

Boyles, Karen E (DSCC)

From: FACSys Fax Connector (COL1SMX03) [FACSys Fax Connector@]
Sent: Tuesday, September 30, 2003 10:59 AM
To: Boyles, Karen E (DSCC)
Subject: Delivered: unI9

Subject: unI9
Scheduled At: Tuesday, September 30, 2003 10:56 AM
Serviced By: FACSys server COL1SMF02

Sent successfully to ***79318 @ (7,818)7592190** on Tuesday, September 30, 2003 10:56:37 AM
Pages:5. Connect time: 01:36. Re-dials: 0. Remote CSI:18187592190. Billing: .

ORDER FOR SUPPLIES OR SERVICES

(Contractor must submit four copies of invoice.)

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

PAGE 1 OF
4

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. F34601-01-G-0004		2. DELIVERY ORDER NO. UB9L		3. DATE OF ORDER (YYMMDD) 2003 SEP 26		4. REQUISITION/PURCH REQUEST NO. YPC03184000001		5. PRIORITY DOA1			
6. ISSUED BY Defense Supply Center Columbus 3990 E. Broad St. P.O. Box 16704 Columbus, OH 43216-5010 Local Administrator: PAABCAJ (614)692-7531 / FAX: (614)693-1679 E-mail: Cynthia.Farley-Fitzpatrick@dla.mil			CODE SP0700		7. ADMINISTERED BY (If other than 6) DCMC VAN NUYS 6230 VAN NUYS BLVD 818 267-2000 VAN NUYS CA 91401-2713			CODE S0512A		8. DELIVERY FOB <input type="checkbox"/> DEST <input checked="" type="checkbox"/> OTHER <i>(See Schedule if other)</i>	
9. CONTRACTOR WHITTAKER CONTROLS INC. 12838 SATICOY STREET NORTH HOLLYWOOD CA 91605-3505		CODE 79318		FACILITY CODE		10. DELIVER TO FOB POINT BY (Date) (YYMMDD) 182 DAYS ADO		11. MARK IF BUSINESS IS <input type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISADVANTAGED <input type="checkbox"/> WOMEN-OWNED			
14. SHIP TO See Schedule - Do Not Ship to Address in Block 6 FMS Requirement CLINS: 0001 EG KDW		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		
16. TYPE OF ORDER DELIVERY <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. Reference your offer dated 2003 SEP 25, 8836 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: 6						
* 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>Karen White</i>			CONTRACTING/ORDERING OFFICER		25. TOTAL \$ 728.10		
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.		29. DIFFERENCE	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			

Packaging - Inspection and Acceptance Address:
3L633

JAMAR PACKAGING INC
24810 AVE TIBBETTS
VALENCIA CA 91355

INSPECTION FOR SUPPLIES SHALL BE LOCATED AT (79318)

INSPECTION FOR PACKAGING SHALL BE LOCATED AT:

JAMAR PACKAGING INC (3L633)
24810 AVENUE TIBBETTS
VALENCIA, CA 91355

ALL TEMS AND CONDITIONS OF CITED BOA APPLY.

SECTION B

PR YPC03184000001
NSN 4810-01-247-4111

ITEM DESCRIPTION:

VALVE, REGULATING, FLUID PRESSURE

THE PROCUREMENT AGENCY HAS DATA ADEQUATE FOR
EVALUATION PURPOSES, BUT LIMITED RIGHTS APPLY.
THE OFFEROR NEED PROVIDE ONLY ITS DATA FOR
EVALUATION.

WHITTAKER CONTROLS INC. (79318) P/N 226447-2

<u>ITEM</u>	<u>PR</u>	<u>PRLI</u>	<u>QUANTITY</u>	<u>UNIT</u>	<u>UNIT PRICE</u>	<u>AMOUNT</u>
0001	YPC03184000001	0001	6	EA	\$121.35000	\$728.10

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 = AE: CLNG/DRY = 1: PRESV MAT = 00:
WRAP MAT = XX: CUSH/DUNN MAT = XX: CUSH/DUNN THKNSS = X:
UNIT CONT = D3: OPI = O:
INTRMDTE CONT = DO: INTRMDTE CONT QTY = AAA:
PACK CODE = Q: PACKING LEVEL = B:
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
SUPPLEMENTAL INSTRUCTIONS

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 26

CONTINUED ON NEXT PAGE

SECTION B

PARCEL POST ADDRESS:

FMS REQ'T
CONTACT TRANS OFFICE AT ADMIN OFF PRIOR TO SHIPMENT

M/F: (TCN) DEGT5V31280051 XXX
RDD A01 CONTACT TRANS OFFICE AT ADMIN OFFICE PRIOR TO SHIPMENT
PROJ 15A TP 1
SUP ADD DA5KDW SIG L

FOR GOVERNMENT USE ONLY: IPD 03

DIC A31 DIST N01 ADV FC NL

REMIT PAYMENT TO:
