

ORDER FOR SUPPLIES OR SERVICES										PAGE 1 OF 4		
1. CONTRACT PURCH ORDER/AGREEMENT NO. DAAE20-02-D-0054			2. DELIVERY ORDER/CALL NO. 0007		3. DATE OF ORDER/CALL (YYYYMMDD) 2003OCT20		4. REQUISITION/PURCH REQUEST NO. SEE SCHEDULE		5. PRIORITY DOA5			
6. ISSUED BY TACOM-ROCK ISLAND AMSTA-LC-CSC-C BOBBIE STEGALL (309)782-3618 ROCK ISLAND IL 61299-7630 EMAIL: STEGALLB@RIA.ARMY.MIL			CODE W52H09	7. ADMINISTERED BY (if other than 6) DCMA ST LOUIS 1222 SPRUCE ST ST LOUIS MO 63103-2812				CODE S2605A	8. DELIVERY FOB <input type="checkbox"/> DESTINATION <input checked="" type="checkbox"/> OTHER (See Schedule if other)			
9. CONTRACTOR ALLIED MATERIALS & EQUIPMENT CO., INC. 1400 KANSAS AVENUE KANSAS CITY, MO. 64127-2135			CODE 34500	FACILITY	10. DELIVER TO FOB POINT BY (Date) (YYYYMMDD) SEE SCHEDULE			11. X IF BUSINESS IS <input checked="" type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISADVANTAGED <input type="checkbox"/> WOMAN-OWNED				
NAME AND ADDRESS TYPE BUSINESS: Other Small Business Performing in U.S.					12. DISCOUNT TERMS 0.01% 20 Days .1%(1/10 OF 1%) 20 DAYS			13. MAIL INVOICES TO THE ADDRESS IN BLOCK See Block 15				
14. SHIP TO SEE SCHEDULE			CODE	15. PAYMENT WILL BE MADE BY DFAS COLUMBUS CENTER DFAS-CO/WEST ENTITLEMENT OPERATIONS PO BOX 182381 COLUMBUS OH 43218-2381				CODE HQ0339	MARK ALL PACKAGES AND PAPERS WITH IDENTIFICATION NUMBERS IN BLOCKS 1 AND 2			
16. TYPE OF ORDER	DELIVERY/ CALL	<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.									
PURCHASE			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)			
<input checked="" 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 SEE SCHEDULE CONTRACT TYPE: Firm-Fixed-Price KIND OF CONTRACT: Supply Contracts and Priced Orders				20. QUANTITY ORDERED/ ACCEPTED*	21. UNIT	22. UNIT PRICE	23. AMOUNT				
* 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 JERRY L YOWELL /SIGNED/ YOWELLJ@RIA.ARMY.MIL (309)782-6736				25. TOTAL	\$9,160.00				
27a. QUANTITY IN COLUMN 20 HAS BEEN <input type="checkbox"/> INSPECTED <input type="checkbox"/> RECEIVED <input type="checkbox"/> ACCEPTED, AND CONFORMS TO CONTRACT EXCEPT AS NOTED			26. DIFFERENCES									
b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE					c. DATE (YYYYMMDD)	d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE						
e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE					28. SHIP. NO.	29. D.O. VOUCHER NO.		30. INITIALS				
f. TELEPHONE NUMBER		g. E-MAIL ADDRESS			<input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL	32. PAID BY		33. AMOUNT VERIFIED CORRECT FOR				
36. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT.					31. PAYMENT <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL			34. CHECK NUMBER				
a. DATE (YYYYMMDD)		b. SIGNATURE AND TITLE OF CERTIFYING OFFICER						35. BILL OF LADING NO.				
37. RECEIVED AT	38. RECEIVED BY (Print)		39. DATE RECEIVED (YYYYMMDD)		40. TOTAL CONTAINERS	41. S/R ACCOUNT NUMBER		42. S/R VOUCHER NO.				

CONTINUATION SHEET**Reference No. of Document Being Continued****Page 2 of 4**

PIIN/SIIN DAAE20-02-D-0054/0007

MOD/AMD

Name of Offeror or Contractor: ALLIED MATERIALS & EQUIPMENT CO., INC.

SUPPLEMENTAL INFORMATION

1. DELIVERY ORDER 0007 IS HEREBY AWARDED AGAINST ORDERING PERIOD 3 (FY04) FOR THE FOLLOWING ITEM:

CLIN 0019: 1,000 EACH, DOOR ASSEMBLY, THUMB, NSN: 1005-01-228-8504, PN: 9381380 AT A UNIT PRICE OF \$9.16 EACH FOR A TOTAL CLIN AMOUNT OF \$9,160.00.

2. THE DELIVERY SCHEDULE IS SET FORTH IN THE SUPPLIES/SERVICES PAGES. PARTIAL DELIVERIES ARE ACCEPTABLE ANYTIME WITHIN THE DELIVERY SCHEDULE TIMEFRAME. EARLIER DELIVERIES ARE ACCEPTABLE, AT NO ADDITIONAL COST TO THE GOVERNMENT.

3. THE TOTAL DOLLAR VALUE OF DELIVERY ORDER 0007 IS \$9,160.00.

4. THIS DELIVERY ORDER IS SUBJECT TO THE TERMS AND CONDITIONS CONTAINED IN THE BASIC CONTRACT, DAAE20-02-D-0054 AND SOLICITATION DAAE20-99-R-0091.

*** END OF NARRATIVE A 001 ***

CONTINUATION SHEET

Reference No. of Document Being Continued
 PIIN/SIIN DAAE20-02-D-0054/0007 MOD/AMD

Name of Offeror or Contractor: ALLIED MATERIALS & EQUIPMENT CO., INC.

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0019	SUPPLIES OR SERVICES AND PRICES/COSTS NSN: 1005-01-228-8504 FSCM: 19200 PART NR: 9381380 SECURITY CLASS: Unclassified				
0019AA	<u>PRODUCTION QUANTITY</u> NOUN: DOOR ASSEMBLY, THUMB PRON: M141S091M1 PRON AMD: 01 ACRN: AA AMS CD: 070011HFAM4 <u>Packaging and Marking</u> <u>Inspection and Acceptance</u> INSPECTION: Origin ACCEPTANCE: Origin <u>Deliveries or Performance</u> DOC SUPPL REL CD MILSTRIP ADDR SIG CD MARK FOR TP CD 001 W52H093283A173 W25G1U J 1 DEL REL CD QUANTITY DEL DATE 001 1,000 17-FEB-2004 FOB POINT: Origin SHIP TO: <u>PARCEL POST 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-0054/0007	1000	EA	\$ 9.16000	\$ 9,160.00

CONTINUATION SHEET

Reference No. of Document Being Continued

PIIN/SIIN DAAE20-02-D-0054/0007 **MOD/AMD**

Name of Offeror or Contractor: ALLIED MATERIALS & EQUIPMENT CO., INC.

CONTRACT ADMINISTRATION DATA

LINE	PRON/ AMS CD/ <u>ITEM</u>	<u>MIPR</u>	<u>ACRN</u>	<u>STAT</u>	<u>ACCOUNTING CLASSIFICATION</u>	JOB ORDER <u>NUMBER</u>	<u>ACCOUNTING STATION</u>	<u>OBLIGATED AMOUNT</u>
0019AA	M141S091M1 070011HFAM4	AA	2	97	X4930AC6G 6D	26FB S11116	W52H09 \$	9,160.00
								TOTAL \$ 9,160.00

SERVICE <u>NAME</u>	<u>TOTAL BY ACRN</u>	<u>ACCOUNTING CLASSIFICATION</u>	JOB <u>STATION</u>	<u>OBLIGATED AMOUNT</u>
Army	AA	97 X4930AC6G 6D	26FB S11116	W52H09 \$ 9,160.00
				TOTAL \$ 9,160.00