

ORDER FOR SUPPLIES OR SERVICES										PAGE 1 OF 4		
1. CONTRACT PURCH ORDER/AGREEMENT NO. DAAE20-99-A-0007			2. DELIVERY ORDER/CALL NO. 0006		3. DATE OF ORDER/CALL (YYYYMMDD) 2002DEC03		4. REQUISITION/PURCH REQUEST NO. SEE SCHEDULE		5. PRIORITY DXA5			
6. ISSUED BY TACOM-ROCK ISLAND AMSTA-LC-CAC CELESTE HOBERT (309)782-1262 ROCK ISLAND IL 61299-7630 EMAIL: HOBERTC@RIA.ARMY.MIL			CODE W52H09	7. ADMINISTERED BY (if other than 6) DCMA VAN NUYS 6230 VAN NUYS BLVD VAN NUYS CA 91401-2713				CODE S0512A	8. DELIVERY FOB <input checked="" type="checkbox"/> DESTINATION <input type="checkbox"/> OTHER (See Schedule if other)			
9. CONTRACTOR GLENNAIR INC 1211 AIR WAY GLENDAL CA 91201-2497			CODE 06324	FACILITY	10. DELIVER TO FOB POINT BY (Date) (YYYYMMDD) SEE SCHEDULE			A	NONE	11. X IF BUSINESS IS <input checked="" type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISADVANTAGED <input type="checkbox"/> WOMAN-OWNED		
NAME AND ADDRESS TYPE BUSINESS: Other Small Business Performing in U.S.			12. DISCOUNT TERMS 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 DFAS-CO/WEST ENTITLEMENT OPERATIONS PO BOX 182381 COLUMBUS OH 43218-2381				CODE HQ0339	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 _____ 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 SEE SCHEDULE CONTRACT TYPE: Firm-Fixed-Price KIND OF CONTRACT: System Acquisition Contracts				20. QUANTITY ORDERED/ACCEPTED*	21. UNIT	22. UNIT PRICE	23. AMOUNT				
* 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 C. YACKLEY /SIGNED/ YACKLEYS@RIA.ARMY.MIL (309) 782-1466				25. TOTAL	\$640.50				
27a. 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			BY:	CONTRACTING/ORDERING OFFICER	26. DIFFERENCES							
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.					31. 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.					

<b>CONTINUATION SHEET</b>	<b>Reference No. of Document Being Continued</b> <b>PIIN/SIIN</b> DAAE20-99-A-0007/0006 <b>MOD/AMD</b>	<b>Page 2 of 4</b>
<b>Name of Offeror or Contractor:</b> GLENAIR INC		

SUPPLEMENTAL INFORMATION

This delivery order awards CLIN 0013 in accordance with solicitation DAAE2003R0010. Delivery is as set forth in Section B.

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



**CONTINUATION SHEET**

**Reference No. of Document Being Continued**

**PIIN/SIIN** DAAE20-99-A-0007/0006

**MOD/AMD**

**Name of Offeror or Contractor:** GLENAIR 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>
0013AA	M1216356M1	AA	2	97	X4930AC6G 6D	26FB S11116	W52H09 \$	640.50
	070011							
							TOTAL \$	640.50

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 \$	640.50
						TOTAL \$	640.50