

# 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>SPM760-05-V-0207</b>		2. DELIVERY ORDER NO.		3. DATE OF ORDER (YYMMDD) <b>2004 OCT 09</b>		4. REQUISITION/PURCH REQUEST NO. <b>0010768622</b>		5. PRIORITY <b>DOC9</b>	
6. ISSUED BY CODE <b>SP0700</b> <b>Defense Supply Center Columbus P.O. Box 3990 Columbus, OH 43218-3990 Local Administrator: PMCMAZI ( ) 692-5689 / FAX: (614)693-1553 E-mail: Marjorie.Christensen@dla.mil</b>				7. ADMINISTERED BY (If other than 6) CODE <b>SP0700</b> <b>DEFENSE SUPPLY CENTER COLUMBUS PO BOX 3990 COLUMBUS OH 43218-3990</b>				8. DELIVERY FOB <input checked="" type="checkbox"/> DEST <input type="checkbox"/> OTHER <i>(See Schedule if other)</i>	
9. CONTRACTOR CODE <b>2X264</b> <b>ALL-SAFE INC. 4767 LANGTON RD. P.O. BOX 116 HILLIARD OH 43026-9474 Vendor's Copy was sent EDI. Do not Duplicate shipment.</b>				FACILITY CODE		10. DELIVER TO FOB POINT BY (Date) (YYMMDD) <b>60 DAYS ADO</b>		11. MARK IF BUSINESS IS <input checked="" 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</b>				15. PAYMENT WILL BE MADE BY CODE <b>SL4701</b> <b>DFAS BVDP (SL4701) P.O. BOX 369031 COLUMBUS OH 43236-9031</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.
	PURCHASE		
Reference your <b>offer dated 2004 OCT 06, DB 1006</b> 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)
<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  
**BX:97X 4930 5CBX 001 2630 S33189**

18. ITEM NO.	19. SCHEDULE OF SUPPLIES/SERVICE	20. QUANTITY ORDERED/ACCEPTED*	21. UNIT	22. UNIT PRICE	23. AMOUNT
		<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>Alan Searfoss</b>		25. TOTAL <b>\$ 469.67</b>	
		BY:		CONTRACTING/ORDERING OFFICER	
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  DATE _____ SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE _____		27. SHIP. INO. <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		28. D.O. VOUCHER NO.	
		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.

## SECTION B

PR 0010768622  
NSN 4320-01-344-4531

## ITEM DESCRIPTION:

PUMPING UNIT, HYDRAULIC, POWER DRIVEN.

SINCE THIS NSN IS A NAVY FIELD LEVEL REPARABLE  
ITEM CONFIGURATION CONTROL MUST BE MAINTAINED  
PER MIL-STD-973.

THE CONTRACTOR WILL OVERPACK ONE EACH  
MANUFACTURER'S COMMERCIAL MANUAL CONSISTING  
OF OPERATION, SERVICES, MAINTENANCE, AND  
REPAIR INSTRUCTIONS, AND A COMPLETE PARTS LIST;  
WITH EACH END ITEM.

NO DATA IS AVAILABLE. THE ALTERNATE OFFEROR IS  
REQUIRED TO PROVIDE A COMPLETE DATA PACKAGE  
INCLUDING DATA FOR THE APPROVED AND ALTERNATE  
PART FOR EVALUATION.

CRITICAL APPLICATION ITEM

DENISON HYDRAULICS INC. (9F512) P/N T6C-005-1R03-B1

<u>ITEM</u>	<u>PR</u>	<u>PRLI</u>	<u>QUANTITY</u>	<u>UNIT</u>	<u>UNIT PRICE</u>	<u>AMOUNT</u>
0001	0010768622	0001	1	EA	\$469.67000	\$469.67

QTY VARIANCE: PLUS 0% MINUS 0%  
INSPECTION POINT: DEST  
ACCEPTANCE POINT: DEST

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 = A:  
INTRMDTE CONT = XX: INTRMDTE CONT QTY = XXX:  
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 MD00100452 REV A  
DATED 4090  
SUPPLEMENTAL INSTRUCTIONS

CONTINUED ON NEXT PAGE

SECTION B

'PRESERVATION & PACKAGING SHALL BE I/A/W THE LATEST REVISION OF FEDERAL SPECIFICATIONS MIL-P-16789 FOR PUMPS, CENTRIFUGAL.'

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

For all shipments of packaged materiel to the government, which includes either depot (DLA-direct) or DVD (customer-direct) shipments, both DoD linear and 2-D bar code markings are required on military shipping labels in accordance with MIL-STD-129, revision P, dated December 15, 2002. 2-D bar coding shall be in accordance with ISO/IEC 15438, ISO/IEC 15434 (ANSI MH10.8.3) and DoD 4500.9-R. MSL linear (code 3 of 9 or code 39) bar coding shall be in accordance with ISO/IEC 16388. MSL label stock quality shall meet MIL-PRF-61002. MSL bar code print quality shall meet ANSI MH10.8-2000 or ANSI X3.182-1990 (R2000) for applicable 2-D and/or linear bar codes. All DVD shipments shall meet additional linear bar coding requirements in DLAD 52.211-9008. When the contract/order omits any data element required to be bar-coded, the field shall be zero-filled. These requirements do not apply to delivery orders when the basic contract has not been modified to require MIL-STD-129P. If there are inconsistencies between the schedule and MIL-STD-129P, the schedule takes precedence.

DELIVER FOB: DESTINATION BY: 2004 DEC 08

PARCEL POST/FREIGHT ADDRESS:

W25G1U  
XU TRANSPORTATION OFFICER  
DDSP NEW CUMBERLAND FACILITY  
BUILDING MISSION DOOR 113 134  
NEW CUMBERLAND PA 17070-5001  
US

NON-MILSTRIP  
PROJ

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CONTINUED ON NEXT PAGE

**SECTION B**

REMIT PAYMENT TO:

\* \* \* \* \*

CONTINUED ON NEXT PAGE

CONTINUATION SHEET

Order Number:  
SPM760-05-V-0207

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THE PURCHASE ORDER CLAUSES ARE APPLICABLE AS INDICATED IN THE  
DLA MASTER SOLICITATION FOR AUTOMATED SOLICITATIONS AND  
RESULTING AWARDS REVISION 04 FOUND ON THE WEB SITE AT  
<https://www.dibbs.bsm.dla.mil/>