

**ORDER FOR SUPPLIES OR SERVICES**

|  |   |  |   |                            |
|--|---|--|---|----------------------------|
| <b>1. Contract/Purch Order/Agreement No.</b><br>DAAE20-99-D-0040 | <b>2. Delivery Order/Call No.</b><br>0002 | <b>3. Date Of Order/Call (YYYYMMDD)</b><br>2001DEC19 | <b>4. Requisition/Purch Request No.</b><br>SEE SCHEDULE | <b>5. Priority</b><br>DOC9 |
|--|---|--|---|----------------------------|

|   |             |        |   |             |        |  |
|---|-------------|--------|---|-------------|--------|--|
| <b>6. Issued By</b><br>TACOM-ROCK ISLAND<br>AMSTA-AQ-ARCC<br>BOB ROBERTS (309)782-4997<br>ROCK ISLAND IL 61299-7630<br><br>EMAIL: ROBERTSC@RIA.ARMY.MIL | <b>Code</b> | W52H09 | <b>7. Administered By (If other than 6)</b><br>DCMA PHILADELPHIA<br>700 ROBBINS AVENUE BLDG 4-A<br>PO BOX 11427<br>PHILADELPHIA PA 19111-0427 | <b>Code</b> | S3915A | <b>8. Delivery FOB</b><br><input checked="" type="checkbox"/> Destination<br><input type="checkbox"/> Other<br><br>(See Schedule if other) |
|---|-------------|--------|---|-------------|--------|--|

|   |             |       |                 |  |  |   |
|---|-------------|-------|-----------------|--|--|---|
| <b>9. Contractor</b><br><br>• ILC MANUFACTURED PRODUCTS DIVISION<br>TWO MOONWALKER ROAD<br>FREDERICA DE 19946-0000<br><br><b>Name and Address</b><br><br>• TYPE BUSINESS: Large Business Performing in U.S. | <b>Code</b> | 09JX4 | <b>Facility</b> |  | <b>10. Deliver To FOB Point By (Date) (YYYYMMDD)</b><br><br>SEE SCHEDULE | <b>11. X If Business Is</b><br><input type="checkbox"/> Small<br><input type="checkbox"/> Small Disadvantaged<br><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><br>SEE SCHEDULE | <b>Code</b> |  | <b>15. Payment Will Be Made By</b><br>DFAS-COLUMBUS CENTER<br>DFAS-CO-JNF/NEW DOMINION<br>P O BOX 182041<br>COLUMBUS OH 43218-2041 | <b>Code</b> | SC1018 | <b>Mark all Packages and Papers with Identification Numbers in Blocks 1 and 2</b> |
|------------------------------------|-------------|--|--|-------------|--------|---|

|   |                      |                                     |   |
|---|----------------------|-------------------------------------|---|
| <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) |
|--------------------|-----------|----------------------|------------------------|

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<br>SEE SCHEDULE<br>CONTRACT TYPE:<br>Firm-Fixed-Price | 20. Quantity Ordered/ Accepted* | 21. Unit | 22. Unit Price | 23. Amount |
|  | KIND OF CONTRACT:<br>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<br><br>By: JOYCE L KLEIN /SIGNED/<br>KLEINJ@RIA.ARMY.MIL (309)782-5051<br><br>Contracting/Ordering Officer | 25. Total       | \$72,470.70 |
|  |   | 29. Differences |             |

|   |   |                             |  |  |
|---|---|-----------------------------|--|--|
| <b>26. Quantity In Column 20 Has Been</b><br><br><input type="checkbox"/> Inspected <input type="checkbox"/> Received <input type="checkbox"/> Accepted And Conforms To Contract Except As Noted<br><br>_____<br>Date Signature Of Authorized Govt Representative | <b>27. Ship. No.</b>  | <b>28. D.O. Voucher No.</b> | <b>30. Initials</b>                    |  |
| <b>36. I certify this account is correct and proper for payment</b><br><br>_____<br>Date Signature And Title Of Certifying Officer  | <input type="checkbox"/> Partial<br><input type="checkbox"/> Final                                      | <b>32. Paid By</b>          | <b>33. Amount Verified Correct For</b> |  |
|   | <input type="checkbox"/> Complete<br><input type="checkbox"/> Partial<br><input type="checkbox"/> Final |                             | <b>34. Check Number</b>                |  |
|   |   |                             | <b>35. Bill Of Lading No.</b>          |  |

|                 |                 |                   |                      |                        |                     |
|-----------------|-----------------|-------------------|----------------------|------------------------|---------------------|
| 37. Received At | 38. Received By | 39. Date Received | 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><br><b>PIIN/SIIN</b> DAAE20-99-D-0040/0002 <b>MOD/AMD</b> | <b>Page 2 of 5</b> |
|---------------------------|---|--------------------|

**Name of Offeror or Contractor:** ILC MANUFACTURED PRODUCTS DIVISION

SUPPLEMENTAL INFORMATION

THIS DELIVERY ORDER IS FOR 3,501 EACH, CARRIER, CANISTER, NSN: 4240-01-376-1382.

DELIVERY WILL BE FOB DESTINATION AS SHOWN IN SECTION B.

THIS AWARD IS PROCESSED AGAINST ORDERING PERIOD 3, FOR A UNIT PRICE OF \$20.70 WITH FIRST ARTICLE, FOR A TOTAL OF \$72,470.70.

ALL OTHER TERMS AND CONDITIONS OF THE BASIC CONTRACT DAAE20-99-D-0040 APPLY.

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

CONTINUATION SHEET

Reference No. of Document Being Continued  
 PIIN/SIIN DAAE20-99-D-0040/0002 MOD/AMD

Name of Offeror or Contractor: ILC MANUFACTURED PRODUCTS DIVISION

| ITEM NO | SUPPLIES/SERVICES   | QUANTITY | UNIT | UNIT PRICE              | AMOUNT                  |
|---------|---|----------|------|-------------------------|-------------------------|
|         | SUPPLIES OR SERVICES AND PRICES/COSTS   |          |      |                         |                         |
| 0001    | <u>Supplies or Services and Prices/Costs</u>  |          |      |                         |                         |
| 0001AA  | <p><u>DATA ITEM</u></p> <p>1</p> <p>LO</p> <p>\$ <u>    ** NSP **</u></p> <p>\$ <u>    ** NSP **</u></p> <p>NOUN: FIRST ARTICLE TEST REPORT<br/>                     SECURITY CLASS: Unclassified<br/>                     PRON: S62ZJ525SB PRON AMD: 01 ACRN: 9<br/>                     AMS CD: 070011CJZJ4</p> <p><u>Packaging and Marking</u></p> <p><u>Inspection and Acceptance</u><br/>                     INSPECTION: Origin ACCEPTANCE: Destination</p> <p><u>Deliveries or Performance</u><br/>                     DOC SUPPL<br/> <u>REL CD MILSTRIP ADDR SIG CD MARK FOR TP CD</u><br/>                     001 W22PVJ 3<br/> <u>DEL REL CD QUANTITY DEL DATE</u><br/>                     001 1 10-MAY-2002</p> <p>FOB POINT: Destination</p> <p>SHIP TO: <u>PARCEL POST ADDRESS</u><br/>                     (ZZZZZ5) TACOM-ROCK ISLAND<br/>                     ATTN AMSTA-AQ-ARCC<br/>                     ROCK ISLAND IL 61299-7630</p> <p><u>CONTRACT/DELIVERY ORDER NUMBER</u><br/>                     DAAE20-99-D-0040/0002</p> | 1        | LO   | \$ <u>    ** NSP **</u> | \$ <u>    ** NSP **</u> |
| 0001AB  | <p><u>PRODUCTION QUANTITY</u></p> <p>3501</p> <p>EA</p> <p>\$ <u>    20.70000</u></p> <p>\$ <u>    72,470.70</u></p> <p>NSN: 4240-01-376-1382<br/>                     NOUN: CARRIER, CANISTER<br/>                     FSCM: 81361<br/>                     PART NR: 5-1-1971<br/>                     SECURITY CLASS: Unclassified<br/>                     PRON: S62ZJ525SB PRON AMD: 01 ACRN: AA<br/>                     AMS CD: 070011CJZJ4</p> <p><u>Packaging and Marking</u></p> <p><u>Inspection and Acceptance</u><br/>                     INSPECTION: Origin ACCEPTANCE: Origin</p> <p><u>Deliveries or Performance</u><br/>                     DOC SUPPL<br/> <u>REL CD MILSTRIP ADDR SIG CD MARK FOR TP CD</u><br/>                     001 W58HZ11347A511 W22PVJ J 2<br/> <u>DEL REL CD QUANTITY DEL DATE</u><br/>                     001 3,501 06-SEP-2002</p> <p>FOB POINT: Destination</p>   | 3501     | EA   | \$ <u>    20.70000</u>  | \$ <u>    72,470.70</u> |

CONTINUATION SHEET

Reference No. of Document Being Continued  
PIIN/SIN DAAE20-99-D-0040/0002 MOD/AMD

Name of Offeror or Contractor: ILC MANUFACTURED PRODUCTS DIVISION

| ITEM NO | SUPPLIES/SERVICES   | QUANTITY | UNIT | UNIT PRICE | AMOUNT |
|---------|---|----------|------|------------|--------|
|         | <p>SHIP TO: <u>PARCEL POST ADDRESS</u><br/>(W22PVJ) XU GENERAL SUPPLY STORAGE POINT<br/>BLUE GRASS ARMY DEPOT<br/>2091 KINGSTON HWY<br/>RICHMOND KY 40475-5000</p> <p><u>CONTRACT/DELIVERY ORDER NUMBER</u><br/>DAAE20-99-D-0040/0002</p> |          |      |            |        |

