

# 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. <b>N00383-02-G-014G</b>		2. DELIVERY ORDER NO. <b>UB6H</b>		3. DATE OF ORDER (YYMMDD) <b>2003 AUG 25</b>		4. REQUISITION/PURCH REQUEST NO. <b>YPC03191000298</b>		5. PRIORITY <b>DOA1</b>			
6. ISSUED BY <b>Defense Supply Center Columbus 3990 E. Broad St. P.O. Box 16704 Columbus, OH 43216-5010 Local Administrator: PAABCAA (614)692-2067 / FAX: (614)693-1679 E-mail: Sharon.Dumbaugh@dia.mil</b>			CODE <b>SP0700</b>		7. ADMINISTERED BY (if other than 6) <b>DCMA GENERAL DYNAMICS DEFENSE SYST 128 LAKESIDE AVE BURLINGTON VT 05401-4985</b>			CODE <b>S4601A</b>			
9. CONTRACTOR <b>GENERAL DYNAMICS ARMAMENT AND TECHNICAL PRODUCTS INC. 128 LAKESIDE AVENUE BURLINGTON VT 05401-4985</b>			CODE <b>05606</b>		FACILITY CODE		10. DELIVER TO FOB POINT BY (Date) (YYMMDD) <b>219 DAYS ARO</b>		8. DELIVERY FOB <input type="checkbox"/> DEST <input checked="" type="checkbox"/> OTHER <small>(See Schedule if other)</small>		
NAME AND ADDRESS			12. DISCOUNT TERMS <b>NET 30 days</b>		11. MARK IF BUSINESS IS <input type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISADVANTAGED <input type="checkbox"/> WOMEN-OWNED		13. MAIL INVOICES TO <b>See Block 15</b>				
14. SHIP TO <b>See Schedule - Do Not Ship to Address in Block 6</b>			CODE		15. PAYMENT WILL BE MADE BY <b>HQ0337 DFAS COLUMBUS CENTER NORTH ENTITLEMENT OPERATIONS P O BOX 182266 COLUMBUS OH 43218-2266</b>			CODE <b>HQ0337</b>		MARK ALL PACKAGES AND PAPERS WITH CONTRACT OR ORDER NUMBER	

16. TYPE OF ORDER	<input checked="" type="checkbox"/> DELIVERY	This delivery order is issued on another Government agency or in accordance with and subject to terms and conditions of above numbered contract.
	<input type="checkbox"/> PURCHASE	Reference your <b>offer dated 2003 JUL 30, 4CC5MC</b> 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: ACCELERATED DELIVERY IS ACCEPTABLE AND DESIRED AT NO COST TO THE GOVERNMENT.</b>	<b>TOTAL: 16</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 BY: <i>Robert Schneider</i> CONTRACTING ORDERING OFFICER	25. TOTAL <b>\$ 5408.00</b>	29. DIFFERENCE
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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.
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CONTINUATION SHEET

Order Number:

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FOB ORIGIN: SACO, ME

INSPECTION POINTS FOR SUPPLIES AND PACKAGING:

GENERAL DYNAMICS ARMAMENT AND TECHNICAL PRODUCTS (05606)

SECONDARY ADMIN LOCATION: SAME AS PRIMARY ADMIN LOCATION

## CONTINUATION SHEET

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## SECTION B

PR YPC03191000298  
 NSN 3020-00-893-8349

## ITEM DESCRIPTION:

GEAR CLUSTER.

IF AQLS ARE LISTED IN THE SPECIFICATION(S)  
 OR DRAWING(S) THEY MAY BE USED TO ESTABLISH THE  
 AUTHORIZED SAMPLE SIZE, HOWEVER, THE ACCEPTANCE  
 NUMBER FOR THIS CONTRACT IS ZERO; I.E., THIS  
 CONTRACT REQUIRES A SAMPLING PLAN THAT ACCEPTS  
 ON ZERO DEFECTS AND REJECTS ON ONE OR MORE  
 DEFECT(S).

CRITICAL APPLICATION ITEM

GENERAL DYNAMICS ARMAMENT AND (05606) P/N 905D219

<u>ITEM</u>	<u>PR</u>	<u>PLI</u>	<u>QUANTITY</u>	<u>UNIT</u>	<u>UNIT PRICE</u>	<u>AMOUNT</u>
0001	YPC03191000298	0001	16	EA	\$338.00000	\$5408.00

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 = 33: CLNG/DRY = 1: PRESV MAT = XX:  
 WRAP MAT = GB: CUSH/DUNN MAT = 00: CUSH/DUNN THKNSS = 0:  
 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

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 MAR 31

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SECTION B

PARCEL POST ADDRESS:

W25G1U  
XU TRANSPORTATION OFFICER  
DDSP NEW CUMBERLAND FACILITY  
BUILDING MISSION DOOR 113 134  
NEW CUMBERLAND PA 17070-5001

FREIGHT SHIPPING ADDRESS:

W25G1U  
TRANSPORTATION OFFICER  
DDSP NEW CUMBERLAND FACILITY  
BUILDING MISSION DOOR 113-134  
NEW CUMBERLAND PA 17070-5001

NON-MILSTRIP  
PROJ

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REMIT PAYMENT TO:

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