

**ORDER FOR SUPPLIES OR SERVICES**

<b>1. CONTRACT PURCH ORDER/AGREEMENT NO.</b> DAAE20-00-D-0046				<b>2. DELIVERY ORDER/CALL NO.</b> 0054		<b>3. DATE OF ORDER/CALL (YYYYMMDD)</b> 2004JUN30		<b>4. REQUISITION/PURCH REQUEST NO.</b> SEE SCHEDULE		<b>5. PRIORITY</b> DOA5	
<b>6. ISSUED BY</b> TACOM-ROCK ISLAND AMSTA-LC-CSC-C MARY ROBBINS (309)782-3818 ROCK ISLAND IL 61299-7630 EMAIL: ROBBINSM@RIA.ARMY.MIL				<b>CODE</b> W52H09		<b>7. ADMINISTERED BY (if other than 6)</b> DCMA ATLANTA 2300 LAKE PARK DRIVE SUITE 300 SMYRNA GA 30080				<b>CODE</b> S1103A	
<b>9. CONTRACTOR</b> F N MANUFACTURING, INC. 797 CLEMSON RD COLUMBIA, SC. 29229-4340  NAME AND ADDRESS  TYPE BUSINESS: Large Business Performing in U.S.				<b>CODE</b> 3S679		<b>FACILITY</b>		<b>10. DELIVER TO FOB POINT BY (Date) (YYYYMMDD)</b> SEE SCHEDULE		<b>8. DELIVERY FOB</b> <input type="checkbox"/> DESTINATION <input checked="" type="checkbox"/> OTHER (See Schedule if other)	
<b>14. SHIP TO</b> SEE SCHEDULE				<b>CODE</b>		<b>15. PAYMENT WILL BE MADE BY</b> DFAS COLUMBUS CENTER DFAS-CO/SOUTH ENTITLEMENT OPERATION P O BOX 182264 COLUMBUS OH 43218-2264				<b>CODE</b> HQ0338	
<b>11. X IF BUSINESS IS</b> <input type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISADVANTAGED <input type="checkbox"/> WOMAN-OWNED				<b>12. DISCOUNT TERMS</b>		<b>13. MAIL INVOICES TO THE ADDRESS IN BLOCK</b> See Block 15					
<b>16. TYPE OF ORDER</b> DELIVERY/ CALL <input checked="" type="checkbox"/> PURCHASE <input type="checkbox"/> THIS DELIVERY ORDER IS ISSUED ON ANOTHER GOVERNMENT AGENCY OR IN ACCORDANCE WITH AND SUBJECT TO TERMS AND CONDITIONS OF ABOVE NUMBERED CONTRACT. Reference your <input type="checkbox"/> Oral <input type="checkbox"/> Written Quotation _____, 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)		
<input checked="" type="checkbox"/> If this box is marked, supplier must sign Acceptance and return the following number of copies:											
<b>17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE</b> SEE SCHEDULE											
<b>18. ITEM NO.</b>		<b>19. SCHEDULE OF SUPPLIES/SERVICE</b>				<b>20. QUANTITY ORDERED/ACCEPTED*</b>		<b>21. UNIT</b>	<b>22. UNIT PRICE</b>		<b>23. AMOUNT</b>
		SEE SCHEDULE CONTRACT TYPE: Firm-Fixed-Price  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.					<b>24. UNITED STATES OF AMERICA</b> TERESA L STOTTLEMYRE /SIGNED/ STOTTLEMYRET@RIA.ARMY.MIL (309)782-4626 BY: _____ CONTRACTING/ORDERING OFFICER					<b>25. TOTAL</b>	\$3,672.16
<b>27a. QUANTITY IN COLUMN 20 HAS BEEN</b> <input type="checkbox"/> INSPECTED <input type="checkbox"/> RECEIVED <input type="checkbox"/> ACCEPTED, AND CONFORMS TO CONTRACT EXCEPT AS NOTED _____											
<b>b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE</b>						<b>c. DATE (YYYYMMDD)</b>		<b>d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE</b>			
<b>e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE</b>						<b>28. SHIP. NO.</b>		<b>29. D.O. VOUCHER NO.</b>		<b>30. INITIALS</b>	
<b>f. TELEPHONE NUMBER</b>			<b>g. E-MAIL ADDRESS</b>			<input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		<b>32. PAID BY</b>		<b>33. AMOUNT VERIFIED CORRECT FOR</b>	
<b>36. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT.</b>						<b>31. PAYMENT</b> <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		<b>34. CHECK NUMBER</b>		<b>35. BILL OF LADING NO.</b>	
<b>a. DATE (YYYYMMDD)</b>		<b>b. SIGNATURE AND TITLE OF CERTIFYING OFFICER</b>				<b>37. RECEIVED AT</b>		<b>38. RECEIVED BY (Print)</b>		<b>39. DATE RECEIVED (YYYYMMDD)</b>	<b>40. TOTAL CONTAINERS</b>
											<b>41. S/R ACCOUNT NUMBER</b>
											<b>42. S/R VOUCHER NO.</b>

**CONTINUATION SHEET****Reference No. of Document Being Continued****Page 2 of 5****PIIN/SIIN** DAAE20-00-D-0046/0054**MOD/AMD****Name of Offeror or Contractor:** F N MANUFACTURING, INC.

## SUPPLEMENTAL INFORMATION

1. DELIVERY ORDER 0054 HEREBY AWARDS CLIN 0001AA FOR 8 EACH M16A4 RIFLES WITH THE CARRYING HANDLE ASSY AT A UNIT PRICE OF \$459.02 FOR A TOTAL OF \$3,672.16. THE UNIT PRICE OF \$461.00 IS DECREASED BY \$3.56 TO \$457.44 AS A RESULT OF VECF L1S9043 AND AN ADDITIONAL \$1.58 IS ADDED FOR HPT AMMUNITION FOR A REVISED UNIT COST OF \$459.02.
2. THIS DELIVERY ORDER IS AGAINST PRICING PERIOD 5.
3. THE DELIVERY SCHEDULE IS SET FORTH IN SECTION B OF THIS DOCUMENT. THE RIFLE AND THE CARRYING HANDLE ASSY SHALL BE PACKAGED TOGETHER.
4. THIS DELIVERY ORDER IS SUBJECT TO THE TERMS AND CONDITIONS CONTAINED IN THE BASIC INDEFINITE DELIVERY INDEFINITE QUANTITY (IDIQ) CONTRACT, DAAE20-00-D-0046.
5. ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED.

\*\*\* END OF NARRATIVE A 001 \*\*\*

CONTINUATION SHEET

Reference No. of Document Being Continued  
 PIIN/SIIN DAAE20-00-D-0046/0054 MOD/AMD

Name of Offeror or Contractor: F N MANUFACTURING, INC.

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT																																				
0001	SUPPLIES OR SERVICES AND PRICES/COSTS  NSN: 1005-01-383-2872 FSCM: 19200 PART NR: 12973001 SECURITY CLASS: Unclassified																																								
0001AA	<p><u>PRODUCTION QUANTITY</u></p> <p>8</p> <p>NOUN: M16A4 RIFLES                      PRON: T14A0B18M1 PRON AMD: 02 ACRN: AA                      CUSTOMER ORDER NO: M954500442084</p> <p><u>Packaging and Marking</u></p> <p><u>Inspection and Acceptance</u>                      INSPECTION: Origin ACCEPTANCE: Origin</p> <p><u>Deliveries or Performance</u></p> <p>DOC SUPPL</p> <table border="0"> <tr> <td><u>REL CD</u></td> <td><u>MILSTRIP</u></td> <td><u>ADDR</u></td> <td><u>SIG CD</u></td> <td><u>MARK FOR</u></td> <td><u>TP CD</u></td> </tr> <tr> <td>001</td> <td>M6785441332084C</td> <td>MMSA01</td> <td>J</td> <td></td> <td>3</td> </tr> </table> <table border="0"> <tr> <td><u>DEL REL CD</u></td> <td><u>QUANTITY</u></td> <td><u>DEL DATE</u></td> </tr> <tr> <td>001</td> <td>4</td> <td>30-OCT-2005</td> </tr> </table> <p>FOB POINT: Origin</p> <p>SHIP TO: <u>PARCEL POST ADDRESS</u>                      (MMSA01) COMMANDER                      ATTN DEFENSE LOGISTICS AGENCY DDAG                      814 RADFORD BLVD STE 20326                      ALBANY GA 31704-0326</p> <p><u>CONTRACT/DELIVERY ORDER NUMBER</u>                      DAAE20-00-D-0046/0054</p> <p>DOC SUPPL</p> <table border="0"> <tr> <td><u>REL CD</u></td> <td><u>MILSTRIP</u></td> <td><u>ADDR</u></td> <td><u>SIG CD</u></td> <td><u>MARK FOR</u></td> <td><u>TP CD</u></td> </tr> <tr> <td>002</td> <td>M6785441332084C</td> <td>MMSA02</td> <td>J</td> <td></td> <td>3</td> </tr> </table> <table border="0"> <tr> <td><u>DEL REL CD</u></td> <td><u>QUANTITY</u></td> <td><u>DEL DATE</u></td> </tr> <tr> <td>001</td> <td>4</td> <td>30-OCT-2005</td> </tr> </table> <p>FOB POINT: Origin</p> <p>SHIP TO: <u>PARCEL POST ADDRESS</u>                      (MMSA02) TRAFFIC MANAGEMENT OFFICER                      DEFENSE DISTRIBUTION DEPOT BARSTOW                      MARINE CORPS LOGISTICS BASE                      BARSTOW CA 92311-5014</p> <p><u>CONTRACT/DELIVERY ORDER NUMBER</u></p>	<u>REL CD</u>	<u>MILSTRIP</u>	<u>ADDR</u>	<u>SIG CD</u>	<u>MARK FOR</u>	<u>TP CD</u>	001	M6785441332084C	MMSA01	J		3	<u>DEL REL CD</u>	<u>QUANTITY</u>	<u>DEL DATE</u>	001	4	30-OCT-2005	<u>REL CD</u>	<u>MILSTRIP</u>	<u>ADDR</u>	<u>SIG CD</u>	<u>MARK FOR</u>	<u>TP CD</u>	002	M6785441332084C	MMSA02	J		3	<u>DEL REL CD</u>	<u>QUANTITY</u>	<u>DEL DATE</u>	001	4	30-OCT-2005	8	EA	\$ 459.02000	\$ 3,672.16
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**Page** 4 of 5

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ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
	DAAE20-00-D-0046/0054				

**CONTINUATION SHEET**

**Reference No. of Document Being Continued**

**PIIN/SIIN** DAAE20-00-D-0046/0054 **MOD/AMD**

**Name of Offeror or Contractor:** F N MANUFACTURING, INC.

CONTRACT ADMINISTRATION DATA

LINE	PRON/ AMS CD/ <u>ITEM</u>	<u>ACRN</u>	<u>STAT</u>	<u>ACCOUNTING CLASSIFICATION</u>	JOB ORDER <u>NUMBER</u>	<u>ACCOUNTING STATION</u>	<u>OBLIGATED AMOUNT</u>
0001AA	T14A0B18M1 M954500442084	AA	2	17 46110923343106785400674432D23340300004MP42084		\$	3,672.16
						TOTAL	\$ 3,672.16

<u>SERVICE NAME</u>	<u>TOTAL BY ACRN</u>	<u>ACCOUNTING CLASSIFICATION</u>	<u>ACCOUNTING STATION</u>	<u>OBLIGATED AMOUNT</u>
Marine Corps	AA	17 46110923343106785400674432D23340300004MP42084		\$ 3,672.16
			TOTAL	\$ 3,672.16