

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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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. F34601-01-G-0004		2. DELIVERY ORDER NO. UBC2		3. DATE OF ORDER (YYMMDD) 2004 FEB 10		4. REQUISITION/PURCH REQUEST NO. YPC03314000116		5. PRIORITY DOA1	
6. ISSUED BY Defense Supply Center Columbus 3990 E. Broad St. P.O. Box 16704 Columbus, OH 43216-5010 Local Administrator: PAABCAJ (614)692-7531 / FAX: (614)693-1679 E-mail: Cynthia.Farley-Fitzpatrick@dla.mil				7. ADMINISTERED BY (If other than 6) DCMC VAN NUYS 6230 VAN NUYS BLVD 818 267-2000 VAN NUYS CA 91401-2713		CODE S0512A		8. DELIVERY FOB <input type="checkbox"/> DEST <input checked="" type="checkbox"/> OTHER <small>(See Schedule if other)</small>	
9. CONTRACTOR WHITTAKER CONTROLS INC. 12838 SATICOY STREET NORTH HOLLYWOOD CA 91605-3505				CODE 79318		FACILITY CODE		10. DELIVER TO FOB POINT BY (Date) (YYMMDD) 365 DAYS ARO	
NAME AND ADDRESS				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 ATTN DFAS CO BVDPPCC/CC CONSTRUCTION 3990 E BROAD ST PO BOX 182317 COLUMBUS OH 43218-6203		CODE S33181	
								MARK ALL PACKAGES AND PAPERS WITH CONTRACT OR ORDER NUMBER	

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.
	PURCHASE		Reference your offer dated 2004 JAN 27, 13253 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 5CC0 001 26.0 S33150
97X4930 5CC0 001 22.1 S33150 (TRANS)**

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: 38			

* 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>Leah Webb</i> CONTRACTING/ORDERING OFFICER		25. TOTAL \$ 30677.78
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		29. DIFFERENCE
DATE _____ SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE _____		28. D.O. VOUCHER NO.		30. INITIALS
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		32. PAID BY
37. RECEIVED AT		38. RECEIVED BY (Print)		33. AMOUNT VERIFIED CORRECT FOR
39. DATE RECEIVED (YYMMDD)		40. TOTAL CONTAINERS		34. CHECK NUMBER
41. S/R ACCOUNT NUMBER		42. S/R VOUCHER NO.		35. BILL OF LADING NO.

Packaging - Inspection and Acceptance Address:
3L633

JAMAR PACKAGING INC
24810 AVE TIBBETTS
VALENCIA CA 91355

SECTION B

PR YPC03314000116
NSN 4820-00-100-1067

ITEM DESCRIPTION:

VALVE, CHECK

NOTE: THE CITED DRAWING IS A SOURCE CONTROLLED DRAWING AND AS OF THE DATE OF THIS SOLICITATION ONLY THE SOURCE(S) CITED ON THE DRAWING HAVE BEEN APPROVED. EVEN THOUGH SOURCES AND APPROVED PART NUMBERS ARE PROVIDED, THE ITEMS FURNISHED MUST MEET THE REQUIREMENTS OF THE CITED DRAWING. OFFERORS WHO ARE INTERESTED IN QUALIFYING THEIR PRODUCT FOR PURPOSE OF FUTURE ACQUISITION MUST CONTACT THE COGNIZANT DESIGN ACTIVITY SPECIFIED ON THE SOURCE CONTROLLED DRAWING.

ALSO, MAY INCLUDE ADDITIONAL APPROVED SOURCES THAT HAVE NOT BEEN REFLECTED ON THE DRAWING AT THIS TIME.

LOCKHEED (98897) P/N 4A99005-101A.

"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."

CRITICAL APPLICATION ITEM

WHITTAKER CONTROLS INC.	(79318)	P/N	26620469
WHITTAKER CONTROLS INC.	(79318)	P/N	26620469-01
LOCKHEED MARTIN CORPORATION	(98897)	P/N	4A99005-101A

I/A/W DRAWING NR 98897 4A99005
BASIC DTD 67 OCT 09
AMEND NR B DTD 67 OCT 09
TYPE NUMBER: -101A
SOURCE CONTROL DRAWING

I/A/W DRAWING NR 98897 V4A99005
BASIC DTD 83 NOV 14
AMEND NR F DTD 83 NOV 14
TYPE NUMBER: -101A
"DETAILED DRAWING (ONE ITEM) "

CONTINUED ON NEXT PAGE

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	YPC03314000116	0001	38	EA	\$807.31000	\$30677.78

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 = AE: CLNG/DRY = 1: PRESV MAT = 00:
 WRAP MAT = XX: CUSH/DUNN MAT = XX: CUSH/DUNN THKNSS = X:
 UNIT CONT = D3: OPI = 0:
 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
 SUPPLEMENTAL INSTRUCTIONS

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: 2005 FEB 09

PARCEL POST/FREIGHT ADDRESS:

SW3119
 DEF DIST DEPOT WARNER ROBINS
 455 BYRON STREET BLDG 376
 ROBINS AFB GA 31098-1887

NON-MILSTRIP
 PROJ NS1

CONTINUED ON NEXT PAGE

SECTION B

REMIT PAYMENT TO:

WHITTAKER CONTROLS
FILE# 53053
LOS ANGELES CA
90074-3053
