

ORDER FOR SUPPLIES OR SERVICES

1. CONTRACT PURCH ORDER/AGREEMENT NO. DAAE20-00-D-0071				2. DELIVERY ORDER/CALL NO. 0021		3. DATE OF ORDER/CALL (YYYYMMDD) 2004MAY11		4. REQUISITION/PURCH REQUEST NO. SEE SCHEDULE		5. PRIORITY DOA5									
6. ISSUED BY TACOM-ROCK ISLAND AMSTA-AQ-ARCC MYRNA DOWELL (309)782-4635 ROCK ISLAND IL 61299-7630 EMAIL: DOWELLM@RIA.ARMY.MIL				CODE W52H09		7. ADMINISTERED BY (if other than 6) DCMA ST LOUIS 1222 SPRUCE ST ST LOUIS MO 63103-2812				CODE S2605A									
9. CONTRACTOR NAME AND ADDRESS PRODUCTION PRODUCTS MANUFACTURING& 1285 DUNN ROAD SAINT LOUIS, MO. 63138-2802				CODE 3S151		FACILITY		10. DELIVER TO FOB POINT BY (Date) (YYYYMMDD) SEE SCHEDULE		8. DELIVERY FOB <input checked="" type="checkbox"/> DESTINATION <input type="checkbox"/> OTHER (See Schedule if other)									
14. SHIP TO SEE SCHEDULE				CODE		15. PAYMENT WILL BE MADE BY DFAS COLUMBUS CENTER DFAS-CO/WEST ENTITLEMENT OPERATIONS PO BOX 182381 COLUMBUS OH 43218-2381				CODE HQ0339									
11. X IF BUSINESS IS <input type="checkbox"/> SMALL <input checked="" type="checkbox"/> SMALL DISADVANTAGED <input type="checkbox"/> WOMAN-OWNED				13. MAIL INVOICES TO THE ADDRESS IN BLOCK See Block 15		12. DISCOUNT TERMS													
16. TYPE OF ORDER DELIVERY/ CALL <input checked="" type="checkbox"/> PURCHASE				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.															
17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE SEE SCHEDULE				<table border="0" style="width:100%;"> <tr> <td style="width:25%; border-bottom: 1px solid black;">NAME OF CONTRACTOR</td> <td style="width:25%; border-bottom: 1px solid black;">SIGNATURE</td> <td style="width:25%; border-bottom: 1px solid black;">TYPED NAME AND TITLE</td> <td style="width:25%; border-bottom: 1px solid black;">DATE SIGNED (YYYYMMDD)</td> </tr> <tr> <td><input type="checkbox"/></td> <td colspan="3">If this box is marked, supplier must sign Acceptance and return the following number of copies:</td> </tr> </table>								NAME OF CONTRACTOR	SIGNATURE	TYPED NAME AND TITLE	DATE SIGNED (YYYYMMDD)	<input type="checkbox"/>	If this box is marked, supplier must sign Acceptance and return the following number of copies:		
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<input type="checkbox"/>	If this box is marked, supplier must sign Acceptance and return the following number of copies:																		
18. ITEM NO.		19. SCHEDULE OF SUPPLIES/SERVICE			20. QUANTITY ORDERED/ACCEPTED*		21. UNIT	22. UNIT PRICE		23. AMOUNT									
		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.				24. UNITED STATES OF AMERICA MARGARET C TUFTEE /SIGNED/ TUFTEEM@RIA.ARMY.MIL (309)782-7163				25. TOTAL		\$1,680,966.00									
27a. 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				26. DIFFERENCES															
b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE				c. DATE (YYYYMMDD)		d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE													
e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE				28. SHIP. NO.		29. D.O. VOUCHER NO.		30. INITIALS											
f. TELEPHONE NUMBER		g. E-MAIL ADDRESS		<input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		32. PAID BY		33. AMOUNT VERIFIED CORRECT FOR											
36. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT.				<input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		31. PAYMENT		34. CHECK NUMBER											
a. DATE (YYYYMMDD)		b. SIGNATURE AND TITLE OF CERTIFYING OFFICER		35. BILL OF LADING NO.															
37. RECEIVED AT		38. RECEIVED BY (Print)		39. DATE RECEIVED (YYYYMMDD)		40. TOTAL CONTAINERS		41. S/R ACCOUNT NUMBER		42. S/R VOUCHER NO.									

CONTINUATION SHEET**Reference No. of Document Being Continued****Page 2 of 4****PIIN/SIIN** DAAE20-00-D-0071/0021**MOD/AMD****Name of Offeror or Contractor:** PRODUCTION PRODUCTS MANUFACTURING&

SUPPLEMENTAL INFORMATION

1. THIS DELIVERY ORDER IS AWARDED UNDER THE TERMS AND CONDITIONS OF DAAE20-00-D-0071, ORDERING PERIOD 5.
2. AWARD IS HEREBY MADE FOR THE FOLLOWING CLINS:

0014AA NSN:4240-01-330-7806 M20A1 SCPE QTY: 126 EA U/P:\$13,341.00 TOTAL:\$1,680,966.00.
3. TOTAL AWARD AMOUNT IS \$1,680,966.00
4. DELIVERY SCHEDULE IS OUTLINED IN SECTION B.
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-0071/0021 MOD/AMD

Name of Offeror or Contractor: PRODUCTION PRODUCTS MANUFACTURING&

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT																														
0014	SUPPLIES OR SERVICES AND PRICES/COSTS NSN: 4240-01-330-7806 FSCM: 81361 PART NR: 5-19-11320 SECURITY CLASS: Unclassified																																		
0014AA	<p><u>PRODUCTION QUANTITY</u></p> <p>NOUN: COLLECTIVE PROTECTI PRON: S64ZK425PC PRON AMD: 02 ACRN: AA AMS CD: 070011</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> <table border="0"> <tr> <td>DOC</td> <td>SUPPL</td> <td></td> <td></td> <td></td> </tr> <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> </tr> <tr> <td>001</td> <td>W58HZ14112A431</td> <td>W22PVJ</td> <td>J</td> <td>2</td> </tr> <tr> <td><u>DEL REL CD</u></td> <td><u>QUANTITY</u></td> <td><u>DEL DATE</u></td> <td></td> <td></td> </tr> <tr> <td>001</td> <td>109</td> <td>15-NOV-2004</td> <td></td> <td></td> </tr> <tr> <td>002</td> <td>17</td> <td>15-DEC-2004</td> <td></td> <td></td> </tr> </table> <p>FOB POINT: Destination</p> <p>SHIP TO: <u>FREIGHT ADDRESS</u> (W22PVJ) XU GENERAL SUPPLY STORAGE POINT BLUE GRASS ARMY DEPOT 2091 KINGSTON HWY RICHMOND KY 40475-5000</p> <p><u>CONTRACT/DELIVERY ORDER NUMBER</u> DAAE20-00-D-0071/0021</p>	DOC	SUPPL				<u>REL CD</u>	<u>MILSTRIP</u>	<u>ADDR</u>	<u>SIG CD</u>	<u>MARK FOR</u>	001	W58HZ14112A431	W22PVJ	J	2	<u>DEL REL CD</u>	<u>QUANTITY</u>	<u>DEL DATE</u>			001	109	15-NOV-2004			002	17	15-DEC-2004			126	EA	\$ 13,341.00000	\$ 1,680,966.00
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PIIN/SIIN DAAE20-00-D-0071/0021 **MOD/AMD**

Name of Offeror or Contractor: PRODUCTION PRODUCTS MANUFACTURING&

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>
0014AA	S64ZK425PC 070011	AA	2	97 X4930AC61 6D	26FB S19130	W13G07 \$	1,680,966.00
						TOTAL \$	1,680,966.00

<u>SERVICE NAME</u>	<u>TOTAL BY ACRN</u>	<u>ACCOUNTING CLASSIFICATION</u>	JOB <u>ACCOUNTING STATION</u>	<u>OBLIGATED AMOUNT</u>
Army	AA	97 X4930AC61 6D	26FB S19130 W13G07	\$ 1,680,966.00
			TOTAL \$	1,680,966.00