

ORDER FOR SUPPLIES OR SERVICES

1. Contract/Purch Order/Agreement No. DAAE20-99-D-0146	2. Delivery Order/Call No. 0003	3. Date Of Order/Call (YYYYMMDD) 2001APR25	4. Requisition/Purch Request No. SEE SCHEDULE	5. Priority DXA5
--	---	--	---	----------------------------

6. Issued By TACOM-ROCK ISLAND AMSTA-LC-CAC-B CHERYL CALLISON (309)782-4843 ROCK ISLAND IL 61299-7630 EMAIL: CALLISONC@RIA.ARMY.MIL	Code	W52H09	7. Administered By (If other than 6) DCMC ORLANDO 3555 MAGUIRE BOULEVARD ORLANDO FL 32803-3726	Code	S1002A	8. Delivery FOB <input type="checkbox"/> Destination <input checked="" type="checkbox"/> Other (See Schedule if other)
---	-------------	--------	--	-------------	--------	--

9. Contractor REAL-TIME LABORATORIES INCORPORATED 990 SOUTH ROGERS CIRCLE SUITE 5 BOCARATON FL 33487-4444 Name and Address TYPE BUSINESS: Other Small Business Performing in U.S.	Code	62319	Facility		10. Deliver To FOB Point By (Date) (YYYYMMDD) SEE SCHEDULE	11. X If Business Is <input checked="" type="checkbox"/> Small <input type="checkbox"/> Small Disadvantaged <input type="checkbox"/> Woman-Owned
---	-------------	-------	-----------------	--	--	--

14. Ship To SEE SCHEDULE	Code		15. Payment Will Be Made By DFAS COLUMBUS CENTER DFAS-CO/SOUTH ENTITLEMENT OPERATION P O BOX 182264 COLUMBUS OH 43218-2264	Code	HQ0338	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 <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 SEE SCHEDULE CONTRACT TYPE: Firm-Fixed-Price	20. Quantity Ordered/ Accepted*	21. Unit	22. Unit Price	23. Amount
	KIND OF CONTRACT: Service Contracts				

<i>* 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.</i>	24. United States Of America By: CINDY PETERMAN /SIGNED/ PETERMANC@RIA.ARMY.MIL (309)782-4634	25. Total	\$227,147.60
		29. Differences	

26. 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 Date _____ Signature Of Authorized Govt Representative _____	27. Ship. No.	28. D.O. Voucher No.	30. Initials	
36. I certify this account is correct and proper for payment Date _____ Signature And Title Of Certifying Officer _____	<input type="checkbox"/> Partial <input type="checkbox"/> Final	32. Paid By		33. Amount Verified Correct For
	<input type="checkbox"/> Complete <input type="checkbox"/> Partial <input type="checkbox"/> Final			34. Check Number
				35. Bill Of Lading No.

37. Received At	38. Received By	39. Date Received	40. Total Containers	41. S/R Account Number	42. S/R Voucher No.
------------------------	------------------------	--------------------------	-----------------------------	-------------------------------	----------------------------

CONTINUATION SHEET**Reference No. of Document Being Continued****Page 2 of 4****PIIN/SIIN** DAAE20-99-D-0146/0003**MOD/AMD****Name of Offeror or Contractor:** REAL-TIME LABORATORIES INCORPORATED

SUPPLEMENTAL INFORMATION

1. DELIVERY ORDER 0003 IS AWARDED FOR THE REPAIR/UPGRADE OF 157 EACH TURRET DISTRIBUTION VALVE, NSN:4820-01-209-8415, PART NUMBER 9376467
2. THE UNIT PRICE FOR THIS ORDERING PERIOD IS \$1446.80 EACH FOR A TOTAL DELIVERY ORDER PRICE OF \$227,147.60
3. DELIVERIES ARE AS SHOWN IN SCHEDULE B.

*** END OF NARRATIVE A 001 ***

CONTINUATION SHEET

Reference No. of Document Being Continued
 PIIN/SIIN DAAE20-99-D-0146/0003 MOD/AMD

Name of Offeror or Contractor: REAL-TIME LABORATORIES INCORPORATED

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>SERVICES LINE ITEM</u></p> <p>NOUN: VALVE, LINEAR, DIRECT SECURITY CLASS: Unclassified PRON: M110P605M1 PRON AMD: 01 ACRN: AA AMS CD: 060015JEZM PART NUMBER 9376467 NSN: 4820-01-209-8415</p> <p>(End of narrative B001)</p> <p><u>Inspection and Acceptance</u> INSPECTION: Origin ACCEPTANCE: Origin</p> <p><u>Deliveries or Performance</u></p> <table border="0"> <tr> <td>DLVR SCH</td> <td></td> <td>PERF COMPL</td> </tr> <tr> <td><u>REL CD</u></td> <td><u>QUANTITY</u></td> <td><u>DATE</u></td> </tr> <tr> <td>001</td> <td>0</td> <td>30-NOV-2001</td> </tr> </table> <p>\$ 227,147.60</p>	DLVR SCH		PERF COMPL	<u>REL CD</u>	<u>QUANTITY</u>	<u>DATE</u>	001	0	30-NOV-2001				<p>\$ 227,147.60</p>
DLVR SCH		PERF COMPL												
<u>REL CD</u>	<u>QUANTITY</u>	<u>DATE</u>												
001	0	30-NOV-2001												

CONTINUATION SHEET

Reference No. of Document Being Continued

PIIN/SIIN DAAE20-99-D-0146/0003

MOD/AMD

Name of Offeror or Contractor: REAL-TIME LABORATORIES INCORPORATED

CONTRACT ADMINISTRATION DATA

LINE	PRON/	OBLG	JOB	ACCOUNTING	OBLIGATED				
<u>ITEM</u>	<u>AMS CD</u>	<u>ACRN STAT</u>	<u>ORDER</u>	<u>STATION</u>	<u>AMOUNT</u>				
0001	M110P605M1	AA 2	97	X4930AC9G 6D	2571 S11116	W52H09	\$	227,147.60	
060015JEZM									
							TOTAL	\$	227,147.60

SERVICE	ACCOUNTING	OBLIGATED	
<u>NAME</u>	<u>STATION</u>	<u>AMOUNT</u>	
Army	W52H09	\$ 227,147.60	
		TOTAL	\$ 227,147.60