

SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS				1. Requisition Number SEE SCHEDULE		Page 1 Of 4	
Offeror To Complete Block 12, 17, 23, 24, & 30							
2. Contract No. DAAE20-99-D-0134		3. Award/Effective Date 2001APR13		4. Order Number 0002		5. Solicitation Number	
6. Solicitation Issue Date		7. For Solicitation Information Call:		A. Name ELVIA JAGGERS		B. Telephone Number (No Collect Calls) (309)782-3271	
8. Offer Due Date/Local Time		9. Issued By TACOM-ROCK ISLAND AMSTA-LC-CSC-C ROCK ISLAND IL 61299-7630		Code W52H09		10. This Acquisition Is	
				<input type="checkbox"/> Unrestricted		11. Delivery For FOB Destination Unless Block Is Marked	
				<input checked="" type="checkbox"/> Set Aside: % For		<input type="checkbox"/> See Schedule	
				<input checked="" type="checkbox"/> Small Business		<input checked="" type="checkbox"/> 13a. This Contract Is A Rated Order Under DPAS (18 CFR 700)	
				<input type="checkbox"/> Small Disadv Business		13b. Rating DOA5	
				<input type="checkbox"/> 8(A)		14. Method Of Solicitation	
				SIC:		<input type="checkbox"/> RFQ <input type="checkbox"/> IFB <input type="checkbox"/> RFP	
				Size Standard:			
e-mail: JAGGERSE@RIA.ARMY.MIL							
15. Deliver To XU TRANSPORTATION OFFICER DDSP NEW CUMBERLAND FACILITY BUILDING MISSION DOOR 113 134 NEW CUMBERLAND PA 17070-5001		Code W25G1U		16. Administered By DCMC DAYTON AREA C BUILDING 30 1725 VAN PATTON DR WRIGHT PATTERSON AFB OH 45433-5302		Code S3605A	
Telephone No.							
17. Contractor/Offeror LANCAY INCORPORATED 600 4TH STREET CARROLLTON KY 41008-0000		Code OTG33 Facility		18a. Payment Will Be Made By DFAS-COLUMBUS CENTER DFAS-CO-JNF/NEW DOMINION P O BOX 182041 COLUMBUS OH 43218-2041		Code SC1018	
Telephone No.				Payment will be made by Electronic Funds Transfer			
<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 X4930AC6G 6D 26FB S1111611S269 W52H09				26. Total Award Amount (For Govt. Use Only) \$1,008.00			
<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 <input type="checkbox"/> 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 <input type="checkbox"/> 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) JERRY L YOWELL /SIGNED/ YOWELLJ@RIA.ARMY.MIL (309)782-6736		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		34. Voucher Number	
				<input type="checkbox"/> Partial <input type="checkbox"/> Final		35. Amount Verified Correct For	
32b. Signature Of Authorized Government Representative		32c. Date		36. Payment <input type="checkbox"/> Complete <input type="checkbox"/> Partial <input type="checkbox"/> Final		37. Check Number	
				38. S/R Account Number		39. S/R Voucher Number	
				40. Paid By			
41a. I Certify This Account Is Correct And Proper For Payment				42a. Received By (Print)			
41b. Signature And Title Of Certifying Officer		41c. Date		42b. Received At (Location)			
				42c. Date Recd (YYMMDD)		42d. Total Containers	

CONTINUATION SHEET	Reference No. of Document Being Continued PIIN/SIIN DAAE20-99-D-0134/0002 MOD/AMD	Page 2 of 4
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Name of Offeror or Contractor: LANCA Y INCORPORATED

SUPPLEMENTAL INFORMATION

1. THE PURPOSE OF THIS DELIVERY ORDER IS TO AWARD CLIN 0004AA FOR HANDLE, BLADE KNIFE, PART NUMBER 12598170, NSN: 5110-01-277-5767 AT A UNIT PRICE OF \$1.68 EACH FOR A TOTAL CLIN AMOUNT OF \$1,008.00.
2. AWARD IS BEING MADE AGAINST PRICING PERIOD 2 OF THE BASIC CONTRACT. EARLY DELIVERIES ARE ACCEPTABLE AT NO ADDITIONAL COSTS TO EITHER PARTY.
3. ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED.

*** END OF NARRATIVE A 001 ***

CONTINUATION SHEET

Reference No. of Document Being Continued
 PIIN/SIIN DAAE20-99-D-0134/0002 MOD/AMD

Name of Offeror or Contractor: LANCA Y INCORPORATED

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0004	<p>SUPPLIES OR SERVICES AND PRICES/COSTS</p> <p><u>Supplies or Services and Prices/Costs</u></p>				
0004AA	<p><u>PRODUCTION QUANTITY</u></p>	600	EA	\$ 1.68000	\$ 1,008.00
	<p>NSN: 5110-01-277-5767 NOUN: HANDLE,KNIFE BLADE FSCM: 19200 PART NR: 12598170 SECURITY CLASS: Unclassified PRON: M111S269M1 PRON AMD: 03 ACRN: AA AMS CD: 070011AG5LZ</p> <p><u>Packaging and Marking</u></p> <p><u>Inspection and Acceptance</u> INSPECTION: Origin ACCEPTANCE: Origin</p> <p><u>Deliveries or Performance</u> DOC SUPPL <u>REL CD MILSTRIP ADDR SIG CD MARK FOR TP CD</u> 001 W52H091071A150 W25G1U J 1 <u>DEL REL CD QUANTITY DEL DATE</u> 001 600 30-JUN-2001</p> <p>FOB POINT: Destination</p> <p>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</p> <p><u>CONTRACT/DELIVERY ORDER NUMBER</u> DAAE20-99-D-0134/0002</p>				

CONTINUATION SHEET

Reference No. of Document Being Continued

PIIN/SIIN DAAE20-99-D-0134/0002 **MOD/AMD**

Name of Offeror or Contractor: LANCA Y INCORPORATED

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>
0004AA	M111S269M1	AA	2	97	X4930AC6G 6D	26FB S1111611S269	W52H09	\$ 1,008.00
	070011AG5LZ							
							TOTAL	\$ 1,008.00

SERVICE						ACCOUNTING		OBLIGATED
<u>NAME</u>	<u>TOTAL BY ACRN</u>	<u>ACCOUNTING CLASSIFICATION</u>				<u>STATION</u>		<u>AMOUNT</u>
Army	AA	97	X4930AC6G 6D	26FB	S1111611S269	W52H09	\$	1,008.00
							TOTAL	\$ 1,008.00