

# 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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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>UBN6</b>		3. DATE OF ORDER (YYMMDD) <b>2004 JAN 30</b>		4. REQUISITION/PURCH REQUEST NO. <b>RPC03294000334</b>		5. PRIORITY <b>DOA1</b>			
6. ISSUED BY <b>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</b>			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 <small>(See Schedule if other)</small>		
9. CONTRACTOR <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>86329</b>		10. DELIVER TO FOB POINT BY (Date) (YYMMDD) <b>210 DAYS ADO</b>		11. MARK IF BUSINESS IS <input type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISADVANTAGED <input type="checkbox"/> WOMEN-OWNED			
NAME AND ADDRESS			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		
EFT: T											

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.								
PURCHASE		Reference your offer dated 2003 NOV 12, M2003106433 neg \$ 1/27/04 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)	
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
	<p><b>Remarks:</b> CONFIRMING ORDER -- DO NOT DUPLICATE ACCELERATED DELIVERY IS ACCEPTABLE AND DESIRED AT NO COST TO THE GOVERNMENT.</p>	<b>TOTAL: 212</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		25. TOTAL \$ <b>92949.28</b>	
		BY: <i>Mary W Jarman</i>		29. DIFFERENCE	
		CONTRACTING ORDERING OFFICER		30. INITIALS	

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.	
DATE _____ SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE _____		<input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		32. PAID BY	
36. I certify this account is correct and proper for payment.		31. PAYMENT <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		33. AMOUNT VERIFIED CORRECT FOR	
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.
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## Manufacture Facilities:

86329

PARKER HANNIFIN CORPORATION  
DIV NICHOLS AIRBORNE DIVISION  
14 ROBBINS POND ROAD  
AYER MA 01432-5641

## Supplies - Inspection and Acceptance Address:

86329

PARKER HANNIFIN CORPORATION  
DIV NICHOLS AIRBORNE DIVISION  
14 ROBBINS POND ROAD  
AYER MA 01432-5641

## Packaging - Inspection and Acceptance Address:

8U894

FRENCH PACKAGING SERVICES INC.  
241 RIVERVIEW AVE. PO BOX 231  
WALTHAM MA 02454-0231

## Admin Office for Supplies and Packaging:

S2206A

S2206A DCMA BOSTON

495 SUMMER ST  
BOSTON MA 02210-2138

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, AABB6

## SECTION B

PR RPC03294000334  
NSN 4320-01-268-7212

## ITEM DESCRIPTION:

PUMP ELEMENT, MAKE-UP AND AUXILIARY.

NOTE: THE CITED DRAWING IS A SOURCE CONTROLLED DRAWING AND AS OF THE DATE OF THIS SOLICITATION ONLY THE SOURCE(S) CITED ON THE DRAWING HAVE BEEN APPROVED. EVEN THOUGH SOURCES AND APPROVED PART NUMBERS ARE PROVIDED, THE ITEMS FURNISHED MUST MEET THE REQUIREMENTS OF THE CITED DRAWING. OFFERORS WHO ARE INTERESTED IN QUALIFYING THEIR PRODUCT FOR PURPOSE OF FUTURE ACQUISITION MUST CONTACT THE COGNIZANT DESIGN ACTIVITY SPECIFIED ON THE SOURCE CONTROLLED DRAWING.

ALSO, MAY INCLUDE ADDITIONAL APPROVED SOURCES THAT HAVE NOT BEEN REFLECTED ON THE DRAWING AT THIS TIME.

PER (86329) P/N 24-46000-2037-2.

"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."

## CRITICAL APPLICATION ITEM

U S ARMY TANK AUTOMOTIVE COMMAND	(19207)	P/N	11629796
PARKER HANNIFIN CORPORATION	(86329)	P/N	24-46000-2037-2

I/A/W DRAWING NR 19207 11629030  
REFNO DTD 77 FEB 23  
AMEND NR P DTD 93 MAY 11  
TYPE NUMBER: NHA DWG REF ONLY  
"DETAILED DRAWING (ONE ITEM)"

I/A/W DRAWING NR 19207 11629796  
BASIC DTD 87 OCT 17  
AMEND NR B DTD 90 OCT 18  
TYPE NUMBER:  
SOURCE CONTROL DRAWING

CONTINUED ON NEXT PAGE

## SECTION B

I/A/W DRAWING NR 19207 11629796

REFNO DTD 87 NOV 06

AMEND NR C DTD 93 MAY 17

TYPE NUMBER:

SUPPLEMENTARY QUALITY ASSURANCE PROVISIONS  
(SQAP) OR QUALITY ASSURANCE PROVISIONS (QAP)

<u>ITEM</u>	<u>PR</u>	<u>PRLI</u>	<u>QUANTITY</u>	<u>UNIT</u>	<u>UNIT PRICE</u>	<u>AMOUNT</u>
2001	RPC03294000334	0001	212	EA	<u>\$438.44000</u>	<u>\$92949.28</u>

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 = 20: CLNG/DRY = 1: PRESV MAT = XX:  
WRAP MAT = XX: CUSH/DUNN MAT = XX: CUSH/DUNN THKNESS = X:  
UNIT CONT = E6: OPI = O:

INTRMDTE CONT = E6: 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 AUG 27

PARCEL POST/FREIGHT ADDRESS:

SW3227  
DEF DIST DEPOT RED RIVER  
RECEIVING BLDG 499  
10TH STREET AND K AVENUE  
TEXARKANA TX 75507-5000

CONTINUED ON NEXT PAGE

SECTION B

NON-MILSTRIP  
PROJ

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REMIT PAYMENT TO:

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