

**ORDER FOR SUPPLIES OR SERVICES**

<b>1. Contract/Purch Order/Agreement No.</b> DAAE20-02-D-0005	<b>2. Delivery Order/Call No.</b> 0001	<b>3. Date Of Order/Call (YYYYMMDD)</b> 2002MAR06	<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-B MARGARET I EMMERT (309)782-7149 ROCK ISLAND IL 61299-7630  EMAIL: EMMERTM@RIA.ARMY.MIL	<b>Code</b>	W52H09	<b>7. Administered By (If other than 6)</b> DCMA VAN NUYS 6230 VAN NUYS BLVD VAN NUYS CA 91401-2713	<b>Code</b>	S0512A	<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>  • PERILLO INDUSTRIES INC DBA CENTURY ELECTRONICS 5701 LINDERO CANYON RD WESTLAKE VILLAGE CA 91362-0000  Name and Address  •  •  TYPE BUSINESS: Small Disadvantaged Business Performing in U.S.	<b>Code</b>	50264	<b>Facility</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 checked="" type="checkbox"/> Woman-Owned
				<b>12. Discount Terms</b>  1/2% 10, 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 WEST ENTITLEMENT OPERATIONS PO BOX 182381 COLUMBUS OH 43218-2381	<b>Code</b>	HQ0339	<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.			

Name Of Contractor	Signature	Typed Name And Title	Date Signed (YYYYMMDD)
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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: Maintenance Contracts				

* 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  By: SUZANNE C. YACKLEY /SIGNED/ YACKLEYS@RIA.ARMY.MIL (309)782-1466	25. Total	\$33,840.00
		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>	
<b>36. I certify this account is correct and proper for payment</b>  Date _____ Signature And Title Of Certifying Officer _____	<input type="checkbox"/> Partial <input type="checkbox"/> Final	<b>32. Paid By</b>	<b>33. Amount Verified Correct For</b>	
	<input type="checkbox"/> Complete <input type="checkbox"/> Partial <input type="checkbox"/> Final		<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.
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<b>CONTINUATION SHEET</b>	<b>Reference No. of Document Being Continued</b> <b>PIIN/SIIN</b> DAAE20-02-D-0005/0001 <b>MOD/AMD</b>	<b>Page</b> 2 <b>of</b> 4
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**Name of Offeror or Contractor:** PERILLO INDUSTRIES INC

SUPPLEMENTAL INFORMATION

This Delivery Order awards CLINs 0001 and 0002 for the Evaluation/Test Charges and Repair Costs for the repair of the Power Supply, PN 110000A.

CLIN 0001AA awards \$11,840.00 to cover evaluation/test charges for the FY02 projected repair quantity of 16 each, at a cost of \$740.00 evaluation/test charge for each Power Supply.

CLIN 0002AA awards \$22,000.00 to cover repair costs for the FY02 projected repair quantity of 16 each, at an estimated repair charge of \$1375.00 for each Power Supply. The contractor, after performing the teardown, inspection, evaluation and testing of the Power Supplies, will submit a Firm Fixed Price proposal to the PCO at TACOM-Rock Island, ATTN: AMSTA-LC-CAC-B, Rock Island, IL 61299-7630, for the actual repair costs. Upon receipt of said contractor repair cost proposal, actual repair cost will be negotiated and a contract modification will be issued to authorize the repair. Under NO circumstances is the contractor to undertake actual repair until after aforementioned contract modification has been executed to authorize the repair.

All other terms and conditions of the basic contract remain unchanged.

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



**CONTINUATION SHEET**

**Reference No. of Document Being Continued**

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**PIIN/SIIN** DAAE20-02-D-0005/0001 **MOD/AMD**

**Name of Offeror or Contractor:** PERILLO INDUSTRIES INC

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>	
0001AA	M124A641M1	AA	2	97	X4930AC9G	6D	252G	S11116			
	060015MM								W52H09	\$	11,840.00
0002AA	M124A641M1	AA	2	97	X4930AC9G	6D	252G	S11116			
	060015MM								W52H09	\$	22,000.00
									TOTAL	\$	33,840.00

SERVICE	TOTAL BY ACRN		ACCOUNTING CLASSIFICATION				ACCOUNTING		OBLIGATED
<u>NAME</u>							<u>STATION</u>	<u>AMOUNT</u>	
Army	AA		97	X4930AC9G	6D	252G	S11116	W52H09	\$ 33,840.00
								TOTAL	\$ 33,840.00