

# 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.<br><b>SP0700-03-D-9712</b>  |  | 2. DELIVERY ORDER NO.<br><b>1013</b> |  | 3. DATE OF ORDER (YYMMDD)<br><b>2003 AUG 13</b>   |  | 4. REQUISITION/PURCH REQUEST NO.<br><b>YPC03225000619</b>   |  | 5. PRIORITY   |  |  |  |
| 6. ISSUED BY<br><b>DEFENSE SUPPLY CENTER COLUMBUS<br/>3990 E. BROAD STREET<br/>P.O. BOX 16704<br/>COLUMBUS, OH 43216-5010</b>       |  |                                      |  | 7. ADMINISTERED BY (If other than 6)<br><b>S0512A DCMC VAN NUYS<br/>6230 VAN NUYS BLVD<br/>818 267-2000<br/>VAN NUYS CA 91401-2713</b>                      |  | 8. DELIVERY FOB<br><input type="checkbox"/> DEST<br><input checked="" type="checkbox"/> OTHER<br><i>(See Schedule if other)</i> |  |   |  |  |  |
| 9. CONTRACTOR<br><b>HR TEXTRON INC.<br/>25200 WEST RYE CANYON ROAD<br/>VALENCIA CA 91355-1265</b>                                   |  | CODE <b>81873</b>                    |  | FACILITY CODE   |  | 10. DELIVER TO FOB POINT BY (Date) (YYMMDD)   |  | 11. MARK IF BUSINESS IS<br><input type="checkbox"/> SMALL<br><input type="checkbox"/> SMALL DISADVANTAGED<br><input type="checkbox"/> WOMEN-OWNED |  |  |  |
|   |  |                                      |  |   |  | 12. DISCOUNT TERMS<br><b>I/A/W/ BASIC CONTRACT</b>  |  |   |  |  |  |
|   |  |                                      |  |   |  | 13. MAIL INVOICES TO<br><b>SEE BLOCK 15</b>   |  |   |  |  |  |
| 14. SHIP TO<br><b>DO NOT SHIP TO ADDRESSES ON THIS PAGE<br/>SEE FOLLOWING PAGE<br/>SHIPPING ADDRESSES ARE SHOWN UNDER LINE ITEM</b> |  |                                      |  | 15. PAYMENT WILL BE MADE BY<br><b>DFAS COLUMBUS CENTER<br/>DFAS CO BVPDCC/CC CONSTRUCTION<br/>3990 E BROAD ST PO BOX 182317<br/>COLUMBUS, OH 43218-6203</b> |  |   |  | 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 _____ 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**

| 18. ITEM NO. | 19. SCHEDULE OF SUPPLIES/SERVICE  | 20. QUANTITY ORDERED/ACCEPTED* | 21. UNIT | 22. UNIT PRICE | 23. AMOUNT |
|--------------|---|--------------------------------|----------|----------------|------------|
|              | <b>Remarks:<br/>Terms and conditions are in accordance with Basic Contract.</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<br>BY: <b>POPS Auto Award</b>   |  | 25. TOTAL<br><b>\$ 16930.42</b> |  |
| 26. QUANTITY IN COLUMN 20 HAS BEEN<br><input type="checkbox"/> INSPECTED <input type="checkbox"/> RECEIVED <input type="checkbox"/> ACCEPTED, AND CONFORMS TO THE CONTRACT EXCEPT AS NOTED |  | 27. SHIP. NO.<br><input type="checkbox"/> PARTIAL<br><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.<br>DATE _____ SIGNATURE AND TITLE OF CERTIFYING OFFICER _____  |  | 31. PAYMENT<br><input type="checkbox"/> COMPLETE<br><input type="checkbox"/> PARTIAL<br><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   |  | 35. BILL OF LADING NO.          |  |
|  |  | 42. S/R VOUCHER NO.  |  |                                 |  |

## SECTION B

ITEM DESCRIPTION NOT INCLUDED

Admin Location Code 516

P/N 200056-2N Manufacturer's CAGE - 81873

| <u>ITEM</u> |   | <u>QTY</u> | <u>UNIT</u> | <u>UNIT PRICE</u> | <u>AMOUNT</u> |
|-------------|---|------------|-------------|-------------------|---------------|
| 7201        | PR YPC03225000619<br>NSN 4810-00-831-4973 | 13         | EA          | 1302.34           | 16930.42      |

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

DELIVERY FOB: ORIGIN BY: 2004 JAN 30

**PARCEL POST ADDRESS:**DISTRIBUTION DEPOT HILL  
7537 WARDLEIGH RD  
HILL AFB UT 840565734**FREIGHT ADDRESS:**SW3210  
DISTRIBUTION DEPOT HILL  
7537 WARDLEIGH RD BLDG 849W  
HILL AFB UT 840565734M/F: (TCN) STOCK BUY RQMT  
RDD: 10-OCT-03 PROJ:

END OF AWARD