

ORDER FOR SUPPLIES OR SERVICES

| | | | | | | | | | | | | | | |
|---|--|---|--|---|--|---|-----------------|--|------------------------|---|--|---|-------------------------------|----------------------------|
| 1. CONTRACT PURCH ORDER/AGREEMENT NO. DAAE20-02-D-0057 | | | | 2. DELIVERY ORDER/CALL NO. 0028 | | 3. DATE OF ORDER/CALL (YYYYMMDD) 2003AUG22 | | 4. REQUISITION/PURCH REQUEST NO. SEE SCHEDULE | | 5. PRIORITY DOA5 | | | | |
| 6. ISSUED BY TACOM-ROCK ISLAND AMSTA-LC-CSC-B CAROL S STAIB (309)782-7114 ROCK ISLAND IL 61299-7630 EMAIL: STAIBC@RIA.ARMY.MIL | | | | CODE W52H09 | | 7. ADMINISTERED BY (if other than 6) DCMA SANTA ANA 34 CIVIC CENTER PLAZA ROOM 813A SANTA ANA CA 92701-4056 SCD: B PAS: NONE ADP PT: HQ0339 | | | | 8. DELIVERY FOB <input type="checkbox"/> DESTINATION <input checked="" type="checkbox"/> OTHER (See Schedule if other) | | | | |
| 9. CONTRACTOR WESTERN DESIGN HOWDEN CORP 16952 MILLIKAN AVE IRVINE, CA. 92606-5045 NAME AND ADDRESS TYPE BUSINESS: Large Business Performing in U.S. | | | | CODE 59027 | | FACILITY | | 10. DELIVER TO FOB POINT BY (Date) (YYYYMMDD) SEE SCHEDULE | | 11. X IF BUSINESS IS <input type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISADVANTAGED <input type="checkbox"/> WOMAN-OWNED | | | | |
| 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 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 KRISTAN A MENDOZA /SIGNED/ MENDOZAK@RIA.ARMY.MIL (309) 782-0243 | | | | 25. TOTAL | | \$4,008.60 | | 26. DIFFERENCES | | |
| 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 | | | | | | | | | | | | | | |
| 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 | | 35. BILL OF LADING NO. | | | | |
| a. DATE (YYYYMMDD) | | b. SIGNATURE AND TITLE OF CERTIFYING OFFICER | | | | 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 5****PIIN/SIIN** DAAE20-02-D-0057/0028**MOD/AMD****Name of Offeror or Contractor:** WESTERN DESIGN HOWDEN CORP

SUPPLEMENTAL INFORMATION

1. THIS DELIVERY ORDER IS AWARDED IN ACCORDANCE WITH THE REQUIREMENTS CONTRACT, DAAE20-02-D-0057, WHICH IS INCORPORATED BY REFERENCE AS PART OF THIS DOCUMENT.
2. THE PURPOSE OF THIS DELIVERY ORDER IS TO AWARD THE ITEM LISTED IN SECTION B FROM THE M230/AWS CATALOG PRICE LIST.
3. ALL MANDATORY CLAUSES FOR A FIRM-FIXED PRICE CONTRACT UNDER DAAE20-02-D-0057 APPLY TO THIS DELIVERY ORDER.
4. THE TOTAL AMOUNT OF THIS ORDER IS \$4,008.60.
5. ALL OTHER TERMS AND CONDITIONS REMAIN THE SAME.

*** END OF NARRATIVE A 001 ***

CONTINUATION SHEET

Reference No. of Document Being Continued
 PIIN/SIIN DAAE20-02-D-0057/0028 MOD/AMD

Name of Offeror or Contractor: WESTERN DESIGN HOWDEN CORP

| ITEM NO | SUPPLIES/SERVICES | QUANTITY | UNIT | UNIT PRICE | AMOUNT | | | | | | | | | | | | | | | | | | |
|-------------------|--|-----------------|-----------------|-----------------|---------------|-----------------|--------------|-----|----------------|--------|---|--|---|-------------------|-----------------|-----------------|-----|---|-------------|---|----|--------------|-------------|
| 0062 | SUPPLIES OR SERVICES AND PRICES/COSTS NSN: 1005-01-182-3766 FSCM: 59027 PART NR: 014406-1 SECURITY CLASS: Unclassified | | | | | | | | | | | | | | | | | | | | | | |
| 0062AA | <u>PRODUCTION QUANTITY</u> NOUN: ADAPTER,AMMUNITION PRON: M1310765M1 PRON AMD: 02 ACRN: AA AMS CD: 070011H3SOX <u>Packaging and Marking</u> <u>Inspection and Acceptance</u> INSPECTION: Origin 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>W52H0932121982</td> <td>W45G19</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>7</td> <td>12-FEB-2004</td> </tr> </table> FOB POINT: Origin SHIP TO: <u>FREIGHT ADDRESS</u> (W45G19) SR W390 RED RIVER MUNITIONS CTR HIGHWAY 82 WEST CL V GATE 44 BLDG 184 TEXARKANA TX 75507-5000 <u>CONTRACT/DELIVERY ORDER NUMBER</u> DAAE20-02-D-0057/0028 | <u>REL CD</u> | <u>MILSTRIP</u> | <u>ADDR</u> | <u>SIG CD</u> | <u>MARK FOR</u> | <u>TP CD</u> | 001 | W52H0932121982 | W45G19 | J | | 1 | <u>DEL REL CD</u> | <u>QUANTITY</u> | <u>DEL DATE</u> | 001 | 7 | 12-FEB-2004 | 7 | EA | \$ 400.86000 | \$ 2,806.02 |
| <u>REL CD</u> | <u>MILSTRIP</u> | <u>ADDR</u> | <u>SIG CD</u> | <u>MARK FOR</u> | <u>TP CD</u> | | | | | | | | | | | | | | | | | | |
| 001 | W52H0932121982 | W45G19 | J | | 1 | | | | | | | | | | | | | | | | | | |
| <u>DEL REL CD</u> | <u>QUANTITY</u> | <u>DEL DATE</u> | | | | | | | | | | | | | | | | | | | | | |
| 001 | 7 | 12-FEB-2004 | | | | | | | | | | | | | | | | | | | | | |
| 0062AB | <u>PRODUCTION QUANTITY</u> NOUN: ADAPTER,AMMUNITION PRON: M131V526M1 PRON AMD: 01 ACRN: AA AMS CD: 070011H3SOX <u>Packaging and Marking</u> <u>Inspection and Acceptance</u> INSPECTION: Origin ACCEPTANCE: Origin | 3 | EA | \$ 400.86000 | \$ 1,202.58 | | | | | | | | | | | | | | | | | | |

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Reference No. of Document Being Continued
 PIIN/SIIN DAAE20-02-D-0057/0028 MOD/AMD

Name of Offeror or Contractor: WESTERN DESIGN HOWDEN CORP

| ITEM NO | SUPPLIES/SERVICES | QUANTITY | UNIT | UNIT PRICE | AMOUNT |
|---------|---|----------|------|------------|--------|
| | <p><u>Deliveries or Performance</u> DOC SUPPL <u>REL CD MILSTRIP ADDR SIG CD MARK FOR TP CD</u> 001 W52H093231A621 W45G19 J 1 <u>DEL REL CD QUANTITY DEL DATE</u> 001 3 12-FEB-2004</p> <p>FOB POINT: Origin</p> <p>SHIP TO: <u>FREIGHT ADDRESS</u> (W45G19) SR W390 RED RIVER MUNITIONS CTR HIGHWAY 82 WEST CL V GATE 44 BLDG 184 TEXARKANA TX 75507-5000</p> <p><u>CONTRACT/DELIVERY ORDER NUMBER</u> DAAE20-02-D-0057/0028</p> | | | | |

CONTINUATION SHEET

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PIIN/SIIN DAAE20-02-D-0057/0028

MOD/AMD

Name of Offeror or Contractor: WESTERN DESIGN HOWDEN CORP

CONTRACT ADMINISTRATION DATA

| LINE | PRON/ <u>ITEM</u> | <u>AMS CD</u> | <u>ACRN</u> | <u>STAT</u> | <u>ACCOUNTING CLASSIFICATION</u> | JOB ORDER <u>NUMBER</u> | <u>ACCOUNTING STATION</u> | <u>OBLIGATED AMOUNT</u> |
|--------|----------------------|---------------|-------------|-------------|----------------------------------|-------------------------------|---------------------------|-------------------------|
| 0062AA | M1310765M1 | | AA | 2 | 97 X4930AC6G 6D | 26FB S11116 | W52H09 \$ | 2,806.02 |
| | 070011H3SOX | | | | | | | |
| 0062AB | M131V526M1 | | AA | 2 | 97 X4930AC6G 6D | 26FB S11116 | W52H09 \$ | 1,202.58 |
| | 070011H3SOX | | | | | | | |
| | | | | | | | TOTAL \$ | 4,008.60 |

| <u>SERVICE NAME</u> | <u>TOTAL BY ACRN</u> | <u>ACCOUNTING CLASSIFICATION</u> | JOB <u>ACCOUNTING STATION</u> | <u>OBLIGATED AMOUNT</u> |
|---------------------|----------------------|----------------------------------|----------------------------------|-------------------------|
| Army | AA | 97 X4930AC6G 6D | 26FB S11116 W52H09 \$ | 4,008.60 |
| | | | TOTAL \$ | 4,008.60 |