

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-0135		3. Award/Effective Date 1999SEP29		4. Order Number 0002		5. Solicitation Number	
7. For Solicitation Information Call:		A. Name TAMMY KUHL		B. Telephone Number (No Collect Calls) (309) 782-3618		6. Solicitation Issue Date	
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 <input checked="" type="checkbox"/> Set Aside: % For <input checked="" type="checkbox"/> Small Business <input type="checkbox"/> Small Disadv Business <input type="checkbox"/> 8(A) SIC: 3421 Size Standard:		11. Delivery For FOB Destination Unless Block Is Marked <input checked="" type="checkbox"/> See Schedule	
e-mail: KUHLT@RIA.ARMY.MIL						12. Discount Terms	
15. Deliver To XU TRANS OFC RED RIVER ARMY DEPOT TEXARKANA TX 75507		Code W45G19		16. Administered By DCMC SYRACUSE-BUFFALO T J DULSKI FEDERAL BUILDING ROOM 1103 111 WEST HURON ST BUFFALO NY 14202-2392		Code S3305A	
Telephone No.						13a. This Contract Is A Rated Order Under DPAS (18 CFR 700) <input checked="" type="checkbox"/>	
17. Contractor/Offeror ONTARIO KNIFE COMPANY 26 EMPIRE STREET FRANKLINVILLE NY 14737-0000		Code 2V376 Facility		18a. Payment Will Be Made By DFAS-COLUMBUS CENTER DFAS-CO-JNB/BUNKER HILL P O BOX 182077 COLUMBUS OH 43218-2077		Code SC1016	
Telephone No.						13b. Rating DOA5	
<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		14. Method Of Solicitation <input type="checkbox"/> RFQ <input type="checkbox"/> IFB <input type="checkbox"/> RFP	
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 S11116 W52H09				26. Total Award Amount (For Govt. Use Only) \$1,075,043.00			
<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) ELVIA JAGGERS JAGGERSE@RIA.ARMY.MIL (309) 782-3271		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-0135/0002 MOD/AMD	Page 2 of 4
---------------------------	---	--------------------

Name of Offeror or Contractor: ONTARIO KNIFE COMPANY

SUPPLEMENTAL INFORMATION

1. Delivery Order 0002 hereby awards the following items against Pricing Period 1.

CLIN 0001AB is for a quantity of 25,001 each; M9 Bayonet/Scabbard; NSN: 1095-01-227-1739/ The delivery schedule is set forth in supplies/services pages on this delivery order.

2. The total dollar value of delivery order 0002 is \$1,075,043.00.

3. This delivery order is subject to the terms and conditions contained in the basic contract, DAAE20-99-D-0135.

*** END OF NARRATIVE A001 ***

CONTINUATION SHEET

Reference No. of Document Being Continued
 PIIN/SIIN DAAE20-99-D-0135/0002 MOD/AMD

Name of Offeror or Contractor: ONTARIO KNIFE COMPANY

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0001	<p>SUPPLIES OR SERVICES AND PRICES/COSTS</p> <p><u>Supplies or Services and Prices/Costs</u></p> <p><u>PRODUCTION QUANTITY</u></p> <p>NSN: 1095-01-227-1739 NOUN: BAYONET AND SCABBAR FSCM: 19200 PART NR: 12011860 SECURITY CLASS: Unclassified CLIN CONTRACT TYPE: Firm-Fixed-Price PRON: M1914919M1 PRON AMD: 01 ACRN: AA AMS CD: 070011LZAG5</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 W52H0991791711 W45G19 J 1 <u>DEL REL CD QUANTITY DEL DATE</u> 001 4,000 30-JUN-2000 002 4,000 31-JUL-2000 003 4,000 31-AUG-2000 004 4,000 29-SEP-2000 005 4,000 31-OCT-2000 006 4,000 30-NOV-2000 007 1,001 29-DEC-2000</p> <p>FOB POINT: Origin</p> <p>SHIP TO: <u>PARCEL POST ADDRESS</u> (W45G19) XU TRANS OFC RED RIVER ARMY DEPOT TEXARKANA TX 75507</p> <p><u>CONTRACT/DELIVERY ORDER NUMBER</u> DAAE20-99-D-0135/0002</p>	25001	EA	\$ 43.00000	\$ 1,075,043.00

CONTINUATION SHEET

Reference No. of Document Being Continued

PIIN/SIIN DAAE20-99-D-0135/0002

MOD/AMD

Name of Offeror or Contractor: ONTARIO KNIFE COMPANY

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>
							<u>NUMBER</u>		
0001	M1914919M1	AA	2	97	X4930AC6G 6D	26FB S11116		W52H09	\$ 1,075,043.00
	070011LZAG5								
								TOTAL	\$ 1,075,043.00

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 S11116			W52H09	\$ 1,075,043.00
							TOTAL	\$ 1,075,043.00