OAS-24 (02/04)	1		
	CONTRACT INSTRUCTION		TION
DEPARTMENT OF THE INTERIOR	1		
AVIATION MANAGEMENT (AM)	CONTRACT NO.		ITEM
300 E. MALLARD DRIVE, SUITE 200 BOISE, IDAHO 83706-3991	DESIGNATED BASE		
FAX 208-433-5030	BUREAU		
QUESTIONS 208-433-5026	DATE		
2 CONTRACTOR NAME AND ADDRESS	3 BUREAU	J NAME AND ADDRESS (Complete if cert	ifying availability of funding)
	FUNDS ADE	AVAILABLE FOR THIS USE. CHECK DOV.	
TELEPHONE NO.		IDS ARE AVAILABLE FOR THIS USE - CHECK BOX  LEPHONE NO.	
		SIGNATURE OF	
FACSIMILE NO.		AUTHORIZED PERSON	
Other Special Notices or Instructions			
5. If there are any matters you wish to discuss please contact me at telephone number:	Typed Name and Signature of Authorized Government Representative  Date		
Fax. No.	Title		
	6. CONTRACTOR'S	ACKNOWLEDGEMENT	
Name (Type or Print)		Signature	
Title		Date	
Contractor should FAX a	copy of the signed not	lice to AM, unless otherwise instructed	by the COR.