

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

3

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. SP0700-00-D-9727		2. DELIVERY ORDER NO. 0075		3. DATE OF ORDER (YYMMDD) 2003 JUL 03		4. REQUISITION/PURCH REQUEST NO. YPC03177000576		5. PRIORITY DOA3			
6. ISSUED BY CODE SP0700 Defense Supply Center Columbus 3990 E. Broad St. P.O. Box 16704 Columbus, OH 43216-5010 Local Administrator: PPPLC09 (614)692-7347 / FAX: (614)692-4759 E-mail: Diane_Hulett@dla.mil				7. ADMINISTERED BY (If other than 6) CODE S1109A DCMA ST PETERSBURG GADSEN BLDG SUITE 200 9549 KOGER BLVD ST PETERSBURG FL 33702-2455 CRITICALITY: B				8. DELIVERY FOB <input checked="" type="checkbox"/> DEST <input type="checkbox"/> OTHER <i>(See Schedule if other)</i>			
9. CONTRACTOR CODE 35795 LESLIE CONTROLS INC. 12501 TELECOM DRIVE TAMPA FL 33637-0906 Vendor's Copy was sent EDI. Do not Duplicate shipment.				10. DELIVER TO FOB POINT BY (Date) (YYMMDD) 168 DAYS ADO		11. MARK IF BUSINESS IS <input type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISADVANTAGED <input type="checkbox"/> WOMEN-OWNED					
12. DISCOUNT TERMS NET 30 days				13. MAIL INVOICES TO See Block 15							
14. SHIP TO CODE See Schedule - Do Not Ship to Address in Block 6				15. PAYMENT WILL BE MADE BY CODE HQ0338 HQ0338 DFAS COLUMBUS CENTER SOUTH ENTITLEMENT OPERATIONS P O BOX 182264 COLUMBUS OH 43218-2264 EFT: T				MARK ALL PACKAGES AND PAPERS WITH CONTRACT OR ORDER NUMBER			

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 2003 JUN 27 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: ACCELERATED DELIVERY IS ACCEPTABLE AND DESIRED AT NO COST TO THE GOVERNMENT.	TOTAL: 18			

* 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 Deborah Waller PPPLCB4 BY: TRACTING/ORDERING OFFICER HER NO.		25. TOTAL \$ 207567.36	
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 <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		29. DIFFERENCE	
DATE _____ SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE _____		33. AMOUNT VERIFIED CORRECT FOR		30. INITIALS	
36. I certify this account is correct and proper for payment. DATE _____ SIGNATURE AND TITLE OF CERTIFYING OFFICER _____		34. CHECK NUMBER		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.

SECTION B

PR YPC03177000576
NSN 4810-01-272-6672

ITEM DESCRIPTION:

VALVE, SOLENOID. 2 INCH.

LESLIE CONTROLS INC. (35795) P/N A3350192001

<u>ITEM</u>	<u>PR</u>	<u>PRLI</u>	<u>QUANTITY</u>	<u>UNIT</u>	<u>UNIT PRICE</u>	<u>AMOUNT</u>
0001	YPC03177000576	0001	18	EA	<u>\$11531.52000</u>	<u>\$207567.36</u>

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

PREP FOR DELIVERY

PKGING DATA - QUP 001:
SHALL BE PACKAGED STANDARD COMMERCIAL IN ACCORDANCE WITH ASTM D 3951.

DOD BAR CODE MARKING REQUIRED IN ACCORDANCE WITH
MIL-STD-129 (LATEST REVISION) MARKING AND BAR
CODING IN ACCORDANCE WITH AIM BC1.

DELIVER FOB: DESTINATION BY: 2003 DEC 18

PARCEL POST ADDRESS:

V21879
USS BATAAN LHD 5
FPO AE 09554-1657

FREIGHT SHIPPING ADDRESS:

V21879
USS BATAAN LHD 5
CALL NAV TRANSPORTATION SUPPORT CTR
COMM 757 443 5434 DSN 646 5434

M/F: (TCN) V2187931681194 XXX
PROJ EE0 TP 2
SUP ADD YSTOCK SIG A

CONTINUED ON NEXT PAGE

SECTION B

FOR GOVERNMENT USE ONLY: IPD 05

DIC A4A DIST 9C ADV FC KZ

* * * * *

REMIT PAYMENT TO:

* * * * *