

ORDER FOR SUPPLIES OR SERVICES

(Contractor must submit four copies of invoice.)

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

PAGE 1 OF
3

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. N00383-00-G-023B		2. DELIVERY ORDER NO. UBD7		3. DATE OF ORDER (YYMMDD) 2004 AUG 05		4. REQUISITION/PURCH REQUEST NO. YPC04159000841		5. PRIORITY DOA1																																				
6. ISSUED BY Defense Supply Center Columbus P.O. Box 3990 Columbus, OH 43218-3990 Local Administrator: PAABCAC (614)692-1056 / FAX: (614)692-6271 E-mail: Ronn.Thompson@dla.mil			CODE SP0700		7. ADMINISTERED BY (If other than 6) DCMC GRUMMAN ST AUGUSTINE 5000 US 1 N PO DRAWER 3447 (904) 825-3563 ST AUGUSTINE FL 32085-3447			CODE S1110A																																				
9. CONTRACTOR NORTHROP GRUMMAN SYSTEMS CORPORATION 5000 US HIGHWAY 1 NORTH P.O. BOX 3447 SAINT AUGUSTINE FL 32095-6200			CODE 61174		FACILITY CODE		10. DELIVER TO FOB POINT BY (Date) (YYMMDD) 452 DAYS ARO		11. MARK IF BUSINESS IS <input 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			CODE		15. PAYMENT WILL BE MADE BY HQ0338 DFAS COLUMBUS CENTER SOUTH ENTITLEMENT OPERATIONS P O BOX 182264 COLUMBUS OH 43218-2264			CODE HQ0338		MARK ALL PACKAGES AND PAPERS WITH CONTRACT OR ORDER NUMBER																																		
16. TYPE OF ORDER		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">DELIVERY</td> <td style="width: 5%; text-align: center;"><input checked="" type="checkbox"/></td> <td colspan="9">This delivery order is issued on another Government agency or in accordance with and subject to terms and conditions of above numbered contract.</td> </tr> <tr> <td>PURCHASE</td> <td></td> <td colspan="9">Reference your offer dated 2004 AUG 05, EA6B2004-0178 and furnish the following on terms specified herein.</td> </tr> <tr> <td colspan="11">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.</td> </tr> </table>										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.									PURCHASE		Reference your offer dated 2004 AUG 05, EA6B2004-0178 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.										
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.																																										
PURCHASE		Reference your offer dated 2004 AUG 05, EA6B2004-0178 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 CG: 97X4930 SCC0 001 26.0 S33150																																												
18. ITEM NO.		19. SCHEDULE OF SUPPLIES/SERVICE				20. QUANTITY ORDERED/ACCEPTED*		21. UNIT	22. UNIT PRICE		23. AMOUNT																																	
		Remarks: CONFIRMING ORDER -- DO NOT DUPLICATE ACCELERATED DELIVERY IS ACCEPTABLE AND DESIRED AT NO COST TO THE GOVERNMENT.				TOTAL: 16																																						
* 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		25. TOTAL		\$ 16190.08																																		
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 DATE _____ SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE _____						27. SHIP. NO.		28. D.O. VOUCHER NO.		29. DIFFERENCE																																		
						<input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		32. PRD BY		30. INITIALS																																		
36. I certify this account is correct and proper for payment. DATE _____ SIGNATURE AND TITLE OF CERTIFYING OFFICER _____						31. PAYMENT		33. AMOUNT VERIFIED CORRECT FOR		34. CHECK NUMBER																																		
						<input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		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 YPC04159000841
 NSN 4720-00-186-8546

ITEM DESCRIPTION:

HOSE ASSEMBLY, METALLIC

NORTHROP GRUMMAN SYSTEMS CORP (26512) P/N GH511G12-0114
 TITFLEX CORP (78570) P/N S34812-1108-090

<u>ITEM</u>	<u>PR</u>	<u>PRLI</u>	<u>QUANTITY</u>	<u>UNIT</u>	<u>UNIT PRICE</u>	<u>AMOUNT</u>
0001	YPC04159000841	0001	16	EA	\$1011.88000	\$16190.08

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 THKNSS = X:
 UNIT CONT = XX: OPI = O:
 INTRMDTE CONT = XX: INTRMDTE CONT QTY = XXX:
 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
 IAW ASTM-D3951, COMMERCIAL PACKAGING.

For all shipments of packaged materiel to the government, which includes either depot (DLA-direct) or DVD (customer-direct) shipments, both DoD linear and 2-D bar code markings are required on military shipping labels in accordance with MIL-STD-129, revision P, dated December 15, 2002. 2-D bar coding shall be in accordance with ISO/IEC 15438, ISO/IEC 15434 (ANSI MH10.8.3) and DoD 4500.9-R. MSL linear (code 3 of 9 or code 39) bar coding shall be in accordance with ISO/IEC 16388. MSL label stock quality shall

CONTINUED ON NEXT PAGE

SECTION B

meet MIL-PRF-61002. MSL bar code print quality shall meet ANSI MH10.8-2000 or ANSI X3.182-1990 (R2000) for applicable 2-D and/or linear bar codes. All DVD shipments shall meet additional linear bar coding requirements in DLAD 52.211-9008. When the contract/order omits any data element required to be bar-coded, the field shall be zero-filled. These requirements do not apply to delivery orders when the basic contract has not been modified to require MIL-STD-129P. If there are inconsistencies between the schedule and MIL-STD-129P, the schedule takes precedence.

DELIVER FOB: ORIGIN BY: 2005 OCT 31

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 95304-5000

NON-MILSTRIP
PROJ

REMIT PAYMENT TO:
