

**ORDER FOR SUPPLIES OR SERVICES**

<b>1. Contract/Purch Order/Agreement No.</b> DAAH23-98-G-0042	<b>2. Delivery Order/Call No.</b> DG17	<b>3. Date Of Order/Call (YYYYMMDD)</b> 2001DEC14	<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-CSC-B PHYLLIS SMITH (309)782-3625 ROCK ISLAND IL 61299-7630  EMAIL: SMITHP3@RIA.ARMY.MIL	<b>Code</b>	W52H09	<b>7. Administered By (If other than 6)</b> DCMA BELL HELICOPTER TEXTRON P O BOX 1605 FORT WORTH TX 76101-1605	<b>Code</b>	S4418A	<b>8. Delivery FOB</b> <input type="checkbox"/> Destination <input checked="" type="checkbox"/> Other
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<b>9. Contractor</b> Name and Address BELL HELICOPTER TEXTRON INC 601 E HURST BLVD P O BOX 482 FORT WORTH TX 76101  TYPE BUSINESS: Large Business Performing in U.S.	<b>Code</b>	97499	<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
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<b>14. Ship To</b> SEE SCHEDULE	<b>Code</b>		<b>15. Payment Will Be Made By</b> DFAS COLUMBUS CENTER WEST ENTITLEMENT OPERATIONS PO BOX 182381 COLUMBUS OH 43218-2381	<b>Code</b>	HQ0339	<b>13. Mail Invoices To the Address in Block</b> See Block 15  <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"/>	This delivery order is issued on another Government agency or in accordance with and subject to terms and conditions of above numbered contract.
	<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.			

Name Of Contractor	Signature	Typed Name And Title	Date Signed (YYYYMMDD)
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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: ADELAIDE J TKATCH /SIGNED/ TKATCHA@RIA.ARMY.MIL (309)782-5313	25. Total	\$112,985.00
		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	33. Amount Verified Correct For
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		34. Check Number
	<input type="checkbox"/> Complete <input type="checkbox"/> Partial <input type="checkbox"/> Final			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.
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<b>CONTINUATION SHEET</b>	<b>Reference No. of Document Being Continued</b> <b>PIIN/SIIN</b> DAAH23-98-G-0042/DG17 <b>MOD/AMD</b>	<b>Page 2 of 4</b>
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**Name of Offeror or Contractor:** BELL HELICOPTER TEXTRON INC

SUPPLEMENTAL INFORMATION

THIS DELIVERY ORDER IS ISSUED IN ACCORDANCE WITH THE TERMS AND CONDITIONS OF BASIC ORDERING AGREEMENT (BOA) DAAH23-98-G-0042 AND BELL HELICOPTER TEXTRON INC. MILITARY SPARES CATALOG AND IS SUBJECT TO THE TERMS AND CONDITIONS THEREIN.

FINAL INSPECTION SHALL BE PERFORMED BY THE DEFENSE PLANT REPRESENTATIVE OFFICE.

CONTRACTOR REMITTANCE ADDRESS:

CHASE MANHATTAN BANK, N.A.  
195 BROADWAY, 16TH FLOOR  
NEW YORK CITY, NY 10081

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

CONTINUATION SHEET

Reference No. of Document Being Continued  
 PIIN/SIIN DAAH23-98-G-0042/DG17 MOD/AMD

Name of Offeror or Contractor: BELL HELICOPTER TEXTRON INC

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT																		
0001	SUPPLIES OR SERVICES AND PRICES/COSTS  <u>Supplies or Services and Prices/Costs</u>																						
0001AA	<u>PRODUCTION QUANTITY</u>  NSN: 6150-01-361-8131 NOUN: CABLE ASSEMBLY,SPEC FSCM: 97499 PART NR: 406-075-192-103 SECURITY CLASS: Unclassified PRON: M121S591M1 PRON AMD: 01 ACRN: AA AMS CD: 060011  <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>W52H091332A612</td> <td>W25G1U</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>25</td> <td>15-SEP-2003</td> </tr> </table> FOB POINT: Origin  SHIP TO: <u>PARCEL POST 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> DAAH23-98-G-0042/DG17	<u>REL CD</u>	<u>MILSTRIP</u>	<u>ADDR</u>	<u>SIG CD</u>	<u>MARK FOR</u>	<u>TP CD</u>	001	W52H091332A612	W25G1U	J		1	<u>DEL REL CD</u>	<u>QUANTITY</u>	<u>DEL DATE</u>	001	25	15-SEP-2003	25	EA	\$ 4,519.40000	\$ 112,985.00
<u>REL CD</u>	<u>MILSTRIP</u>	<u>ADDR</u>	<u>SIG CD</u>	<u>MARK FOR</u>	<u>TP CD</u>																		
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