

SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS				1. Requisition Number SEE SCHEDULE		Page 1 Of 3	
Offeror To Complete Block 12, 17, 23, 24, & 30							
2. Contract No. DAAE20-99-D-0030		3. Award/Effective Date 1999JUL29		4. Order Number 0003		5. Solicitation Number	
7. For Solicitation Information Call:		A. Name DEBRA JUHL		B. Telephone Number (No Collect Calls) (309) 782-3370		6. Solicitation Issue Date	
9. Issued By TACOM-ROCK ISLAND AMSTA-AC-PCH-C ROCK ISLAND IL 61299-7630		Code W52H09		10. This Acquisition Is <input checked="" type="checkbox"/> Unrestricted <input type="checkbox"/> Set Aside: % For <input type="checkbox"/> Small Business <input type="checkbox"/> Small Disadv Business <input type="checkbox"/> 8(A) SIC: 3563 Size Standard:		11. Delivery For FOB Destination Unless Block Is Marked <input type="checkbox"/> See Schedule <input checked="" type="checkbox"/> 13a. This Contract Is A Rated Order Under DPAS (18 CFR 700) 13b. Rating DOC9 14. Method Of Solicitation <input type="checkbox"/> RFQ <input type="checkbox"/> IFB <input type="checkbox"/> RFP	
15. Deliver To CONSOL PROP OFC ROCK ISLAND ARSENAL ROCK ISLAND IL 61299-5000		Code W52H1B		16. Administered By DCMC BALTIMORE 217 EAST REDWOOD ST SUITE 1800 BALTIMORE MD 21202-5299		Code S2101A	
Telephone No.		17. Contractor/Offeror LBS CORPORATION 11408 PULASKI HIGHWAY WHITE MARSH, MD 21162-1512		18a. Payment Will Be Made By DFAS-COLUMBUS CENTER SOUTH ENTITLEMENT OPERATION DFAS-CO-JSC/CAPITOL PO BOX 182263 COLUMBUS OH 43218-2263		Code SC1034	
Telephone No.		<input type="checkbox"/> 17b. Check If Remittance Is Different And Put Such Address In Offer		18b. Submit Invoices To Address Shown In Block 18a Unless Block Below Is Checked <input type="checkbox"/> See Addendum			
19. Item No.		20. Schedule Of Supplies/Services		21. Quantity		22. Unit	
		SEE SCHEDULE					
		(Attach Additional Sheets As Necessary)					
						23. Unit Price	
						24. Amount	
25. Accounting And Appropriation Data ACRN: AA 97 79035018019181050201000031K9 S44205 W52H09						26. Total Award Amount (For Govt. Use Only) \$217,260.00	
<input type="checkbox"/> 27a. Solicitation Incorporates By Reference FAR 52.212-1, 52.212-4. FAR 52.212-3 And 52.212-5 Are Attached.						<input type="checkbox"/> Are <input type="checkbox"/> Are Not Attached.	
<input checked="" type="checkbox"/> 27b. Contract/Purchase Order Incorporates By Reference FAR 52.212-4. FAR 52.212-5 Is Attached. Addenda						<input checked="" type="checkbox"/> Are <input type="checkbox"/> Are Not Attached.	
28. Contractor Is Required To Sign This Document And Return _____ Copies To Issuing Office. Contractor Agrees To Furnish And Deliver All Items Set Forth Or Otherwise Identified Above And On Any Additional Sheets Subject To The Terms And Conditions Specified Herein.				29. Award Of Contract: Reference _____ Offer Dated _____. Your Offer On Solicitation (Block 5) Including Any Additions Or Changes Which Are Set Forth Herein Is Accepted As To Items:			
30a. Signature Of Offeror/Contractor				31a. United States Of America (Signature Of Contracting Officer)			
30b. Name And Title Of Signer (Type Or Print)		30c. Date Signed		31b. Name Of Contracting Officer (Type Or Print) HOWARD LEWIS LEWISH@RIA.ARMY.MIL (309) 782-3506		31c. Date Signed	
32a. Quantity In Column 21 Has Been <input type="checkbox"/> Received <input type="checkbox"/> Inspected <input type="checkbox"/> Accepted And Conforms To The Contract Except As Noted				33. Ship Number <input type="checkbox"/> Partial <input type="checkbox"/> Final		34. Voucher Number	
32b. Signature Of Authorized Government Representative		32c. Date		36. Payment <input type="checkbox"/> Complete <input type="checkbox"/> Partial <input type="checkbox"/> Final		35. Amount Verified Correct For	
				38. S/R Account Number		39. S/R Voucher Number	
				42a. Received By (Print)		37. Check Number	
41a. I Certify This Account Is Correct And Proper For Payment				42b. Received At (Location)		40. Paid By	
41b. Signature And Title Of Certifying Officer		41c. Date		42c. Date Recd (YYMMDD)		42d. Total Containers	

CONTINUATION SHEET

Reference No. of Document Being Continued
 PIIN/SIIN DAAE20-99-D-0030/0003 MOD/AMD

Name of Offeror or Contractor: LBS CORPORATION

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT															
	SUPPLIES OR SERVICES AND PRICES/COSTS																			
0001	<u>Supplies or Services and Prices/Costs</u>																			
0001AG	HYDROVANE AIR COMPRESSOR 5702398	142	EA	\$ 1,530.00000	\$ 217,260.00															
	NSN: 0000-00-000-0000 NOUN: AIR COMPRESSOR FSCM: 59678 PART NR: 11B257019 SECURITY CLASS: Unclassified PRON: W19A4V14M1 PRON AMD: 01 ACRN: AA AMS CD: 53450532 CUSTOMER ORDER NO: MIPR7HRIARP031																			
	<u>Packaging and Marking</u>																			
	<u>Inspection and Acceptance</u>																			
	INSPECTION: Destination ACCEPTANCE: Destination																			
	<u>Deliveries or Performance</u>																			
	DOC SUPPL																			
	<table border="1"> <thead> <tr> <th>REL CD</th> <th>MILSTRIP</th> <th>ADDR</th> <th>SIG CD</th> <th>MARK FOR</th> <th>TP CD</th> </tr> </thead> <tbody> <tr> <td>001</td> <td>W52H099208T618</td> <td>W52H1B</td> <td>J</td> <td></td> <td>3</td> </tr> </tbody> </table>	REL CD	MILSTRIP	ADDR	SIG CD	MARK FOR	TP CD	001	W52H099208T618	W52H1B	J		3							
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002	40	12-JAN-2000																		
003	40	12-FEB-2000																		
004	35	12-MAR-2000																		
	FOB POINT: Destination																			
	<u>SHIP TO: PARCEL POST ADDRESS</u>																			
	(W52H1B) CONSOL PROP OFC ROCK ISLAND ARSENAL ROCK ISLAND IL 61299-5000																			
	MARK FOR: W80Y1H CMTH/SUTTON X0006																			
	<u>CONTRACT/DELIVERY ORDER NUMBER</u> DAAE20-99-D-0030/0003																			

CONTINUATION SHEET

Reference No. of Document Being Continued

PIIN/SIIN DAAE20-99-D-0030/0003

MOD/AMD

Name of Offeror or Contractor: LBS CORPORATION

CONTRACT ADMINISTRATION DATA

LINE	PRON/	OBLG				JOB		
<u>ITEM</u>	<u>AMS CD</u>	<u>ACRN</u>	<u>STAT</u>	<u>ACCOUNTING CLASSIFICATION</u>		<u>ORDER</u>	<u>ACCOUNTING</u>	<u>OBLIGATED</u>
						<u>NUMBER</u>	<u>STATION</u>	<u>AMOUNT</u>
0001AG	W19A4V14M1	AA	2	97	79035018019181050201000031K9	S44205	W52H09	\$ 217,260.00
	53450532							
							TOTAL	\$ 217,260.00

SERVICE						ACCOUNTING		OBLIGATED
<u>NAME</u>	<u>TOTAL BY ACRN</u>	<u>ACCOUNTING CLASSIFICATION</u>				<u>STATION</u>		<u>AMOUNT</u>
Army	AA	97	79035018019181050201000031K9	S44205		W52H09	\$	217,260.00
						TOTAL	\$	217,260.00