ORDER FOR SUPPLIES OR SERVICES

(Contractor must submit four copies of invoice.)

Form Approved
OMB No. 0704-0187
Expires Jun 30, 1997

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.: SP0900-04-M- 0597
2. DELIVERY ORDER NO.:
3. DATE OF ORDER (YYMMMDD): 2/26/04
4. REQUISITION/PURCH REQUEST NO.: SEE CONTINUATION SHEET
5. PRIORITY: D0-A7

6. ISSUED BY — CODE SP0900
DEFENSE SUPPLY CENTER, COLUMBUS - NEB
COLUMBUS, OH 43216-5000
Contract Specialist: Richard Bebel
Comm 614-692-8609 fax 614-692-6955

7. ADMINISTERED BY (If other than 6) — CODE S0512A
DCMA Van Nuys
6230 Van Nuys Blvd. Rm 4925
Van Nuys CA 91401-2713
CDC: PAS: N

8. DELIVERY FOB: [ ] DEST [X] OTHER (See Schedule if other)

9. CONTRACTOR — CODE 02101 — FACILITY CODE
NAME AND ADDRESS:
Pacific Scientific
6382 Rose Lane
Carpinteria, CA 93013-2922

This Order is Complete
DO NOT RESHIP!

10. DELIVER TO FOB POINT BY (Date) (YYMMMDD): 5/11/2004 (77)
11. MARK IF BUSINESS IS: [ ] SMALL [ ] SMALL DISADVANTAGED [ ] WOMEN-OWNED
12. DISCOUNT TERMS: NET 30 DAYS
13. MAIL INVOICES TO: SEE BLOCK 15

14. SHIP TO — CODE
SEE ATTACHED CONTINUATION SHEET(S)

15. PAYMENT WILL BE MADE BY — CODE S33184
DFAS-COLUMBUS CENTER
ATTN: DFAS-CO-LSCAB
P.O. BOX 182317
COLUMBUS, OH 43218-6205

MARK ALL PACKAGES AND PAPERS WITH CONTRACT OR ORDER NUMBER

16. TYPE OF ORDER
DELIVERY [ ] 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 Quoted 2/9/04 By Kathleen Morton 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 (YYMMMDD)
[ ] 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 5CE 01 260 S33-150
BUYER: KIM WATSON NEAJA

18. ITEM NO.	19. SCHEDULE OF SUPPLIES/SERVICE	20. QUANTITY ORDERED/ ACCEPTED*	21. UNIT	22. UNIT PRICE	23. AMOUNT
0001	**NOTICE: ITEM(S) ARE URGENTLY NEEDED**	1	EA	9050.00	9050.00
	MARK EXTERIOR OF ALL SHIPPING CONTAINERS WITH:				
0002	Contract Number & Transportation control Number (TCN)	1	EA	9050.00	9050.00
	DO NOT SHIP PARCEL POST. Ship Fastest Traceable Means				
	Accelerated delivery is acceptable and desired at no cost to the government or vendor.				
	FOB: Carpinteria CA				

Kimberly M. Watson

* 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
KIMBERLY M. WATSON
BY CONTRACTING OFFICER
FEB 26, 2004
CONTRACTING/ORDERING OFFICER

25. TOTAL: 18,100.00
29. DIFFERENCES:

26. QUANTITY IN COLUMN 20 HAS BEEN: [ ] INSPECTED [ ] RECEIVED [ ] ACCEPTED, AND CONFORMS TO THE CONTRACT EXCEPT AS NOTED
DATE | SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE

27. SHIP. NO.: [ ] PARTIAL [ ] FINAL
28. D.O. VOUCHER NO.
30. INITIALS
32. PAID BY
33. AMOUNT VERIFIED CORRECT FOR
31. PAYMENT: [ ] COMPLETE [ ] PARTIAL [ ] FINAL
34. CHECK NUMBER
35. BILL OF LADING NO.

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) | 39. DATE RECEIVED (YYMMMDD) | 40. TOTAL CONTAINERS | 41. S/R ACCOUNT NUMBER | 42. S/R VOUCHER NO.

CONTINUATION SHEET	Order Number: SP0900-04-M-0597	Page 2 of 4 Pages

The automated purchase order clauses found in Part III, Provisions and Clauses of the latest revision of the DSCC Master Solicitation for Automated Solicitations and Resulting Awards are applicable to this order. The clauses may be viewed on the DSCC website at: http://dibbs.dscccols.com/refs/provclauses/.

The clauses incorporated by reference have the same force and effect as if they were in full text; however, those having no bearing on the instant acquisition become self-deleting.

E03 – INSPECTION AT ORIGIN (DSCC 52.246-9C01) (JUN 2001)

(c) Inspection Points:

SUPPLIES

(X) Same as Offeror
Applicable to CLIN(s): ALL.
( ) Other (CAGE, Name, Street Address, City, State and Zip Code)

_____

_____

Applicable to CLIN(s): _____

PACKAGING

(X) Same as Offeror
Applicable to CLIN(s): ALL

( ) Same as above

( ) Other (CAGE, Name, Street Address, City, State and Zip Code)

_____

_____

Applicable to CLIN(s): _____

( ) **E03A – SECONDARY ADMINISTRATION** INSPECTION/ACCEPTANCE AT ORIGIN WILL BE PERFORMED BY:

_____

E04 – ACCEPTANCE AT ORIGIN (DSCC 52.246-9C02) (NOV 1995)

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED SP0900-04-M-0597	PAGE 3 of 4

NAME OF OFFEROR OR CONTRACTOR

ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0001	PR NUMBER: ADE04043000174 NSN: 5920000433982 ITEM NAME: ARRESTOR, LIGHTNING PART NO: 1927-01 FCC: EBB PR LINE ITEM NUMBER: 000001	1	EA	9050.00	9050.00
	PREP FOR DELIVERY: PACKAGING DATA - MMIL - STD-2073 (1B 21 JUN 91) (2C 21 JUN 91) QUP = : PRES MTHD = : CLNG/DRY = : PRESV MAT = : WRAP MAT = : CUSH/DUNN MAT = : CUSH/DUNN THKNESS = : UNIT CONT = : LEVEL PRESV = : INTRMDTE CONT = : INTRMDTE CONT QTY = : PACK = : PACK LEVEL = : MARKING SHALL BE IN ACCORDANCE WITH MIL-STD-129L SPECIAL MARKING CODE: NO CODES IN THIS TABLE ONLY MIL-STD-129L REV PALLETIZATION SHALL BE IN ACCORDANCE WITH DATED 40404				
	AIR FREIGHT/FREIGHT ADDRESS: V21412 USS GEORGE WASHINGTON CVN 73 NAVAL OPERATIONAL LOGISTICS SUPPORT CENTER NOLSC COMM 757-443-5434 DSN 646-5434 M/F : V214122191DB55 RDD: 777 PROJ: 9GF SUPP ADD : YS6AWP SIG: A FOR GOVERNMENT USE ONLY: IPD: 02 DIC: A41 DIST: 9N ADV: FC: 7L SPOT BUY END OF PR	CONTACT TRANSPORTATION AT 614-692-7039 FOR SHIPPING INSTRUCTIONS SHIPMENT BY PARCEL POST IS NOT PERMITTED FOR THIS ORDER. SHIP FASTEST TRACEABLE MEANS POSSIBLE. CALL TRANSPORTATION OFFICE 614-692-7039 FOR SHIPPING INSTRUCTIONS			

BEST COMMERCIAL PACKAGING

BEST COMMERCIAL PACKAGING

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED SP090-04-m-0597	PAGE 4 of 4

NAME OF OFFEROR OR CONTRACTOR

ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0002	PR NUMBER: ADE04043000179 NSN: 5920000433982 ITEM NAME: ARRESTOR, LIGHTNING PART NO: 1927-01 FCC: EBB PR LINE ITEM NUMBER: 000001	1	EA	9050.00	9050.00
	PREP FOR DELIVERY: PACKAGING DATA - MMIL - STD-2073 (1B 21 JUN 91) (2C 21 JUN 91) QUP = : PRES MTHD = : CLNG/DRY = : PRESV MAT = : WRAP MAT = : CUSH/DUNN MAT = : CUSH/DUNN THKNESS = : UNIT CONT = : LEVEL PRESV = : INTRMDTE CONT = : INTRMDTE CONT QTY = : PACK = : PACKING LEVEL = : MARKING SHALL BE IN ACCORDANCE WITH MIL-STD-129L SPECIAL MAR KING CODE -NO CODES IN THIS TABLE ONLY MIL-STD-129L PALLETIZATION SHALL BE IN ACCORDANCE WITH REV DATED 40404 AIR FREIGHT/FREIGHT ADDRESS: N65888 NAVAL AVIATION DEPOT ASKARS RECEIVING BLDG 94 NAVAL AIR STATION NORTH ISLAND SAN DIEGO CA 92135-7058 M/F : N65888333645A2 RDD: 999 PROJ: ZZ0 SUPP ADD : SIG: A FOR GOVERNMENT USE ONLY: IPD: 03 DIC: A4A DIST: 9N ADV: FC: GC SPOT BUY END OF PR				

SHIPMENT BY PARCEL POST IS NOT PERMITTED FOR THIS ORDER. SHIP FASTEST TRACEABLE MEANS POSSIBLE.

CALL TRANSPORTATION OFFICE 614-692-7039 FOR SHIPPING INSTRUCTIONS

SMALL BUSINESS

SMALL BUSINESS COORDINATION RECORD

REPORT CONTROL SYMBOL

1. CONTROL NO. *(OPTIONAL)*	2. PURCHASE REQUEST NO./ REQUISITION NO.	3. TOTAL ESTIMATED VALUE (Including options) $ 8800.00 Approx	4. SOLICITATION NO./CONTRACT MODIFICATION NO.

5. BUYER

a. NAME *(Last, First, Middle Initial)*	b. OFFICE SYMBOL	c. TELEPHONE *(Include Area Code)*
Watson Kim	DSCC-NEB	(614) 692-7401

6. ITEM DESCRIPTION *(Including quantity)*

See Attached Page

6a. FEDERAL SUPPLY CLASS/SERVICE *(FSC/SVC)* CODE

7. TYPE OF COORDINATION *(X one)*

X	a. INITIAL CONTRACT		b. MODIFICATION		c. WITHDRAWAL

8. SMALL BUSINESS SIZE STANDARD

a. NAICS CODE	b. NO. OF EMPLOYEES	c. DOLLARS

9. RECOMMENDATION *(X as applicable)*

YES	NO	*(If all recommendations are "No," explain in Remarks.)*
	X	a. SECTION 8(A) *(X one)*
		(1) Competitive / (2) Sole Source
	X	b. SMALL DISADVANTAGED BUSINESS (SDB) SET-ASIDE
	X	c. HISTORICALLY BLACK COLLEGES AND UNIVERSITIES/MINORITY INSTITUTIONS (HBCU/MI) SET-ASIDE *(List percentage)* %
	X	d. SMALL BUSINESS (SB) SET-ASIDE *(List percentage)* %
	X	e. EMERGING SMALL BUSINESS SET-ASIDE
	X	f. EVALUATION PREFERENCE FOR SDBs
	X	g. SMALL BUSINESS-SMALL PURCHASE (SB-SP) SET-ASIDE

10. ACQUISITION HISTORY *(X one)*

	a. FIRST TIME BUY
	b. PREVIOUS ACQUISITION *(X all that apply)*
	(1) Section 8(A)
	(2) SDB Set-Aside
	(3) HBCU/MI Set-Aside
	(4) SB Set-Aside
	(5) SB - SP Set-Aside
X	(6) Other *(Specify)*
	(7) Two or more responsive SB offers on prior acquisition
	(8) One or more responsive SDB offer(s) within 10% or award price of prior acquisition

11. SB PROGRESS PAYMENTS *(X one)*: a. YES [ ] b. NO [X]

12. SUBCONTRACTING PLAN REQUIRED *(X one)*: a. YES [ ] b. NO [X]

13. SYNOPSIS REQUIRED *(X one)*: a. YES [ ] b. NO [X] *(If "No," cite FAR 5.202 exception)* Urgency 6.302-2

14. REMARKS
cc: File copy only. Exceeds $10,000

Quote said exceeded $10,000

15. REVIEWED BY SMALL BUSINESS ADMINISTRATION (SBA) REPRESENTATIVE

a. NAME *(Last, First, Middle Initial)*

b. SIGNATURE

c. DATE SIGNED *(YYMMDD)*

16. LOCAL USE

17. CONTRACTING OFFICER *(X one)*: a. CONCURS [X] b. REJECTS [ ]

c. RECOMMENDATIONS *(Document rejections on reverse side)*
Award

d. NAME *(Last, First, Middle Initial)*
Watson Kimberly M.

e. SIGNATURE
Kim Watson

f. DATE SIGNED *(YYMMDD)*
2/26/04

18. SMALL BUSINESS SPECIALIST *(X one)*: a. CONCURS [ ] b. APPEALS [ ]

NOTE: Any change in the acquisition plan this coordination record describes will require return for re-evaluation by the SB specialist.

c. NAME *(Last, First, Middle Initial)*

d. SIGNATURE

e. DATE SIGNED *(YYMMDD)*