

# 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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**5**

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. <b>SP0750-03-D-7713</b>		2. DELIVERY ORDER NO. <b>0001</b>		3. DATE OF ORDER (YYMMDD) <b>2003 MAY 16</b>		4. REQUISITION/PURCH REQUEST NO. <b>RPC03003000631</b>		5. PRIORITY <b>DOA4</b>	
6. ISSUED BY <b>Defense Supply Center Columbus 3990 E. Broad St. P.O. Box 16704 Columbus, OH 43216-5010 Local Administrator: PLLXCAQ (614)692-4670 / FAX: (614)693-1577 E-mail: India_Franklin@dsc.dla.mil</b>			7. ADMINISTERED BY (If other than 6) <b>DEFENSE SUPPLY CENTER COLUM DSCC-LXCAQ PH 614-692-4670 BOX 16704 (TRANS 614-692-2175) COLUMBUS OH 43216-5010</b>		7. ADMINISTERED BY (If other than 6) <b>SC0700</b>			8. DELIVERY FOB <input checked="" type="checkbox"/> DEST <input type="checkbox"/> OTHER <i>(See Schedule if other)</i>	
9. CONTRACTOR <b>UNITED DEFENSE LP DBA SPARE PARTS DEPT DIV STEEL 1805 COLEMAN RD ANNISTON AL 36207-6859</b>		CODE <b>076M6</b>		FACILITY CODE		10. DELIVER TO FOB POINT BY (Date) (YYMMDD) <b>140 DAYS ADO</b>		11. MARK IF BUSINESS IS <input type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISADVANTAGED <input type="checkbox"/> WOMEN-OWNED	
NAME AND ADDRESS		12. DISCOUNT TERMS <b>NET 30 days</b>		13. MAIL INVOICES TO <b>See Block 15</b>					
14. SHIP TO <b>See Schedule - Do Not Ship to Address in Block 6</b>		CODE		15. PAYMENT WILL BE MADE BY <b>S33181 DFAS COLUMBUS CENTER ATTN DFAS CO BVDPCC/CC CONSTRUCTION 3990 E BROAD ST PO BOX 182317 COLUMBUS OH 43218-6203</b>		CODE <b>S33181</b>		MARK ALL PACKAGES AND PAPERS WITH CONTRACT OR ORDER NUMBER <b>EFT: T</b>	
16. DELIVERY TYPE OF ORDER <input checked="" type="checkbox"/> DELIVERY <input type="checkbox"/> PURCHASE		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 <b>offer dated 2003 MAR 27, SP075003D713 BASIC</b> 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)			
<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 <b>CG: 97X4930 SCC0 001 26.0 S33150</b>									
18. ITEM NO.	19. SCHEDULE OF SUPPLIES/SERVICE	20. QUANTITY ORDERED/ACCEPTED*	21. UNIT	22. UNIT PRICE	23. AMOUNT				
	<b>Remarks: CONFIRMING ORDER - DO NOT DUPLICATE ACCELERATED DELIVERY IS ACCEPTABLE AND DESIRED AT NO COST TO THE GOVERNMENT.</b>	<b>TOTAL: 50</b>							
* 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 BY: <i>Susan Bland</i>		CONTRACTING/ORDERING OFFICER		25. TOTAL	<b>\$ 74807.00</b>		
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		27. SHIP TO		28. D.O. VOUCHER NO		29. DIFFERENCE			
DATE _____ SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE _____		30. INITIALS		31. PAYMENT <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		33. AMOUNT VERIFIED CORRECT FOR			
36. I certify this account is correct and proper for payment. DATE _____ SIGNATURE AND TITLE OF CERTIFYING OFFICER _____		32. PAID BY		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 RPC03003000631  
NSN 2920-01-300-0232

## ITEM DESCRIPTION:

AUTOMATIC TENSIONER ASSEMBLY.

"CLASS I OZONE DEPLETING CHEMICALS ARE NOT TO BE USED NOR INCORPORATED IN ANY ITEMS TO BE DELIVERED UNDER THIS CONTRACT. THIS PROHIBITION SUPERSEDES ALL SPECIFICATION REQUIREMENTS BUT DOES NOT ALLEVIATE ANY PRODUCT REQUIREMENTS. SUBSTITUTE CHEMICALS MUST BE SUBMITTED FOR APPROVAL UNLESS THEY ARE AUTHORIZED BY THE SPECIFICATION REQUIREMENTS."

DLAD CLAUSE 52.246-9004, PRODUCT VERIFICATION TESTING, IS HEREBY INCORPORATED, AND MAY BE INVOKED AT THE DISCRETION OF THE PROCUREMENT ACTIVITY.

IF AQLS ARE LISTED IN THE SPECIFICATION(S) OR DRAWING(S) THEY MAY BE USED TO ESTABLISH THE AUTHORIZED SAMPLE SIZE, HOWEVER, THE ACCEPTANCE NUMBER FOR THIS CONTRACT IS ZERO; I.E., THIS CONTRACT REQUIRES A SAMPLING PLAN THAT ACCEPTS ON ZERO DEFECTS AND REJECTS ON ONE OR MORE DEFECT(S).

FIRST ARTICLE TEST IS REQUIRED IN ACCORDANCE WITH QUALITY ASSURANCE PROVISIONS (QAP) NUMBER 12361445, PART II, TABLE III, PARA 2.

## CRITICAL APPLICATION ITEM

I/A/W DRAWING NR 19207 12361445  
BASIC DTD 90 APR 05  
AMEND NR G DTD 96 JUL 23  
TYPE NUMBER:  
"SPECIFICATION CONTROL"

I/A/W DRAWING NR 19207 12361445  
REFNO DTD 90 MAY 30  
AMEND NR E DTD 95 JUL 24  
TYPE NUMBER:  
SUPPLEMENTARY QUALITY ASSURANCE PROVISIONS (SQAP) OR QUALITY ASSURANCE PROVISIONS (QAP)

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## SECTION B

<u>ITEM</u>	<u>PR</u>	<u>PRLI</u>	<u>QUANTITY</u>	<u>UNIT</u>	<u>UNIT PRICE</u>	<u>AMOUNT</u>
0001	RPC03003000631	0001	30	EA	\$1496.14000	\$44884.20

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 = 31: CLNG/DRY = 1: PRESV MAT = 00:  
WRAP MAT = 00: CUSH/DUNN MAT = XX: CUSH/DUNN THKNSS = X:  
UNIT CONT = E6: OPI = O:  
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

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 OCT 03

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

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SECTION B

NON-MILSTRIP  
PROJ

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<u>ITEM</u>	<u>PR</u>	<u>PRLI</u>	<u>QUANTITY</u>	<u>UNIT</u>	<u>UNIT PRICE</u>	<u>AMOUNT</u>
0002	RPC03003000631	0002	20	EA	\$1496.14000	\$29922.80

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

PREP FOR DELIVERY

PKGING DATA - MIL-STD-2073-1D, 15 DEC 1999  
MIL-STD-2073 PACKAGING DATA SAME AS PRIOR LINE

DELIVER FOB: DESTINATION BY: 2003 OCT 03

PARCEL POST ADDRESS:

W62G2T  
XU DEF DIST DEPOT SAN JOAQUIN  
TRANSPORTATION OFFICER  
PO BOX 960001  
STOCKTON CA 95296-0130

FREIGHT SHIPPING ADDRESS:

W62G2T  
XU DEF DIST DEPOT SAN JOAQUIN  
25600 S CHRISMAN ROAD  
REC WHSE 10 PH 209 839 4307  
TRACY CA 95376-5000

NON-MILSTRIP  
PROJ

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SECTION B

REMIT PAYMENT TO:

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