

# 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>N00104-02-G-0303</b>		2. DELIVERY ORDER NO. <b>UB06</b>		3. DATE OF ORDER (YYMMDD) <b>2003 OCT 30</b>		4. REQUISITION/PURCH REQUEST NO. <b>YPE03139000436</b>		5. PRIORITY <b>DOA2</b>	
6. ISSUED BY CODE <b>SP0900</b> <b>Defense Supply Center Columbus 3990 E. Broad St. P.O. Box 16704 Columbus, OH 43216-5010 Local Administrator: PCCSCCW (614)692-2960 / FAX: (614)692-6922 E-mail: Thomas.Crosby@dla.mil</b>				7. ADMINISTERED BY (If other than 6) CODE <b>S2401A</b> <b>DCMA TWIN CITIES B H WHIPLE FEDERAL BLDG RM 1150 1 FEDERAL DRIVE FT SNELLING MN 55111-4007</b>				8. DELIVERY FOB <input type="checkbox"/> DEST <input checked="" type="checkbox"/> OTHER <i>(See Schedule if other)</i>	
9. CONTRACTOR CODE <b>44114</b> <b>UNITED DEFENSE L.P. 4800 EAST RIVER ROAD MINNEAPOLIS MN 55421-1498</b>				FACILITY CODE <b>44114</b>		10. DELIVER TO FOB POINT BY (Date) (YYMMDD) <b>210 DAYS ARO</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 CODE <b>See Schedule - Do Not Ship to Address in Block 6 FMS Requirement CLINS: 7001</b>				15. PAYMENT WILL BE MADE BY CODE <b>S33184</b> <b>DFAS - COLUMBUS CENTER ATTN DFAS BVD/PC/CC 3990 E BROAD ST PO BOX 182317 COLUMBUS OH 43218-6205</b>				MARK ALL PACKAGES AND PAPERS WITH CONTRACT OR ORDER NUMBER	
EFT: T									

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 <b>offer dated 2003 JUN 16, EN58890</b> and furnish the following on terms specified herein. <b>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.</b>
	PURCHASE		

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
	<b>Remarks: CONFIRMING ORDER -- DO NOT DUPLICATE ACCELERATED DELIVERY IS ACCEPTABLE AND DESIRED AT NO COST TO THE GOVERNMENT.</b>	<b>TOTAL: 1</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 <b>Jerry Goodson</b> BY:		PCCSCEK		25. TOTAL <b>\$ 2142.31</b>	
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		28. D.O. VOUCHER NO.		CONTRACTING/ORDERING OFFICER		29. DIFFERENCE	
DATE _____ SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE _____		<input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		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		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.		35. BILL OF LADING NO.			

Manufacture Facilities:  
44114

UNITED DEFENSE L.P.  
4800 EAST RIVER ROAD  
MINNEAPOLIS MN 55421-1498

**SECTION B**

PR YPE03139000436  
NSN 1440-00-918-9134

## ITEM DESCRIPTION:

CARTRIGE ASSEMBLY

10001 LD419921 REV D DL

THE USE OF ANY CLASS I OZONE-DEPLETING SUBSTANCE (ODS) IN THE DESIGN, MANUFACTURING, TESTING, CLEANING, OR ANY OTHER PROCESS FOR THIS ITEM UNDER ANY MILITARY OR FEDERAL SPECIFICATION, STANDARD OR DRAWING REFERENCED IN THIS ITEM DESCRIPTION IS "PROHIBITED" UNLESS THE SEPARATE WRITTEN APPROVAL OF THE CONTRACTING OFFICER IS OBTAINED. THIS PROHIBITION SUPERSEDES ALL SPECIFICATION REQUIREMENTS BUT DOES NOT ALLEVIATE ANY PRODUCT PERFORMANCE REQUIREMENTS. THIS DOES NOT APPLY TO COMMERCIAL ITEMS, AS DEFINED IN "FAR 11.001" OR TO PART-NUMBERED-ONLY ITEMS.

IF THE APPLICABLE (OEM OR MILITARY) DRAWING, SPECIFICATION, STANDARD, OR QUALITY ASSURANCE PROVISION (QAP) SPECIFIES AN ACCEPTABLE QUALITY LEVEL (AQL). THE SAMPLING ACCEPTANCE NUMBER SHALL BE REDUCED TO ZERO (0). FOR EXAMPLE IF THE ACCEPT REJECT CRITERIA IS ACCEPT ON (3) DEFECTS AND REJECT ON (4) DEFECTS. THE NEW ACCEPT REJECT CRITERIA IS ACCEPT ON (0) DEFECTS AND REJECT THE ENTIRE LOT ON (1) DEFECT. EVEN THOUGH THE ACCEPTANCE LEVEL IS ELIMINATED, THE SAMPLE SIZE REMAINS THE SAME.

UNITED DEFENSE LP (44114)P/N LD419921-0016  
IAW NAVY(10001) DWG. LD419921ITEM16

**CONTINUED ON NEXT PAGE**

SECTION B

<u>ITEM</u>	<u>PR</u>	<u>PRLI</u>	<u>QUANTITY</u>	<u>UNIT</u>	<u>UNIT PRICE</u>	<u>AMOUNT</u>
7001	YPE03139000436	0001	1	EA	\$2142.31000	\$2142.31

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 THKNESS = X:  
 UNIT CONT = XX: OPI = O:  
 INTRMDTE CONT = XX: INTRMDTE CONT QTY = XXX:  
 PACK CODE = Q: PACKING LEVEL = B:  
 MARKING SHALL BE IN ACCORDANCE WITH MIL-STD-129.  
 SPECIAL MARKING CODE: 00 - NO SPECIAL MARKING.  
 SUPPLEMENTAL INSTRUCTIONS  
 PRESERVATION AND PACKAGING SHALL BE IAW THE  
 LATEST REVISION OF MILITARY SPECIFICATION:  
 MIL-E-17555, FOR ELECTRONIC EQUIPMENT.

WHEN ZZ IS THE METHOD OF PRESERVATION, USE LEVEL  
 'A' PRESERVATION AS CITED IN THE COMMODITY  
 SPECIFICATION.

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 MAY 27

PARCEL POST ADDRESS:

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

M/F: (TCN) PATJ5V31210214 XXX  
 RDD CONTACT TRANS OFFICE AT ADMIN OFFICE PRIOR TO SHIPMENT  
 PROJ TP 2  
 SUP ADD PA2KMD SIG L

FOR GOVERNMENT USE ONLY: IPD 06

DIC A01 DIST F9N ADV 26 FC 48

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CONTINUED ON NEXT PAGE

**SECTION B**

REMIT PAYMENT TO:

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