

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. F42600-02-G-0003		2. DELIVERY ORDER NO. UB4R		3. DATE OF ORDER (YYMMDD) 2003 SEP 25		4. REQUISITION/PURCH REQUEST NO. YPE03105000024		5. PRIORITY DOA7	
6. ISSUED BY Defense Supply Center Columbus 3990 E. Broad St. P.O. Box 16704 Columbus, OH 43216-5010 Local Administrator: PCCACGD (614)692-7495 / FAX: (614)692-6929 E-mail: Patricia.McMurray@dla.mil				7. ADMINISTERED BY (If other than 6) DEFENSE SUPPLY CENTER COLUMB 3990 E. BROAD ST, P O BOX 16704 COLUMBUS, OHIO 43216-5010		8. DELIVERY FOB <input type="checkbox"/> DEST <input checked="" type="checkbox"/> OTHER <i>(See Schedule if other)</i>			
9. CONTRACTOR HONEYWELL INTL INC. DEFENSE AVIONICS SYSTEMS DIV 9201 SAN MATEO BLVD ALBUQUERQUE NM 87113-2220		10. DELIVER TO FOB POINT BY (Date) (YYMMDD) 90 DAYS ADO		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		15. PAYMENT WILL BE MADE BY S33184 DFAS - COLUMBUS CENTER ATTN DFAS CO BVDPCC/CC ELECTRONICS 3990 E BROAD ST PO BOX 182317 COLUMBUS OH 43218-6205		16. MARK ALL PACKAGES AND PAPERS WITH CONTRACT OR ORDER NUMBER					

16. TYPE OF ORDER	<input checked="" type="checkbox"/> DELIVERY <input 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. Reference your offer dated 2003 MAY 07, 35877-1-A 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.							
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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
EG: 97X4930 SCE0 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: 63			

* 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 Harold Campbell BY:		PCCAAARQ		25. TOTAL \$ 756.00	
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		32. PAID BY <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		33. AMOUNT VERIFIED CORRECT FOR		29. DIFFERENCE	
DATE _____ SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE _____		31. PAYMENT <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		34. CHECK NUMBER		30. INITIALS	
36. I certify this account is correct and proper for payment. DATE _____ SIGNATURE AND TITLE OF CERTIFYING OFFICER _____		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.	

FOB, Inspection and Acceptance shall be at: Contractor's plant.
Variation in quantity limited to: Plus _0_%, Minus _5_%.

All other terms and conditions of the cited BOA apply.

SECTION B

PR YPE03105000024
NSN 5962-00-349-7080

ITEM DESCRIPTION:

ITEM NAME MICROCIRCUIT,DIGITA

CRITICAL APPLICATION ITEM

HONEYWELL INTERNATIONAL INC. - (07187) P/N 4008080-402

<u>ITEM</u>	<u>PR</u>	<u>PRLI</u>	<u>QUANTITY</u>	<u>UNIT</u>	<u>UNIT PRICE</u>	<u>AMOUNT</u>
0001	YPE03105000024	0001	63	EA	\$12.00000	\$756.00

QTY VARIANCE: PLUS 0% MINUS 10%
INSPECTION POINT: ORIGIN
ACCEPTANCE POINT: ORIGIN

PREP FOR DELIVERY

PKGING DATA - MIL-STD-2073-1D, 15 DEC 1999
QUP = 001: PRES MTHD = GX: CLNG/DRY = 1: PRESV MAT = 00:
WRAP MAT = XX: CUSH/DUNN MAT = XX: CUSH/DUNN THKNESS = X:
UNIT CONT = XX: OPI = M:
INTRMDTE CONT = D3: INTRMDTE CONT QTY = AAA:
PACK CODE = U:
MARKING SHALL BE IN ACCORDANCE WITH MIL-STD-129.
SPECIAL MARKING CODE: 39 - MIL-STD-129 ESD SENS ELEC DEV RQMT APPLY

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: 2003 DEC 24

PARCEL POST ADDRESS:

SW3210
DISTRIBUTION DEPOT HILL
7537 WARDLEIGH RD
HILL AFB UT 84056-5734

CONTINUED ON NEXT PAGE

SECTION B

FREIGHT SHIPPING ADDRESS:

SW3210
DISTRIBUTION DEPOT HILL
7537 WARDLEIGH RD BLDG 849W
HILL AFB UT 84056-5734

NON-MILSTRIP
PROJ CI1

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REMIT PAYMENT TO:

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