

**ORDER FOR SUPPLIES OR SERVICES**

<b>1. CONTRACT PURCH ORDER/AGREEMENT NO.</b> DAAE20-01-D-0092	<b>2. DELIVERY ORDER/CALL NO.</b> 0010	<b>3. DATE OF ORDER/CALL (YYYYMMDD)</b> 2003JAN29	<b>4. REQUISITION/PURCH REQUEST NO.</b> SEE SCHEDULE	<b>5. PRIORITY</b> DOA5
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<b>6. ISSUED BY</b> TACOM-ROCK ISLAND AMSTA-LC-CAC-C NANCY MONIKE (309)782-4900 ROCK ISLAND IL 61299-7630 EMAIL: MONIKEN@RIA.ARMY.MIL	<b>CODE</b> W52H09	<b>7. ADMINISTERED BY (if other than 6)</b> DCMA ST PETERSBURG 9549 KOGER BLVD GADSDEN BLDG SUITE 200 ST PETERSBURG FL 33702-2455	<b>CODE</b> S1109A	<b>8. DELIVERY FOB</b> <input type="checkbox"/> DESTINATION <input checked="" type="checkbox"/> OTHER (See Schedule if other)
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<b>9. CONTRACTOR</b> HONEYWELL INC, SENSOR AND GUIDANCE PRODUCTS 13350 US HIGHWAY 19 N CLEARWATER FL 33764-7290  TYPE BUSINESS: Large Business Performing in U.S.	<b>CODE</b> OBFA5	<b>FACILITY</b> C	<b>NONE</b>	<b>HQ0338</b>	<b>10. DELIVER TO FOB POINT BY (Date) (YYYYMMDD)</b> SEE SCHEDULE	<b>11. X IF BUSINESS IS</b> <input type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISADVANTAGED <input type="checkbox"/> WOMAN-OWNED
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<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>MARK ALL PACKAGES AND PAPERS WITH IDENTIFICATION NUMBERS IN BLOCKS 1 AND 2</b>
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<b>16. TYPE OF ORDER</b>	<b>DELIVERY/ CALL</b>	<input checked="" 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.
	<b>PURCHASE</b>		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.			

<b>NAME OF CONTRACTOR</b>	<b>SIGNATURE</b>	<b>TYPED NAME AND TITLE</b>	<b>DATE SIGNED (YYYYMMDD)</b>
<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

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.	<b>24. UNITED STATES OF AMERICA</b> ROCK WOODSTOCK /SIGNED/ WOODSTOCKR@RIA.ARMY.MIL (309) 782-7237 BY: _____ CONTRACTING/ORDERING OFFICER	<b>25. TOTAL</b>	\$185,000.00
		<b>26. DIFFERENCES</b>	

**27a. QUANTITY IN COLUMN 20 HAS BEEN**  
 INSPECTED  RECEIVED  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>
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<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>
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<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>31. PAYMENT</b>		<b>34. CHECK NUMBER</b>

**36. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT.**

<b>a. DATE (YYYYMMDD)</b>	<b>b. SIGNATURE AND TITLE OF CERTIFYING OFFICER</b>	<input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL	<b>35. BILL OF LADING NO.</b>
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<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>
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<b>CONTINUATION SHEET</b>	<b>Reference No. of Document Being Continued</b> <b>PIIN/SIIN</b> DAAE20-01-D-0092/0010 <b>MOD/AMD</b>	<b>Page 2 of 5</b>
<b>Name of Offeror or Contractor:</b> HONEYWELL INC,		

SUPPLEMENTAL INFORMATION

1. This Delivery Order awards a quantity of 5 each Inertial Navigation Unit (INU) on PRON C02BM8K31AM1 on NSN: 6650-01-498-1337, Part Number 12484747, for the Knight(Striker), BFIST and A3 Programs. See Schedule B.
2. The project liability schedule is adjusted accordingly. See Attachment 001.

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

CONTINUATION SHEET

Reference No. of Document Being Continued  
 PIIN/SIIN DAAE20-01-D-0092/0010 MOD/AMD

Name of Offeror or Contractor: HONEYWELL INC,

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT																		
0002	<p>SUPPLIES OR SERVICES AND PRICES/COSTS</p> <p><u>Supplies or Services and Prices/Costs</u></p> <p>SECURITY CLASS: Unclassified</p> <p><u>BCT-SPT MFCS POINTING DEVICE</u>                      NSN: 6650-01-498-1337                      Part Number: 12484747</p> <p>(End of narrative B001)</p> <p>NOUN: BCT-SPT MFCS POINTING DEVICE                      PRON: C02BM8K31A PRON AMD: 01 ACRN: AA                      AMS CD: 65480261300                      CUSTOMER ORDER NO: C02BM8K31AM1</p> <p><u>Packaging and Marking</u>  <u>Inspection and Acceptance</u>                      INSPECTION: Origin ACCEPTANCE: Origin  <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></td> <td>000000</td> <td></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>3</td> <td>30-OCT-2003</td> </tr> </table> <p>FOB POINT: Origin</p> <p>SHIP TO: <u>PARCEL POST ADDRESS</u>                      (W91AEH) SU W4MK STK REC ACCT HQ ARDC SSF                      BLDG 91 4TH AVE                      PICATINNY ARSENAL NJ 07806-5000</p> <p>MARK FOR: BRADLEY A3 PRODUCTION  <u>CONTRACT/DELIVERY ORDER NUMBER</u>                      DAAE20-01-D-0092/0010</p>	<u>REL CD</u>	<u>MILSTRIP</u>	<u>ADDR</u>	<u>SIG CD</u>	<u>MARK FOR</u>	<u>TP CD</u>	001		000000			3	<u>DEL REL CD</u>	<u>QUANTITY</u>	<u>DEL DATE</u>	001	3	30-OCT-2003	3	EA	\$ 37,000.00000	\$ 111,000.00
<u>REL CD</u>	<u>MILSTRIP</u>	<u>ADDR</u>	<u>SIG CD</u>	<u>MARK FOR</u>	<u>TP CD</u>																		
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0002AF	<p><u>BCT-SPT MFCS POINTING DEVICE</u>                      NSN: 6650-01-498-1337                      Part Number: 12484747</p> <p>(End of narrative B001)</p> <p>NOUN: BCT-SPT MFCS POINTING DEVICE                      PRON: C02BM8K31A PRON AMD: 01 ACRN: AA                      AMS CD: 65480261300                      CUSTOMER ORDER NO: C02BM8K31AM1</p> <p><u>Packaging and Marking</u>  <u>Inspection and Acceptance</u>                      INSPECTION: Origin ACCEPTANCE: Origin  <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></td> <td>000000</td> <td></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>2</td> <td>30-OCT-2003</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		000000			3	<u>DEL REL CD</u>	<u>QUANTITY</u>	<u>DEL DATE</u>	001	2	30-OCT-2003	2	EA	\$ 37,000.00000	\$ 74,000.00
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CONTINUATION SHEET

Reference No. of Document Being Continued  
PIIN/SIIN DAAE20-01-D-0092/0010 MOD/AMD

Name of Offeror or Contractor: HONEYWELL INC,

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
	<p>FOB POINT: Origin</p> <p>SHIP TO: <u>PARCEL POST ADDRESS</u> (CK0P12) XR UNITED DEFENSE L P GROUND SYSTEMS DIVISON 1100 BAIRS RD PO BOX 15512 YORK PA 17405-1512</p> <p>MARK FOR: GEORGE DEVOE(973)274-4962 <u>CONTRACT/DELIVERY ORDER NUMBER</u> DAAE20-01-D-0092/0010</p>				

**CONTINUATION SHEET**

**Reference No. of Document Being Continued**

**PIIN/SIIN** DAAE20-01-D-0092/0010 **MOD/AMD**

**Name of Offeror or Contractor:** HONEYWELL INC,

CONTRACT ADMINISTRATION DATA

LINE	PRON/	OBLG	JOB	ACCOUNTING	OBLIGATED
<u>ITEM</u>	<u>AMS CD</u>	<u>ACRN</u> <u>STAT</u>	<u>ORDER</u>	<u>STATION</u>	<u>AMOUNT</u>
0002AE	C02BM8K31A	AA 2 21	22040000026D6D056548026255Y S28017	W15QKN \$	111,000.00
65480261300					
0002AF	C02BM8K31A	AA 2 21	22040000026D6D056548026255Y S28017	W15QKN \$	74,000.00
65480261300					
TOTAL					\$ 185,000.00

SERVICE	ACCOUNTING	OBLIGATED
<u>NAME</u>	<u>STATION</u>	<u>AMOUNT</u>
Army	W15QKN \$	185,000.00
TOTAL		\$ 185,000.00