

ORDER FOR SUPPLIES OR SERVICES

(Contractor must submit four copies of invoice.)

Form Approved
OMB No. 0704-0187
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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. N00383-02-G-003H		2. DELIVERY ORDER NO. UBQ7		3. DATE OF ORDER (YYMMDD) 2004 FEB 20		4. REQUISITION/PURCH REQUEST NO. YPC04049000037		5. PRIORITY DOA1			
6. ISSUED BY Defense Supply Center Columbus 3990 E. Broad St. P.O. Box 16704 Columbus, OH 43216-5010 Local Administrator: PAACAD (614)692-1407 / FAX: (614)692-6292 E-mail: Michael.Theado@dla.mil			CODE SP0700		7. ADMINISTERED BY (If other than 6) DCMC SANTA ANA 34 CIVIC CENTER PLAZA ROOM 813A SANTA ANA, CA 92701-4056			CODE S0513A			
9. CONTRACTOR PARKER HANNIFIN CUSTOMER SUPPORT INC. 14300 ALTON PARKWAY IRVINE CA 92618-1814 Vendor's Copy was sent EDI. Do not Duplicate shipment.			CODE 59211		FACILITY CODE 3H889		10. DELIVER TO FOB POINT BY (Date) (YYMMDD) 120 DAYS ADO		8. DELIVERY FOB <input type="checkbox"/> DEST <input checked="" type="checkbox"/> OTHER <small>(See Schedule if other)</small>		
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 HQ0339 DFAS COLUMBUS CENTER WEST ENTITLEMENT OPERATIONS P O BOX 182381 COLUMBUS OH 43218-2381			CODE HQ0339		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.
	PURCHASE		Reference your offer dated 2004 JAN 26, M2004010094 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:			
		1			

* 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 \$ 625.36	
BY: <i>Mary James</i>		CONTRACTING/ORDERING OFFICER		29. DIFFERENCE	
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.		30. INITIALS	
DATE _____ SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE _____		28. D.O. VOUCHER NO.		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.	

Manufacture Facilities:

3H889

PARKER HANNIFIN CORPORATION
DIV AIR & FUEL DIVISION
16666 VON KARMAN AVENUE
IRVINE CA 92606-4917

Supplies and Packaging - Inspection and Acceptance Address:

3H889

PARKER HANNIFIN CORPORATION
DIV AIR & FUEL DIVISION
16666 VON KARMAN AVENUE
IRVINE CA 92606-4917

All Terms and Conditions apply as agreed in the Basic Ordering Agreement
N0038302G003H effective 1/16/2003 through 01/15/2006.

COC is Authorized per FAR 52.246-15.

This is an EMERGENCY SUPPLY ITEM (ESOC) in support of our current "Wartime
Effort". Please EXPEDITE your Delivery in order to fill our Military
Customer's URGENT REQUIREMENT.

Thank you for helping us serve our Military Customer .Mary Tatman, AABB6

SECTION B

PR YPC04049000037
 NSN 4810-01-399-7420

ITEM DESCRIPTION:

DIAPHRAGM, ACTUATOR VALVE, SPECIAL SHAPED.

"ASO/NAVSEA/AVSCOM CRITICAL ITEM"

CRITICAL APPLICATION ITEM

PARKER HANNIFIN CORPORATION (3H889) P/N 2933115-101
 PARKER HANNIFIN CUSTOMER SUPPORT (59211) P/N 2933115-101

<u>ITEM</u>	<u>PR</u>	<u>PRLI</u>	<u>QUANTITY</u>	<u>UNIT</u>	<u>UNIT PRICE</u>	<u>AMOUNT</u>
2001	YPC04049000037	0001	1	EA	<u>\$625.36000</u>	<u>\$625.36</u>

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

PREP FOR DELIVERY

PKGING DATA - QUP 001:

SHALL BE PACKAGED STANDARD COMMERCIAL IN ACCORDANCE WITH ASTM D 3951.

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 JUN 19

PARCEL POST ADDRESS:

N65923
 NAVAL AVIATION DEPOT CHERRY POINT
 PSC 8021
 MCAS CHERRY POINT NC 28533-0021

CONTINUED ON NEXT PAGE

SECTION B

FREIGHT SHIPPING ADDRESS:

N65923
MARK FOR NADEP RECEIVING OFFICER
MARINE CORPS AIR STATION 65923
CUNNINGHAM STREET BLDG 159 BAY R4
CHERRY POINT NC 28533-5040

M/F: (TCN) N659234043K9MM XXX
RDD 043 SHIP BY FASTEST TRACEABLE MEANS
PROJ 705 TP 1
SUP ADD SIG A

FOR GOVERNMENT USE ONLY: IPD 03

DIC A4A DIST 9C ADV FC PC

REMIT PAYMENT TO:
