

# 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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**5**

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-003H</b>		2. DELIVERY ORDER NO. <b>UBK4</b>		3. DATE OF ORDER (YYMMDD) <b>2004 JAN 28</b>		4. REQUISITION/PURCH REQUEST NO. <b>See Schedule</b>		5. PRIORITY <b>DOA1</b>		
6. ISSUED BY Defense Supply Center Columbus 3990 E. Broad St. P.O. Box 16704 Columbus, OH 43216-5010 Local Administrator: PAABCAD (614)692-1407 / FAX: (614)692-6292 E-mail: Michael.Theado@dla.mil			CODE <b>SP0700</b>	7. ADMINISTERED BY (If other than 6) <b>DCMC SANTA ANA 34 CIVIC CENTER PLAZA ROOM 813A SANTA ANA, CA 92701-4056</b>			CODE <b>S0513A</b>		8. DELIVERY FOB <input type="checkbox"/> DEST <input checked="" type="checkbox"/> OTHER (See Schedule if other)	
9. CONTRACTOR  NAME AND ADDRESS <b>PARKER HANNIFIN CUSTOMER SUPPORT INC. 14300 ALTON PARKWAY IRVINE CA 92618-1814 Vendor's Copy was sent EDI. Do not Duplicate shipment.</b>			CODE <b>59211</b>	FACILITY CODE <b>93835</b>		10. DELIVER TO FOB POINT BY (Date) (YYMMDD) <b>See Schedule</b>		11. MARK IF BUSINESS IS <input type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISADVANTAGED <input type="checkbox"/> WOMEN-OWNED		
						12. DISCOUNT TERMS <b>NET 30 days</b>		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>HQ0339 DFAS COLUMBUS CENTER WEST ENTITLEMENT OPERATIONS P O BOX 182381 COLUMBUS OH 43218-2381</b>			CODE <b>HQ0339</b>		MARK ALL PACKAGES AND PAPERS WITH CONTRACT OR ORDER NUMBER	

16. 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.								
TYPE OF PURCHASE		Reference your <b>offer dated 2003 OCT 23, M2003106332</b> and furnish the following on terms specified herein.								
ORDER		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:</b> <b>CONFIRMING ORDER -- DO NOT DUPLICATE ACCELERATED DELIVERY IS ACCEPTABLE AND DESIRED AT NO COST TO THE GOVERNMENT.</b>	<b>TOTAL:</b> <b>38</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>Mary Salmon</i> CONTRACTING/ORDERING OFFICER		25. TOTAL \$ <b>34499.06</b>	
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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.	
DATE _____ SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE _____		31. PAYMENT <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		32. PAID BY	
36. I certify this account is correct and proper for payment. DATE _____ SIGNATURE AND TITLE OF CERTIFYING OFFICER _____				33. AMOUNT VERIFIED CORRECT FOR	
				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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## Manufacture Facilities:

93835

PARKER HANNIFIN CORPORATION  
DBA ABEX NWL DIVISION DIV ABEX NWL  
2220 PALMER AVENUE  
KALAMAZOO MI 49001-4165

## Supplies - Inspection and Acceptance Address:

93835

PARKER HANNIFIN CORPORATION  
DBA ABEX NWL DIVISION DIV ABEX NWL  
2220 PALMER AVENUE  
KALAMAZOO MI 49001-4165

## Packaging - Inspection and Acceptance Address:

2N095

UNIQUE INDUSTRIAL PACKAGING  
1975 WALDORF ST NW STE B  
GRAND RAPIDS MI 49544-1435

## Admin Office for Supplies and Packaging:

S2303A

S2303A DCMA GRAND RAPIDS  
RIVERVIEW CTR BLDG  
678 FRONT AVE NW  
GRAND RAPIDS MI 49504-5352

All Terms and Conditions apply as agreed in the Basic Ordering Agreement  
N0038302G003H effective 1/16/2003 through 01/15/2006.

COC is Authorized per FAR 52.246-15.

F02 - Variation in Quantity (FAR 52.211-16) (APR 1984) applies to this  
order with a 10% increase or decrease in quantities authorized.

Thank you for helping us serve our Military Customer .Mary Tatman, AAB6

## SECTION B

PR YPC04005000353  
 NSN 4320-00-851-2371

## ITEM DESCRIPTION:

PARTS KIT, HYDRAULIC PUMP.  
 PARKER HANNIFIN CORP. ABEX MWL DIVISION  
 PART NUMBER 60709.

"ASO/NAVSEA/AVSCOM CRITICAL ITEM"  
 PARKER HANNIFIN CORPORATION (93835) P/N 60709

<u>ITEM</u>	<u>PR</u>	<u>PRLI</u>	<u>QUANTITY</u>	<u>UNIT</u>	<u>UNIT PRICE</u>	<u>AMOUNT</u>
2001	YPC04005000353	0001	30	EA	\$907.87000	\$27236.10

QTY VARIANCE: PLUS 10% MINUS 10%  
 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 = XX:  
 WRAP MAT = XX: CUSH/DUNN MAT = XX: CUSH/DUNN THKNES = X:  
 UNIT CONT = D3: OPI = M:  
 INTRMDTE CONT = 10: 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 NOV 13

PARCEL POST ADDRESS:

CONTINUED ON NEXT PAGE

SECTION B

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

FREIGHT SHIPPING ADDRESS:

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

NON-MILSTRIP  
PROJ

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<u>ITEM</u>	<u>PR</u>	<u>PRLI</u>	<u>QUANTITY</u>	<u>UNIT</u>	<u>UNIT PRICE</u>	<u>AMOUNT</u>
2002	YPC04008000332	0001	8	EA	\$907.87000	\$7262.96

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

PREP. FOR DELIVERY

PKGING DATA - MIL-STD-2073-1D, 15 DEC 1999  
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HILL AFB UT 84056-5734

NON-MILSTRIP  
PROJ

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REMIT PAYMENT TO:

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