

# ORDER FOR SUPPLIES OR SERVICES

(Contractor must submit four copies of invoice.)

Form Approved  
OMB No. 0704-0137  
Expires Jun 30, 1997

PAGE 1 OF  
4

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 (0704-0137), 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>N00383-01-G-015N</b>		2. DELIVERY ORDER NO. <b>UZ4A</b>		3. DATE OF ORDER (YYMMDD) <b>2003 SEP 04</b>		4. REQUISITION/PURCH REQUEST NO. <b>YPC03238000890</b>		5. PRIORITY <b>DOA1</b>	
6. ISSUED BY <b>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.Miller@dla.mil</b>			CODE <b>SP0700</b>		7. ADMINISTERED BY (If other than 6) CODE <b>S0707A</b>			8. DELIVERY FOB <input type="checkbox"/> DEST <input checked="" type="checkbox"/> OTHER <small>(See Schedule if other)</small>	
9. CONTRACTOR  <b>NAME AND ADDRESS: SIKORSKY AIRCRAFT CORP 6900 MAIN ST STRATFORD CT 06615-9129</b>			CODE <b>78286</b>		FACILITY CODE		10. DELIVER TO FOB POINT BY (Date) (YYMMDD) <b>209 DAYS ARO</b>		11. MARK IF BUSINESS IS <input type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISADVANTAGED <input type="checkbox"/> WOMEN-OWNED
					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 CODE <b>HQ0337</b>			MARK ALL PACKAGES AND PAPERS WITH CONTRACT OR ORDER NUMBER	
					<b>HQ0337 DFAS COLUMBUS CENTER NORTH ENTITLEMENT OPERATIONS P O BOX 182266 COLUMBUS OH 43218-2266 EFT: T</b>				

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 <b>offer dated 2003 AUG 28, SPQS</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.
	PURCHASE	<input type="checkbox"/>	

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
	<b>Remarks: ACCELERATED DELIVERY IS ACCEPTABLE AND DESIRED AT NO COST TO THE GOVERNMENT.</b>	<b>TOTAL: 5</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:		25. TOTAL \$ <b>451.55</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.		28. D.O. VOUCHER NO.	
DATE _____ SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE _____		<input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		29. DIFFERENCE	
36. I certify this account is correct and proper for payment. DATE _____ SIGNATURE AND TITLE OF CERTIFYING OFFICER _____		31. PAYMENT <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		30. INITIALS	
37. RECEIVED AT		38. RECEIVED BY (Print)		32. PAID BY	
39. DATE RECEIVED (YYMMDD)		40. TOTAL CONTAINERS		33. AMOUNT VERIFIED CORRECT FOR	
		41. S/R ACCOUNT NUMBER		34. CHECK NUMBER	
		42. S/R VOUCHER NO.		35. BILL OF LADING NO.	

## SECTION B

PR YPC03238000890  
NSN 4710-01-107-1206

## ITEM DESCRIPTION:

TUBE ASSEMBLY, METAL. STAINLESS STEEL MATERIAL,  
1/4 INCH O.D., 0.016 INCH WALL THICKNESS,

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).

DLAD 52.246-9000, CERTIFICATE OF QUALITY  
COMPLIANCE APPLIES. DLAD 52.246-9003,  
MEASURING AND TEST EQUIPMENT APPLIES.  
DLAD CLAUSE 52.246-9004, PRODUCT VERIFICATION  
TESTING, IS HEREBY INCORPORATED, AND MAY BE  
INVOKED AT THE DISCRETION OF THE PROCUREMENT  
ACTIVITY IF THIS SOLICITATION/AWARD CALLS  
FOR GOVERNMENT INSPECTION AT SOURCE.

THE INTERNATIONAL ORGANIZATION FOR  
STANDARDIZATION (ISO) 9002 OR A "TAILORED"  
PROGRAM MEETING THE FOLLOWING ISO 9002  
PARAGRAPHS APPLIES:

4.5, DOCUMENT CONTROL: LIMITED TO INSPECTION  
AND TESTING AS WELL AS APPLICABLE DRAWINGS,  
SPECIFICATIONS AND INSTRUCTIONS REQUIRED BY  
CONTRACT  
4.6, PURCHASING: 4.6.1 AND LIMITED TO 4.6.2 A)  
AND 4.6.4.2, ALL OTHER PARTS OF PARAGRAPH  
ARE HEREBY DELETED  
4.7, CUSTOMER-SUPPLIED PRODUCT:  
4.8, PRODUCT IDENTIFICATION & TRACEABILITY:  
4.10, INSPECTION & TESTING:  
4.11, INSPECTION, MEASURING & TEST EQUIPMENT:  
4.12, INSPECTION AND TEST STATUS:  
4.13, CONTROL OF NONCONFORMING PRODUCT:  
4.14, CORRECTIVE AND PREVENTIVE ACTION:  
PARAGRAPH 4.14.3 APPLY TO PRODUCT ONLY  
4.16, QUALITY RECORDS:  
FAR CLAUSE 52.246-11 APPLIES

CRITICAL APPLICATION ITEM

CONTINUED ON NEXT PAGE

## SECTION B

SIKORSKY AIRCRAFT CORP

(78286) P/N 70652-06211-045

<u>ITEM</u>	<u>PR</u>	<u>PRLI</u>	<u>QUANTITY</u>	<u>UNIT</u>	<u>UNIT PRICE</u>	<u>AMOUNT</u>
2001	YPC03238000890	0001	5	EA	\$90.31000	\$451.55

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 = ZZ: CLNG/DRY = X: PRESV MAT = XX:

WRAP MAT = XX: CUSH/DUNN MAT = XX: CUSH/DUNN THKNESS = X:

UNIT CONT = XX: OPI = O:

INTRMDTE CONT =

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

SUPPLEMENTAL INSTRUCTIONS

'PRESERVATION AND PACKAGING SHALL BE  
 I-A-W THE LATEST REVISION OF FEDERAL  
 SPECIFICATION MIL-H-775, HOSE.'

'WHEN ZZ IS THE METHOD OF PRESERVATION, USE  
 LEVEL 'A' PRESERVATION AS CITED IN THE  
 COMMODITY SPECIFICATION.'

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 MAR 31

PARCEL POST ADDRESS:

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

CONTINUED ON NEXT PAGE

SECTION B

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 NS1

\*\*\*\*\*

REMIT PAYMENT TO:

\*\*\*\*\*