

ORDER FOR SUPPLIES OR SERVICES

(Contractor must submit four copies of invoice.)

Form Approved
OMB No. 0704-0187
Expires Jun 30, 1997

PAGE 1 OF

4

Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports, 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302, and to the Office of Management and Budget, Paperwork Reduction Project (0704-0187), Washington, DC 20503.

**PLEASE DO NOT RETURN YOUR FORM TO EITHER OF THESE ADDRESSES.
SEND YOUR COMPLETED FORM TO THE PROCUREMENT OFFICIAL IDENTIFIED IN ITEM 6.**

| | | | | | | | | | |
|---|--|--------------------------------------|--------------------|---|--|--|--|---|--|
| 1. CONTRACT/PURCH ORDER NO. N00383-02-G-003H | | 2. DELIVERY ORDER NO. UBT9 | | 3. DATE OF ORDER (YYMMDD) 2004 MAR 30 | | 4. REQUISITION/PURCH REQUEST NO. YPC04072000088 | | 5. PRIORITY DOA1 | |
| 6. ISSUED BY Defense Supply Center Columbus 3990 E. Broad St. P.O. Box 16704 Columbus, OH 43216-5010 Local Administrator: PAABCAD (614)692-1407 / FAX: (614)692-6292 E-mail: Michael.Theado@dla.mil | | | CODE SP0700 | | 7. ADMINISTERED BY (If other than 6) DCMC SANTA ANA 34 CIVIC CENTER PLAZA ROOM 813A SANTA ANA, CA 92701-4056 | | | CODE S0513A | |
| 9. CONTRACTOR PARKER HANNIFIN CUSTOMER SUPPORT INC. 14300 ALTON PARKWAY IRVINE CA 92618-1814 Vendor's Copy was sent EDI. Do not Duplicate shipment. | | CODE 59211 | | FACILITY CODE 82106 | | 10. DELIVER TO FOB POINT BY (Date) (YYMMDD) 210 DAYS ADO | | 8. DELIVERY FOB <input type="checkbox"/> DEST <input checked="" type="checkbox"/> OTHER <i>(See Schedule if other)</i> | |
| NAME AND ADDRESS | | | | | | 12. DISCOUNT TERMS NET 30 days | | 11. MARK IF BUSINESS IS <input type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISADVANTAGED <input type="checkbox"/> WOMEN-OWNED | |
| | | | | | | 13. MAIL INVOICES TO See Block 15 | | | |
| 14. SHIP TO See Schedule - Do Not Ship to Address in Block 6 | | CODE | | 15. PAYMENT WILL BE MADE BY HQ0339 | | CODE | | MARK ALL PACKAGES AND PAPERS WITH CONTRACT OR ORDER NUMBER | |
| | | | | HQ0339 DFAS COLUMBUS CENTER WEST ENTITLEMENT OPERATIONS P O BOX 182381 COLUMBUS OH 43218-2381 EFT: T | | | | | |

| | | | |
|-------------------|----------|-------------------------------------|---|
| 16. TYPE OF ORDER | DELIVERY | <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. Reference your offer dated 2004 MAR 26, M2004033350 and 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. |
| | PURCHASE | | |

| | | | |
|--|-----------|----------------------|----------------------|
| NAME OF CONTRACTOR | SIGNATURE | TYPED NAME AND TITLE | DATE SIGNED (YYMMDD) |
| <input type="checkbox"/> If this box is marked, supplier must sign Acceptance and return the following number of copies: | | | |

17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE
CG: 97X4930 5CC0 001 26.0 S33150

| 18. ITEM NO. | 19. SCHEDULE OF SUPPLIES/SERVICE | 20. QUANTITY ORDERED/ACCEPTED* | 21. UNIT | 22. UNIT PRICE | 23. AMOUNT |
|--------------|---|--------------------------------|----------|----------------|------------|
| | Remarks: CONFIRMING ORDER -- DO NOT DUPLICATE ACCELERATED DELIVERY IS ACCEPTABLE AND DESIRED AT NO COST TO THE GOVERNMENT. | TOTAL: 5 | | | |

| | | | | | |
|--|-------------------------|--|----------------------|---------------------------------|---------------------|
| * 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 Mary Tatman PAAABB6 | | 25. TOTAL \$ 500.00 | |
| | | BY: <i>Mary Tatman</i> | | 29. DIFFERENCE | |
| 26. QUANTITY IN COLUMN 20 HAS BEEN <input type="checkbox"/> INSPECTED <input type="checkbox"/> RECEIVED <input type="checkbox"/> ACCEPTED, AND CONFORMS TO THE CONTRACT EXCEPT AS NOTED | | 32. PAID BY | | 30. INITIALS | |
| DATE SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE | | <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL | | 33. AMOUNT VERIFIED CORRECT FOR | |
| 36. I certify this account is correct and proper for payment. | | 31. PAYMENT <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL | | 34. CHECK NUMBER | |
| DATE SIGNATURE AND TITLE OF CERTIFYING OFFICER | | | | 35. BILL OF LADING NO. | |
| 37. RECEIVED AT | 38. RECEIVED BY (Print) | 39. DATE RECEIVED (YYMMDD) | 40. TOTAL CONTAINERS | 41. S/R ACCOUNT NUMBER | 42. S/R VOUCHER NO. |

Manufacture Facilities:
82106

PARKER HANNIFIN CORPORATION
DIV CONTROL SYSTEMS DIVISION -
14300 ALTON PARKWAY
IRVINE CA 92618-1898

Supplies and Packaging - Inspection and Acceptance Address:
82106

PARKER HANNIFIN CORPORATION
DIV CONTROL SYSTEMS DIVISION -
14300 ALTON PARKWAY
IRVINE CA 92618-1898

All Terms and Conditions apply as agreed in the Basic Ordering Agreement
N0038302G003H effective 1/16/2003 through 01/15/2006.

COC is Authorized per FAR 52.246-15.

Thank you for helping us serve our Military Customer .Mary Tatman, AABB6

SECTION B

PR YPC04072000088
NSN 3020-01-055-8183

ITEM DESCRIPTION:

GEAR, SPUR
PARKER HANNIFIN (92003) P/N 2751709.

CRITICAL APPLICATION ITEM

PARKER HANNIFIN CORPORATION (92003) P/N 2751709

| <u>ITEM</u> | <u>PR</u> | <u>PRLI</u> | <u>QUANTITY</u> | <u>UNIT</u> | <u>UNIT PRICE</u> | <u>AMOUNT</u> |
|-------------|----------------|-------------|-----------------|-------------|-------------------|---------------|
| 2001 | YPC04072000088 | 0001 | 5 | EA | \$100.00000 | \$500.00 |

QTY VARIANCE: PLUS 0% MINUS 0%
INSPECTION POINT: ORIGIN
ACCEPTANCE POINT: ORIGIN

PREP FOR DELIVERY

PKGING DATA - MIL-STD-2073-1D, 15 DEC 1999
QUP = 001: PRES MTHD = 10: CLNG/DRY = 1: PRESV MAT = 00:
WRAP MAT = CA: CUSH/DUNN MAT = 00: CUSH/DUNN THKNESS = 0:
UNIT CONT = D3: OPI = 0:
INTRMDTE CONT = DO: INTRMDTE CONT QTY = AAA:
PACK CODE = U:
MARKING SHALL BE IN ACCORDANCE WITH MIL-STD-129.
SPECIAL MARKING CODE: 00 - NO SPECIAL MARKING.
PALLETIZATION SHALL BE IN ACCORDANCE WITH DC1636P001 REV E
DATED 3029

For all shipments of packaged materiel to the government, which includes either depot (DLA-direct) or DVD (customer-direct) shipments, both DoD linear and 2-D bar code markings are required on military shipping labels in accordance with MIL-STD-129, revision P, dated December 15, 2002, as amended by Change Notice 1, dated January 15, 2004. 2-D bar coding shall be in accordance with ISO/IEC 15438, ISO/IEC 15434 (ANSI MH10.8.3) and DoD 4500.9-R. MSL linear (code 3 of 9 or code 39) bar coding shall be in accordance with ISO/IEC 16388. MSL label stock quality shall meet MIL-PRF-61002. MSL bar code print quality

CONTINUED ON NEXT PAGE

SECTION B

shall meet ANSI MH10.8-2000 or ANSI X3.182-1990 (R2000) for applicable 2-D and/or linear bar codes. All DVD shipments shall meet additional linear bar coding requirements in DLAD 52.211-9008. When the contract/order omits any data element required to be bar-coded, the field shall be zero-filled. These requirements do not apply to delivery orders when the basic contract has not been modified to require MIL-STD-129P. If there are inconsistencies between the schedule and MIL-STD-129P, the schedule takes precedence.

DELIVER FOB: ORIGIN BY: 2004 OCT 26

PARCEL POST ADDRESS:

SW3210
DISTRIBUTION DEPOT HILL
7537 WARDLEIGH RD
HILL AFB UT 84056-5734

FREIGHT SHIPPING ADDRESS:

SW3210
DISTRIBUTION DEPOT HILL
7537 WARDLEIGH RD BLDG 849W
HILL AFB UT 84056-5734

NON-MILSTRIP
PROJ NS1

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REMIT PAYMENT TO:

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