

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. SP0700-01-D-9405		2. DELIVERY ORDER NO. 0035		3. DATE OF ORDER (YYMMDD) 2004 JUL 23		4. REQUISITION/PURCH REQUEST NO. NPC0420100622		5. PRIORITY DOA1															
6. ISSUED BY Defense Supply Center Columbus P.O. Box 3990 Columbus, OH 43218-3990 Local Administrator: PAABCAC (614)692-7512 / FAX: (614)692-5269 E-mail: Dorinda.Conner@dla.mil				7. ADMINISTERED BY (if other than 6) DCMA PRATT & WHITNEY 400 MAIN ST EAST HARTFORD CT 06108-0969 CRITICALITY: B				8. DELIVERY FOB <input type="checkbox"/> DEST <input checked="" type="checkbox"/> OTHER <small>(See Schedule if other)</small>															
9. CONTRACTOR UNITED TECHNOLOGIES CORP DBA PRATT & WHITNEY DIV MILITARY 400 MAIN STREET MAIL STOP 182-14 EAST HARTFORD CT 06108-0968 Vendor's Copy was sent EDI. Do not Duplicate shipment.				10. DELIVER TO FOB POINT BY (Date) (YYMMDD) See Schedule		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															
14. SHIP TO See Schedule - Do Not Ship to Address in Block 6				15. PAYMENT WILL BE MADE BY HQ0337 HQ0337 DFAS COLUMBUS CENTER NORTH ENTITLEMENT OPERATIONS P O BOX 182266 COLUMBUS OH 43218-2266				13. MAIL INVOICES TO See Block 15															
16. DELIVERY TYPE OF ORDER <input checked="" type="checkbox"/> PURCHASE This delivery order is issued on another Government agency or in accordance with and subject to terms and conditions of above numbered contract. 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)														
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: ACCELERATED DELIVERY IS ACCEPTABLE AND DESIRED AT NO COST TO THE GOVERNMENT.																			TOTAL: 90			
* 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 \$ 93997.80			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. <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL			28. D.O. VOUCHER NO.			30. INITIALS					
DATE _____ SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE _____												31. PAYMENT <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL			32. PAID BY			33. AMOUNT VERIFIED CORRECT FOR					
36. I certify this account is correct and proper for payment. DATE _____ SIGNATURE AND TITLE OF CERTIFYING OFFICER _____												34. CHECK NUMBER			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 NPC04201000622
NSN 2910-01-351-8861

ITEM DESCRIPTION:

HOLDER, FUEL INJECTOR.

CRITICAL APPLICATION ITEM

UNITED TECHNOLOGIES CORPORATION (77445) P/N 2187700

<u>ITEM</u>	<u>PR</u>	<u>PRLI</u>	<u>QUANTITY</u>	<u>UNIT</u>	<u>UNIT PRICE</u>	<u>AMOUNT</u>
0001AA	NPC04201000622	0001	44	EA	\$1044.42000	\$45954.48
QTY VARIANCE: PLUS 5% MINUS 5%						
INSPECTION POINT: ORIGIN						
ACCEPTANCE POINT: ORIGIN						

DELIVERY FOB: ORIGIN BY: 2005 FEB 28

<u>ITEM</u>	<u>PR</u>	<u>PRLI</u>	<u>QUANTITY</u>	<u>UNIT</u>	<u>UNIT PRICE</u>	<u>AMOUNT</u>
0001AB	NPC04201000622	0001	44	EA	\$1044.42000	\$45954.48
QTY VARIANCE: PLUS 5% MINUS 5%						
INSPECTION POINT: ORIGIN						
ACCEPTANCE POINT: ORIGIN						

DELIVERY FOB: ORIGIN BY: 2005 MAR 31

<u>ITEM</u>	<u>PR</u>	<u>PRLI</u>	<u>QUANTITY</u>	<u>UNIT</u>	<u>UNIT PRICE</u>	<u>AMOUNT</u>
0001AC	NPC04201000622	0001	2	EA	\$1044.42000	\$2088.84
QTY VARIANCE: PLUS 5% MINUS 5%						
INSPECTION POINT: ORIGIN						
ACCEPTANCE POINT: ORIGIN						

DELIVERY FOB: ORIGIN BY: 2005 APR 30

PREP FOR DELIVERY

"THE TERMS AND CONDITIONS OF THE BASIC CONTRACT WITH REGARD TO PACKAGING TAKE PRECEDENCE."

CONTINUED ON NEXT PAGE

SECTION B

PARCEL POST/FREIGHT ADDRESS:

SW3122
DEF DIST DEPOT JACKSONVILLE
BLDG 175 SWAN ROAD
NAS JACKSONVILLE FL 32212-0103

NON-MILSTRIP
PROJ

REMIT PAYMENT TO:
