

ORDER FOR SUPPLIES OR SERVICES

1. Contract/Purch Order/Agreement No. DAAE20-01-P-0149	2. Delivery Order/Call No.	3. Date Of Order/Call (YYYYMMDD) 20010430	4. Requisition/Purch Request No. SEE SCHEDULE
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5. Priority
DOA5

6. Issued By TACOM-ROCK ISLAND AMSTA-LC-CSC-A SUE MCGREGOR (309)782-3127 ROCK ISLAND IL 61299-7630 EMAIL: MCGREGORS@RIA.ARMY.MIL	Code	W52H09	7. Administered By (If other than 6) DCMC BOSTON 495 SUMMER STREET BOSTON MA 02210-2138 SCD B PAS NONE ADP PT SC1012	Code	S2206A
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8. Delivery FOB

Destination
 Other

(See Schedule if other)

9. Contractor Name and Address CAM ENGINEERING INC 26 WELLMAN ST UNIT #3 LOWELL MA 01851-5110 TYPE BUSINESS: Other Small Business Performing in U.S.	Code	OWG03	Facility	10. Deliver To FOB Point By (Date) (YYYYMMDD) SEE SCHEDULE	11. X If Business Is <input checked="" type="checkbox"/> Small <input type="checkbox"/> Small Disadvantaged <input type="checkbox"/> Woman-Owned
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12. Discount Terms

13. Mail Invoices To the Address in Block See Block 15

14. Ship To SEE SCHEDULE	Code		15. Payment Will Be Made By DFAS-COLUMBUS CENTER DFAS-CO-JNB/BUNKER HILL P O BOX 182077 COLUMBUS OH 43218-2077	Code	SC1016
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Mark all Packages and Papers with Identification Numbers in Blocks 1 and 2

16. Type of Order

Delivery/Call This delivery order is issued on another Government agency or in accordance with and subject to terms and conditions of above numbered contract.

Purchase Reference your Oral; Written Quotation DAAE2001T0015, Dated _____, furnish the following on terms specified herein.
Acceptance. The Contractor Hereby Accepts The Offer Represented By The Numbered Purchase Order As It May Previously Have Been Or Is Now Modified, Subject To All Of The Terms And Conditions Set Forth, And Agrees To Perform The Same.

Name Of Contractor	Signature	Typed Name And Title	Date Signed (YYYYMMDD)
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If this box is marked, supplier must sign Acceptance and return the following number of copies:

17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE SEE SCHEDULE					
18. Item No.	19. Schedule Of Supplies/Service SEE SCHEDULE CONTRACT TYPE: Firm-Fixed-Price	20. Quantity Ordered/ Accepted*	21. Unit	22. Unit Price	23. Amount
	KIND OF CONTRACT: Supply Contracts and Priced Orders				

* If quantity accepted by the Government is same as quantity ordered, indicate by X. If different, enter actual quantity accepted below quantity ordered and encircle.	24. United States Of America By: <i>Kristan A. Mendoza</i> KRISTAN A MENDOZA MENDOZAK@RIA.ARMY.MIL (309)782-0243 Contracting/Ordering Officer	25. Total	\$16,881.48	29. Differences	
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26. Quantity In Column 20 Has Been <input type="checkbox"/> Inspected <input type="checkbox"/> Received <input type="checkbox"/> Accepted And Conforms To Contract Except As Noted Date _____ Signature Of Authorized Govt Representative _____	27. Ship. No. <input type="checkbox"/> Partial <input type="checkbox"/> Final	28. D.O. Voucher No.	30. Initials	32. Paid By	33. Amount Verified Correct For
36. I certify this account is correct and proper for payment Date _____ Signature And Title Of Certifying Officer _____	31. Payment <input type="checkbox"/> Complete <input type="checkbox"/> Partial <input type="checkbox"/> Final				34. Check Number
					35. Bill Of Lading No.

37. Received At	38. Received By	39. Date Received	40. Total Containers	41. S/R Account Number	42. S/R Voucher No.
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