

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. SP0760-03-D-5F48 | | 2. DELIVERY ORDER NO. 0002 | | 3. DATE OF ORDER (YYMMDD) 2003 NOV 19 | | 4. REQUISITION/PURCH REQUEST NO. YPC03318000555 | | 5. PRIORITY DOA4 | | | |
| 6. ISSUED BY CODE SP0700 Defense Supply Center Columbus 3990 E. Broad St. P.O. Box 16704 Columbus, OH 43216-5010 Local Administrator: PMMEECM (614)692-2032 / FAX: (614)693-1551 E-mail: Patricia.Hachten@dla.mil | | | | 7. ADMINISTERED BY (If other than 6) CODE SC0700 DEFENSE SUPPLY CENTER COLU DSCC-MEECM 614-692-2032 BOX 16704 (TRANS 614-692-2175) COLUMBUS OHIO 43216-5010 | | | | 8. DELIVERY FOB <input checked="" type="checkbox"/> DEST <input type="checkbox"/> OTHER <i>(See Schedule if other)</i> | | | |
| 9. CONTRACTOR CODE 0FWZ1 DAR ENTERPRISES INC 2700 ROGAN RD. ORLANDO FL 32812-5828 | | | | FACILITY CODE | | 10. DELIVER TO FOB POINT BY (Date) (YYMMDD) 45 DAYS ADO | | 11. MARK IF BUSINESS IS <input checked="" type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISADVANTAGED <input type="checkbox"/> WOMEN-OWNED | | | |
| NAME AND ADDRESS | | | | 12. DISCOUNT TERMS | | 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 S33181 S33181 DFAS COLUMBUS CENTER ATTN DFAS CO BVDPC/CC CONSTRUCTION 3990 E BROAD ST PO BOX 182317 COLUMBUS OH 43218-6203 | | | | MARK ALL PACKAGES AND PAPERS WITH CONTRACT OR ORDER NUMBER | | | |
| EFT: T | | | | | | | | | | | |

| | | | |
|-------------------|----------|-------------------------------------|--|
| 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 offer dated 2003 APR 14 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 | | |

| | | | |
|--|-----------|----------------------|----------------------|
| 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 |
|--------------|--|--------------------------------|----------|----------------|------------|
| | Remarks: ACCELERATED DELIVERY IS ACCEPTABLE AND DESIRED AT NO COST TO THE GOVERNMENT. | TOTAL: 12 | | | |

| | | | | | |
|--|--|--|--|---------------------------------|--|
| * 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 Hanan Sabir PMMLT16 | | 25. TOTAL \$ 3528.00 | |
| 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 | | BY: | | 29. DIFFERENCE | |
| DATE _____ SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE _____ | | 30. INITIALS | | 33. AMOUNT VERIFIED CORRECT FOR | |
| 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 | | 34. CHECK NUMBER | |
| 37. RECEIVED AT | | 38. RECEIVED BY (Print) | | 35. BILL OF LADING NO. | |
| 39. DATE RECEIVED (YYMMDD) | | 40. TOTAL CONTAINERS | | 41. S/R ACCOUNT NUMBER | |
| 42. S/R VOUCHER NO. | | 32. PAID BY | | 33. AMOUNT VERIFIED CORRECT FOR | |

All terms and conditions of Basic SP076003D5F48 apply

SECTION B

PR YPC03318000555
NSN 4320-01-204-1810

ITEM DESCRIPTION:

PUMP UNIT, CENTRIFUGAL.

CRITICAL APPLICATION ITEM

MYERS F E CO (42223) P/N HC-50

| <u>ITEM</u> | <u>PR</u> | <u>PRLI</u> | <u>QUANTITY</u> | <u>UNIT</u> | <u>UNIT PRICE</u> | <u>AMOUNT</u> |
|-------------|----------------|-------------|-----------------|-------------|-------------------|---------------|
| 0001 | YPC03318000555 | 0001 | 12 | EA | \$294.00000 | \$3528.00 |

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

PREP FOR DELIVERY

PKGING DATA - MIL-STD-2073-1D, 15 DEC 1999
QUP = 001: PRES MTHD = BL: CLNG/DRY = 1: PRESV MAT = 49:
WRAP MAT = XX: CUSH/DUNN MAT = AD: CUSH/DUNN THKNESS = X:
UNIT CONT = E5: OPI = 0:
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: DESTINATION BY: 2004 JAN 03

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 CI1

* * * * *

REMIT PAYMENT TO:

* * * * *

CONTINUED ON NEXT PAGE

CONTINUATION SHEET

Order Number:

SP0760-03-D-5F48-0002

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THE PURCHASE ORDER CLAUSES ARE APPLICABLE AS INDICATED IN THE
DSCC MASTER SOLICITATION FOR AUTOMATED SOLICITATIONS AND
RESULTING AWARDS REVISION 13 FOUND ON THE DSCC WEB SITE AT
<http://dibbs.dsc.dla.mil/refs/provclauses/>