

ORDER FOR SUPPLIES OR SERVICES

1. CONTRACT PURCH ORDER/AGREEMENT NO. W52H09-04-D-0043	2. DELIVERY ORDER/CALL NO. 0001	3. DATE OF ORDER/CALL (YYYYMMDD) 2004MAR17	4. REQUISITION/PURCH REQUEST NO. SEE SCHEDULE	5. PRIORITY DOA5
------------------------------------------------------------------	-------------------------------------------	------------------------------------------------------	---------------------------------------------------------	----------------------------

6. ISSUED BY TACOM-ROCK ISLAND AMSTA-LC-CSC-A CATHY MENDOZA (309)782-1258 ROCK ISLAND IL 61299-7630 EMAIL: MENDOZAC@RIA.ARMY.MIL	CODE W52H09	7. ADMINISTERED BY (if other than 6) DCMA SPRINGFIELD BLDG 1 ARDEC PICATINNY NJ 07806-5000	CODE S3101A	8. DELIVERY FOB <input type="checkbox"/> DESTINATION <input checked="" type="checkbox"/> OTHER (See Schedule if other)
--------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------	------------------------------------------------------------------------------------------------------------	-----------------------	----------------------------------------------------------------------------------------------------------------------------------------

9. CONTRACTOR ALLIED DYNAMICS INC. 191 COOLIDGE AVENUE ENGLEWOOD, NJ. 07631-4523	CODE OAPNO	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 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 <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 SUZANNE K MCGREGOR /SIGNED/ MCGREGORS@RIA.ARMY.MIL (309)782-3127 BY: _____ CONTRACTING/ORDERING OFFICER	25. TOTAL	\$104,000.00
		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		32. PAID BY <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		33. AMOUNT VERIFIED CORRECT FOR	
g. E-MAIL ADDRESS		31. PAYMENT <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		34. CHECK NUMBER	
36. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT.					
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 PIIN/SIIN W52H09-04-D-0043/0001 MOD/AMD	Page 2 of 5
---------------------------	-----------------------------------------------------------------------------------------------------------	--------------------

Name of Offeror or Contractor: ALLIED DYNAMICS INC.

SUPPLEMENTAL INFORMATION

Delivery Order 0001 is hereby awarded under the terms and conditions of contract W52H09-04-D-0043.

Award is made for 1,800 each Buffer Backplate under CLIN 0001AB.

*** END OF NARRATIVE A 001 ***

CONTINUATION SHEET

Reference No. of Document Being Continued
 PIIN/SIIN W52H09-04-D-0043/0001 MOD/AMD

Name of Offeror or Contractor: ALLIED DYNAMICS INC.

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT																																				
0001	SUPPLIES OR SERVICES AND PRICES/COSTS SECURITY CLASS: Unclassified																																								
0001AA	<u>SERVICES LINE ITEM</u> NOUN: M249 BACKPLATE FAT PRON: M141S503M1 PRON AMD: 01 ACRN: AA AMS CD: 070011 *** FATR shall be mailed to: TACOM AT ROCK ISLAND 1 ROCK ISLAND ARESENAL ATTN: AMSTA-LC-CSC-A/CATHY MENDOZA ROCK ISLAND, IL 61299-7630 (End of narrative B001) <u>Inspection and Acceptance</u> INSPECTION: Origin ACCEPTANCE: Destination <u>Deliveries or Performance</u> <table border="0" style="width: 100%;"> <tr> <td style="width: 30%;">DLVR SCH</td> <td style="width: 30%;">PERF COMPL</td> <td></td> </tr> <tr> <td><u>REL CD</u></td> <td><u>QUANTITY</u></td> <td><u>DATE</u></td> </tr> <tr> <td>001</td> <td>0</td> <td>12-AUG-2004</td> </tr> </table> <p style="text-align: right;">\$ 6,800.00</p>	DLVR SCH	PERF COMPL		<u>REL CD</u>	<u>QUANTITY</u>	<u>DATE</u>	001	0	12-AUG-2004				\$ 6,800.00																											
DLVR SCH	PERF COMPL																																								
<u>REL CD</u>	<u>QUANTITY</u>	<u>DATE</u>																																							
001	0	12-AUG-2004																																							
0001AB	<u>PRODUCTION QUANTITY</u> NOUN: BACKPLATE,BUFFER AS PRON: M131S649M1 PRON AMD: 03 ACRN: AA AMS CD: 0700116Z6ZA <u>Packaging and Marking</u> <u>Inspection and Acceptance</u> INSPECTION: Origin ACCEPTANCE: Origin <u>Deliveries or Performance</u> <table border="0" style="width: 100%;"> <tr> <td style="width: 10%;">DOC</td> <td style="width: 10%;">SUPPL</td> <td></td> <td></td> <td></td> <td></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>W52H093107A163</td> <td>W25G1U</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></td> <td></td> <td></td> </tr> <tr> <td>001</td> <td>300</td> <td>06-JAN-2005</td> <td></td> <td></td> <td></td> </tr> <tr> <td>002</td> <td>300</td> <td>06-FEB-2005</td> <td></td> <td></td> <td></td> </tr> </table>	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	W52H093107A163	W25G1U	J		1	<u>DEL REL CD</u>	<u>QUANTITY</u>	<u>DEL DATE</u>				001	300	06-JAN-2005				002	300	06-FEB-2005				1800	EA	\$ 54.00000	\$ 97,200.00
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	W52H093107A163	W25G1U	J		1																																				
<u>DEL REL CD</u>	<u>QUANTITY</u>	<u>DEL DATE</u>																																							
001	300	06-JAN-2005																																							
002	300	06-FEB-2005																																							

CONTINUATION SHEET

Reference No. of Document Being Continued
PIIN/SIIN W52H09-04-D-0043/0001 **MOD/AMD**

Name of Offeror or Contractor: ALLIED DYNAMICS INC.

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
003	300 06-MAR-2005				
004	300 06-APR-2005				
005	300 06-MAY-2005				
006	300 06-JUN-2005				
	FOB POINT: Destination				
	SHIP TO: <u>FREIGHT 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> W52H09-04-D-0043/0001				

CONTINUATION SHEET

Reference No. of Document Being Continued

Page 5 of 5

PIIN/SIIN W52H09-04-D-0043/0001

MOD/AMD

Name of Offeror or Contractor: ALLIED DYNAMICS INC.

CONTRACT ADMINISTRATION DATA

LINE	PRON/ AMS CD/ <u>ITEM</u>	<u>ACRN</u>	<u>STAT</u>	<u>ACCOUNTING CLASSIFICATION</u>	JOB ORDER <u>NUMBER</u>	<u>ACCOUNTING STATION</u>	<u>OBLIGATED AMOUNT</u>	
0001AA	M141S503M1 070011	AA	2	97 X4930AC6G 6D	26FB S11116	W52H09 \$	6,800.00	
0001AB	M131S649M1 0700116Z6ZA	AA	2	97 X4930AC6G 6D	26FB S11116	W52H09 \$	97,200.00	
TOTAL							\$	104,000.00

<u>SERVICE NAME</u>	<u>TOTAL BY ACRN</u>	<u>ACCOUNTING CLASSIFICATION</u>	<u>ACCOUNTING STATION</u>	<u>OBLIGATED AMOUNT</u>
Army	AA	97 X4930AC6G 6D	26FB S11116	W52H09 \$ 104,000.00
TOTAL				\$ 104,000.00