

**ORDER FOR SUPPLIES OR SERVICES**

<b>1. Contract/Purch Order/Agreement No.</b> DAAE20-02-D-0031	<b>2. Delivery Order/Call No.</b> 0004	<b>3. Date Of Order/Call (YYYYMMDD)</b> 2002OCT17	<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-CSC-C ELLEN BARTZ (309)782-5120 ROCK ISLAND IL 61299-7630  EMAIL: BARTZE@RIA.ARMY.MIL	<b>Code</b>	W52H09	<b>7. Administered By (If other than 6)</b> DCMA MANASSAS 10500 BATTLEVIEW PKWY SUITE 200 MANASSAS VA 20109-2342	<b>Code</b>	S2404A	<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 HQ0338</b>	

<b>9. Contractor</b>  AIMPOINT INC 3989 HWY 62 W BERRYVILLE AR 72616  Name and Address  TYPE BUSINESS: Other Small Business Performing in U.S.	<b>Code</b>	3J629	<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>		
				<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/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.			

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:

<b>17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE</b> SEE SCHEDULE					
<b>18. Item No.</b>	<b>19. Schedule Of Supplies/Service</b> SEE SCHEDULE CONTRACT TYPE: Firm-Fixed-Price	<b>20. Quantity Ordered/ Accepted*</b>	<b>21. Unit</b>	<b>22. Unit Price</b>	<b>23. Amount</b>
	KIND OF CONTRACT: Supply Contracts and Priced Orders				

<b>* 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>	<b>24. United States Of America</b>  / SIGNED/ By: JERRY L YOWELL /SIGNED/ YOWELLJ@RIA.ARMY.MIL (309)782-6736 Contracting/Ordering Officer	<b>25. Total</b>	\$1,903.34
		<b>29. Differences</b>	

<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>

<b>37. Received At</b>	<b>38. Received By</b>	<b>39. Date Received</b>	<b>40. Total Containers</b>	<b>41. S/R Account Number</b>	<b>42. S/R Voucher No.</b>
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**CONTINUATION SHEET****Reference No. of Document Being Continued****Page 2 of 4****PIIN/SIIN** DAAE20-02-D-0031/0004**MOD/AMD****Name of Offeror or Contractor:** AIMPOINT INC

## SUPPLEMENTAL INFORMATION

1. DELIVERY ORDER 0004 HEREBY AWARDS THE FOLLOWING CLIN AGAINST ORDERING PERIOD ONE:

CLIN 0004 - 3,226 EA, SCREW, MACHINE, NSN: 5305-01-448-9826, AT A UNIT PRICE OF \$0.59 FOR A TOTAL AMOUNT OF \$1,903.34.

2. THE DELIVERY SCHEDULE IS SET FORTH IN SECTION B, SUPPLIES/SERVICES.

3. THE TOTAL DOLLAR VALUE OF THIS DELIVERY ORDER IS \$1,903.34.

4. THIS DELIVERY ORDER IS SUBJECT TO THE TERMS AND CONDITIONS CONTAINED IN BASIC CONTRACT DAAE20-02-D-0031.

5. EARLIER DELIVERIES ARE ACCEPTABLE AT NO ADDITIONAL COST TO THE GOVERNMENT.

6. ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED.

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

CONTINUATION SHEET

Reference No. of Document Being Continued  
 PIIN/SIIN DAAE20-02-D-0031/0004 MOD/AMD

Name of Offeror or Contractor: AIMPOINT INC

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT																		
0004	SUPPLIES OR SERVICES AND PRICES/COSTS <u>Supplies or Services and Prices/Costs</u>																						
0004AA	<u>PRODUCTION QUANTITY</u>	3226	EA	\$ 0.59000	\$ 1,903.34																		
	NSN: 5305-01-448-9826 NOUN: SCREW, MACHINE FSCM: 3J629 PART NR: 05681090 SECURITY CLASS: Unclassified PRON: M131S020M1 PRON AMD: 02 ACRN: AA AMS CD: 070011LZ  <u>Packaging and Marking</u>  <u>Inspection and Acceptance</u> INSPECTION: Certificate of Conformance ACCEPTANCE: Origin  <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>W52H092281A160</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>3,226</td> <td>11-MAR-2003</td> </tr> </table> FOB POINT: Origin  SHIP TO: <u>FREIGHT ADDRESS</u> (W25G1U) XU TRANSPORTATION OFFICER DDSP NEW CUMBERLAND FACILITY BUILDING MISSION DOOR 113 134 NEW CUMBERLAND PA 17070-5001  <u>CONTRACT/DELIVERY ORDER NUMBER</u> DAAE20-02-D-0031/0004	<u>REL CD</u>	<u>MILSTRIP</u>	<u>ADDR</u>	<u>SIG CD</u>	<u>MARK FOR</u>	<u>TP CD</u>	001	W52H092281A160	W25G1U	J		1	<u>DEL REL CD</u>	<u>QUANTITY</u>	<u>DEL DATE</u>	001	3,226	11-MAR-2003				
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**Reference No. of Document Being Continued**

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**PIIN/SIIN** DAAE20-02-D-0031/0004

**MOD/AMD**

**Name of Offeror or Contractor:** AIMPOINT 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>
							<u>NUMBER</u>		
0004AA	M131S020M1	AA	2	97	X4930AC6G 6D	26FB S11116		W52H09	\$ 1,903.34
	070011LZ								
								TOTAL	\$ 1,903.34

SERVICE							ACCOUNTING	OBLIGATED
<u>NAME</u>	<u>TOTAL BY ACRN</u>	<u>ACCOUNTING CLASSIFICATION</u>					<u>STATION</u>	<u>AMOUNT</u>
Army	AA	97	X4930AC6G 6D	26FB S11116			W52H09	\$ 1,903.34
							TOTAL	\$ 1,903.34