	REFERENCE NO. OF DOCUMENT BEING CONTINUED
CONTINUATION SHEET	HSCEMD-16-P-00017

NAME OF OFFEROR OR CONTRACTOR GUIDANCE SOFTWARE INC

ITEM NO. SUPPLIES/SERVICES QUANTITY UNIT UNIT PRICE AMOUNT (A) (B) (C) (D) (E) (F) Service Providers shall follow these procedures when submitting invoices. 1. Invoice Submission: Invoices shall be submitted in a ".pdf" format in accordance with the contract terms and conditions via email, United States Postal Service (USPS) or facsimile as follows: Email: a. (b)(6);(b)(7)(C) Receiving Official Point-of-Contact (POC) Alternate Receiving Official Point-of-Contact (ALT. POC) Procurement POC Each email shall contain only (1) invoice and the invoice number shall be indicated on the subject line of the email. b. USPS: DHS, ICE Financial Operations - Burlington P.O. Box 1620 Williston, VT 05495-1620 ATTN: ICE/HSI/HQ/DIV4 The Contractors Data Universal Numbering System (DUNS) Number must be registered and active in the System for Award Management (SAM) at https://www.sam.gov prior to award and shall be notated on every invoice submitted to ensure prompt payment provisions are met. The ICE program office identified in the task order/contract shall also be notated on every invoice. c. Facsimile: Alternative Invoices shall be submitted to: (802)-288-7658 Continued ...

PAGE

3

OF

NAME OF OFFEROR OR CONTRACTOR GUIDANCE SOFTWARE INC

ITEM NO. SUPPLIES/SERVICES QUANTITY UNIT UNIT PRICE AMOUNT (A) (B) (C) (D) (E) (F) Submissions by facsimile shall include a cover sheet, point of contact and the number of total pages. Note: the Service Providers or Contractors Dunn and Bradstreet (D&B) DUNS Number must be registered in the System for Award Management (SAM) at https://www.sam.gov prior to award and shall be notated on every invoice submitted to ensure prompt payment provisions are met. The ICE program office identified in the contract shall also be anotated on every invoice. 2. Content of Invoices: Each invoice shall contain the following information in accordance with 52.212-4 (g), as applicable: (i) Name and address of the Contractor. The name, address and DUNS number on the invoice MUST match the information in both the Contract/Agreement and the information in the SAM; (ii) Dunn and Bradstreet (D&B) DUNS number; (iii) Invoice date and unique invoice number; (iv) Contract number (HSCEMD-16-P-0017); (v) Contract Line Item Number(s) (CLIN: 0001 or 0002); Description; quantity; unit of measure; unit price and extended price of the items delivered, period of performance (each CLIN shall be identified separately on the invoice); (vi) If applicable, shipping number and date of shipment, including the bill of lading number and weight of shipment if shipped on Government bill of lading; (vii) Terms of any discount for prompt payment offered; (viii) Remit to Address; (ix) Name, title, and phone number of person to notify in event of an improper invoice; Continued ...

OF

PAGE

CONTINUATION SHEET

NAME OF OFFEROR OR CONTRACTOR GUIDANCE SOFTWARE INC

ITEM NO. SUPPLIES/SERVICES QUANTITY UNIT UNIT PRICE AMOUNT (A) (B) (C) (D) (E) (F) (x) ICE program office designated on order/contract/agreement and (xi) Mark invoice as "Interim" (Ongoing performance and additional billing expected) and "Final" (performance complete and no additional billing) (xii) Electronic Funds Transfer (EFT) banking information in accordance with 52.232-33 Payment by Electronic Funds Transfer - System for Award Management or 52-232-34, Payment by Electronic Funds Transfer - Other than System for Award Management. 3. In order to ensure that an accurate invoice is submitted, the Contractor shall coordinate the invoice with the Receiving Official POC or Alternate Receiving Official POCOR before sending the invoice to Financial Operations Burlington. 4. Invoice Inquiries: Questions regarding (b)(6);(b)(7)(C) invoice submission or payment, please contact ICE Financial Operations at 1-877-491 OF by e-mail at (b)(6);(b)(7)(C) (b)(4)

OF

PAGE

AMENDME	ENT OF SOLICITATION/MODIFIC	ATION OF C	ONTRACT		1. CONTRACT ID CODE	E		PAGE OF PAGES		
sonner ann ach	ENT/MODIFICATION NO.	3. EFFECTIVE		4. F	REQUISITION/PURCHASE REQ. NO.	5. PR	1 DJECT NO	1 . (If applicable)		
P00002		See Blo								
6. ISSUED B	Y CODE	ICE/IOSI	Contract and Contract of Contr	7. /	ADMINISTERED BY (If other than Item 6)	CODE				
Immigra Office 7701 N.	Igations Ops Support D ation and Customs Enfo of Acquisition Manage Stemmons Freeway, (b)(TX 75247	rcement ment]							
8. NAME AND	O ADDRESS OF CONTRACTOR (No., street,	county, State and	ZIP Code)	(x)	9A. AMENDMENT OF SOLICITATION NO.					
7 CAMPU SUITE 2					9B. DATED (SEE ITEM 11) 10A. MODIFICATION OF CONTRACT/ORDER N HSCEMD = $16 - P = 00033$ 10B. DATED (SEE ITEM 13)	0.				
CODE 0		FACILITY COL)E		12 WHEERS WERE WORD					
	330955680000				04/25/2016					
virtue of thi reference t	is amendment you desire to change an offer to the solicitation and this amendment, and it ITING AND APPROPRIATION DATA (If requ	r already submit is received prior <i>uired)</i>	ted , such change may be to the opening hour and o	e ma date	SPECIFIED MAY RESULT IN REJECTION OF YO de by telegram or letter, provided each telegram of specified.	or letter	makes	14.		
			T CONTRACTO/ORDERC				.o in riem			
CHECK ONE	A. THIS CHANGE ORDER IS ISSUED F ORDER NO. IN ITEM 10A.	PURSUANT TO:	(Specify authority) THE	CHA	ANGES SET FORTH IN ITEM 14 ARE MADE IN T	HE CON	NTRACT			
	B. THE ABOVE NUMBERED CONTRAC appropriation date, etc.) SET FORTH	T/ORDER IS M I IN ITEM 14, PU	ODIFIED TO REFLECT T JRSUANT TO THE AUTH	IOR	ADMINISTRATIVE CHANGES (such as changes ITY OF FAR 43.103(b).	n payin	g office,			
	C. THIS SUPPLEMENTAL AGREEMENT	T IS ENTERED	INTO PURSUANT TO AU	тно	DRITY OF:					
320	D. OTHER (Specify type of modification	1992A HUNDY	1 (12 152) V							
X	Closeout IAW FAR 4.8	04 Close	out of Contra	ac	t Files					
E. IMPORTAN			to sign this document and				i)			
DUNS Nu Points	mber: 033095568 of Contact:	Organized by U	CF section headings, incl	ludir	ng solicitation/contract subject matter where feasib	le.)				
	POC: (b)(6);(b)(7)(C)				703-287-(b)(6);(b)(7)(C)					
	te POC: (b)(6);(b)(7)(C)				, 703-287-(b)(6);(b	_)			
Contrac	t Specialist: (b)(6);(b)(7)(C)			, 214-905-(b)(6);(b)(7)	(C)				
and all ~	invoices paid.	2		tł	nis order. All work has	been	comp	lete		
	Action: Y Sensitive An of Performance: (b)(4)	ward: [b)								
Except as pro	ovided herein, all terms and conditions of th	e document refe	erenced in Item 9 A or 10A	A, as	heretofore changed, remains unchanged and in f	ull force	and effect	*		
	AND TITLE OF SIGNER (Type or print)			16	A. NAME AND TITLE OF CONTRACTING OFFIC					
15B. CONTR	ACTOR/OFFEROR		15C. DATE SIGNED							
	(Signature of person authorized to sign)			-	(Signature of Contracting Officer)					
NSN 7540-01 Previous edit	1-152-8070				S		RD FORM 3	30 (REV. 10-83)		
Previous edit	epic.org	EPIC	C-17-06-13-ICE-FOI	A-2			CFR) 53.24	³ 001004		

		OR	DER FOR SU	PPLIES OR SER	/ICES			PAGE	OF PAGES	
IMPORTANT:	Mark all	packages and papers with c	contract and/or or	der numbers.				1	11	
1. DATE OF OR	DER	2. CONTRACT NO. (If any)					6. SHIP TO:			
08/12/20	16				a. NAME OF CO	ONSIGNEE				
3. ORDER NO.			4. REQUISITION/F	REFERENCE NO.						
HSCEMD-1	6-P-0	0092	192116VPH	00000311	Investig	ation - SAC P	hoenix			
Investig Immigrat	ation ion a	ess correspondence to) s Ops Support Da nd Customs Enfor uisition Managem	cement			ion and Custo Central Avenu				
		ons Freeway, (b)(6)						10 0		
Dallas T	X 752	47			c.CITY Phoenix			d. STATE AZ	e. ZIP CODE 85012	
7. TO: CELI	EBRIT	E USA CORP			f. SHIP VIA					
a. NAME OF CC CELLEBRI						8. TYF	PE OF ORDER			
b. COMPANY N	AME				X a. PURCHA	SE		. DELIVERY	,	
c. STREET ADD 7 CAMPUS		P			REFERENCE		-			
SUITE 21		E .			Quote #	(b)(4)		se, this deliv	nstructions on the ery order is	
SOLLE 210					Dated Au	ıg 12,2016	52000		ions contained on his form and is	
						he following on the terms specified on both sides of	issue	d subject to	the terms and	
d. CITY			e. STATE	f. ZIP CODE	this order and o	n the attached sheet, if	cond		above-numbered	
PARSIPPAN			NJ	07054	any, including delivery as indicated.					
9. ACCOUNTING		PROPRIATION DATA			10. REQUISITION	DNINGOFFICE Id Sec Inv SAC	Phoenix			
11. BUSINESS	CLASSIFIC	CATION (Check appropriate bo	ox(es))	enants en sua de a s				2. F.O.B. POI	NT	
	a. SMALL X b. OTHER THAN SMALL c. DISADVANTAGED d. V					e. HUBZone				
f. SERVICI	E-DISABLE AN-OWNEI	것같^^	THE WOSB PROG	Construction of the second s	EDWOSB					
		13. PLACE OF		14. GOVERNMENT B/L	NO.	15. DELIVER TO F.O.B.	2.227VD4.022	16. DISCOU	NT TERMS	
a. INSPECTION Destinat		b. ACCEPTANCE Destinati				ON OR BEFORE (Date 90 Days After Order	») Receipt of		Net 30	
2				17. SCHEDULE (Se	ee reverse for Reje		4			
ITEM NO.					QUANTITY ORDERED (c) (d)	1 L. J. S. States and L. H.	AMOUNT		QUANTITY ACCEPTED	
(a)	DUNS 1	Number: 0330955	ь) 68		(c) (d)	(e)	(f)		(g)	
	~ Priman (b)(6);(b)(Alt. 1 (b)(6);(b)(ry POC: (b)(6);(b)(7)(C (7)(C) POC: (b)(6);(b)(7)(C)	;)) , 602-	-200-(b)(6);(b)(7)(-200-(b)(6);(b)(7)((
	18. SHIP	PING POINT		19. GROSS SHIPPING	WEIGHT	20. INVOICE NO.			17(h) TOTAL	
			2	21. MAIL INVOICE TO:					(Cont. pages)	
	a. NAME	Depa	artment of	Homeland Se	curity		(b)(4)			
SEE BILLING	b. STRE			nance Center						
ON REVERSE	(or P.O. I	Box) P.O	. Box 1620						17(i) GRAND TOTAL	
	c. CITY				d. STATE	e. ZIP CODE	(b)(4)			
		lliston			VT	05495-1279				
22. UNITED S	STATES OF	ES .				23. NAME (Typed)	1. 5 17			
AMERIC	ABY (Sign	pature)				(b)(6);(b)(7)(C)				
		F				TITLE: CONTRACTING				
AUTHORIZED FC PREVIOUS EDITI							c		ORM 347 (Rev. 2/2012) SA/FAR 48 CFR 53.213(f)	

PAGE NO

2

		all packages and papers with contract and/or order numbers.						
DATE OF ORE	DER	CONTRACT NO.				ORDER NO.		
08/12/20	016					HSCEMD-16-P	-00092	
ITEM NO.	1	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT	AMO	UNT	QUANTITY
			ORDERED		PRICE	0.000		ACCEPTED
(a)		(b)	(c)	(d)	(e)	(f)	(g)
		s will schedule training and						
		munication with Cellebrite if needed.						
	10 C	s are not authorized to change the terms						,
	and	conditions of this order.						
	The	contractor is requested to acknowledge						
	acc	eptance of this order by signing in the						
	spa	ce below and returning a copy of this						
	pag	e with signature to the contracting						
	off	icer via fax- 214-905-5568 or email-						
	(b)(6);(b)(7)(C)						
	(~)(~							
	Sig	nature		1 1				
				1 1				
	-			1 1				
	Tit	le						
	Dat	P						
	~							
	Eve	mpt Action: N						
		counting Info:						
	(b)(7							
	(0)(7							
		5						
0001			(h))(4)				8
0001	(b)(4			(+) 				
								/
	<							
	~							
	FOR	COMMUNICATION OF THIS ORDER						
				1 1				
	12.12.000	communications and invoices must						
	ref	erence order number HSCEMD-16-P-00092.						
		E: The contractor should not accept any						
		truction that results in a change to the						
	sup	plies ordered herein from an Entity or		1 1				
	ind	ividual other than a Contracting Officer		1 1				
	at	the issuing office.						
	1			[]				
	Inv	oicing Instructions:		[]				
	1							
	Con	tractors shall use these procedures when						
	100 C 100 C 100 C	tinued						
	1493300							
	1							
	1							
<u>ç</u>	1					A		1
	TOTA	L CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))	>			(b)(4)		

AUTHORIZED FOR LOCAL REPODUCTION PREVIOUS EDITION NOT USABLE

PAGE NO 3

	: Mark all packages and papers with contract and/or order numbers.					
DATE OF ORD					DER NO.	
08/12/20	J16				CEMD-16-P-00092	
ITEM NO.	SUPPLIES/SERVICES	QUANTITY			AMOUNT	QUANTITY
(a)	(b)	ORDERED (c)	(d)	PRICE (e)	(f)	ACCEPTED (g)
0.000	submitting an invoice.	124244		1000070		
	namenakoské ramenzanista. Utotestu jateczistavstvoletestu v n					
	1. Invoice Submission:					
	Primary method of submission is email.					
	Invoices shall be submitted to:					
	(b)(6);(b)(7)(C)					
	Each email shall be in a .pdf format;					
	contain only one (1) invoice and the					
	subject line of the email will annotate the					
	invoice number.					
	· · · · · · · · ·					
	Alternate method of submission is fax.					
	Invoices shall be submitted to:					
	802-288-7658					
	Each fax shall have a cover sheet					
	identifying point of contact, phone number					
	and number of pages.					
	Note: The Contractor's Dunn and Bradstreet					
	(D&B) DUNS number must be active in the					
	System for Award Management (SAM) at					
h	https://www.sam.gov.					
	2. Content of Invoices: Each invoice					
	submission shall contain the following					
	information:					
	(i) Name and address of the Contractor.					
	The name, address and DUNS number on the					
	invoice MUST match the information in both					
	the Contract/Agreement and the information					
	in the SAM;					
	(ii) Dunn and Bradstreet (D&B) DUNS number;					
	(iii) Invoice date and invoice number;					
	(iv) Agreement/Contract number, contract					
	line item number and, if applicable, the					
	order number;					
	(v) Description, quantity, unit of measure,					
	unit price and extended price of the items					
	delivered;					
	(vi) Shipping number and date of shipment,					
	including the bill of lading number and					
	weight of shipment if shipped on Government					
	Continued					
	l					
	TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))	\geq			\$0.00	
	OR LOCAL REPODUCTION TION NOT USABLE					NAL FORM 348 (Rev. 4/2005) ibed by GSA FAR (48 CFR) 53.213(

PAGE NO

4

/12/20	20-01-000	CONTRACT NO.			ORDE	r no . EMD-16-P-00092	
	010		0.000			10 CONTRACTOR	
EM NO.		SUPPLIES/SERVICES	QUANTITY		UNIT	AMOUNT	QUANTIT
(a)		(b)	(c)	(d)	(e)	(f)	(g)
		l of lading;					
	(vii	i) Terms of any discount for prompt					
	paym	ment offered;		1 1			
	(vii	ii) Remit to Address;					
	(ix)	Name, title, and phone number of					
	pers	son to notify in event of defective		1 1			
	invo	pice;		1 1			
	(x)	Whether the invoice is "Interim" or		1 1			
	"Fir	nal" and					
	(xi)	ICE program office designated on					
	orde	er/contract/agreement.					
	In a	accordance with Contract Clause, FAR					
		212-4(g)(1), Contract Terms and		1 1			
		ditions - Commercial Items, or FAR					
	1.	232-25(a)(3), Prompt Payment, as					
		licable, the information identified					
		ve is required with each invoice					
		nission.					
	3.	Payment Inquiries: Questions regarding	na l				
		pice submission or payment, please	(b)(6);(b)	(7)(C)			
		cact ICE Financial Operations at		and			
		77-491- or by e-mail at					
		b)(7)(C)					
8	1						
	The	total amount of award: (b)(4) . The	3				
		igation for this award is shown in box	218				
	17(i						
		- / -					
	· · · ·						
			2				
	C						
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	5			1 1			
				[]			
	Î			[]			
	TOTAL	CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))	\geq			\$0.00	

		OR	DER FOR SU	PPLIES OR SER	/ICES				PAGE	OF PAGES	
IMPORTANT:	Mark all packa	ages and papers with o			20070-000-000 				1	4	
1. DATE OF OR		NTRACT NO. (If any) EMD-13-D-000						6. SHIP TO:		NU.	
04/28/20		EMD-13-D-000	01		a. NAME OF	F CO	NSIGNEE				
3. ORDER NO.			4. REQUISITION/	REFERENCE NO.							
	L7-J-0002	5	192117VSS		HSI SE	LLS	3				
		prespondence to) ps Support Da	allas	popula del pola (del parte da ten 1	b.STREET ADDRESS Attn: (b)(6);(b)(7)(C)						
		Customs Enfor			State Hwy 88 Mile Post 112.5						
		ition Managem			Mile P	ost	t 112.5				
ATT: (b)(6		Freeway, (b)(6),(D)(7)(C)		c.CITY Sells				d. STATE	e. ZIP CODE	
Dallas T	TX 75247								AZ	85634	
7. TO:					f. SHIP VIA						
a. NAME OF CO CELLEBRI							8. TYP	E OF ORDER			
b. COMPANY N	IAME				a. PUR	CHAS	SE	X	b. DELIVERY	,	
c. STREET ADD					REFERENC	CE Y	OUR:	100	272 10113 S	2 0 0 0	
7 CAMPUS	Quote	(b)(4	4)		cept for billing i erse, this deliv	instructions on the ery order is					
SUITE 210					Dated	Mai	rch 19, 2017	su	bject to instruct	ions contained on	
						e following on the terms		s side only of th ued subject to			
d. CITY e. STATE f. ZIP CODE					and conditions specified on both sides of conditions of the above-nu this order and on the attached sheet, if contract.						
PARSIPPA	07452	any, including delivery as indicated.									
	G AND APPROP	RIATION DATA					NING OFFICE	DL			
See Sche	and weap country and	N (Check appropriate bo	ox(es))		ICE HM	TUC	d Sec Inv SAC		12. F.O.B. PO	NT	
a. SMALL		THER THAN SMALL	X c. DISADVA	ANTAGED d. WO	MEN-OWNED		e. HUBZone		Destinat		
	E-DISABLED	g. WOMEN-OWNE			EDWOSB			3	Descinat	21011	
VETER	AN-OWNED	ELIGIBLE UNDER	THE WOSB PROC								
	13	. PLACE OF		14. GOVERNMENT B/L	NO.		15. DELIVER TO F.O.B. F ON OR BEFORE (Date)	16. DISCOU	NT TERMS	
a. INSPECTION Destinat		b. ACCEPTANCE Destinati	on				30 Days Afte	r Award		Net 30	
				17. SCHEDULE (Se	e reverse for R	eject	tions)	1			
	1.1				QUANTITY	134045	UNIT			QUANTITY	
ITEM NO.			R SERVICES			JNIT (d)	PRICE	AMOUN	т	ACCEPTED	
(a)	DUNS Num		ь) 68		(c)	(u)	(e)	(f)		(g)	
	~		<u>>></u>	520-383-(b)(6);(b	VZVC						
	(b)(6);(b)(7)(C)	POC: (b)(6);(b)(7)(0	<u> </u>	520-383- <u>(b)(0),(b</u>							
ľ	~										
	Secondory	y POC: (b)(6);(b)(7)(C)	r							
	concinue	4									
	18. SHIPPING	POINT		19. GROSS SHIPPING	WEIGHT		20. INVOICE NO.			17(h)	
										TOTAL (Cont.	
			86	1 21. MAIL INVOICE TO:						pages)	
	a. NAME		25					(b)(4)			
SEE BILLING		Dep	artment of	Homeland Sec	curity				24		
INSTRUCTIONS	b. STREET AD	DRESS Bur	lington Fi	nance Center							
ON REVERSE	(or P.O. Box)		. Box 1620							17(i) GRAND	
		ATT	N: HSI - S	SAC - Phoenix						TOTAL	
	c. CITY				d. STATE	E 1	e. ZIP CODE	(b)(4)			
	Willi	ston			VT		05495-1279				
22. UNITED	STATES OF						23. NAME (Typed)	2. 5 .0			
AMERIC	ABY (Signature,						(b)(6);(b)(7)(C)				
							TITLE: CONTRACTING/	ORDERING OFFIC	ER		
	OR LOCAL REPROL ION NOT USABLE	DUCTION								ORM 347 (Rev. 2/2012) SA/FAR 48 CFR 53.213(f)	

PAGE NO

IMPORTANT	Mark all packages and papers with contract and/or order numbers.					
DATE OF ORD					ORDER NO.	
04/28/20	HSCEMD-13-D-00001				HSCEMD-17-J-00025	
ITEM NO.	SUPPLIES/SERVICES	QUANTITY	1- Contract 10	UNIT	AMOUNT	QUANTITY
(a)	(b)	ORDERED (c)	(d)	PRICE (e)	(f)	ACCEPTED (g)
-	520-229-(b)(6);(b)(7)(C)					
	520-229-(b)(6)(b)(7)(C) The contractor is requested to acknowledge acceptance of this order by signing in the space below and returning a copy of this page with signature to the contracting officer via fax- 214-905-5568 or email- (b)(6);(b)(7)(C) Signature Title Date All vendor warranties, explicit or implicit, pertaining to the items or services identified on this order are incorporated as part of this order. All terms and conditions of contract HSCEMD-13-D-00001 hereby apply to this delivery order. Exempt Action: N Sensitive Award: NONE Accounting Info: (b)(7)(E)					
	(b)(4) FOR COMMUNICATION OF THIS ORDER All communications and invoices must reference order number HSCEMD-17-J-00025. NOTE: The contractor should not accept any instruction that results in a change to the supplies ordered herein from an Entity or Continued		(4)			

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

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

PAGE NO

3

	Mark all packages and papers with contract and/or order numbers.					102 - 102 -	
DATE OF ORDE					ORDER NO.		
04/28/203	17 HSCEMD-13-D-00001				HSCEMD-17-J-0002		
ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT	Ĩ	AMOUNT	QUANTITY
(a)	(b)	ORDERED (c)	(d)	PRICE (e)		(f)	ACCEPTED (g)
0.350	individual other than a Contracting Officer	0.02		100.00			
	at the issuing office.						
1	Invoicing Instructions:						
c	Contractors shall use these procedures when						
2	submitting an invoice.						
	1. Invoice Submission:						
1	Primary method of submission is email.						
	Invoices shall be submitted to:						
	(b)(6);(b)(7)(C)						
1	Each email shall be in a .pdf format;						
	contain only one (1) invoice and the						
3	subject line of the email will annotate the						
-	invoice number.						
	Alternate method of submission is fax.						
	Invoices shall be submitted to:						
-	802-288-7658						
1	Each fax shall have a cover sheet						
	identifying point of contact, phone number						
	and number of pages.						
1	Note: The Contractor's Dunn and Bradstreet						
	(D&B) DUNS number must be active in the						
2	System for Award Management (SAM) at						
1	https://www.sam.gov.						
	2. Content of Invoices: Each invoice						
1	submission shall contain the following						
	information:						
	(i) Name and address of the Contractor.						
	The name, address and DUNS number on the						
	invoice MUST match the information in both						
ť	the Contract/Agreement and the information						
	in the SAM;						
	(ii) Dunn and Bradstreet (D&B) DUNS number;						
	(iii) Invoice date and invoice number;						
	(iv) Agreement/Contract number, contract						
	line item number and, if applicable, the order number;						
2	Continued						
						\$0.00	
	TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))	/					

AUTHORIZED FOR LOCAL REPODUCTION PREVIOUS EDITION NOT USABLE

PAGE NO

4

ORDER NO.

DATE OF ORDER	HSCEMD-13-D-00001			
04/28/201	H2CFWD-12-D-00001			

04/28/20	D17 HSCEMD-13-D-00001		-	HSC	CEMD-17-J-00025	10 mar 40 a 10 a
ITEM NO.	SUPPLIES/SERVICES	QUANTITY		UNIT PRICE	AMOUNT	QUANTITY ACCEPTED
(a)	(b)	(c)	(d)	(e)	(f)	(g)
	(v) Description, quantity, unit of measure,					
	unit price and extended price of the items					
	delivered;					,
	(vi) Shipping number and date of shipment,					
	including the bill of lading number and weight of shipment if shipped on Government					
	bill of lading;					
	(vii) Terms of any discount for prompt					
	payment offered;					
	(viii) Remit to Address;					
	(ix) Name, title, and phone number of					
	person to notify in event of defective					
	invoice;					
	(x) Whether the invoice is "Interim" or					
	"Final" and					
	(xi) ICE program office designated on					
	order/contract/agreement.					
	In accordance with Contract Clause, FAR					
	52.212-4(g)(1), Contract Terms and					
	Conditions - Commercial Items, or FAR					
	52.232-25(a)(3), Prompt Payment, as					
	applicable, the information identified					
	above is required with each invoice					
	submission.					
	3. Payment Inquiries: Questions regarding	(b)(6)	(b)(7)	(C)		
	invoice submission or payment, please	(-/(-/	()(-)	x-7		
	contact ICE Financial Operations at	- 10 ⁻				
	(b)(6);(b)(7)(C)					
	The total amount of award: (b)(4) . The					
	obligation for this award is shown in box					
	17(i).					
10 10	TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))	\geq		•	\$0.00	•

AUTHORIZED FOR LOCAL REPODUCTION PREVIOUS EDITION NOT USABLE

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

OFF	EROR TO COMPLETE BLC		AERCIAL ITEMS	1. 1 :	92117VHQ	ACCC(0003	1	14
CONTRACT NO.	LIGHTO COMPLETE BLU	3. AWARD/	4. ORDER NUMBER				5. SOLICITATION NU		6. SOLICITATION
		EFFECTIVE DAT	HSCEMD-17	-P-00012	2				ISSUE DATE
FOR SOLICITATION	a. NAME				b. TELEPHON			alls) 8. OFFI	ER DUE DATE/LOCAL TIME
INFORMATION CALL	.: (b)(6);(b)(7)	(C)			214-905	5-(b)(6);(b)(7)(C)		
SSUED BY		CODE	ICE/IOSD	10. THIS AC	QUISITION IS	X U	NRESTRICTED OR	SETAS	IDE: % FOR:
nvestigations (nmigration and ffice of Acquis 701 N. Stemmons allas TX 75247	Customs Enfor sition Managem	cement ent		HUBZO BUSINE SERVIC VETER	BUSINESS NE SMALL SS E-DISABLED AN-OWNED BUSINESS	(WC		THE WOMEN-C	NAICS: (b)(4) SIZE STANDARD: (b)(4)
DELIVERY FOR FOB DESTIN	A- 12. DISCOUNT TERMS						13b. RATING		
TION UNLESS BLOCK IS Net 30				1	IS CONTRACT I				
SEE SCHEDULE				22.032	AS (15 CFR 700)		14. METHOD OF S	SOLICITATION	RFP
DELIVER TO	CODE	CCC		16. ADMINIS	TERED BY			CODE	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
Cyber Crimes Center 11320 Random Mills Road (b)(6);(b)(7)(C) Fairfax VA 22030				Immig: Office 7701 M Attn:	cation a e of Acq	ind Cu quisit tons H (C)	s Support I ustoms Enfo tion Manage Freeway, 10	orcement	99000
. CONTRACTOR/ CO	ODE 03309556800	0 0 FACILITY CODE			NT WILL BE MAD			CODE	ICE-HSI-HO-DI
CAMPUS DR STE RSIPPANY NJ 07				Attn:	Box 1620 ICE-HSI		DIV 4		
					SCEMD-17 ston VT				
	1848855 (b)(6);(b)(7)								
			R	Willi:	ston VT	05495	5-1620 Shown in Block 18a	UNLESS BLOC	CK BELOW
	DIFFERENT AND PUT SUCH A			Willi:	ston VT	05495 ADDRESS	5-1620 Shown in Block 18a	UNLESS BLOC	24. AMOUNT
17b. CHECK IF REMITTANCE IS 19. ITEM NO. DUNS Nu: Obligat (b)(6);(b)(7)(Alterna (b)(6);(b)(7)(Technic (b)(6);(b)(7)((b)(6);(b)(7)(Cellebr	SDIFFERENT AND PUT SUCH A SCHEDU mber: 0330955 ion POC: (b)(6);(b) (C) te POC: (b)(6);(b)(((C) al POC: (b)(6);(b)(((C) al POC: (b)(6);(b)(((C)) is authoriz ite concerning	20. LE OF SUPPLIES/S 668 ((7)(C) 7)(C) 7)(C) 7)(C) ed to cor this pu:	ERVICES , 703-293- 703-293-(b)(6); 703-293-(b)(6); nmunicate wi rchase order	Willi: 18b. SUBMI IS CHI (b)(6);(b)(7)((b)(7)(C) (b)(7)(C) th	Ston VT	05495 ADDRESS	5-1620 SHOWN IN BLOCK 18a DENDUM 23.	UNLESS BLOC	24.
7b. CHECK IF REMITTANCE IS 19. ITEM NO. DUNS Nu: Obligat (b)(6);(b)(7) Alterna (b)(6);(b)(7) Technic (b)(6);(b)(7) (c)(6);(b)(6);(b	SDIFFERENT AND PUT SUCH A SCHEDU mber: 0330955 ion POC: (b)(6);(b) (C) te POC: (b)(6);(b)((C) al POC: (b)(6);(b)((C) al POC: (b)(6);(b)((C) is authoriz ite concerning e Reverse and/or Attach	20. LE OF SUPPLIES/S 668 ((7)(C) 7)(C) 7)(C) 7)(C) ed to cor this pu:	ERVICES , 703-293- 703-293-(b)(6); 703-293-(b)(6); nmunicate wi rchase order	Willi: 18b. SUBMI IS CHI (b)(6);(b)(7)((b)(7)(C) (b)(7)(C) th	Ston VT	ADDRESS SEE ADD 22. UNIT	5-1620 SHOWN IN BLOCK 18a DENDUM 23.		24. AMOUNT
7b. CHECK IF REMITTANCE IS 19. ITEM NO. DUNS Nu: Obligat (b)(6);(b)(7) Alterna (b)(6);(b)(7) Technic (b)(6);(b)(7) (c)(6);(b)(7) (SDIFFERENT AND PUT SUCH A SCHEDU mber: 0330955 ion POC: (b)(6);(b) (C) te POC: (b)(6);(b)((C) al POC: (b)(6);(b)((C) al POC: (b)(6);(b)((C) is authoriz ite concerning e Reverse and/or Attach	20. LE OF SUPPLIES/S 668 ((7)(C) 7)(C) 7)(C) 7)(C) ed to cor this pu:	ERVICES , 703-293- 703-293-(b)(6); 703-293-(b)(6); nmunicate wi rchase order	Willi: 18b. SUBMI IS CHI (b)(6);(b)(7)((b)(7)(C) (b)(7)(C) th	Ston VT	ADDRESS SEE ADD 22. UNIT	5–1620 SHOWN IN BLOCK 18a JENDUM 23. UNIT PRICE		24. AMOUNT
7b. CHECK IF REMITTANCE IS 19. ITEM NO. DUNS Nu: Obligat (b)(6);(b)(7) Alterna (b)(6);(b)(7) Technic (b)(6);(b)(7) (cellebr (Use ACCOUNTING AND APPRO e schedule 27a. SOLICITATION INCOR	SDIFFERENT AND PUT SUCH A SCHEDU mber: 0330955 ion POC: (b)(6);(b) (C) te POC: (b)(6);(b)(7 (C) al POC: (b)(6);(b)(7 (C) al POC: (b)(6);(b)(7 (C) is authoriz ite concerning e Reverse and/or Attach OPRIATION DATA	20. LE OF SUPPLIES/S 668 ((7)(C) 7)(C) 7)(C) 7)(C) 7)(C) ced to con this pu: Additional She	ERVICES , 703-293- (b)(6); 703-293- (b)(6); 703-293- (b)(6); mmunicate wi rchase order ets as Necessary) 52.212-4. FAR 52.212-	Willi: 18b. SUBMI IS CHI (b)(6);(b)(7)((b)(7)(C) (b)(7)(C) th 3 AND 52.212-	Ston VT	ADDRESS SEE ADD 22. UNIT	5-1620 SHOWN IN BLOCK 18a PENDUM 23. UNIT PRICE 26. TOTAL AWARD / (b)(4) DDENDA		24. AMOUNT
17b. CHECK IF REMITTANCE IS 19. ITEM NO. DUNS Nu: Obligat (b)(6);(b)(7) Alterna (b)(6);(b)(7) Technic (b)(6);(b)(7)((b)(6);(b)(7)(Cellebr	SDIFFERENT AND PUT SUCH A SCHEDU mber: 0330955 ion POC: (b)(6);(b) (C) te POC: (b)(6);(b)(((C) al POC: (b)(6);(b)(((C) al POC: (b)(6);(b)((C) al POC: (b)(6);(b)((C) (C) al POC: (b)(6);(b)((C) (C) al POC: (b)(6);(b)((C) (C) al POC: (b)(6);(b)((C) (C) al POC: (b)(6);(b)((C) (C) al POC: (b)(6);(b)((C) (C) (C) al POC: (b)(6);(b)((C) (C) (C) al POC: (b)(6);(b)((C) (C) (C) al POC: (b)(6);(b)((C) (C) (C) (C) (C) (C) al POC: (b)(6);(b)((C) (C) (C) (C) (C) (C) (C) (C) (C) (20. LE OF SUPPLIES/S 668 ((7)(C) 7)(C) 7)(C) 20. 668 ((7)(C) 7)(C) 7)(C) 20. 668 ((7)(C) 7)(C) 20. 668 ((7)(C) 7)(C) 20. 20. 20. 20. 20. 20. 20. 20.	ERVICES , 703-293- 703-293- (b)(6); 703-293- (Willi: 18b. SUBMI' IS CHI (b)(6);(b)(7)((b)(7)(C) (b)(7)(C) th 3 AND 52.212- 52.212-5 IS AT	Ston VT	ADDRESS SEE ADD 22. UNIT HED. AI ADDEN OF CONT 02 / 28 ANY ADE ACCEPTE	5-1620 SHOWN IN BLOCK 18a PENDUM 23. UNIT PRICE 26. TOTAL AWARD / (b)(4) DDENDA DA TRACT: Q	AMOUNT (For ARI UOTE (b)(OFFER ON S BES WHICH A	24. AMOUNT Covt. Use Only) E ARE NOT ATTACHE E ARE NOT ATTACHE E ARE NOT ATTACHE 4) OFF OLICITATION (BLOCK 5), ARE SET FORTH

19. ITEM NO.		20. SCHEDULE OF SUPPLIE	S/SERVICES		21. QUANTITY	22. UNIT	23 UNIT P		24. AMOUNT	
	INSTRUCTION SERVICES H Contractine 214-905 (b)(6 Exempt Act	SCHEDULE OF SUPPLIE ellebrite SHALL NC NS THAT RESULTS IN EREIN. g Officer: (b)(6),(b)(7)	T ACCEPT ANY A CHANGE TO THE (C) ,		QUANTITY					
	Continued									
32a. QUANTIT	TY IN COLUMN 21 HAS	3 BEEN								
RECEI			D, AND CONFORMS TO THE CO				til Statisticker and the second s			
32b. SIGNATU	JRE OF AUTHORIZED	GOVERNMENT REPRESENTATIV	E 32c. DATE	32d. PRIN	ITED NAME	AND 1	ITLE OF AUTH	IORIZED GO	VERNMENT REPRESENTATIVE	
32e. MAILING	ADDRESS OF AUTHO	RIZED GOVERNMENT REPRESE	NTATIVE							
				329. E-IVIA	UF AUTE	URIZE	ED GOVERNM	LIVI REPRE	GENTATIVE	
33. SHIP NUM	IBER	34. VOUCHER NUMBER	35. AMOUNT VERIFIED CORRECT FOR	36. PAYM		_			37. CHECK NUMBER	
PARTIAL	FINAL	1		CON	IPLETE		PARTIAL	FINAL		
38. S/R ACCO	UNT NUMBER	39. S/R VOUCHER NUMBER	40. PAID BY						1	
		CORRECT AND PROPER FOR PAY	/MENT	420 P		(Print	1			
<u></u>	JRE AND TITLE OF CE		41c. DATE		42a. RECEIVED BY (Print)					
			42b. RECEIVED AT (Location)							
				42c. DA	ATE REC'D (YY/MN	1/DD)	42d. TOTAI	CONTAINERS	
						_		L		

R		PAGE	OF
CONTINUATION SHEET	HSCEMD-17-P-00012	3	14

NAME OF OFFEROR OR CONTRACTOR CELLEBRITE INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	unit (D)	UNIT PRICE	amount (F)
	duration of licensing term. Accounting Info: (b)(7)(E)				
	Funded: (b)(4) Accounting Info: (b)(7)(E)				
	Funded: (b)(4) Accounting Info: (b)(7)(E)				
	Funded: (b)(4) Period of Performance: (b)(4)	_			
1001	(b)(4)	(b.)(4)		
	Period of Performance: (b)(4) FOR COMMUNICATION OF THIS ORDER All communications and invoices must reference the order number shown in Block #4 on page 1 of				
	the Purchase Order. Payment Inquiries: Questions regarding invoice submission or payment, please contact ICE Financial Operations at 1-877-491 - or by e-mail at (b)(6);(b)(7)(C) Direct other	(b)(6)		(C));(b)(7)(C)	
	inquiries to (b)(6);(b)(7)(C) at the issuing office at (214) 905(or) via e-mail to: (b)(6);(b)(7)(C) The Contractor is requested to acknowledge	<u>, s</u>			
	acceptance of this purchase order by signing in blocks 30a-c on the front page of the purchase order (SF 1449) and returning a copy of this page with signature to the Contracting Officer via facsimile to (214) 905-5568 or via e-mail to (b)(6);(b)(7)(C) upon receipt.				
	Continued				
NSN 7540-01-1	52-8067				OPTIONAL FORM 336 (4-86)

NAME OF OFFEROR OR CONTRACTOR CELLEBRITE INC

<pre>Please contact the Contracting Officer if there are any questions or concerns. NOTE: The contractor should not accept any instruction that results in a change to the supplies/services ordered herein from an Entity or individual other than a Contracting Officer at the issuing office. </pre>	(C)	(D)	UNIT PRICE (E)	AMOUNT (F)
<pre>instruction that results in a change to the supplies/services ordered herein from an Entity or individual other than a Contracting Officer at the issuing office. ************************************</pre>				
 INVOICE INSTRUCTIONS 1. Invoice Submission: Primary method of submission is email. Invoices shall be submitted to: (D)(6)(0)(0)(7)(C) Attn: ICE-HSI-HQ DIV 4 Invoice Each email shall be in a .pdf format; contain only one (1) invoice and the subject line of the email will annotate the invoice number. Alternate method of submission is fax. Invoices shall be to: 802-288-7658 Attn: ICE-HSI-HQ DIV 4 Invoice Each fax shall have a cover sheet identifying point of contact, phone number and number of pages. Note: The Contractor's Dunn and Bradstreet (D&B) DUNS number must be active in the System for Award Management (SAM) at https://www.sam.gov. Content of Invoices: Each invoice submission shall contain the following information: (i) Name and address of the Contractor. The name, address and DUNS number on the invoice MUST match the information in both the Contract/Agreement and the information in the 				
<pre>Primary method of submission is email. Invoices shall be submitted to: (b)(6)(b)(7)(C) Attn: ICE-HSI-HQ DIV 4 Invoice Each email shall be in a .pdf format; contain only one (1) invoice and the subject line of the email will annotate the invoice number. Alternate method of submission is fax. Invoices shall be to: 802-288-7658 Attn: ICE-HSI-HQ DIV 4 Invoice Each fax shall have a cover sheet identifying point of contact, phone number and number of pages. Note: The Contractor's Dunn and Bradstreet (D&B) DUNS number must be active in the System for Award Management (SAM) at https://www.sam.gov. 2. Content of Invoices: Each invoice submission shall contain the following information: (i) Name and address of the Contractor. The name, address and DUNS number on the invoice MUST match the information in both the Contract/Agreement and the information in the</pre>				
<pre>shall be submitted to: (b)(6)(b)(7)(C) Attn: ICE-HSI-HQ DIV 4 Invoice Each email shall be in a .pdf format; contain only one (1) invoice and the subject line of the email will annotate the invoice number. Alternate method of submission is fax. Invoices shall be to: 802-288-7658 Attn: ICE-HSI-HQ DIV 4 Invoice Each fax shall have a cover sheet identifying point of contact, phone number and number of pages. Note: The Contractor's Dunn and Bradstreet (D&B) DUNS number must be active in the System for Award Management (SAM) at https://www.sam.gov. 2. Content of Invoices: Each invoice submission shall contain the following information: (i) Name and address of the Contractor. The name, address and DUNS number on the invoice MUST match the information in both the Contract/Agreement and the information in the</pre>				
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name, address and DUNS number on the invoice MUST match the information in both the Contract/Agreement and the information in the				
(ii) Dunn and Bradstreet (D&B) DUNS number;(iii) Invoice date and invoice number;(iv) Agreement/Contract number, contract lineitem number and, if applicable, the order number;Continued				

PAGE

4

OF

NAME OF OFFEROR OR CONTRACTOR CELLEBRITE INC

ITEM NO. SUPPLIES/SERVICES QUANTITY UNIT UNIT PRICE AMOUNT (A) (B) (C) (D) (E) (F) (v) Description, quantity, unit of measure, unit price and extended price of the items delivered; (vi) Shipping number and date of shipment, including the bill of lading number and weight of shipment if shipped on Government bill of lading; (vii) Terms of any discount for prompt payment offered; (viii) Remit to Address; (ix) Name, title, and phone number of person to notify in event of defective invoice; (x) Mark invoice as "Interim" (Ongoing performance and additional billing expected) and "Final" (performance complete and no additional billing) and (xi) ICE program office designated on order/contract/agreement. (xii) Electronic Funds Transfer (EFT) banking information in accordance with 52.232-33 Payment by Electronic Funds Transfer - System for Award Management or 52-232-34, Payment by Electronic Funds Transfer - Other than System for Award Management. In accordance with Contract Clause, FAR 52.212-4(g)(1), Contract Terms and Conditions --Commercial Items, or FAR 52.232-25(a)(3), Prompt Payment, as applicable, the information identified above is required with each invoice submission. (b)(6);(b)(7)(C) 3. Payment Inquiries: Questions regarding invoice submission or payment, please contact ICE Financial Operations at 1-877-491 or by e-mail at (b)(6);(b)(7)(C) Invoices without the above information may be returned for resubmission. The total amount of award: (b)(4) The obligation for this award is shown in box 26.

PAGE

		ORDER F	OR SU	PPLIES OR SER	/ICES				PAGE	OF PAGES	
IMPORTANT:	Mark all packages and paper								1	8	
1. DATE OF OR	DER 2. CONTRACT NO. (II GS-07F-355A	f any)						6. SHIP TO:		76U	
07/27/20		A			a. NAME (OF CC	DNSIGNEE				
3. ORDER NO.		4. REQU	JISITION/F	REFERENCE NO.				1971-1972 - FW 11			
HSCETE-1	6-F-00037	1921	16VHQ	4CCC0047	ICE HMLND SEC INV HQ DIV 4						
ICEINFOR IMMIGRAT OFFICE C	FICE (Address correspondence to MATION TECHNOLOG TION AND CUSTOMS F F ACQUISITION MAN REET NW (b)(6),(b)(7)(C)	Y DIVISIO ENFORCEME NAGEMENT			b.STREET ADDRESS IMMIGRATION AND CUSTOMS ENFORCEMENT 11320 RANDOM HILLS ROAD (b)(6);(b)(7)(C)						
	ON DC 20536				c. CITY FAIRFAX d. STATE e. ZIP CODE VA 22030						
7. TO: (b)(6);(b)(7)(C)					f. SHIP VI	A					
a. NAME OF CONTRACTOR MSAB INCORPORATED							8. TYF	PE OF ORDER			
b. COMPANY N	AME				a. PUF	RCHA	SE	Ū	X b. DELIVER	Y	
c. STREET ADD	and the ball of the second state of the weather the second state of the second state of				REFEREN				5- 100 31440		
	FERSON DAVIS HWY				Quote	#(b)(4)		Except for billing reverse, this delive	instructions on the very order is	
SUITE 80	1				-			5	subject to instruc	tions contained on	
						nish th	ne following on the terms		this side only of t issued subject to		
d CITY	d. CITY e. STATE f. ZIP CODE						pecified on both sides of h the attached sheet, if		conditions of the	above-numbered	
ARLINGTO						Sec. Sec	elivery as indicated.		contract.		
9. ACCOUNTIN	G AND APPROPRIATION DATA	1					NING OFFICE D SEC INV HQ	DTV 4			
Jan Strategie - State Schutzer	CLASSIFICATION (Check appro	priate box(es))						ಗಳನ್ನು ಚಿತ್ರ	12. F.O.B. PO	INT	
a. SMALL	b. OTHER THAN SM	ALL C.	DISADVA	NTAGED d. WO	DMEN-OWNED	0	e. HUBZone		Destina	tion	
		I-OWNED SMALL UNDER THE WO		n de la construcción de	EDWOSB						
	13. PLACE OF			14. GOVERNMENT B/L	NO.		15. DELIVER TO F.O.B.	POINT	16. DISCOL	JNT TERMS	
a. INSPECTION	b. ACCEF					ON OR BEFORE (Date) 09/01/2016					
Destinat	lon Desti	nation		17.0011501115.00			A Branger (Net 30	
î				17. SCHEDULE (Se		Rejec	1	1	1	OUNTITY	
ITEM NO.	SUP	PLIES OR SERVI	CES		QUANTITY	UNIT	UNIT	AMOL	JNT	QUANTITY ACCEPTED	
(a)		(b)			(c)	(d)	(e)	(f)		(g)	
	(b)(4)	.501762]						
	Continued										
	18. SHIPPING POINT			19. GROSS SHIPPING	WEIGHT		20. INVOICE NO.			17(h) TOTAL (Cont.	
			2	1. MAIL INVOICE TO:						pages)	
	a. NAME	DHS ICE						(b)(4)			
SEE BILLING INSTRUCTIONS ON REVERSE	b. STREET ADDRESS (or P.O. Box)	b. STREET ADDRESS BURLINGTON FINANCE CENTER								17(i) GRAND TOTAL	
	c. CITY				d. STA	TE	e. ZIP CODE	(b)(4)	-		
	WILLISTON				VT 05495-1620						
22. UNITED	STATES OF				23. NAME (Typed)						
AMERIC	A BY (Signature)	ŝ					(b)(6);(b)(7)(C) TITLE: CONTRACTING	ORDERING OFF	ICER		
AUTHORIZED FO	DR LOCAL REPRODUCTION							an ann a martir a an Araba Araba	OPTIONAL F	ORM 347 (Rev. 2/2012)	
	ION NOT USABLE									GSA/FAR 48 CFR 53.213(f)	

CONTRACT	NO. (if	any) GS-07F-3	55AA			PAGE	2 OF 8			
-			SUPPLEMENTAL IN	VOICING I	NFORMATION					
the following s other invoice v contract numb totals. Prepaid post), the billin	tatement, (s will be submi er (if any), o I shipping co ng must be s	igned and dated) is on tted." However, if the (rder number, item nun sts will be indicated as	(or attached to) the order: Contractor wishes to submit hber(s), description of supples a separate item on the inv ding or receipt. When sever	"Paymen an invoid lies or ser oice. Whe	t is requested in ce, the following i rvice, sizes, quan ere shipping cost	tead of a separate invoice, provid the amount of \$ N nformation must be provided: tities, unit prices, and extended s exceed \$10 (except for parcel in ordering activity during the sam	o			
			RECEIVI	NG REPOR	RT					
and conforms	· · · · · · · · · · · · · · · · · · ·		e face of this order has been rejected for the reas	and the second						
SHIPMENT NUMBER	FINAL		DATE RECEIVED	SIGNA	TURE OF AUTHORIZ	ED U.S. GOV I REP.	DATE			
TOTAL CONTAINI	ERS	GROSS WEIGHT	RECEIVED AT	TITLE						
			REPORT OF I	REJECTIO	NS					
ITEM NO.	SUPPLIES OR SERVICES			UNIT	QUANTITY REJECTED	REASON FOR REJEC	TION			
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OPTIONAL FORM 347 (Rev. 2/2012) (BACK)

PAGE NO

ORDER FOR SUPPLIES OR SERVICES SCHEDULE - CONTINUATION

PAGE 3

	SCHEDULE - CONTINUATION	<u>0</u>				5	
IMPORTANT	: Mark all packages and papers with contract and/or order numbers.						
DATE OF ORD					ORDER		
07/27/20	016 GS-07F-355AA				HSCE	TE-16-F-00037	
ITEM NO.	SUPPLIES/SERVICES	QUANTITY		UNIT		AMOUNT	QUANTITY
(a)	(b)	ORDERED (c)	(d)	PRICE (e)	8	(f)	ACCEPTED (g)
<u></u>	CONDITIONS ARE APPLICABLE. THIS IS A FIRM	1.57	1				(3)
	FIXED PRICE ORDER.						
	Dependencionel considerazione dependenciale dependenciales						
	NAICS: (b)(4)						
	PSC: (b)(4)						
	-						
	THE CONTRACTOR SHALL NOTIFY THE GOVERNMENT						
	30 DAYS PRIOR TO THE EXPIRATION OF ANY						
	SOFTWARE LICENSING/MAINTENANCE AGREEMENT.						
	THE GOVERNMENT WILL NOT BE OBLIGATED TO PAY						
	THE CONTRACTOR ANY AMOUNT IN EXCESS OF THE						
	FIXED-PRICE AMOUNT COVERING THE EFFECTIVE						
	PERIOD OF PERFORMANCE IN THE ORDER, AND THE						
	CONTRACTOR SHALL NOT CONTINUE PERFORMANCE						
	UNLESS AND UNTIL THE CONTRACTING OFFICER						
	NOTIFIES THE CONTRACTOR VERBALLY OR BY						
	WRITTEN MODIFICATION THAT A NEW PERIOD OF						
	PERFORMANCE HAS BEEN ESTABLISHED AND						
	APPROVED.						
	I THIT DATION OF AUTOOD THY						
	LIMITATION OF AUTHORITY						
	No person in the Government, other than a						
	Contracting Officer, has the authority to						
	provide direction to the Contractor, which						
	alters the Contractor's obligations or						
	changes this contract in any way. If any			1			
	person representing the Government, other						
	than a Contracting Officer, attempts to						
	alter contract obligations, change the						
	contract specifications/statement of work						
	or tells the contractor to perform some						
	effort which the Contractor believes to be						/
	outside the scope of this contract, the Contractor shall immediately notify the						
	Procuring Contracting Officer (PCO).						
	Contractor personnel shall not comply with						
	any order or direction which they believe						
	to be outside the scope of this contract						
	unless the order or direction is issued by						
	a Contracting Officer.						
	Continued						

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

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OPTIONAL FORM 348 (Rev. 4/2006)

\$0.00

PAGE NO

4

	: Mark all packages and papers with contract and/or order numbers.						
DATE OF ORE					ORDER NO.		
07/27/20	016 GS-07F-355AA				HSCETE-16-F-00037	() 	
ITEM NO.	SUPPLIES/SERVICES	QUANTITY			AMOUNT	QUANTITY	
(a)	(b)	ORDERED (c)	(d)	PRICE (e)	(f)	ACCEPTED (g)	
	If the Contractor makes any changes without	N72				(3)	
	the authorization of the Contracting						
	Officer, by modifying this order to include						
	increasing devices or services, the					2	
	Contractor is performing at its own risk.						
	A funded G-514 is required before any goods						
	or services are provided by the Contractor						
	and no one is authorized to make any						
	changes to this order that will increase						
	the obligated amount, other than the						
	Contracting Officer. Any Government						
	individual other than Contracting Officer					<i>2</i>	
	who directs the Contractor to change this						
	order by increasing of quantities is						
	committing an unauthorized commitment and						
	shall complete the ratification process to						
	resolve that matter.						
	resorve that matter.						
			1				
	Exempt Action: N						
	Accounting Info:						
	(b)(7)(E)						
	Period of Performance: (b)(4)						
	(b)(4)						
0001	(b)(4);(b)(6);(b)(7)(C)	(b)(4)				
		,					
	SECTION 508 COMPLIANCE						
	29 U.S.C. SECTION 508 OF THE REHABILITATION		1				
	ACT (29 U.S.C. 794D), AS AMENDED BY THE						
	WORKFORCE INVESTMENT ACT OF 1998 (P.L.						
	Continued						
	continued						

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

AUTHORIZED FOR LOCAL REPODUCTION PREVIOUS EDITION NOT USABLE \langle

(b)(4)

PAGE NO

5

IMPORTANT:	Mark all packages and papers with contract and/or order numbers.			(d		00 00			
DATE OF ORDE					ORDER				
07/27/20	16 GS-07F-355AA				HSCET	E-16-F-00037			
ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE		AMOUNT	QUANTITY ACCEPTED		
(a)	(b)	(c)	(d)	(e)		(f)	(g)		
	105-220), AUGUST 7, 1998, REQUIRES THAT								
	WHEN FEDERAL AGENCIES DEVELOP, PROCURE,								
	MAINTAIN, OR USE ELECTRONIC AND INFORMATION								
	TECHNOLOGY (EIT), THEY MUST ENSURE THAT IT								
	IS ACCESSIBLE TO PEOPLE WITH DISABILITIES.								
	FEDERAL EMPLOYEES AND MEMBERS OF THE PUBLIC WHO HAVE DISABILITIES MUST HAVE ACCESS TO						·		
	AND USE OF INFORMATION AND SERVICES THAT IS								
	COMPARABLE TO THE ACCESS AND USE AVAILABLE								
	TO NON-DISABLED FEDERAL EMPLOYEES AND								
	MEMBERS OF THE PUBLIC. ALL EIT WILL COMPLY								
	WITH THE APPLICABLE TECHNICAL AND								
	FUNCTIONAL PERFORMANCE CRITERIA OF SECTION								
	508, UNLESS EXEMPT.								
	FAR 52.223-16 IEEE 1680 STANDARD FOR THE ENVIRONMENTAL ASSESSMENT OF PERSONAL								
	COMPUTER PRODUCTS IS HEREBY INCORPORATED BY								
	REFERENCE.								
	Included by reference IAW FAR 52.222-50,								
	Combating Trafficking in Persons (FEB								
	2009); FAR 52.232-39 Unenforceability of								
	Unauthorized Obligations (JUN 2013)								
	ADVANCE PAYMENTS ARE NOT AUTHORIZED.								
	CONTRACTOR SHALL SUBMIT INVOICE MONTHLY OR								
	QUARTERLY IN ARREARS.								
	INVOICE PAYMENT INSTRUCTIONS								
	Please use these procedures when you submit								
	an invoice for all acquisitions emanating								
	from ICE/OAQ.								
	1. Invoices shall now be submitted via one								
	of the following three methods:								
	a. By mail: See Block 21.								
	b. By facsimile (fax) at: 802-288-7658								
	(include a cover sheet with point of contact & # of pages)								
	concret a " or payes!								
	Continued								

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

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

\$0.00

PAGE NO 6

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

DATE OF ORD	ER	CONTRACT NO.				ORDER NO.	
07/27/20	016	GS-07F-355AA				HSCETE-16-F-00037	
ITEM NO.		SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT	AMOUNT	QUANTITY
(a)		(b)	ORDERED (c)	(d)	PRICE (e)		ACCEPTED (g)
0.00	c.	By e-mail at:			1352.02	1.22.6	
K		(b)(7)(C)					
Ľ							
	Inv	oices submitted by other than these					
	thr	ee methods will be returned. Contractor					
	Tax	payer Identification Number (TIN) must					
	101011	registered in the Central Contractor					
		istration (http://www.ccr.gov) prior to					
		rd and shall be notated on every invoice					
		mitted to ICE/OAQ on or after 01 March					
		8 to ensure prompt payment provisions					
		met. The ICE program office identified the delivery order/contract shall also					
		notated on every invoice. Please send an					
		itional copy of the invoice to					
(1		(b)(7)(C)					
	2.	In accordance with Section I, Contract					
	Cla	uses, FAR 52.212-4 (g)(1), Contract					
		ms and Conditions, Commercial Items, the					
		ormation required with each invoice					
	sub	mission is as follows:					
	An	invoice must include:					
		Name and address of the Contractor;					
	100 C 100 C) Invoice date and number;					
	(ii	i) Contract number, contract line item					
	num	ber and, if applicable, the order					
	10.000.000.0000	ber;					
) Description, quantity, unit of					
		sure, unit price and extended price of					
	Sec. 1.	items delivered;		, I			
	100 B 100 B	Shipping number and date of shipment, luding the bill of lading number and					
	and the second sec	ght of shipment if shipped on Government					
	11 - 12 - 13 - 13 - 13 - 13 - 13 - 13 -	1 of lading;					
) Terms of any discount for prompt					
		ment offered;					
	(vi	i) Name and address of official to whom					
	pay	ment is to be sent;					
	1000	ii) Name, title, and phone number of					
	Contraction and the	son to notify in event of defective					
	- Harrison -	oice; and					
) Taxpayer Identification Number (TIN).					
		Contractor shall include its TIN on the					
		oice only if required elsewhere in this tinued					
	CON	critica					
	TOTAL	CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))	\geq		I	\$0.00	l.

TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17(H)) AUTHORIZED FOR LOCAL REPODUCTION PREVIOUS EDITION NOT USABLE

PAGE NO 7

IMPORTANT: Mark all packages and papers with contract and/or order numbers.							
DATE OF ORDER							
07/27/2016	GS-07F-355AA						

DATE OF ORD					DRDER NO.	
07/27/20	16 GS-07F-355AA			H	HSCETE-16-F-00037	
ITEM NO.	SUPPLIES/SERVICES	QUANTITY		UNIT	AMOUNT	QUANTITY
(a)	(b)	ORDERED (c)	(d)	PRICE (e)	(f)	ACCEPTED (g)
(t	<pre>(b) contract. (See paragraph 1 above.) (x) Electronic funds transfer (EFT) banking information. (A) The Contractor shall include EFT banking information on the invoice only if required elsewhere in this contract. (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 52.232-33, Payment by Electronic Funds Transfer; Central Contractor Registration. (C) EFT banking information is not required if the Government waived the requirement to pay by EFT. DHS / ICE Financial Operations - Burlington Customer Service Inquiry Center @ </pre>	(C)		PRICE (e)		ACCEPTED (g)
	TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))	\geq		1	\$0.00	l
AUTHORIZED FC	INTAL CARRIED FORWARD TO IST PAGE (TEM T/(H)) R LOCAL REPODUCTION ON NOT USABLE				OPTIO	NAL FORM 348 (Rev. 4/2006) ibed by GSA FAR (48 CFR) 53.213(1

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PAGE NO 8

SCHEDULE	- CONTINUATION	
		7

IMPORTANT: Mark all packages and papers with contract and/or order numbers. DATE OF ORDER CONTRACT NO. ORDER NO.									
		CONTRACT NO. GS-07F-355AA				ORDER I	NO. TE-16-F-00037		
ITEM NO.	10	SUPPLIES/SERVICES	QUANTITY	UNIT			AMOUNT	QUANTITY	
			ORDERED		PRICE			ACCEPTED	
	-	(0)	197	(4)	(6)			(9)	
		(b) total amount of award: (b)(4) . The igation for this award is shown in box i).		(d)			(1)		
	TOTAL	CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))	\geq				\$0.00		
	OR LOC	AL REPODUCTION					OPTION	AL FORM 348 (Rev. 4/2006) bed by GSA FAR (48 CFR) 53.213(f	

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		OR	DER FOR SU	PPLIES OR SERV	/ICES				PAGE	OF PAGES	
IMPORTANT:	Mark all p	ackages and papers with o							1	30	
1. DATE OF OR	DER	2. CONTRACT NO. (If any) HSCEMD-13-D-000	0.1					6. SHIP TO:		1.12	
03/02/20		HSCEMD-13-D-000	01		a. NAME C	OF CC	INSIGNEE				
3. ORDER NO. HSCETE-1	L6-J-00	048	4. REQUISITION/ 1921160PR		ICE OF	BILITY					
		oss correspondence to) I TECHNOLOGY DIV	/ISION		b. STREET ADDRESS IMMIGRATION AND CUSTOMS ENFORCEMENT						
IMMIGRAT	TION AN	ID CUSTOMS ENFOR	RCEMENT		500 12	2TH	STREET SW				
		JISITION MANAGEM	1ENT								
		1W (b)(6);(b)(7)(C)									
WASHINGT	CON DC	20536			c. CITY WASHIN	NGT	ON		d. STATE DC	e. ZIP CODE 20024	
The first sector of the sector	(b)(7)(C)				f. SHIP VIA	1					
a. NAME OF CO CELLEBRI							8. TYF	PE OF ORDER			
b. COMPANY N	IAME				a. PUR	CHA	an -		X b. DELIVER	۲	
c. STREET ADD		7			REFEREN	ICE Y	OUR:	5			
7 CAMPUS	DRIVE	2			-				Except for billing reverse, this delive	instructions on the very order is	
								1.5	subject to instruct this side only of the	tions contained on	
							ne following on the terms	4.00	issued subject to	the terms and	
d. CITY			e. STATE	f. ZIP CODE		04903-03	pecified on both sides of the attached sheet, if		conditions of the contract.	above-numbered	
PARSIPPA	NY		NJ	07452	any, includi	ing de	elivery as indicated.				
9. ACCOUNTING		ROPRIATION DATA			10. REQUIS	SITIO	NING OFFICE				
	CLASSIFIC	ATION (Check appropriate bo	x(es))	nano na secono antesta					12. F.O.B. PO	INT	
X a. SMALL		b. OTHER THAN SMALL	c. DISADVA		DMEN-OWNED		e. HUBZone		Destinat	tion	
f. SERVICI	E-DISABLE	안 ^^	D SMALL BUSINES THE WOSB PROG	Contraction of the second s	EDWOSB						
-		13. PLACE OF		14. GOVERNMENT B/L	NO.		15. DELIVER TO F.O.B.	POINT	16. DISCOU	INT TERMS	
a. INSPECTION Destinat		b. ACCEPTANCE Destinati					ON OR BEFORE (Date 30 Days Afte) r Award		Net 30	
				17. SCHEDULE (Se	e reverse for F	Rejec	tions)				
	-			5.1497 2 5 10 H2 10 12 12 12 H2 200 13 13	QUANTITY		UNIT			QUANTITY	
ITEM NO. (a)			DR SERVICES		ORDERED (c)	UNIT (d)	PRICE (e)	AMO (f	2014161	ACCEPTED (g)	
	DUNS N	lumber: 0330955			(0)	10-01	(0)	v.	/	(9)	
		partment of Hom									
		immigration and utilizes contr									
	(b)(4)	00111000 001101									
ļ	Contin	ued									
	CONCIN	lueu									
1	18. SHIPP	ING POINT		19. GROSS SHIPPING	WEIGHT		20. INVOICE NO.			17(h) TOTAL	
							-			(Cont. pages)	
	21. MAIL INVOICE TO:										
	a. NAME	TO	BE IDENTIF	IED ON INDIV	IDUAL			(b)(4)			
SEE BILLING INSTRUCTIONS	b. STREE	TADDRESS DEL	IVERY ORDE	RS							
ON REVERSE	(or P.O. B	lox)								17(i)	
										GRAND TOTAL	
						-	e. ZIP CODE	(b)(4)			
	c. CITY				d. STAT	E	e. ZIF CODE		с. С		
22. UNITED S	STATES OF	1					23. NAME (Typed)				
	ABY (Signa	an an Na					(b)(6);(b)(7)(C)				
							TITLE: CONTRACTING	ORDERING OF	FICER		
AUTHORIZED FC										ORM 347 (Rev. 2/2012) SSA/FAR 48 CFR 53.213(f)	

PAGE NO

2

IMPORTANT	Mark all packages and papers with contract and/or order numbers.							
	ATE OF ORDER CONTRACT NO. ORDER NO. 3/02/2016 HSCEMD-13-D-00001 HSCETE-16-J-00048							
03/02/20	16 HSCEMD-13-D-00001			E	ISCETE-16-J-00048			
ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT	AMOUNT	QUANTITY		
(a)	(b)	ORDERED (c)	(d)	PRICE (e)	(f)	ACCEPTED (g)		
0.50	Universal Forensic Extraction Devices	100,000,0		1040646	2 D. D. C.			
	(UFEDs) for ICE agents.							
	This is a Fixed-Priced Delivery order.							
	Delivery shall be made within 30 days after							
	receipt of order. All ICE HSCEMD-13-D-00001							
	terms and conditions apply.							
	Exempt Action: N							
	Accounting Info:							
	(b)(7)(E)							
	Period of Performance: (b)(4)							
	(b)(4)							
	(0)(4)							
0001	SHIP TO:	(b)	(4)					
	5150 EISENHOWER AVENUE		ΓT					
	ALEXANDRIA, VA 222304							
	ATTN: (b)(6);(b)(7)(C)							
	202-421-(b)(6);(b)(7)(C)							
	(b)(4)							
0000	(b)(4)	(6))						
0002	(0)(+)	(b)((4) I I					
			i 1					
	*Advanced Payments are not authorized;							
	INVOICING AND PAYMENT PROCEDURE:							
	Contractors, please use these procedures							
	when you submit an invoice for all							
	acquisitions emanating from ICE/OAQ. This							
	procedure takes effect 03/01/08 and							
	pertains to all invoices submitted on that							
	date and thereafter.							
	1. In accordance with Section G, Contract							
	Administration Data, invoices shall now be							
	submitted via one of the following three							
	methods:							
	a. By mail: (See Block 21)							
	b. By facsimile (fax) at: 802-288-7658							
	Continued							
-	I TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))	\geq	1 1		(b)(4)			

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

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PAGE NO

3

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

7E OF OR	DER CONTRACT NO. 016 HSCEMD-13-D-00001			1.	r no . ETE-16-J-00048	
EM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT	AMOUNT	QUANTIT
(a)	(b)	ORDERED (c)	(d)	PRICE (e)	(f)	ACCEPTE (g)
(4)	(include a cover sheet with point of	(6)	(4)	(6)		(9)
	contact & # of pages)					
	c. By e-mail at:					
	(b)(6);(b)(7)(C)					
	2. Invoices submitted by other than these					
	three methods will be returned. Contractor					
	Taxpayer Identification Number (TIN) must					
	be registered in the Central Contractor					
	Registration (http://www.ccr.gov) prior to					
	award and shall be notated on every invoice					
	submitted to ICE/OAQ on or after 03/01/08					
	to ensure prompt payment provisions are					
	met. The ICE program office identified in					
	the delivery order/contract shall also be					
	notated on every invoice. Please send an					
	additional copy of the invoice to					
	(b)(6);(b)(7)(C)					
	3. In accordance with Section I, Contract					
	Clauses, FAR 52.212-4 (g)(1), Contract					
	Terms and Conditions, Commercial Items, or					
	FAR 52.232-25 (a)(3), Prompt Payment, as					
	applicable, the information required with					
	each invoice submission is as follows:					
	An invoice must include:					
	(i) Name and address of the Contractor;					
	(ii) Invoice date and number;					
	(iii) Contract number, contract line item					
	number and, if applicable, the order					
	number;					
	(iv) Description, quantity, unit of		11			
	measure, unit price and extended price of					
	the items delivered;					
	(v) Shipping number and date of shipment,					
	including the bill of lading number and					
	weight of shipment if shipped on Government					
	bill of lading;					
	(vi) Terms of any discount for prompt					
	payment offered;					
	(vii) Name and address of official to whom					
	payment is to be sent;					
	(viii) Name, title, and phone number of					
	person to notify in event of defective					
	invoice; and					
	(ix) Taxpayer Identification Number (TIN).					
	The Contractor shall include its TIN on the					
	invoice only if required elsewhere in this					
	Continued					

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PAGE NO

ORDER FOR SUPPLIES OR SERVICES SCHEDULE - CONTINUATION

4

ATE OF ORD						
	Mark all packages and papers with contract and/or order numbers.				08	
				1000	RDER NO.	
3/02/20	16 HSCEMD-13-D-00001			H:	SCETE-16-J-00048	
ITEM NO.	SUPPLIES/SERVICES	QUANTITY		UNIT	AMOUNT	QUANTITY
(a)	(b)	ORDERED (c)	(d)	PRICE (e)	(f)	ACCEPTED (g)
(u)	contract. (See paragraph 1 above.)	(0)		(6)		(9)
	(x) Electronic funds transfer (EFT) banking					
	information.					
	(A) The Contractor shall include EFT					
	banking information on the invoice only if					
	required elsewhere in this contract.		· .			
	(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		1			
	Contractor Registration, or 52.232-34,					
	Payment by Electronic Funds Transfer; Other					
	Than Central Contractor Registration), or					
	applicable agency procedures.					
	(C) EFT banking information is not required					
	if the Government waived the requirement to					
	pay by EFT.					
	4. INVOICES WITHOUT THE ABOVE INFORMATION					
	AND/OR NOT SUBMITTED BY ONE OF THE APPROVED					
	METHODS (MAIL, FAX, OR EMAIL) MAY BE					
	RETURNED FOR RESUBMISSION.					
	5. EACH PROGRAM OFFICE IS RESPONSIBLE FOR					
	RECEIPT AND ACCEPTANCE OF GOODS AND/OR					
	SERVICES. UPON RECEIPT AND ACCEPTANCE OF					
	GOODS/SERVICES, COMPLETE THE APPLICABLE					
	FFMS REPORTS OR DFC WILL NOT PROCESS THE					
	INVOICE FOR PAYMENT.					
	6. ADVANCE PAYMENTS ARE NOT AUTHORIZED.					
	CONTRACTOR SHALL SUBMIT AN INVOICE MONTHLY		i - 1			
	OR QUARTERLY IN ARREARS.					
	7. FOR INQUIRING PAYMENT STATUS, VENDORS			(b)(6);(b)(7)(C)		
	CAN CALL DFC CUSTOMER SERVICE AT			22		
	214-915 - OR FAX AT 214-915-6262 BETWEEN					
	7:30 A.M. AND 4:30 P.M., MONDAY THRU FRIDAY					
	CST. EMAIL ADDRESS IS					
(b)(6);(b)(7)(C)					
63-	Signature below constitutes acceptance of					
	the above ICE Terms and Conditions;					
	The Contractor is requested to acknowledge					
	acceptance of this delivery order by					
	· · · · · · · · · · · · · · · · · · ·		1 I	1		
	signing in the space below and returning a					
	signing in the space below and returning a Continued					

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

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PAGE NO

5

pers with contract	and/or order	numbers.	

	: Mark all packages and papers with contract and/or order numbers.					i.
DATE OF ORD					ORDER NO.	
03/02/20	HSCEMD-13-D-00001			1	HSCETE-16-J-00048	
ITEM NO.	SUPPLIES/SERVICES	QUANTITY		UNIT	AMOUNT	QUANTITY
		ORDERED	1000	PRICE		ACCEPTED
(a)	(b)	(c)	(d)	(e)	(f)	(g)
	copy of this page with signature to the					
	Contract Specialist via email. The					
	Contractor should not accept any					
	instruction that results in a change to the					
	supplies/services ordered herein from any					
	Entity.					
	FOR QUESTIONS OR CONCERNS PLEASE CONTACT					
	THE FOLLOWING:					
	CONTRACT SPECIALIST:					
	(b)(6);(b)(7)(C)					
	DHS/ICE/OAQ/ITD					
	Phone: 202-732-(b)(6);(b)(7)(C)					
	Email: (b)(6);(b)(7)(C)					
	PROGRAM OFFICE COR/POC:					
	(b)(6),(b)(7)(C)					
	DHS/ICE/OPR					
	Desk: 202-421-(b)(6);(b)(7)(C)					
	Email: (b)(6);(b)(7)(C)					
	CONTRACTOR:					
	Cellebrite					
	(201) 848-(b)(6);(b)(7)(C)					
	(b)(6);(b)(7)(C)					
	The total amount of award: (b)(4) . The					
	obligation for this award is shown in box					
	17(i).					
	2004 #45.08 US					
			1 1			
	TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))	\geq			\$0.00	
AUTHORIZED FO	OR LOCAL REPODUCTION				OPTIC	NAL FORM 348 (Rev. 4/2006)

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		OR	DER FOR SU	PPLIES OR SER	VICES			PAGE	OF PAGES		
IMPORTANT:	Mark all	packages and papers with o						1	4		
1. DATE OF OR	DER	2. CONTRACT NO. (If any)					6. SHIP TO:		RU.		
03/03/20	16	117 ×3536*			a. NAME OF CONSIGNEE						
3. ORDER NO.			4. REQUISITION/	REFERENCE NO.							
HSCETE-1	6-P-0	0006	1921160PR		DHS-ICE-OPR						
		ess correspondence to) on Technology Di	Luision	readine courter a prot	b.STREET ADDRESS ISU-TECH OPS GROUP 5150 EISENHOWER AVENUE						
Immigration and Customs Enforcement			5150 EIS	ENHOWER AVENU	JΕ						
		uisition Managen	nent								
Washingt		NW, (b)(6);(b)(7)(C)			c. CITY d. STATE e. ZIP CODE						
Wabhinge	.on be	20000			ALEXANDE	AIA		VA	22304		
7. TO: (b)(6);(b	b)(7)(C)				f. SHIP VIA						
a. NAME OF CO MSAB INC						8. TY	PE OF ORDER				
b. COMPANY N	AME				X a. PURCHA	ASE	-	b. DELIVERY	·		
c. STREET ADD					REFERENCE		100				
5300 SHA	WNEE	ROAD SUITE 100						xcept for billing verse, this deliv	instructions on the erv order is		
							su	ubject to instruct	ions contained on		
					Please furnish t	he following on the terms			his form and is the terms and		
d. CITY			e. STATE	f. ZIP CODE		specified on both sides of on the attached sheet, if		conditions of the above-numb contract.			
ALEXANDR	IA		VA	223122311	any, including d	lelivery as indicated.		Jillact.			
9. ACCOUNTING	G AND APP	PROPRIATION DATA			10. REQUISITIO			a 2			
See Sche	101 - 101 - 101 - 101 - 101 - 101 - 101 - 101 - 101 - 101 - 101 - 101 - 101 - 101 - 101 - 101 - 101 - 101 - 101	CATION (Check appropriate bo	ov(oc))		ICE Ofc	of Professnl	Responsib	12. F.O.B. PO	NT		
a. SMALL		b. OTHER THAN SMALL	c. DISADVA	NTAGED d. W	OMEN-OWNED	e. HUBZone					
f. SERVICI	E-DISABLE	ED g. WOMEN-OWNE	D SMALL BUSINES	s (WOSB)	EDWOSB			Destinat	LION		
VETER	AN-OWNE		THE WOSB PROG	RAM		-					
		13. PLACE OF		14. GOVERNMENT B/L	NO.	15. DELIVER TO F.O.B. ON OR BEFORE (Dat	e)	16. DISCOU	NT TERMS		
a. INSPECTION Destinat		b. ACCEPTANCE Destinati				30 Days Afte	er Award		Net 30		
		Deserved		17. SCHEDULE (S	ee reverse for Reje	ctions)			1.00 00		
1					QUANTITY		1		QUANTITY		
ITEM NO.			OR SERVICES		ORDERED UNI (c) (d)		AMOU	NT	ACCEPTED		
(a)	DUNS I	Number: 8313017	ь) 762		(c) (d)	(e)	(f)		(g)		
	DO/DP2	AS Rating: N Exe		n: N							
	Accour (b)(7)(E)	nting Info:									
1	(D)(7)(E)										
	Conti	nued									
	18. SHIP	PING POINT		19. GROSS SHIPPING	WEIGHT	20. INVOICE NO.	<u> </u>	1	17(h)		
									TOTAL (Cont.		
				1. MAIL INVOICE TO:					pages)		
		5	10	T. MAIL INVOICE TO.			(b)(4)				
	a. NAME		-ICE-OPR								
SEE BILLING INSTRUCTIONS	b. STRE	ET ADDRESS ISU	-TECH OPS	GROUP							
ON REVERSE	(or P.O. 1	Box) 515	0 EISENHOW	ER AVENUE					17(i)		
									GRAND		
						710.0005	(b)(4)	1			
	c. CITY	EXANDRIA			d. STATE VA	e. ZIP CODE 22304		0			
22. UNITED	1. 				V T1	23. NAME (Typed)					
	ABY (Sigr					(b)(6);(b)(7)(C)					
						TITLE: CONTRACTING	ORDERING OFFI	CER			
AUTHORIZED FC									ORM 347 (Rev. 2/2012) SA/FAR 48 CFR 53.213(I)		
PREVIOUS EDITI	01100108							r reachoed by c	AN TO GET 03.210[1]		