

ORDER FOR SUPPLIES OR SERVICES

| | | | | |
|--|-----------------------------------|--|---|----------------------------|
| 1. Contract/Purch Order/Agreement No. DAAE20-02-P-0233 | 2. Delivery Order/Call No. | 3. Date Of Order/Call (YYYYMMDD) 2002MAR20 | 4. Requisition/Purch Request No. SEE SCHEDULE | 5. Priority DOA5 |
|--|-----------------------------------|--|---|----------------------------|

| | | | | | | |
|---|-------------|--------|--|-------------|--------|--|
| 6. Issued By TACOM-ROCK ISLAND AMSTA-LC-CSC-A TERESA STOTTLEMYRE (309)782-4626 ROCK ISLAND IL 61299-7630 EMAIL: STOTTLEMYRET@RIA.ARMY.MIL | Code | W52H09 | 7. Administered By (If other than 6) DCMA NEW YORK FT WADSWORTH BLDG 120 207 NEW YORK AVE STATEN ISLAND NY 10305-5013 SCD A PAS NONE ADP PT HQ0337 | Code | S3310A | 8. Delivery FOB <input type="checkbox"/> Destination <input checked="" type="checkbox"/> Other (See Schedule if other) |
|---|-------------|--------|--|-------------|--------|--|

| | | | | | |
|--|-------------|-------|-----------------|--|--|
| 9. Contractor KIPCO MACHINE AND TOOL INC 105 JAMAICA AVE BROOKLYN NY 11207 Name and Address TYPE BUSINESS: Other Small Business Performing in U.S. | Code | 51081 | 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 |
| | | | | 12. Discount Terms 0.50% 10 Days Net 30 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 NORTH ENTITLEMENT OPERATIONS PO BOX 182266 COLUMBUS OH 43218-2266 | Code | HQ0337 | Mark all Packages and Papers with Identification Numbers in Blocks 1 and 2 |
|------------------------------------|-------------|--|---|-------------|--------|---|

| | | |
|--------------------------|----------------------|---|
| 16. Type of Order | Delivery/Call | 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 DAAE2002T0130, Dated _____, furnish the following on terms specified herein. |
| | X | 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 | | | | |

| | | | |
|--|--|-----------------|-------------|
| * 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: KRISTAN A MENDOZA /SIGNED/ MENDOZAK@RIA.ARMY.MIL (309)782-0243 Contracting/Ordering Officer | 25. Total | \$22,896.00 |
| | | 29. Differences | |

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

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

CONTINUATION SHEET

Reference No. of Document Being Continued
 PIIN/SIIN DAAE20-02-P-0233 MOD/AMD

Name of Offeror or Contractor: KIPCO MACHINE AND TOOL INC

| ITEM NO | SUPPLIES/SERVICES | QUANTITY | UNIT | UNIT PRICE | AMOUNT | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--------------------|---|-----------------|---------------|-----------------|--------------|--|--|---------------|-----------------|-------------|---------------|-----------------|--------------|-----|----------------|--------|---|--|---|-------------------|-----------------|-----------------|--|--|--|-----|-------|-------------|--|--|--|-----|-------|-------------|--|--|--|------|----|------------|--------------|
| 0001 0001AA | <p>SUPPLIES OR SERVICES AND PRICES/COSTS</p> <p><u>Supplies or Services and Prices/Costs</u></p> <p><u>PRODUCTION QUANTITY</u></p> <p>NSN: 1005-01-327-4583 NOUN: PARTS KIT,GUN FSCM: 19200 PART NR: 12557030 SECURITY CLASS: Unclassified PRON: M121S367M1 PRON AMD: 02 ACRN: AA AMS CD: 0700116Z6ZA</p> <p><u>Packaging and Marking</u></p> <p><u>Inspection and Acceptance</u> INSPECTION: Origin ACCEPTANCE: Origin</p> <p><u>Deliveries or Performance</u></p> <table border="0"> <tr> <td>DOC</td> <td colspan="5">SUPPL</td> </tr> <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>W52H092008A151</td> <td>W45G19</td> <td>J</td> <td></td> <td>1</td> </tr> <tr> <td><u>DEL REL CD</u></td> <td><u>QUANTITY</u></td> <td><u>DEL DATE</u></td> <td colspan="3"></td> </tr> <tr> <td>001</td> <td>2,650</td> <td>30-NOV-2002</td> <td colspan="3"></td> </tr> <tr> <td>002</td> <td>2,650</td> <td>30-DEC-2002</td> <td colspan="3"></td> </tr> </table> <p>FOB POINT: Destination</p> <p>SHIP TO: <u>FREIGHT ADDRESS</u> (W45G19) XR 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-P-0233/0000</p> | DOC | SUPPL | | | | | <u>REL CD</u> | <u>MILSTRIP</u> | <u>ADDR</u> | <u>SIG CD</u> | <u>MARK FOR</u> | <u>TP CD</u> | 001 | W52H092008A151 | W45G19 | J | | 1 | <u>DEL REL CD</u> | <u>QUANTITY</u> | <u>DEL DATE</u> | | | | 001 | 2,650 | 30-NOV-2002 | | | | 002 | 2,650 | 30-DEC-2002 | | | | 5300 | KT | \$ 4.32000 | \$ 22,896.00 |
| DOC | SUPPL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <u>REL CD</u> | <u>MILSTRIP</u> | <u>ADDR</u> | <u>SIG CD</u> | <u>MARK FOR</u> | <u>TP CD</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 001 | W52H092008A151 | W45G19 | J | | 1 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <u>DEL REL CD</u> | <u>QUANTITY</u> | <u>DEL DATE</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 001 | 2,650 | 30-NOV-2002 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 002 | 2,650 | 30-DEC-2002 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 0002 | <p><u>Supplies or Services and Prices/Costs</u></p> <p><u>DATA ITEM</u></p> <p>NOUN: DD FORM 1423 REQUIREMENTS SECURITY CLASS: Unclassified</p> <p>Contractor will prepare and deliver the technical data in accordance with the requirements, quantities and schedules set forth in the Contract Data Requirements Lists (DD Form 1423), Exhibit A.</p> <p>A DD 250 IS NOT REQUIRED.</p> <p>(End of narrative B001)</p> | | | \$ ** NSP ** | \$ ** NSP ** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

CONTINUATION SHEET

Reference No. of Document Being Continued
PIIN/SIN DAAE20-02-P-0233 **MOD/AMD**

Page 3 of 4

Name of Offeror or Contractor: KIPCO MACHINE AND TOOL INC

| ITEM NO | SUPPLIES/SERVICES | QUANTITY | UNIT | UNIT PRICE | AMOUNT |
|---------|--|----------|------|------------|--------|
| | <p><u>Inspection and Acceptance</u> INSPECTION: Destination ACCEPTANCE: Destination</p> | | | | |

CONTINUATION SHEET

Reference No. of Document Being Continued

Page 4 of 4

PIIN/SIIN DAAE20-02-P-0233

MOD/AMD

Name of Offeror or Contractor: KIPCO MACHINE AND TOOL 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 | M121S367M1 | AA | 2 | 97 | X4930AC6G | 6D | 26FB | S11116 | W52H09 | \$ 22,896.00 |
| | 0700116Z6ZA | | | | | | | | | |
| | | | | | | | | | TOTAL | \$ 22,896.00 |

| SERVICE | | | | | | | ACCOUNTING | OBLIGATED |
|-------------|----------------------|----------------------------------|-----------|----|------|----------------|---------------|--------------|
| <u>NAME</u> | <u>TOTAL BY ACRN</u> | <u>ACCOUNTING CLASSIFICATION</u> | | | | <u>STATION</u> | <u>AMOUNT</u> | |
| | | | | | | | | |
| Army | AA | 97 | X4930AC6G | 6D | 26FB | S11116 | W52H09 | \$ 22,896.00 |
| | | | | | | | TOTAL | \$ 22,896.00 |