

# 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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**3**

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>DAAE07-03-D-S023</b>		2. DELIVERY ORDER NO. <b>UB31</b>		3. DATE OF ORDER (YYMMDD) <b>2004 JAN 30</b>		4. REQUISITION/PURCH REQUEST NO. <b>YPC04009000666</b>		5. PRIORITY <b>DOA4</b>	
6. ISSUED BY <b>Defense Supply Center Columbus 3990 E. Broad St. P.O. Box 16704 Columbus, OH 43216-5010 Local Administrator: PLLXCBF (614)692-1278 / FAX: (614)693-1574 E-mail: Julie.Brill@dla.mil</b>				7. ADMINISTERED BY (If other than 6) CODE <b>SP0700</b>		7. ADMINISTERED BY (If other than 6) CODE <b>S2305A</b>		8. DELIVERY FOB <input checked="" type="checkbox"/> DEST <input type="checkbox"/> OTHER <small>(See Schedule if other)</small>	
9. CONTRACTOR <b>U.S. DEFENSE SERVICES INC. DBA USDS 35418 MOUND RD. STERLING HEIGHTS MI 48310-4721</b>				9. CONTRACTOR CODE <b>OBAT5</b>		10. DELIVER TO FOB POINT BY (Date) (YYMMDD) <b>75 DAYS ADO</b>		11. MARK IF BUSINESS IS <input checked="" type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISADVANTAGED <input type="checkbox"/> WOMEN-OWNED	
14. SHIP TO <b>See Schedule - Do Not Ship to Address in Block 6</b>				15. PAYMENT WILL BE MADE BY CODE <b>S33181</b>		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>				15. PAYMENT WILL BE MADE BY CODE <b>S33181</b>		ATTN: DFAS CO BVDPC/CC CONSTRUCTIO 3990 E BROAD ST PO BOX 182317 COLUMBUS OH 43218-6203 <b>EFT: T</b>		MARK ALL PACKAGES AND PAPERS WITH CONTRACT OR ORDER NUMBER	
16. TYPE OF ORDER DELIVERY <input checked="" type="checkbox"/> PURCHASE <input 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. 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)
17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE <b>CG: 97X4930 5CC0 001 26.0 S33150</b>									
18. ITEM NO.	19. SCHEDULE OF SUPPLIES/SERVICE				20. QUANTITY ORDERED/ACCEPTED*	21. UNIT	22. UNIT PRICE	23. AMOUNT	
	Remarks: <b>CONFIRMING ORDER -- DO NOT DUPLICATE ACCELERATED DELIVERY IS ACCEPTABLE AND DESIRED AT NO COST TO THE GOVERNMENT. Duty free entry authorized.</b>				<b>TOTAL: 12</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: 		25. TOTAL <b>\$ 1786.20</b>		29. DIFFERENCE	
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.		28. D.O. VOUCHER NO.		30. INITIALS	
DATE _____ SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE _____				<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 _____				31. PAYMENT <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL				34. CHECK NUMBER	
37. RECEIVED AT	38. RECEIVED BY (Print)		39. DATE RECEIVED (YYMMDD)		40. TOTAL CONTAINERS	41. S/R ACCOUNT NUMBER		42. S/R VOUCHER NO.	

## SECTION B

PR YPC04009000666  
NSN 2540-01-304-8378

## ITEM DESCRIPTION:

ARM, REARVIEW MIRROR.  
"CLASS I OZONE DEPLETING CHEMICALS ARE NOT TO BE USED NOR INCORPORATED IN ANY ITEMS TO BE DELIVERED UNDER THIS CONTRACT. THIS PROHIBITION SUPERSEDES ALL SPECIFICATION REQUIREMENTS BUT DOES NOT ALLEVIATE ANY PRODUCT REQUIREMENTS. SUBSTITUTE CHEMICALS MUST BE SUBMITTED FOR APPROVAL UNLESS THEY ARE AUTHORIZED BY THE SPECIFICATION REQUIREMENTS."

ALVIS HAGGLUNDS AB	(S3465)	P/N	2 0071-043
ALVIS HAGGLUNDS AB	(S3465)	P/N	2537286-801
ALVIS HAGGLUNDS AB	(S3465)	P/N	91364-991

<u>ITEM</u>	<u>PR</u>	<u>PRLI</u>	<u>QUANTITY</u>	<u>UNIT</u>	<u>UNIT PRICE</u>	<u>AMOUNT</u>
0001	YPC04009000666	0001	12	EA	\$148.85000	\$1786.20

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 = ZZ: CLNG/DRY = X: PRESV MAT = XX:  
WRAP MAT = XX: CUSH/DUNN MAT = XX: CUSH/DUNN THKNSS = X:  
UNIT CONT = XX: OPI = 0:  
INTRMDTE CONT = XX: 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 D  
DATED 1277  
SUPPLEMENTAL INSTRUCTIONS

PRESERVATION AND PACKAGING SHALL BE  
IAW ASTM-D3951, COMMERCIAL PACKAGING.

CONTINUED ON NEXT PAGE

SECTION B

DOD BAR CODE MARKING REQUIRED IN ACCORDANCE WITH MIL-STD-129 (LATEST REVISION) MARKING AND BAR CODING IN ACCORDANCE WITH AIM BC1.

DELIVER FOB: DESTINATION BY: 2004 APR 14

PARCEL POST ADDRESS:

W62G2T
XU DEF DIST DEPOT SAN JOAQUIN
TRANSPORTATION OFFICER
PO BOX 960001
STOCKTON CA 95296-0130

FREIGHT SHIPPING ADDRESS:

W62G2T
XU DEF DIST DEPOT SAN JOAQUIN
25600 S CHRISMAN ROAD
REC WHSE 10 PH 209 839 4307
TRACY CA 95376-5000

NON-MILSTRIP
PROJ UBO

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REMIT PAYMENT TO:

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