

ORDER FOR SUPPLIES OR SERVICES

(Contractor must submit four copies of invoice.)

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

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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. SP0740-02-D-1032		2. DELIVERY ORDER NO. 0005		3. DATE OF ORDER (YYMMDD) 2003 MAY 22		4. REQUISITION/PURCH REQUEST NO. YPC03118000654		5. PRIORITY DOA1	
6. ISSUED BY Defense Supply Center Columbus 3990 E. Broad St. P.O. Box 16704 Columbus, OH 43216-5010 Local Administrator: PAABCAJ (614)692-7531 / FAX: (614)693-1679 E-mail: Cynthia.Farley-Fitzpatrick@dsccl.dla.mil				7. ADMINISTERED BY (If other than 6) DCMC SEATTLE CORPORATE CAMPUS E III 3009 112TH AVE NE SUITE 200 BELLEVUE WA 98004-8019		8. DELIVERY FOB <input checked="" type="checkbox"/> DEST <input type="checkbox"/> OTHER <i>(See Schedule if other)</i>			
9. CONTRACTOR NAME AND ADDRESS BENCHMADE KNIFE CO INC 300 BEAVERCREEK RD OREGON CITY OR 97045-4142		10. DELIVER TO FOB POINT BY (Date) (YYMMDD) See Schedule		11. MARK IF BUSINESS IS <input checked="" 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 See Schedule - Do Not Ship to Address in Block 6		15. PAYMENT WILL BE MADE BY HQ0339 HQ0339 DFAS COLUMBUS CENTER WEST ENTITLEMENT OPERATIONS P O BOX 182381 COLUMBUS OH 43218-2381		MARK ALL PACKAGES AND PAPERS WITH CONTRACT OR ORDER NUMBER		EFT: T			

16. DELIVERY TYPE OF ORDER: DELIVERY, PURCHASE

This delivery order is issued on another Government agency or in accordance with and subject to terms and conditions of above numbered contract 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.

NAME OF CONTRACTOR: _____ SIGNATURE: _____ TYPED NAME AND TITLE: _____ DATE SIGNED (YYMMDD): _____

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
	<p>Remarks: ACCELERATED DELIVERY IS ACCEPTABLE AND DESIRED AT NO COST TO THE GOVERNMENT.</p>	TOTAL: 2472			

<p>* 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.</p>		<p>24. UNITED STATES OF AMERICA</p> <p>BY: CONTRACTING/ORDERING OFFICER</p>		<p>25. TOTAL \$ 284280.00</p>	
<p>26. QUANTITY IN COLUMN 20 HAS BEEN</p> <p><input type="checkbox"/> INSPECTED <input type="checkbox"/> RECEIVED <input type="checkbox"/> ACCEPTED, AND CONFORMS TO THE CONTRACT EXCEPT AS NOTED</p> <p>DATE: _____ SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE: _____</p>		<p>27. SHIP. NO.</p> <p><input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL</p>		<p>28. D.O. VOUCHER NO.</p> <p>29. DIFFERENCE</p>	
<p>36. I certify this account is correct and proper for payment.</p> <p>DATE: _____ SIGNATURE AND TITLE OF CERTIFYING OFFICER: _____</p>		<p>31. PAYMENT</p> <p><input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL</p>		<p>30. INITIALS</p> <p>33. AMOUNT VERIFIED CORRECT FOR</p> <p>34. CHECK NUMBER</p> <p>35. BILL OF LADING NO.</p>	
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 YPC03118000654
NSN 1095-01-456-4457

ITEM DESCRIPTION:

KNIFE, COMBAT (KNIFE, AUTOMATIC).
APPROX. 7.90-8.25 IN. O/A LG. OPEN, 4.50-4.68
IN. CLOSED LENGTH, HIGH CARBON STEEL COMBO BLADE
WITH HARD ANODIZED ALUMINUM HANDLE.
BENCHMADE KNIFE CO INC (041N2) P/N 9100SBT
MASTERS OF DEFENSE LLC (1WXM6) P/N CQD MARK II

<u>ITEM</u>	<u>PR</u>	<u>PRLI</u>	<u>QUANTITY</u>	<u>UNIT</u>	<u>UNIT PRICE</u>	<u>AMOUNT</u>
0001AA	YPC03118000654	0001	500	EA	\$115.00000	\$57500.00

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

DELIVERY FOB: DESTINATION BY: 2003 JUN 12

<u>ITEM</u>	<u>PR</u>	<u>PRLI</u>	<u>QUANTITY</u>	<u>UNIT</u>	<u>UNIT PRICE</u>	<u>AMOUNT</u>
0001AB	YPC03118000654	0001	500	EA	\$115.00000	\$57500.00

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

DELIVERY FOB: DESTINATION BY: 2003 JUN 19

<u>ITEM</u>	<u>PR</u>	<u>PRLI</u>	<u>QUANTITY</u>	<u>UNIT</u>	<u>UNIT PRICE</u>	<u>AMOUNT</u>
0001AC	YPC03118000654	0001	500	EA	\$115.00000	\$57500.00

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

DELIVERY FOB: DESTINATION BY: 2003 JUN 26

<u>ITEM</u>	<u>PR</u>	<u>PRLI</u>	<u>QUANTITY</u>	<u>UNIT</u>	<u>UNIT PRICE</u>	<u>AMOUNT</u>
0001AD	YPC03118000654	0001	500	EA	\$115.00000	\$57500.00

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

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CONTINUATION SHEET

Order Number:

SP0740-02-D-1032-0005

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SECTION B

PR YPC03118000654 PRLI 0001 CONT'D
ACCEPTANCE POINT: DEST

DELIVERY FOB: DESTINATION BY: 2003 JUL 03

ITEM	PR	PRLI	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0001AE	YPC03118000654	0001	472	EA	\$115.00000	\$54280.00

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

DELIVERY FOB: DESTINATION BY: 2003 JUL 10

PREP FOR DELIVERY

PKGING DATA - MIL-STD-2073-1D, 15 DEC 1999
QUP = 001: PRES MTHD = 31: CLNG/DRY = 1: PRESV MAT = 00:
WRAP MAT = 00: CUSH/DUNN MAT = XX: CUSH/DUNN THKNESS = X:
UNIT CONT = D4: 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 D
DATED 1277

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

PARCEL POST ADDRESS:

W25G1U
XU TRANSPORTATION OFFICER
DDSP NEW CUMBERLAND FACILITY
BUILDING MISSION DOOR 113 134
NEW CUMBERLAND PA 17070-5001

FREIGHT SHIPPING ADDRESS:

W25G1U
TRANSPORTATION OFFICER
DDSP NEW CUMBERLAND FACILITY
BUILDING MISSION DOOR 113-134
NEW CUMBERLAND PA 17070-5001

CONTINUED ON NEXT PAGE

SECTION B

NON-MILSTRIP
PROJ CLF

REMIT PAYMENT TO:
