

ORDER FOR SUPPLIES OR SERVICES

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

1. DATE OF ORDER September 23, 2016		2. CONTRACT NO. (If any) GS23F0217K		6. SHIP TO:	
3. ORDER NO. TIRNO-16-K-00395		4. REQUISITION/REFERENCE NO. S-6-S7-10-CO-A05 000		a. NAME OF CONSIGNEE 2567 Internal Revenue Service	
5. ISSUING OFFICE (Address correspondence to) Internal Revenue Service 6009 Oxon Hill Road, Suite 500 Oxon Hill, MD 20745				b. STREET ADDRESS 1111 Constitution Avenue NW	
				c. CITY Washington	d. STATE DC
				e. ZIP CODE 20224	
7. TO:				f. SHIP VIA	
a. NAME OF CONTRACTOR (b)(6)				8. TYPE OF ORDER	
b. COMPANY NAME 00533270 PIONEER CREDIT RECOVERY, INC.				<input type="checkbox"/> a. PURCHASE REFERENCE YOUR: _____ Please furnish the following on the terms and conditions specified on both sides of this order and on the attached sheet, if any, including delivery as indicated.	
c. STREET ADDRESS 26 EDWARD ST				<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 ARCADE		e. STATE NY	f. ZIP CODE 14009		
9. ACCOUNTING AND APPROPRIATION DATA 17170913D S710000 7A 2512				10. REQUISITIONING OFFICE Small Business/Self -Employed SBSE:C:CBR:PDCO	
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 <input type="checkbox"/> e.HUBZone <input type="checkbox"/> f.SERVICE-DISABLED VETERAN -OWNED <input type="checkbox"/> g.WOMEN-OWNED SMALL BUSINESS(WOSB) ELIGIBLE UNDER THE WOSB PROGRAM <input type="checkbox"/> h.EDWOSB					
12. F.O.B. POINT Destination					
13. PLACE OF		14. GOVERNMENT B/L NO.		15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date) 09/30/2021	
a. INSPECTION	b. ACCEPTANCE			16. DISCOUNT TERMS Terms: 0% Days: 0	

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)
SECTION I: PRICE SCHEDULE - COMMISSION FEES						
BASE PERIOD: September 23, 2016 - September 22, 2017						
0001	Category 1: Individual accounts with balance due \$10,000 or less - Contractor to be reimbursed at the rate of (b)(6) of collections recovered for accounts valued at \$10,000 or less.	1.00	LO	0.00	0.00	
0002	Category 2: Individual accounts with balance due of \$10,001 to \$50,000 - Contractor to be reimbursed at the rate of (b)(6) of collections recovered for accounts valued at \$10,001 to \$50,000.	1.00	LO	0.00	0.00	
SEE BILLING INSTRUCTIONS ON REVERSE	18. SHIPPING POINT		19. GROSS SHIPPING WEIGHT		20. INVOICE NO.	
	21. MAIL INVOICE TO:					17(h) TOT. ◀ (Cont. pages)
	a. NAME 12108 IRS Beckley Finance Center					
	b. STREET ADDRESS (or P.O. Box) P.O. Box 9002					17(i) GRAND TOTAL
	c. CITY Beckley		d. STATE WV	e. ZIP CODE 25802		

22. UNITED STATES OF AMERICA BY (Signature) (b)(6)

23. NAME (Typed)

Cynthia K. Lynn

TITLE: CONTRACTING/ORDERING OFFICER

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OPTIONAL FORM 347 (REV.2/2012)

Prescribed by GSA/FAR 48 CFR 53.213(f)

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

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DATE OF ORDER September 23, 2016		CONTRACT NO. GS23F0217K		ORDER NO. TIRNO-16-K-00395		
ITEM NO. (A)	SUPPLIES OR SERVICES (B)	QUANTITY ORDERED (C)	UNIT (D)	UNIT PRICE (E) US\$	AMOUNT (F) US\$	QUANTITY ACCEPTED (G)
	(Continued)					
0003	Category 3: Individual accounts with balance due of \$50,001 or more - Contractor to be reimbursed at the rate of [REDACTED] of collections recovered for accounts valued at \$50,001 or more. (b)(4)	1.00	LO	0.00	0.00	
0004	Category 4: Additional Account Types - Contractor to be reimbursed at the rate of [REDACTED] of collections recovered for additional account types.* (b)(4) OPTION PERIOD 1: September 23, 2017 - September 22, 2018	1.00	LO	0.00	0.00	
1001	Category 1: Individual accounts with balance due \$10,000 or less - Contractor to be reimbursed at the rate of [REDACTED] of collections recovered for accounts valued at \$10,000 or less. (b)(4)	1.00	LO	0.00	0.00	
1002	Category 2: Individual accounts with balance due of \$10,001 to \$50,000 - Contractor to be reimbursed at the rate of [REDACTED] of collections recovered for accounts valued at \$10,001 to \$50,000. (b)(4)	1.00	LO	0.00	0.00	
1003	Category 3: Individual accounts with balance due of \$50,001 or more - Contractor to be reimbursed at the rate of [REDACTED] of collections recovered for accounts valued at \$50,001 or more. (b)(4)	1.00	LO	0.00	0.00	
1004	Category 4: Additional Account Types - Contractor to be reimbursed at the rate of [REDACTED] of collections recovered for additional account types. (b)(4) OPTION PERIOD 2: September 23, 2018 - September 22, 2019	1.00	LO	0.00	0.00	
2001	Category 1: Individual accounts with balance due \$10,000 or less - Contractor to be reimbursed at the rate of [REDACTED] of collections recovered for accounts valued at \$10,000 or less. (b)(4)	1.00	LO	0.00	0.00	
2002	Category 2: Individual accounts with balance due of \$10,001 to \$50,000 - Contractor to be reimbursed at the rate of [REDACTED] of collections recovered for accounts valued at \$10,001 to \$50,000. (b)(4)	1.00	LO	0.00	0.00	
2003	Category 3: Individual accounts with balance due of \$50,001 or more - Contractor to be reimbursed at the rate of [REDACTED] of collections recovered for accounts valued at (b)(4)	1.00	LO	0.00	0.00	
TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))					0.00	

NSN 7540-01-152-8082

50348-101

OPTIONAL FORM 348 (10-83)

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

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

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DATE OF ORDER September 23, 2016		CONTRACT NO. GS23F0217K		ORDER NO. TIRNO-16-K-00395		
ITEM NO. (A)	SUPPLIES OR SERVICES (B)	QUANTITY ORDERED (C)	UNIT (D)	UNIT PRICE (E) US\$	AMOUNT (F) US\$	QUANTITY ACCEPTED (G)
	(Continued) \$50,001 or more.					
2004	Category 4: Additional Account Types - Contractor to be reimbursed at the rate of [REDACTED] of collections recovered for additional account types. (b)(4) OPTION PERIOD 3: September 23, 2019 - September 22, 2020	1.00	LO	0.00	0.00	
3001	Category 1: Individual accounts with balance due \$10,000 or less - Contractor to be reimbursed at the rate of [REDACTED] of collections recovered for accounts valued at \$10,000 or less. (b)(4)	1.00	LO	0.00	0.00	
3002	Category 2: Individual accounts with balance due of \$10,001 to \$50,000 - Contractor to be reimbursed at the rate of [REDACTED] of collections recovered for accounts valued at \$10,001 to \$50,000. (b)(4)	1.00	LO	0.00	0.00	
3003	Category 3: Individual accounts with balance due of \$50,001 or more - Contractor to be reimbursed at the rate of [REDACTED] of collections recovered for accounts valued at \$50,001 or more. (b)(4)	1.00	LO	0.00	0.00	
3004	Category 4: Additional Account Types - Contractor to be reimbursed at the rate of [REDACTED] of collections recovered for additional account types. (b)(4) OPTION PERIOD 4: September 23, 2020 - September 22, 2021	1.00	LO	0.00	0.00	
4001	Category 1: Individual accounts with balance due \$10,000 or less - Contractor to be reimbursed at the rate of [REDACTED] of collections recovered for accounts valued at \$10,000 or less. (b)(4)	1.00	LO	0.00	0.00	
4002	Category 2: Individual accounts with balance due of \$10,001 to \$50,000 - Contractor to be reimbursed at the rate of [REDACTED] of collections recovered for accounts valued at \$10,001 to \$50,000. (b)(4)	1.00	LO	0.00	0.00	
4003	Category 3: Individual accounts with balance due of \$50,001 or more - Contractor to be reimbursed at the rate of [REDACTED] of collections recovered for accounts valued at \$50,001 or more. (b)(4)	1.00	LO	0.00	0.00	
4004	Category 4: Additional Account Types - Contractor to be reimbursed at the rate of [REDACTED] of collections recovered for additional account types. (b)(4)	1.00	LO	0.00	0.00	
TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))					0.00	

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DATE OF ORDER September 23, 2016		CONTRACT NO. GS23F0217K		ORDER NO. TIRNO-16-K-00395		
ITEM NO. (A)	SUPPLIES OR SERVICES (B)	QUANTITY ORDERED (C)	UNIT (D)	UNIT PRICE (E) US\$	AMOUNT (F) US\$	QUANTITY ACCEPTED (G)
	(Continued) [redacted] of collections recovered for additional account types. (b)(4)					
TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))					0.00	