

**ORDER FOR SUPPLIES OR SERVICES**

<b>1. Contract/Purch Order/Agreement No.</b>  DAAE20-01-P-0217	<b>2. Delivery Order/Call No.</b>	<b>3. Date Of Order/Call (YYYYMMDD)</b>  2001MAY04	<b>4. Requisition/Purch Request No.</b>  SEE SCHEDULE	<b>5. Priority</b>  DOA5
--	-----------------------------------	--	---	--------------------------------

<b>6. Issued By</b> TACOM-ROCK ISLAND AMSTA-LC-CFA-A LINDA GRAFF (309)782-3136 ROCK ISLAND IL 61299-7630  EMAIL: GRAFFL@RIA.ARMY.MIL	<b>Code</b>	W52H09	<b>7. Administered By (If other than 6)</b> DCMC PITTSBURGH FEDERAL BLDG ROOM 1612 1000 LIBERTY AVENUE PITTSBURGH PA 15222-4190	<b>Code</b>	S3911A	<b>8. Delivery FOB</b>  <input type="checkbox"/> Destination <input checked="" type="checkbox"/> Other  (See Schedule if other)
			<b>SCD C</b>	<b>PAS NONE</b>	<b>ADP PT SC1012</b>	

<b>9. Contractor</b>  Name and Address  GENERAL MFG CO 3249 INDUSTRIAL BLVD P O BOX 115 BETHEL PARK PA 15102  TYPE BUSINESS: Other Small Business Performing in U.S.	<b>Code</b>	1HU06	<b>Facility</b>		<b>10. Deliver To FOB Point By (Date) (YYYYMMDD)</b>  SEE SCHEDULE	<b>11. X If Business Is</b> <input checked="" type="checkbox"/> Small <input type="checkbox"/> Small Disadvantaged <input type="checkbox"/> Woman-Owned
				<b>12. Discount Terms</b>  0.50% 10 Days Net 30 Days		
				<b>13. Mail Invoices To the Address in Block</b> See Block 15		

<b>14. Ship To</b> SEE SCHEDULE	<b>Code</b>		<b>15. Payment Will Be Made By</b> DFAS COLUMBUS CENTER DFAS-CO-JNC/MINUTEMAN PO BOX 182266 COLUMBUS OH 43218-2362	<b>Code</b>	SC1032	<b>Mark all Packages and Papers with Identification Numbers in Blocks 1 and 2</b>
------------------------------------	-------------	--	--	-------------	--------	---

<b>16. Type of Order</b>	<b>Delivery/Call</b>	<b>This delivery order is issued on another Government agency or in accordance with and subject to terms and conditions of above numbered contract.</b>				
		Reference your <input type="checkbox"/> Oral; <input checked="" type="checkbox"/> Written Quotation DAAE2001T0093, Dated _____, furnish the following on terms specified herein.				
	<b>Purchase</b>	<input checked="" type="checkbox"/>				
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)
--------------------	-----------	----------------------	------------------------

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 SEE SCHEDULE CONTRACT TYPE: Firm-Fixed-Price	20. Quantity Ordered/ Accepted*	21. Unit	22. Unit Price	23. Amount
	KIND OF CONTRACT: Supply Contracts and Priced Orders				

<i>* 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.</i>	24. United States Of America  By: MARY DONOVAN /SIGNED/ DONOVANM@RIA.ARMY.MIL (309)782-4895	25. Total	\$47,400.00
		29. Differences	

<b>26. 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  Date _____ Signature Of Authorized Govt Representative _____	<b>27. Ship. No.</b>	<b>28. D.O. Voucher No.</b>	<b>30. Initials</b>		
		<input type="checkbox"/> Partial <input type="checkbox"/> Final			<b>33. Amount Verified Correct For</b>
<b>36. I certify this account is correct and proper for payment</b>  Date _____ Signature And Title Of Certifying Officer _____		<b>31. Payment</b>  <input type="checkbox"/> Complete <input type="checkbox"/> Partial <input type="checkbox"/> Final	<b>32. Paid By</b>		<b>34. Check Number</b>
					<b>35. Bill Of Lading No.</b>

37. Received At	38. Received By	39. Date Received	40. Total Containers	41. S/R Account Number	42. S/R Voucher No.
-----------------	-----------------	-------------------	----------------------	------------------------	---------------------

<b>CONTINUATION SHEET</b>	<b>Reference No. of Document Being Continued</b> <b>PIIN/SIIN</b> DAAE20-01-P-0217 <b>MOD/AMD</b>	<b>Page</b> 2 <b>of</b> 6
---------------------------	--	---------------------------

**Name of Offeror or Contractor:** GENERAL MFG CO

SUPPLEMENTAL INFORMATION

1. SOLICITATION DAAE20-01-T-0093 IS INCLUDED AS A PART OF THIS AWARD.
2. AWARD IS MADE FOB DESTINATION WITH THE REQUIREMENT FOR HIGHER LEVEL CONTRACT QUALITY IN ACCORDANCE WITH ISO 9002.

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

CONTINUATION SHEET

Reference No. of Document Being Continued  
 PIIN/SIIN DAAE20-01-P-0217 MOD/AMD

Page 3 of 6

Name of Offeror or Contractor: GENERAL MFG CO

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT																		
0001	<p>SUPPLIES OR SERVICES AND PRICES/COSTS</p> <p><u>Supplies or Services and Prices/Costs</u></p> <p><u>PRODUCTION QUANTITY WITHOUT FIRST ARTICLE/OV</u></p> <p>NSN: 4931-01-260-2208                      NOUN: ADAPTER KIT,TRUNNION                      FSCM: 19200                      PART NR: 12000682-2                      SECURITY CLASS: Unclassified                      PRON: M111F071M1 PRON AMD: 02 ACRN: AA                      AMS CD: 060011</p> <p><u>Description/Specs./Work Statement</u>                      TOP DRAWING NR: 12000682-2                      DATE: 07-NOV-2000</p> <p><u>Packaging and Marking</u>                      SEE CLAUSE DS6411</p> <p>(End of narrative D001)</p> <p><u>Inspection and Acceptance</u>                      INSPECTION: Origin ACCEPTANCE: Origin</p> <p><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>W52H090348H983</td> <td>W25G1U</td> <td>J</td> <td></td> <td>1</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>20</td> <td>04-DEC-2001</td> </tr> </table> <p>FOB POINT: Destination</p> <p>SHIP TO: <u>FREIGHT ADDRESS</u>                      (W25G1U) XU TRANSPORTATION OFFICER                      DDSP NEW CUMBERLAND FACILITY                      BUILDING MISSION DOOR 113 134                      NEW CUMBERLAND PA 17070-5001</p> <p><u>CONTRACT/DELIVERY ORDER NUMBER</u>                      DAAE20-01-P-0217/0000</p> </p>	<u>REL CD</u>	<u>MILSTRIP</u>	<u>ADDR</u>	<u>SIG CD</u>	<u>MARK FOR</u>	<u>TP CD</u>	001	W52H090348H983	W25G1U	J		1	<u>DEL REL CD</u>	<u>QUANTITY</u>	<u>DEL DATE</u>	001	20	04-DEC-2001	20	KT	\$ 2,370.00000	\$ 47,400.00
<u>REL CD</u>	<u>MILSTRIP</u>	<u>ADDR</u>	<u>SIG CD</u>	<u>MARK FOR</u>	<u>TP CD</u>																		
001	W52H090348H983	W25G1U	J		1																		
<u>DEL REL CD</u>	<u>QUANTITY</u>	<u>DEL DATE</u>																					
001	20	04-DEC-2001																					
0002	<p><u>Supplies or Services and Prices/Costs</u></p> <p><u>DATA ITEM</u></p> <p>NOUN: DD FORM 1423 CDRL                      SECURITY CLASS: Unclassified</p> <p><u>Inspection and Acceptance</u>                      INSPECTION: Destination ACCEPTANCE: Destination</p>			\$ ** NSP **	\$ ** NSP **																		

**CONTINUATION SHEET**

**Reference No. of Document Being Continued**

**Page 4 of 6**

**PIIN/SIIN** DAAE20-01-P-0217

**MOD/AMD**

**Name of Offeror or Contractor:** GENERAL MFG CO

CONTRACT ADMINISTRATION DATA

LINE	PRON/	OBLG					JOB	ACCOUNTING	OBLIGATED
<u>ITEM</u>	<u>AMS CD</u>	<u>ACRN</u>	<u>STAT</u>	<u>ACCOUNTING CLASSIFICATION</u>			<u>ORDER</u>	<u>STATION</u>	<u>AMOUNT</u>
							<u>NUMBER</u>		
0001	M111F071M1	AA	2	97	X4930AC9G 6D	26KB S11116		W52H09	\$ 47,400.00
	060011								
								TOTAL	\$ 47,400.00

SERVICE							ACCOUNTING	OBLIGATED
<u>NAME</u>	<u>TOTAL BY ACRN</u>	<u>ACCOUNTING CLASSIFICATION</u>					<u>STATION</u>	<u>AMOUNT</u>
Army	AA	97	X4930AC9G 6D	26KB	S11116		W52H09	\$ 47,400.00
							TOTAL	\$ 47,400.00

**CONTINUATION SHEET****Reference No. of Document Being Continued****Page 5 of 6****PIIN/SIIN** DAAE20-01-P-0217**MOD/AMD****Name of Offeror or Contractor:** GENERAL MFG CO

## CONTRACT CLAUSES

	<u>Regulatory Cite</u>	<u>Title</u>	<u>Date</u>
1	52.232-33	PAYMENT BY ELECTRONIC FUNDS TRANSFER - CENTRAL CONTRACTOR REGISTRATION	MAY/1999

**CONTINUATION SHEET****Reference No. of Document Being Continued****Page 6 of 6****PIIN/SIIN** DAAE20-01-P-0217**MOD/AMD****Name of Offeror or Contractor:** GENERAL MFG CO

## LIST OF ATTACHMENTS

<u>List of</u> <u>Addenda</u>	<u>Title</u>	<u>Date</u>	<u>Number</u> <u>of Pages</u>	<u>Transmitted By</u>
Attachment 001	GENERAL MFG. CO. QUOTE	30-JAN-2001	001	
Attachment 002	SOLICITATION DAAE20-01-T-0093		016	