# ORDER FOR SUPPLIES OR SERVICES

*(Contractor must submit four copies of invoice.)*

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



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. | 2. DELIVERY ORDER NO. | 3. DATE OF ORDER (YYMMMDD) | 4. REQUISITION/PURCH REQUEST NO. | 5. PRIORITY |
|---|---|---|---|---|
| N00383-01-G-015N | UZN9 | 2004 FEB 04 | YPC04008000802 | DOA1 |

**6. ISSUED BY** CODE SP0700

Defense Supply Center Columbus
3990 E.Broad St.
P.O. Box 16704
Columbus,OH 43216-5010
Local Administrator: PAABCAB (614)692-3799 / FAX: (614)692-1238
E-mail: Myrtice.Gray@dla.mil

**7. ADMINISTERED BY** *(If other than 6)* CODE S0707A

DCMA SIKORSKY AIRCRAFT
6900 MAIN ST PO BOX 9731
STRATFORD, CT 06615-9131

CRITICALITY: B

**8. DELIVERY FOB**
- [ ] DEST
- [X] OTHER

*(See Schedule if other)*

**9. CONTRACTOR** CODE 78286 FACILITY CODE

NAME AND ADDRESS
SIKORSKY AIRCRAFT CORP
6900 MAIN ST
STRATFORD CT 06615-9129

**10. DELIVER TO FOB POINT BY** *(Date)* *(YYMMMDD)* 331 DAYS ARO

**11. MARK IF BUSINESS IS**
- [ ] SMALL
- [ ] SMALL DISAD-VANTAGED
- [ ] 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 HQ0337

HQ0337 DFAS COLUMBUS CENTER
NORTH ENTITLEMENT OPERATIONS
P O BOX 182266
COLUMBUS OH 43218-2266

EFT: T

MARK ALL PACKAGES AND PAPERS WITH CONTRACT OR ORDER NUMBER

**16. TYPE OF ORDER**
- DELIVERY [X] This delivery order is issued on another Government agency or in accordance with and subject to terms and conditions of above numbered contract.
- PURCHASE [ ] Reference your offer dated 2004 FEB 02, CQ5RH04 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 *(YYMMMDD)*

[ ] 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: 13 | | | |

* *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: Ramona Joe — CONTRACTING/ORDERING OFFICER

**25. TOTAL** $ 18165.29

**29. DIFFERENCE**

**26. QUANTITY IN COLUMN 20 HAS BEEN**
- [ ] INSPECTED
- [ ] RECEIVED
- [ ] ACCEPTED, AND CONFORMS TO THE CONTRACT EXCEPT AS NOTED

DATE | SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE

**27. SHIP. NO.**
- [ ] PARTIAL
- [ ] FINAL

**28. D.O. VOUCHER NO.**

**30. INITIALS**

**32. PAID BY**

**33. AMOUNT VERIFIED CORRECT FOR**

**31. PAYMENT**
- [ ] COMPLETE
- [ ] PARTIAL
- [ ] FINAL

**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 *(YYMMMDD)* | 40. TOTAL CONTAINERS | 41. S/R ACCOUNT NUMBER | 42. S/R VOUCHER NO. |
|---|---|---|---|---|---|
| | | | | | |

## SECTION B

PR YPC04008000802
NSN 3040-01-155-1665

ITEM DESCRIPTION:

CONNECTING LINK,RIG
SIKORSKY AIRCRAFT CORP (78286) P/N 65414-03104-048

| ITEM | PR | PRLI | QUANTITY | UNIT | UNIT PRICE | AMOUNT |
|---|---|---|---|---|---|---|
| 2001 | YPC04008000802 | 0001 | 13 | EA | $1397.33000 | $18165.29 |

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 = XX: CUSH/DUNN MAT = XX: CUSH/DUNN THKNESS = X:
UNIT CONT = DO: OPI = O:
INTRMDTE CONT = E5: 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: ORIGIN BY: 2004 DEC 31

PARCEL POST ADDRESS:

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

**CONTINUED ON NEXT PAGE**

## SECTION B

FREIGHT SHIPPING ADDRESS:

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

NON-MILSTRIP
PROJ

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REMIT PAYMENT TO:

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