RTP. Curriculum to be developed to meet/exceed expectations of the U.S. Department of Health and Human Services. GTI will provide 1:6 instructors to student ratio.	(b)(4)	
	Catering for (b)(4) Monday-Friday, Breakfast, Lunch and Dinner. Breakfast & Dinner will be at the caterer's establishment. Lunch will be brought out to the training site to minimize down time.		
	Instructors=no charge. (b)(4) (Breakfast, Lunch and Dinner) (b)(4) (b)(4). Includes set up, delivery, and water		
	Range related equipment (Targets, backers, set-up, clean up and lead reclaim fee)		

Pricing Summaries:

Price per student for (b)(4)

Price per day/ (b)(4)

SUBTOTAL

SALES TAX

SHIPPING & HANDLING

TOTAL PROPOSAL/PER EVENT

Thank you for your consideration!

GTI

Research Training Consult
 25 E. Fairview Ave. Suite #215A
 Meridian, Idaho 83642
 Phone 866 938-5510 Fax 208 938-5507

QUOTE

DATE: AUGUST 3, 2010

TO:

(b)(6) & (7)(c)

Special Agent**National Training Coordinator****Special Programs****Office of Investigations, OIG****U.S. Department of Health and Human Services****Office:** (b)(6) & (7)(c)**Mobile:**

(b)(6) & (7)(c)

@oig.hhs.gov

FROM:**Government Training Institute (GTI)****Scott Sailor****Training Coordinator****Office: (866)938-5510****Mobile:** (b)(6) & (b)(7)(c)**s.sailor@gtitraining.org****COMMENTS OR SPECIAL INSTRUCTIONS: QUOTE FOR BASIC RIFLE TRAINING PROGRAM (BRTP).**

Coordinator	P.O. NUMBER	REQUISITIONER	SHIPPED VIA	F.O.B. POINT	TERMS
Sailor, Scott	TBD	(b)(6) & (b)(7)(c)		SC	Net 30

QUANTITY	DESCRIPTION	UNIT PRICE	TOTAL
(b)(4)	<p>Tuition for BRTP. Curriculum to be developed to meet/exceed expectations of the U.S. Department of Health and Human Services. GTI will provide 1:10 instructor to student ratio.</p> <p>Lodging for students. (b)(4) (Instructors stay at no charge)</p> <p>Catering for (b)(4) Monday-Friday, Lunch and Dinner. Breakfast is provided by hotel. Instructors=no charge. (b)(4) (Lunch and Dinner) >(b)(4) Includes set up, delivery and water</p> <p>(b)(4)</p> <p>Range related equipment (Targets, backers, set-up, clean up and lead reclaim fee)</p>	(b)(4)	

Pricing Summaries:

Price per 'student for (b)(4)

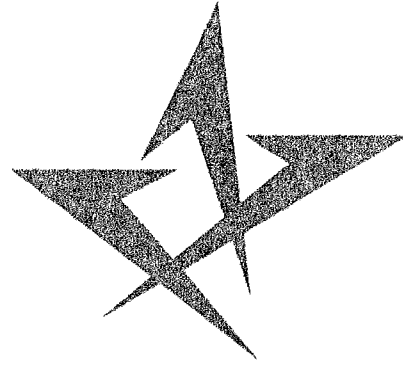
Price per day/per stu

SHIPPIN

TOTAL PROPOSAL/PER EVENT

\$50,200.00

Thank you for your consideration!



TRIPLE CANOPY

**Presented to
United States Department of Health and Human
Services – Office of Inspector General**

**In Support of
HHS-OIG Basic Rifle Training Program
Training Course**

Rough Order of Magnitude (ROM)

30 September 2010

**Submitted by:
Triple Canopy, Inc.
2250 Corporate Park Drive
Suite 300
Herndon, VA 20171
(703) 673-5000
DUNS 13-812-9692**

Triple Canopy has an active registration on the Central Contractor Registry.



NOTICE FOR HANDLING PROPOSALS

This proposal shall be used and disclosed for evaluation purposes only, and a copy of this notice shall be applied to any reproduction or abstract thereof. Any authorized restrictive notices which the submitted places on this proposal shall also be strictly complied with.

GENERAL INFORMATION

Company: Triple Canopy, Inc.

Company Headquarters: Triple Canopy, Inc.
2250 Corporate Park Drive
Suite 300
Herndon, VA 20171
Triplecanopy.com

DUNS Number: 13-812-9692

Cage Code: 3K6X2

Fed Employer Number: 72-0748100

Line of Business: Integrated Security Solutions

Chief Executive Officer: Ignacio Balderas
Triple Canopy, Inc.
2250 Corporate Park Drive
Suite 300
Herndon, VA 20171
703-673-5000

**Key Managers
Authorized to Negotiate and
Commitment Triple Canopy Inc.:** Ignacio Balderas, Chief Executive Officer
Kelvin Kai, Chief Operating Officer
Thomas Magnani, Chief Financial Officer
Ray Randall, Sr. Vice President, Strategic Initiatives
Juliet Protas, Sr. Vice President and General Counsel
Scott Wilson, Sr. Vice President, Human Resources

Director of Contracts Robert F. Danzig
Triple Canopy, Inc.
2250 Corporate Park Drive
Suite 300
Herndon, VA 20171
(703) 673-5126
robert.danzig@triplecanopy.com

ROUGH ORDER OF MAGNITUDE

Triple Canopy is pleased to present this rough order of magnitude (ROM) to the Department of Health and Human Services – Office of Inspector General (HHS-OIG) as an estimate to provide training for the HHS-OIG Basic Rifle Training Program. This estimate is for planning and budgetary purposes, and does not commit Triple Canopy to the prices depicted. Triple Canopy is prepared to provide a formal quote at the HHS-OIG's request that will reflect the current prices at the time of the request.

This quote is a total course cost for a maximum of 25 students per course over a 5-day period. We are prepared to offer this course in multiple iterations to the customer's specifications.

Labor	Qty	Days	Daily Price	Subtotal	Total Price
Instructor I	(b)(4)	(b)(4)			
Instructor II					
Subtotal Labor					

Other Direct Costs	Subtotal	Total Price
Travel Related Prices		
Instructor Travel		
Instructor Vehicle Rental		
Instructor Per Diem		
Instructor Lodging		
Subtotal Travel Related Prices		

Training Area and Course Related Prices	
Targets and Support Items	(b)(4)
Classroom	
Police House	
Rifle Range	
Shoot House	
Student Housing	
Student Dining	
JESTC Medic Pay	
TEST Fire Course	
LSP Trooper OT Pay	
Subtotal Training Area and Course Related Prices	

Total Course Price	(b)(4)
---------------------------	--------



Certificate of Registration

QUALITY MANAGEMENT SYSTEM - ISO 9001:2008

This is to certify that:

**Triple Canopy, Inc.
2250 Corporate Park Drive
Suite 300
Herndon
Virginia
20171
USA**

Holds Certificate No: FS 517373

and operates a Quality Management System which complies with the requirements of ISO 9001:2008 for the following scope:

The design and implementation of training and management support of security operations for government and commercial sectors. This Quality Management System (QMS) is applicable to corporate support operations of Triple Canopy, Inc. Herndon, Virginia and training center operations located in Zachary, Louisiana.

For and on behalf of BSI:

President, BSI America, Inc.

Originally Registered: 07/13/2007

Latest Issue: 07/08/2010

Expiry Date: 07/12/2013



Page: 1 of 2

This certificate remains the property of BSI and shall be returned immediately upon request.
An electronic certificate can be authenticated online. Printed copies can be validated at www.bsigroup.com/ClientDirectory
To be read in conjunction with the scope above or the attached appendix.

Americas Headquarters: 12110 Sunset Hills Road, Suite 200, Reston, VA 20190, USA.



Certificate No: **FS 517373**

Location

Registered Activities

Triple Canopy, Inc.
2250 Corporate Park Drive
Suite 300
Herndon
Virginia
20171
USA

The design and implementation of training and management support of security operations for government and commercial sectors. This Quality Management System (QMS) is applicable to corporate support operations of Triple Canopy, Inc. Herndon, Virginia and training center operations located in Zachary, Louisiana.

Triple Canopy
Joint Emergency Services Training Center
(JESTC)
1400 West Irene Rd.
Zachary
Louisiana
70791
USA

The implementation of training for physical site security operations for government and commercial sectors.

Originally Registered: **07/13/2007**

Latest Issue: **07/08/2010**

Expiry Date: **07/12/2013**

Page: 2 of 2

This certificate remains the property of BSI and shall be returned immediately upon request.

An electronic certificate can be authenticated [online](#). Printed copies can be validated at www.bsigroup.com/ClientDirectory
To be read in conjunction with the scope above or the attached appendix.

Americas Headquarters: 12110 Sunset Hills Road, Suite 200, Reston, VA 20190, USA.

Medical Kits for B RTP

- (1) Bolin Chest Seal
- (1) Casualty Assistance Card
- (1) Combat Gauze (Quick clot or a similar product)
- (2) Compressed Gauze 4.5in x 4.1yds
- (1) Elastic Bandage 4in x 5yds
- (1) "H" Bandage, 4in x
- (1) Military Emergency Airway (MET)
- (1) Nasopharyngeal Airway 28Fr
- (1) Trauma Gloves
- (1) Triangle Bandage 36in x 40 in
- (1) Trauma Scissors

Law Enforcement Trauma Kit™

Contents:

(1)	Bolin	Chest	Seal™	(BCS™)
(1)	Casualty	Assistance	Card	
(1)	CELOX™	Hemostatic	Granules, 35g	Packet
(2)	Compressed Gauze, 4.5	in. x 4.1		yds.
(1)	Elastic Bandage, 4	in. x 5		yds.
(1)	"H"-Bandage®	Combat Dressing, 4		in.
(1)	Military	Emergency Tourniquet™		(MET™)
(1)	Nasopharyngeal	Airway		28Fr
(1)	pr.)	Trauma		Gloves
(1)	Triangular Bandage, 36	in. x 40		in.

See details

Our price: \$126.99



2601 Performance Court Unit 101
Virginia Beach, VA 23453

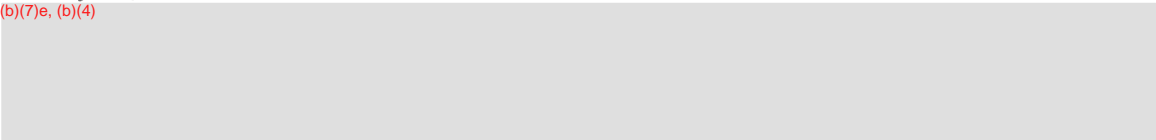
TQS Quote

Date	Quote #
2/17/2011	TQS20110011

Name / Address
(b)(6) & (7)(c) OIG HHS (b)(6) & (7)(c) @oig.hhs.gov

Item	Description	Qty	U/M	Cost	Total
	Quote #1				
Medical Kits T...	Medical Kits TQS LETK ** This kit is the training kit. This does not have Celox. This kit goes inside a nylon pouch**	(b)(4)		(b)(4)	
Medical Kits T...	Medical Kits TQS MET T-T NSN: 6515-01-537-9259				
Medical Kits T...	Medical Kits TQS LETK ** This kit has the Combat Gauze instead of Celox 35gr **				
DELIVERY	SHIPPING & HANDLING				
This quote contains proprietary information and is intended for the sole use of the requesting party.			Total (b)(4)		
Phone #	Fax #	E-mail		Web Site	
757-425.4962	757-321-7251	terry.mueller@tqsresponse.com		www.tqsresponse.com	

Mr. (b)(6) & (7)(c)
(b)(7)e, (b)(4)



Day 1

Introductions
Welcome and Safety Brief

(b)(7)e



Day 2

Day 3

(b)(7)e



Day 4

(b)(7)e



Day 5

Final Training Exercises

Rough order of magnitude for the course with (b)(4) including ammo. Government would supply duty weapons (pistol & carbine) and all personal tactical gear (belt, holster, magazine holders, body armor, ear & eye protection). We can supply weapons (b)(4) weapon per day) if needed.

William Washburn
Training Coordinator
US Training Center
P: (252) 435-0075 C (b)(6) & (b)(7)(c)
F: (252) 435-0043
wwashburn@ustraining.com
www.ustraining.com

GTI

Research Training Consult
25 E. Fairview Ave. Suite #215A
Meridian, Idaho 83642
Phone 866 938-5510 Fax 208 938-5507

QUOTE

DATE: SEPTEMBER 30, 2010

TO:

(b)(6) & (7)(c)

Special Agent
National Training Coordinator
Special Programs
Office of Investigations, OIG
U.S. Department of Health and Human Services
Office: (b)(6) & (7)(c)
Mobile: (b)(6) & (7)(c) @oig.hhs.gov

FROM:

Government Training Institute (GTI)
Scott Sailor
Training Coordinator
Office: (866)938-5510
Mobile: (b)(6) & (7)(c)
s.sailor@gtitraining.org

COMMENTS OR SPECIAL INSTRUCTIONS: QUOTE FOR BASIC RIFLE TRAINING PROGRAM (BRTP).

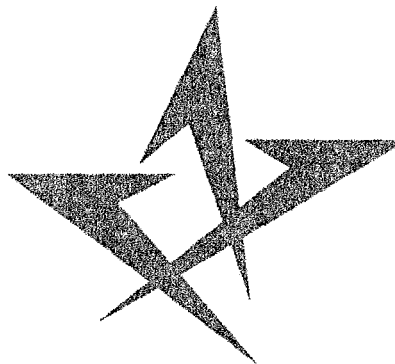
Coordinator	P.O. NUMBER	REQUISITIONER	SHIPPED VIA	F.O.B. POINT	TERMS
Sailor, Scott	TBD	(b)(6) & (7)(c)		SC	Net 30

QUANTITY	DESCRIPTION	UNIT PRICE	TOTAL
(b)(4)	Tuition for BRTP. Curriculum to be developed to meet/exceed expectations of the U.S. Department of Health and Human Services. GTI will provide 1:6 instructors to student ratio. Catering for (b)(4) Monday-Friday, Breakfast, Lunch and Dinner. Breakfast & Dinner will be at the caterer's establishment. Lunch will be brought out to the training site to minimize down time. Instructors=no charge. (b)(4) Breakfast, Lunch and Dinner) (b)(4) (b)(4). Includes set up, delivery, and water Range related equipment (Targets, backers, set-up, clean up and lead reclaim fee)	(b)(4)	(b)(4)

Pricing Summaries:

Price per student for (b)(4)	SUBTOTAL	(b)(4)
Price per day/per stu	SALES TAX	
	SHIPPING & HANDLING	
	TOTAL PROPOSAL/PER EVENT	

Thank you for your consideration!



TRIPLE CANOPY

**Presented to
United States Department of Health and Human
Services – Office of Inspector General**

**In Support of
HHS-OIG Basic Rifle Training Program
Training Course**

Rough Order of Magnitude (ROM)

21 October 2010

**Submitted by:
Triple Canopy, Inc.
2250 Corporate Park Drive
Suite 300
Herndon, VA 20171
(703) 673-5000
DUNS 13-812-9692**

Triple Canopy has an active registration on the Central Contractor Registry.



NOTICE FOR HANDLING PROPOSALS

This proposal shall be used and disclosed for evaluation purposes only, and a copy of this notice shall be applied to any reproduction or abstract thereof. Any authorized restrictive notices which the submitted places on this proposal shall also be strictly complied with.

GENERAL INFORMATION

Company: Triple Canopy, Inc.

Company Headquarters: Triple Canopy, Inc.
2250 Corporate Park Drive
Suite 300
Herndon, VA 20171
Triplecanopy.com

DUNS Number: 13-812-9692

Cage Code: 3K6X2

Fed Employer Number: 72-0748100

Line of Business: Integrated Security Solutions

Chief Executive Officer: Ignacio Balderas
Triple Canopy, Inc.
2250 Corporate Park Drive
Suite 300
Herndon, VA 20171
703-673-5000

Key Managers
Authorized to Negotiate and
Commitment Triple Canopy Inc.: Ignacio Balderas, Chief Executive Officer
Kelvin Kai, Chief Operating Officer
Thomas Magnani, Chief Financial Officer
Ray Randall, Sr. Vice President, Strategic Initiatives
Juliet Protas, Sr. Vice President and General Counsel
Scott Wilson, Sr. Vice President, Human Resources

Director of Contracts Robert F. Danzig
Triple Canopy, Inc.
2250 Corporate Park Drive
Suite 300
Herndon, VA 20171
(703) 673-5126
robert.danzig@triplecanopy.com

ROUGH ORDER OF MAGNITUDE

Triple Canopy is pleased to present this rough order of magnitude (ROM) to the Department of Health and Human Services – Office of Inspector General (HHS-OIG) as an estimate to provide training for the HHS-OIG Basic Rifle Training Program. This estimate is for planning and budgetary purposes, and does not commit Triple Canopy to the prices depicted. Triple Canopy is prepared to provide a formal quote at the HHS-OIG's request that will reflect the current prices at the time of the request.

This quote is a total course cost for a maximum of 25 students per course over a 5-day period. We are prepared to offer this course in multiple iterations to the customer's specifications.

Labor	Qty	Days	Daily Price	Subtotal	Total Price
Instructor I	(b)(4)				
Instructor II					
Subtotal Labor					

Other Direct Costs	Subtotal	Total Price
Travel Related Prices		
Instructor Travel	(b)(4)	
Instructor Vehicle Rental		
Instructor Per Diem		
Instructor Lodging		
Subtotal Travel Related Prices		
Training Area and Course Related Prices	(b)(4)	
Targets and Support Items		
Classroom		
Police House		
Rifle Range		
Shoot House		
Student Housing		
Student Dining		
JESTC Medic Pay		
TEST Fire Course		
LSP Trooper OT Pay		
Role Players		
Training Vehicles/Consumable Vehicles		
Subtotal Training Area and Course Related Prices		
Total Course Price		(b)(4)