

ORDER FOR SUPPLIES OR SERVICES					Form Approved	Page 1 Of 4
1. Contract/Purch Order No. GS29F0177G		2. Delivery Order No. DAAE20-00-F-0016		3. Date Of Order 2000FEB29	4. Requisition/Purch Request No. SEE SCHEDULE	
6. Issued By TACOM-ROCK ISLAND AMSTA-AC-PCH-C JAN DAY (309) 782-3472 ROCK ISLAND IL 61299-7630 EMAIL: DAYJ@RIA.ARMY.MIL		Code W52H09	7. Administered By (If other than 6) DCMC INDIANAPOLIS 8899 EAST 56TH STREET INDIANAPOLIS IN 46249-5701		Code S1501A	5. Certified for National Defense Under DMS Reg 1 Priority DOA5
9. Contractor KIMBALL OFFICE FURNITURE 1600 ROYAL STREET JASPER IN 47549-0000		Code 4V077	Facility Code	10. Deliver To FOB Point By (Date) SEE SCHEDULE		8. Delivery FOB <input checked="" type="checkbox"/> Dest <input type="checkbox"/> Other (See Schedule if other)
TYPE BUSINESS: Large Business Performing in U.S.				12. Discount Terms		11. Mark If Business Is <input type="checkbox"/> Small <input type="checkbox"/> Small Disadvantaged <input type="checkbox"/> Woman-Owned
14. Ship To SEE SCHEDULE		Code	15. Payment Will Be Made By DFAS ST LOUIS ATT DFAS-SL-FPV 4300 GOODFELLOW BLVD BLDG 110 PO BOX 200009 ST LOUIS MO 63120-0009		Code HQ0304	13. Mail Invoices To See Block 15
16. T O Y R P D E E R O F		Delivery	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 <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
<input type="checkbox"/> 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 FAST PAY						
18. Item No.	19. Schedule Of Supplies/Service SEE SCHEDULE CONTRACT TYPE: Firm-Fixed-Price KIND OF CONTRACT: Supply Contracts and Priced Orders		20. Quantity Ordered/ Accepted*	21. Unit	22. Unit Price	23. Amount
* If quantity accepted by the Government is sameas quantity ordered, indicate by X. If different, enter actual quantity accepted below quantity ordered and encircle.			24. United States Of America By: PATRICIA J HARMON HARMONP@RIA.ARMY.MIL (309) 782-5717		25. Total \$2,891.53	29. Differences
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			27. Ship. No.	28. D.O. Voucher No.	30. Initials	
Date _____ Signature Of Authorized Govt Representative _____			<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			31. Payment <input type="checkbox"/> Complete <input type="checkbox"/> Partial <input type="checkbox"/> Final			34. Check Number
Date _____ Signature And Title Of Certifying Officer _____					35. Bill Of Lading No.	
37. Received At	38. Received By	39. Date Received	40. Total Containers	41. S/R Account No.	42. S/R Voucher No.	

CONTINUATION SHEET**Reference No. of Document Being Continued****Page 2 of 4**

PIIN/SIIN DAAE20-00-F-0016

MOD/AMD

Name of Offeror or Contractor: KIMBALL OFFICE FURNITURE

SUPPLEMENTAL INFORMATION

1. This Delivery Order is awarded against GSA Schedule GS-29F-0177G with Kimball International, Inc.
2. Kimball Office Furniture quotation, dated 28 Feb 2000, is incorporated as attachment 0001. This attachment contains product description and style numbers, along with quantities, individual unit price, and extended unit price. The cost for these parts is \$2,891.53.
3. Shipping instructions: All items should be shipped to the following address:

W52H1C
Rock Island Arsenal
Building 299
ATTN: SIORI-IST
Rock Island, IL 61299-5000

Mark For: CATHY FARLEY/QUALITY OF LIFE

Contract number as set forth in Block 2 of page 1 must appear on outside of shipping container and detailed packing list must be included with the shipment.
4. The invoice payment is to be sent to:

Kimball Office Furniture
PO Box 93096
Chicago, IL 60673-3096
5. All terms and conditions of the listed GSA schedule are applicable to this order.
6. Pursuant to a quality approved manufacturer agreement with GSA, the contractor is authorized to issue a Certificate of Conformance covering supplies at time of shipment in accordance with the GSA.

*** END OF NARRATIVE A001 ***

CONTINUATION SHEET

Reference No. of Document Being Continued
 PIIN/SIIN DAAE20-00-F-0016 MOD/AMD

Name of Offeror or Contractor: KIMBALL OFFICE FURNITURE

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT												
	SUPPLIES OR SERVICES AND PRICES/COSTS																
0001	<u>Supplies or Services and Prices/Costs</u>																
0001AA	<u>QUALITY OF LIFE - MODULAR FURNITURE PARTS</u>	1	LT	\$ ** N/A **	\$ 2,891.53												
	NSN: 0000-00-000-0000 NOUN: QOL - MODULAR FURNITURE PARTS SECURITY CLASS: Unclassified PRON: M106C007M1 PRON AMD: 01 ACRN: AA AMS CD: SM2A5000000SM2A																
	<u>Packaging and Marking</u>																
	<u>Inspection and Acceptance</u>																
	INSPECTION: Destination ACCEPTANCE: Destination																
	<u>Deliveries or Performance</u>																
	DOC SUPPL																
	<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>W52H090055QOL1</td> <td>W52H1C</td> <td>M</td> <td></td> <td>2</td> </tr> </table>	<u>REL CD</u>	<u>MILSTRIP</u>	<u>ADDR</u>	<u>SIG CD</u>	<u>MARK FOR</u>	<u>TP CD</u>	001	W52H090055QOL1	W52H1C	M		2				
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001	1	16-MAR-2000															
	FOB POINT: Destination																
	SHIP TO: <u>PARCEL POST ADDRESS</u>																
	(W52H1C) XR TRANS OFC																
	ATTN SIORI IST																
	ROCK ISLAND ARSENAL																
	ROCK ISLAND IL 61299-5000																
	MARK FOR: FARLEY/QOL																

CONTINUATION SHEET

Reference No. of Document Being Continued

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PIIN/SIIN DAAE20-00-F-0016

MOD/AMD

Name of Offeror or Contractor: KIMBALL OFFICE FURNITURE

CONTRACT ADMINISTRATION DATA

LINE	PRON/	OBLG	JOB	ACCOUNTING	OBLIGATED
<u>ITEM</u>	<u>AMS CD</u>	<u>ACRN STAT</u>	<u>ORDER</u>	<u>STATION</u>	<u>AMOUNT</u>
0001AA	M106C007M1	AA 2	97	X4930AC5GX6D6D02PSM2A5031EC S11116	0ABFBQ W52H09 \$ 2,891.53
SM2A5000000SM2A					
					TOTAL \$ 2,891.53

SERVICE	ACCOUNTING	OBLIGATED
<u>NAME</u>	<u>STATION</u>	<u>AMOUNT</u>
Army	W52H09	\$ 2,891.53
	TOTAL	\$ 2,891.53