

# 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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**2**

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>SP0700-99-D-9704</b>		2. DELIVERY ORDER NO. <b>2204</b>		3. DATE OF ORDER (YYMMDD) <b>2004 AUG 03</b>		4. REQUISITION/PURCH REQUEST NO. <b>YPC04216001127</b>		5. PRIORITY	
6. ISSUED BY <b>DEFENSE SUPPLY CENTER COLUMBUS P.O. Box 3990 Columbus, OH 43218-3990</b>				7. ADMINISTERED BY (If other than 6) <b>SC0700 DEFENSE SUPPLY CNTR COLUMBUS ATTN DSCC-PLS PO BOX 3990 (TRANS 1-800-456-5507) COLUMBUS, OH 43218-3990</b>		8. DELIVERY FOB <input checked="" type="checkbox"/> DEST <input type="checkbox"/> OTHER <small>(See Schedule if other)</small>			
9. CONTRACTOR <b>NALL AEROPower CORPORATION 5775 RIO VISTA DRIVE CLEARWATER FL 33760-3137</b>		10. DELIVER TO FOB POINT BY (Date) (YYMMDD)		11. MARK IF BUSINESS IS <input type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISADVANTAGED <input type="checkbox"/> WOMEN-OWNED		12. DISCOUNT TERMS <b>I/A/W/ BASIC CONTRACT</b>		13. MAIL INVOICES TO <b>SEE BLOCK 15</b>	
14. SHIP TO <b>DO NOT SHIP TO ADDRESSES ON THIS PAGE SEE FOLLOWING PAGE SHIPPING ADDRESSES ARE SHOWN UNDER LINE ITEM</b>		15. PAYMENT WILL BE MADE BY <b>DFAS COLUMBUS CENTER ATTN DFAS CO BVDPC/CC CONSTRUCTION 3990 E BROAD ST PO BOX 182317 FAS CUSTOMER SERVICE 1-800-756-4571 COLUMBUS, OH 43218-3990</b>		16. TYPE OF ORDER DELIVERY <input checked="" type="checkbox"/> PURCHASE <input type="checkbox"/>		17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE <b>CG: 97X4930 5CC0 001 26.0 S33150</b>		18. MARK ALL PACKAGES AND PAPERS WITH CONTRACT OR ORDER NUMBER	
16. TYPE OF ORDER DELIVERY <input checked="" type="checkbox"/> PURCHASE <input 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 _____ and furnish the following on terms specified herein. <b>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.</b>									
17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE <b>CG: 97X4930 5CC0 001 26.0 S33150</b>									
18. TYPE OF ORDER DELIVERY <input checked="" type="checkbox"/> PURCHASE <input 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 _____ and furnish the following on terms specified herein. <b>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.</b>									
19. SCHEDULE OF SUPPLIES/SERVICE									
20. QUANTITY ORDERED/ACCEPTED*									
21. UNIT									
22. UNIT PRICE									
23. AMOUNT									
24. UNITED STATES OF AMERICA BY: <b>POPS Auto Award</b> CONTRACTING/ORDERING OFFICER									
25. TOTAL \$ <b>2946.07</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. NO. <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL									
28. D.O. VOUCHER NO.									
29. DIFFERENCE									
30. INITIALS									
31. PAYMENT <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL									
32. PAID BY									
33. AMOUNT VERIFIED CORRECT FOR									
34. CHECK NUMBER									
35. BILL OF LADING NO.									
36. I certify this account is correct and proper for payment. DATE _____ SIGNATURE AND TITLE OF CERTIFYING OFFICER _____									
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

ITEM DESCRIPTION NOT INCLUDED

Admin Location Code LPL  
000000000 Post Award Administrator NONE AVAILABLE

P/N 28043 Manufacturer's CAGE - 10989

<u>ITEM</u>		<u>QTY</u>	<u>UNIT</u>	<u>UNIT PRICE</u>	<u>AMOUNT</u>
7201	PR YPC04216001127 NSN 2910-01-363-6837	23	EA	128.09	2946.07

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

DELIVERY FOB: DESTINATION BY: 2004 DEC 31

**PARCEL POST ADDRESS:**XU DEF DIST DEPOT SAN JOAQUIN  
TRANSPORTATION OFFICER  
PO BOX 960001  
STOCKTON CA 952960130**FREIGHT ADDRESS:**W62G2T  
XU DEF DIST DEPOT SAN JOAQUIN  
25600 S CHRISMAN ROAD  
REC WHSE 10 PH 209 839 4307  
TRACY, CA 95304-5000M/F: (TCN) STOCK BUY RQMT  
RDD: 28-SEP-04 PROJ:

END OF AWARD