

<b>SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS</b>				<b>1. Requisition Number</b> SEE SCHEDULE		<b>Page</b> 1 <b>Of</b> 4	
<b>Offeror To Complete Block 12, 17, 23, 24, &amp; 30</b>							
<b>2. Contract No.</b> DAAE20-01-D-0092		<b>3. Award/Effective Date</b> 2003SEP16		<b>4. Order Number</b> 0018		<b>5. Solicitation Number</b>	
<b>6. Solicitation Issue Date</b>		<b>7. For Solicitation Information Call:</b>		<b>A. Name</b> NANCY MONIKE		<b>B. Telephone Number (No Collect Calls)</b> (309)782-4900	
<b>8. Offer Due Date/Local Time</b>		<b>9. Issued By</b> TACOM-ROCK ISLAND AMSTA-LC-CAC-C ROCK ISLAND IL 61299-7630		<b>Code</b> W52H09		<b>10. This Acquisition Is</b>	
				<input checked="" type="checkbox"/> <b>Unrestricted</b>		<b>11. Delivery For FOB Destination Unless Block Is Marked</b>	
				<input type="checkbox"/> <b>Set Aside: % For</b>		<input checked="" type="checkbox"/> <b>See Schedule</b>	
				<input type="checkbox"/> <b>Small Business</b>		<input checked="" type="checkbox"/> <b>13a. This Contract Is A Rated Order Under DPAS (18 CFR 700)</b>	
				<input type="checkbox"/> <b>Small Disadv Business</b>		<b>13b. Rating</b> DOA5	
				<input type="checkbox"/> <b>8(A)</b>		<b>14. Method Of Solicitation</b>	
				<b>SIC:</b>		<input type="checkbox"/> <b>RFQ</b> <input type="checkbox"/> <b>IFB</b> <input type="checkbox"/> <b>RFP</b>	
				<b>Size Standard:</b>			
<b>e-mail:</b> MONIKEN@RIA.ARMY.MIL		<b>15. Deliver To</b> XU W4MK CENTER ARMAMENT RD E USA ARM RES DEV AND ENGR CTR BLDG 91 4TH AVE PICATINNY ARSENAL NJ 07801-5000		<b>Code</b> W15BXD		<b>16. Administered By</b> DCMA ST PETERSBURG 9549 KOGER BLVD GADSDEN BLDG SUITE 200 ST PETERSBURG FL 33702-2455	
<b>Telephone No.</b>				<b>Code</b> S1109A			
<b>17. Contractor/Offeror</b> HONEYWELL INTL DSES CLEARWATER DEFENSE 13350 US HIGHWAY 19 NORTH ATTN: CLEARWATER, FL. 33764-7290		<b>Code</b> 0BFA5 <b>Facility</b>		<b>18a. 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>Telephone No.</b>							
<input type="checkbox"/> <b>17b. Check If Remittance Is Different And Put Such Address In Offer</b>				<b>18b. Submit Invoices To Address Shown In Block 18a Unless Block Below Is Checked</b>		<input type="checkbox"/> <b>See Addendum</b>	
<b>19. Item No.</b>		<b>20. Schedule Of Supplies/Services</b>		<b>21. Quantity</b>		<b>22. Unit</b>	
		SEE SCHEDULE					
		(Attach Additional Sheets As Necessary)					
						<b>23. Unit Price</b>	
						<b>24. Amount</b>	
<b>25. Accounting And Appropriation Data</b> ACRN: AA 21 32035000031B1B02P52867526EB S28017 W52H09				<b>26. Total Award Amount (For Govt. Use Only)</b> \$3,700,000.00			
<input type="checkbox"/> <b>27a. Solicitation Incorporates By Reference FAR 52.212-1, 52.212-4. FAR 52.212-3 And 52.212-5 Are Attached.</b>				<input type="checkbox"/> <b>Are</b> <input type="checkbox"/> <b>Are Not Attached.</b>			
<input checked="" type="checkbox"/> <b>27b. Contract/Purchase Order Incorporates By Reference FAR 52.212-4. FAR 52.212-5 Is Attached. Addenda</b>				<input checked="" type="checkbox"/> <b>Are</b> <input type="checkbox"/> <b>Are Not Attached.</b>			
<b>28. Contractor Is Required To Sign This Document And Return _____ Copies</b>				<b>29. Award Of Contract: Reference _____ Offer</b>			
<input type="checkbox"/> <b>To Issuing Office. Contractor Agrees To Furnish And Deliver All Items Set Forth Or Otherwise Identified Above And On Any Additional Sheets Subject To The Terms And Conditions Specified Herein.</b>				<input type="checkbox"/> <b>Dated _____ . Your Offer On Solicitation (Block 5) Including Any Additions Or Changes Which Are Set Forth Herein Is Accepted As To Items:</b>			
<b>30a. Signature Of Offeror/Contractor</b>				<b>31a. United States Of America (Signature Of Contracting Officer)</b>			
<b>30b. Name And Title Of Signer (Type Or Print)</b>		<b>30c. Date Signed</b>		<b>31b. Name Of Contracting Officer (Type Or Print)</b> CAROL C RIVARD /SIGNED/ RIVARDC@RIA.ARMY.MIL (309)782-3272		<b>31c. Date Signed</b>	
<b>32a. Quantity In Column 21 Has Been</b>				<b>33. Ship Number</b>		<b>34. Voucher Number</b>	
<input type="checkbox"/> <b>Received</b> <input type="checkbox"/> <b>Inspected</b> <input type="checkbox"/> <b>Accepted And Conforms To The Contract Except As Noted</b>				<input type="checkbox"/> <b>Partial</b> <input type="checkbox"/> <b>Final</b>		<b>35. Amount Verified Correct For</b>	
<b>32b. Signature Of Authorized Government Representative</b>		<b>32c. Date</b>		<b>36. Payment</b>		<b>37. Check Number</b>	
				<input type="checkbox"/> <b>Complete</b> <input type="checkbox"/> <b>Partial</b> <input type="checkbox"/> <b>Final</b>			
				<b>38. S/R Account Number</b>		<b>39. S/R Voucher Number</b>	
				<b>40. Paid By</b>			
<b>41a. I Certify This Account Is Correct And Proper For Payment</b>				<b>42a. Received By (Print)</b>			
<b>41b. Signature And Title Of Certifying Officer</b>		<b>41c. Date</b>		<b>42b. Received At (Location)</b>			
				<b>42c. Date Recd (YYMMDD)</b>		<b>42d. Total Containers</b>	

<b>CONTINUATION SHEET</b>	<b>Reference No. of Document Being Continued</b> <b>PIIN/SIIN</b> DAAE20-01-D-0092/0018 <b>MOD/AMD</b>	<b>Page 2 of 4</b>
<b>Name of Offeror or Contractor:</b> HONEYWELL INTL		

SUPPLEMENTAL INFORMATION

1. This Delivery Order awards a quantity of 100 each on Clin 0002AU, Inertial Navigation Units (INUs) for the BFVS A3 Program under PRON HH3355861AM1. See Schedule B.
2. Item NSN: 6605-01-498-1337, Part Number: 12484747.
3. 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-0092/0018 MOD/AMD

Name of Offeror or Contractor: HONEYWELL INTL

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT																														
0002	SUPPLIES OR SERVICES AND PRICES/COSTS  NSN: 6605-01-498-1337 FSCM: 19207 PART NR: 12484747 SECURITY CLASS: Unclassified																																		
0002AU	<p><u>PRODUCTION QUANTITY</u></p> <p>100</p> <p>NOUN: INU                      PRON: HH3355861A PRON AMD: 01 ACRN: AA                      AMS CD: 52867500086</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>W15BW932533601</td> <td>W15BXD</td> <td>M</td> <td>1</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>50</td> <td>10-JUN-2004</td> <td></td> <td></td> </tr> <tr> <td>002</td> <td>50</td> <td>10-AUG-2004</td> <td></td> <td></td> </tr> </table> <p>FOB POINT: Origin</p> <p>SHIP TO: <u>PARCEL POST ADDRESS</u>                      (W15BXD) XU W4MK CENTER ARMAMENT RD E                      USA ARM RES DEV AND ENGR CTR                      BLDG 91 4TH AVE                      PICATINNY ARSENAL NJ 07801-5000</p> <p><u>CONTRACT/DELIVERY ORDER NUMBER</u>                      DAAE20-01-D-0092/0018</p> <p>DISREGARD ABOVE SHIP-TO ADDRESS</p> <p>SHIP TO: HONEYWELL                      9201 SAN MATEO BLVD NE                      ALBUQUERQUE, NM 87113</p> <p>MARK FOR: ATTN: MIKE STECKBECK (505) 828-6611</p> <p>(End of narrative F001)</p>	DOC	SUPPL				<u>REL CD</u>	<u>MILSTRIP</u>	<u>ADDR</u>	<u>SIG CD</u>	<u>MARK FOR</u>	001	W15BW932533601	W15BXD	M	1	<u>DEL REL CD</u>	<u>QUANTITY</u>	<u>DEL DATE</u>			001	50	10-JUN-2004			002	50	10-AUG-2004			100	EA	\$ 37,000.00000	\$ 3,700,000.00
DOC	SUPPL																																		
<u>REL CD</u>	<u>MILSTRIP</u>	<u>ADDR</u>	<u>SIG CD</u>	<u>MARK FOR</u>																															
001	W15BW932533601	W15BXD	M	1																															
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**CONTINUATION SHEET**

**Reference No. of Document Being Continued**

**PIIN/SIIN** DAAE20-01-D-0092/0018

**MOD/AMD**

**Name of Offeror or Contractor:** HONEYWELL INTL

CONTRACT ADMINISTRATION DATA

LINE	PRON/	OBLG				JOB			
<u>ITEM</u>	<u>AMS CD</u>	<u>ACRN</u>	<u>STAT</u>	<u>ACCOUNTING CLASSIFICATION</u>		<u>ORDER</u>	<u>ACCOUNTING</u>		<u>OBLIGATED</u>
						<u>NUMBER</u>	<u>STATION</u>		<u>AMOUNT</u>
0002AU	HH3355861A	AA	2	21	32035000031B1B02P52867526EB	S28017	3RM923	W52H09	\$ 3,700,000.00
	52867500086								
							TOTAL	\$	3,700,000.00

<u>SERVICE</u>	<u>TOTAL BY ACRN</u>	<u>ACCOUNTING CLASSIFICATION</u>		<u>ACCOUNTING</u>	<u>OBLIGATED</u>	
<u>NAME</u>				<u>STATION</u>	<u>AMOUNT</u>	
Army	AA	21	32035000031B1B02P52867526EB	S28017	W52H09	\$ 3,700,000.00
					TOTAL	\$ 3,700,000.00