

ORDER FOR SUPPLIES OR SERVICES

1. CONTRACT PURCH ORDER/AGREEMENT NO. DAAE20-03-D-0135	2. DELIVERY ORDER/CALL NO. 0001	3. DATE OF ORDER/CALL (YYYYMMDD) 2003JUN30	4. REQUISITION/PURCH REQUEST NO. SEE SCHEDULE	5. PRIORITY DOA5
--	---	--	---	----------------------------

6. ISSUED BY TACOM-ROCK ISLAND AMSTA-AQ-ARCC LORRIE SCHMIDT (309)782-0673 ROCK ISLAND IL 61299-7630 EMAIL: SCHMIDTL@RIA.ARMY.MIL	CODE W52H09	7. ADMINISTERED BY (if other than 6) DCMA ATLANTA 805 WALKER STREET SUITE 1 MARIETTA GA 30060-2789	CODE S1103A	8. DELIVERY FOB <input checked="" type="checkbox"/> DESTINATION <input type="checkbox"/> OTHER (See Schedule if other)
--	--------------------	--	--------------------	--

9. CONTRACTOR COVERS INC 500 WEST GOLDSBORO STREET KENLY, NC. 27542-7758	CODE OVR31	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			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/SOUTH ENTITLEMENT OPERATION P O BOX 182264 COLUMBUS OH 43218-2264	CODE HQ0338	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	20. QUANTITY ORDERED/ACCEPTED*	21. UNIT	22. UNIT PRICE	23. AMOUNT
	SEE SCHEDULE CONTRACT TYPE: Firm-Fixed-Price 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 MARGARET C TUFTEE /SIGNED/ TUFTEEM@RIA.ARMY.MIL (309)782-7163	25. TOTAL	\$4,620.32
	BY: _____	26. DIFFERENCES	

27a. QUANTITY IN COLUMN 20 HAS BEEN
 INSPECTED RECEIVED 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.		<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 5**

PIIN/SIIN DAAE20-03-D-0135/0001

MOD/AMD

Name of Offeror or Contractor: COVERS INC

SUPPLEMENTAL INFORMATION

1. This delivery order formalizes letter award dated 30 Jun 2003 under the terms and conditions of contract DAAE20-03-D-0135, ordering period 1. A copy of the letter award is attached as page 2A of this order.

2. Award is for the following:

0001AA First Article Test Report for the CAM Carrying Case

0001AB Chemical Agent Monitor (CAM) Carrying Case NSN: 6665-01-417-9307 Quantity 100 each

3. The total price for this delivery order is \$4,620.32.

*** END OF NARRATIVE A 001 ***

CONTINUATION SHEET

Reference No. of Document Being Continued
PIIN/SIIN DAAE20-03-D-0135/0001 **MOD/AMD**

Page 4 of 5

Name of Offeror or Contractor: COVERS INC

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
	RICHMOND KY 40475-5000 <u>CONTRACT/DELIVERY ORDER NUMBER</u> DAAE20-03-D-0135/0001				

CONTINUATION SHEET

Reference No. of Document Being Continued

PIIN/SIIN DAAE20-03-D-0135/0001

MOD/AMD

Name of Offeror or Contractor: COVERS INC

CONTRACT ADMINISTRATION DATA

<u>LINE</u>	<u>PRON/</u>	<u>OBLG</u>	<u>JOB</u>	<u>ACCOUNTING</u>	<u>OBLIGATED</u>			
<u>ITEM</u>	<u>AMS CD</u>	<u>ACRN STAT</u>	<u>ORDER</u>	<u>STATION</u>	<u>AMOUNT</u>			
0001AB	S63ZD335SB	AA 2	97	X4930AC9B 6N	26KB S19130	W13G07	\$	4,620.32
	060011							
						TOTAL	\$	4,620.32

<u>SERVICE</u>	<u>ACCOUNTING</u>	<u>OBLIGATED</u>
<u>NAME</u>	<u>STATION</u>	<u>AMOUNT</u>
Army	W13G07	\$ 4,620.32
	TOTAL	\$ 4,620.32