

**ORDER FOR SUPPLIES OR SERVICES**

<b>1. CONTRACT PURCH ORDER/AGREEMENT NO.</b> DAAE20-03-G-0001	<b>2. DELIVERY ORDER/CALL NO.</b> 0014	<b>3. DATE OF ORDER/CALL (YYYYMMDD)</b> 2004MAR09	<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-CAC-B PAM YERINGTON (309)782-7297 ROCK ISLAND IL 61299-7630 EMAIL: YERINGTONP@RIA.ARMY.MIL	<b>CODE</b>	W52H09	<b>7. ADMINISTERED BY (if other than 6)</b> DCMA BIRMINGHAM BURGER PHILLIPS CENTER 1910 3RD AVE NORTH ROOM 201 BIRMINGHAM AL 35203-2376	<b>CODE</b>	S0101A	<b>8. DELIVERY FOB</b> <input type="checkbox"/> DESTINATION <input checked="" type="checkbox"/> OTHER (See Schedule if other)
			<b>SCD: A</b>	<b>PAS: NONE</b>	<b>ADP PT: HQ0338</b>	

<b>9. CONTRACTOR</b> • DRS TEST & ENERGY MANAGEMENT INC 110 WYNN DRIVE NAME AND ADDRESS: HUNTSVILLE, AL. 35805-0927 • TYPE BUSINESS: Large Business Performing in U.S.	<b>CODE</b>	24290	<b>FACILITY</b>		<b>10. DELIVER TO FOB POINT BY (Date) (YYYYMMDD)</b> SEE SCHEDULE	<b>11. X IF BUSINESS IS</b> <input 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"/>	<b>THIS DELIVERY ORDER IS ISSUED ON ANOTHER GOVERNMENT AGENCY OR IN ACCORDANCE WITH AND SUBJECT TO TERMS AND CONDITIONS OF ABOVE NUMBERED CONTRACT.</b>			
	<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.						

<b>NAME OF CONTRACTOR</b>	<b>SIGNATURE</b>	<b>TYPED NAME AND TITLE</b>	<b>DATE SIGNED (YYYYMMDD)</b>
<input checked="" type="checkbox"/>	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
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18. ITEM NO.	19. SCHEDULE OF SUPPLIES/SERVICE	20. QUANTITY ORDERED/ ACCEPTED*	21. UNIT	22. UNIT PRICE	23. AMOUNT
	SEE SCHEDULE CONTRACT TYPE: Cost-Plus-Fixed-Fee Cost Contract KIND OF CONTRACT: Service Contracts 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.	<b>24. UNITED STATES OF AMERICA</b> CAROL C RIVARD /SIGNED/ RIVARDC@RIA.ARMY.MIL (309)782-3272 BY: _____ CONTRACTING/ORDERING OFFICER	<b>25. TOTAL</b>	\$189,000.00
		<b>26. DIFFERENCES</b>	

**27a. QUANTITY IN COLUMN 20 HAS BEEN**  
 INSPECTED     RECEIVED     ACCEPTED, AND CONFORMS TO CONTRACT EXCEPT AS NOTED

<b>b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE</b>	<b>c. DATE (YYYYMMDD)</b>	<b>d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE</b>
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<b>e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE</b>	<b>28. SHIP. NO.</b>	<b>29. D.O. VOUCHER NO.</b>	<b>30. INITIALS</b>
	<input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL	<b>32. PAID BY</b>	<b>33. AMOUNT VERIFIED CORRECT FOR</b>

<b>f. TELEPHONE NUMBER</b>	<b>g. E-MAIL ADDRESS</b>	<b>31. PAYMENT</b>	<b>34. CHECK NUMBER</b>
		<input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL	

<b>36. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT.</b>			
<b>a. DATE (YYYYMMDD)</b>	<b>b. SIGNATURE AND TITLE OF CERTIFYING OFFICER</b>		<b>35. BILL OF LADING NO.</b>

<b>37. RECEIVED AT</b>	<b>38. RECEIVED BY (Print)</b>	<b>39. DATE RECEIVED (YYYYMMDD)</b>	<b>40. TOTAL CONTAINERS</b>	<b>41. S/R ACCOUNT NUMBER</b>	<b>42. S/R VOUCHER NO.</b>
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Name of Offeror or Contractor: DRS TEST &amp; ENERGY MANAGEMENT INC

## SUPPLEMENTAL INFORMATION

USMC M1A1 CONTRACTOR LOGISTIC SUPPORT FOR THE DIRECT SUPPORT  
ELECTRICAL SYSTEMS TEST (DSESTS)

1. The purpose of this delivery order is to provide Incremental Funding in the amount of \$189,000.00 for Semi-Annual Limited Technical Inspection (LTI) and Contractor Logistics Support (CLS) of all USMC DSESTS in accordance with the attached Scope of Work (Attachment 01 to this Delivery Order 0014).
2. This award is executed on a Cost Plus Fixed Fee as follows:

Estimated Cost:	\$335,482.00
Fixed Fee:	<u>\$30,975.00</u>
Total:	\$366,457.00
Warranty	\$9,636.00
3. The period of performance ends 31 March 2005, unless extended by mutual agreement of both parties.
4. Contract Clauses:
  - a. All mandatory clauses are incorporated by reference.
  - b. Mandatory for Cost Plus Fixed Fee Service Contracts Only: Page 28
  - c. Optional Clauses: Pages 28 and 29
  - d. Optional for Cost Plus Fixed Fee contracts only: Page 31 and 32
5. All other terms and conditions of the Basic Ordering Agreement are also incorporated by reference and remain unchanged.
6. Promptly notify the Contracting Officer upon reaching 75% of the funding level.
7. The balance of funding in the amount of \$187,093.00 will be provided at a later date.
8. This award is executed in accordance with the terms and conditions of DRS Proposal 3CM2NA). The cost structure is in accordance with the base and Option Year 1 of this delivery order.
9. As a result of the above, the funding level for Delivery Order 0014 is incrementally awarded at \$189,000.00.

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



**CONTINUATION SHEET**

**Reference No. of Document Being Continued**

**PIIN/SIIN** DAAE20-03-G-0001/0014 **MOD/AMD**

**Name of Offeror or Contractor:** DRS TEST & ENERGY MANAGEMENT INC

CONTRACT ADMINISTRATION DATA

LINE	PRON/ AMS CD/	OBLG	JOB ORDER	ACCOUNTING STATION	OBLIGATED AMOUNT
<u>ITEM</u>	<u>MIPR</u>	<u>ACRN</u> <u>STAT</u>	<u>NUMBER</u>	<u>STATION</u>	<u>AMOUNT</u>
0001AA	T14M9545M1	AA 2	17	46110922203106785400674432D22200500004MP42010	\$ 189,000.00
	M954500442010				
				TOTAL	\$ 189,000.00

SERVICE NAME	TOTAL BY ACRN	ACCOUNTING CLASSIFICATION	ACCOUNTING STATION	OBLIGATED AMOUNT
Marine Corps	AA	17 46110922203106785400674432D22200500004MP42010		\$ 189,000.00
			TOTAL	\$ 189,000.00

**CONTINUATION SHEET**

**Reference No. of Document Being Continued**

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**PIIN/SIIN** DAAE20-03-G-0001/0014

**MOD/AMD**

**Name of Offeror or Contractor:** DRS TEST & ENERGY MANAGEMENT INC

LIST OF ATTACHMENTS

<u>List of Addenda</u>	<u>Title</u>	<u>Date</u>	<u>Number of Pages</u>	<u>Transmitted By</u>
Attachment 001	DRS TEST & ENERGY TASK ORDER STATEMENT OF WORK FOR SEMI-ANNUAL LIMITED TECHNICAL INSPECTION (LTI) AND CLS OF AL USMC M1A1 DSESTS		005	EMAIL