

ORDER FOR SUPPLIES OR SERVICES

(Contractor must submit four copies of invoice.)

Form Approved
OMB No. 0704-0187
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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. N00383-02-G-003H		2. DELIVERY ORDER NO. UB9Y		3. DATE OF ORDER (YYMMDD) 2003 AUG 27		4. REQUISITION/PURCH REQUEST NO. YPE0305600072		5. PRIORITY DOA7	
6. ISSUED BY Defense Supply Center Columbus 3990 E. Broad St. P.O. Box 16704 Columbus, OH 43216-5010 Local Administrator: PCCDBGX (614)692-7948 / FAX: (614)692-1100 E-mail: Lenora.Parham@dla.mil				7. ADMINISTERED BY (If other than 6) DCMA SANTA ANA ROOM 813A 34 CIVIC CENTER PLAZA SANTA ANA CA 92701-4056		8. DELIVERY FOB <input type="checkbox"/> DEST <input checked="" type="checkbox"/> OTHER <small>(See Schedule if other)</small>			
9. CONTRACTOR PARKER HANNIFIN CUSTOMER SUPPORT IN 14300 ALTON PRKY IRVINNE CA 92618 Vendor's Copy was sent EDI. Do not Duplicate shipment.		10. DELIVER TO FOB POINT BY (Date) (YYMMDD) 190 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 HQ0339 HQ0339 DFAS COLUMBUS CENTER WEST ENTITLEMENT OPERATIONS P O BOX 182381 COLUMBUS OH 43218-2381 EFT: T		MARK ALL PACKAGES AND PAPERS WITH CONTRACT OR ORDER NUMBER					

16. TYPE OF ORDER	DELIVERY	<input checked="" type="checkbox"/>	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 AUG 19, M2003071427 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.
	PURCHASE	<input type="checkbox"/>	

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: 10			

* 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 Patricia Hodge PCCDBRU		25. TOTAL \$ 7903.70	
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		BY:		29. DIFFERENCE	
DATE _____ SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE _____		32. PAID BY		30. INITIALS	
36. I certify this account is correct and proper for payment. DATE _____ SIGNATURE AND TITLE OF CERTIFYING OFFICER _____		31. PAYMENT <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		33. AMOUNT VERIFIED CORRECT FOR	
37. RECEIVED AT		38. RECEIVED BY (Print)		34. CHECK NUMBER	
39. DATE RECEIVED (YYMMDD)		40. TOTAL CONTAINERS		35. BILL OF LADING NO.	
41. S/R ACCOUNT NUMBER		42. S/R VOUCHER NO.			

Supplies and Packaging - Inspection and Acceptance Address:
26055

PARKER HANNIFIN CORP
ELECTRONIC SYSTEMS DIV
300 MARCUS BLVD
SMITHTOWN NY 11787-2044

Admin Office for Supplies and Packaging:
S3309A

S3309A CMDR DCMC LONG ISLAND

605 STEWART AVE
GARDEN CITY LI NY 11530-4761

ALL TERMS AND CONDITIONS OF THE CITED BASIC APPLY.

INSPECTION OF ITEM AT CONTRACTOR'S PLANT:

PARKER-HANNIFIN CORP
ELECTRONIC SYSTEMS DIVISION
300 MARCUS BLVD
SMITHTOWN, NY 11787-2044

ITEM INSPECTION/ACCEPTANCE AT ABOVE FACILITY.

FOB: CONTRACTOR'S PLANT, SMITHTOWN, NY

SECONDARY ADMINISTRATION BY:

DCMA LONG ISLAND (S3309A)
605 STEWART AVE
GARDEN CITY, NY 11530-4761

SECTION B

PR YPE03056000072
NSN 5930-01-385-4616

ITEM DESCRIPTION:

SWITCH,PUSH

CRITICAL APPLICATION ITEM

PARKER HANNIFIN CORP (59211) P/N 861-094-006

I/A/W DRAWING NR 26055 861-094
BASIC DTD 88 DEC 07
AMEND NR DTD
TYPE NUMBER: 861-094-006
SPECIFICATION CONTROL

<u>ITEM</u>	<u>PR</u>	<u>PRLI</u>	<u>QUANTITY</u>	<u>UNIT</u>	<u>UNIT PRICE</u>	<u>AMOUNT</u>
2001	YPE03056000072	0001	10	EA	\$790.37000	\$7903.70

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 = 41: CLNG/DRY = 1: PRESV MAT = 00:
WRAP MAT = 00: CUSH/DUNN MAT = NA: CUSH/DUNN THKNESS = X:
UNIT CONT = XX: OPI = 0:
INTRMDTE CONT = D3: INTRMDTE CONT QTY = AAA:
PACK CODE = U:
MARKING SHALL BE IN ACCORDANCE WITH MIL-STD-129.
SPECIAL MARKING CODE: 00 - NO SPECIAL MARKING.

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 04

PARCEL POST ADDRESS:

CONTINUED ON NEXT PAGE

SECTION B

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 NS5

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REMIT PAYMENT TO:

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