

# 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-0284</b>		2. DELIVERY ORDER NO.		3. DATE OF ORDER (YYMMDD) <b>2004 OCT 14</b>		4. REQUISITION/PURCH REQUEST NO. <b>0010717105</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: PMCMAZ0 ( )692-1227 / FAX: (614)693-1553 E-mail: jocelyn.green@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 type="checkbox"/> DEST <input checked="" type="checkbox"/> OTHER <i>(See Schedule if other)</i>	
9. CONTRACTOR CODE <b>1N9W8</b> <b>B.T. BRAKE SALES INC. 117 WEST PEACH STREET CONNELLSVILLE PA 15425-3125</b>				FACILITY CODE		10. DELIVER TO FOB POINT BY (Date) (YYMMDD) <b>30 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 CODE <b>See Schedule - Do Not Ship to Address in Block 6 FMS Requirement</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		This delivery order is issued on another Government agency or in accordance with and subject to terms and conditions of above numbered contract.							
DELIVERY		Reference your <b>offer dated 2004 SEP 16, 091604Z</b> and furnish the following on terms specified herein.							
PURCHASE		<input checked="" type="checkbox"/> 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: 140</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>Willie J. Caslin</b> <b>PMCMAAG</b>		25. TOTAL <b>\$ 1955.80</b>	
BY: <i>Willie J. Caslin</i>		TRACTING/ORDERING OFFICER		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		32. PAID BY		30. INITIALS	
DATE _____ SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE _____		<input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		33. AMOUNT VERIFIED CORRECT FOR	
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		34. CHECK NUMBER	
DATE _____ SIGNATURE AND TITLE OF CERTIFYING OFFICER _____				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 0010717105  
NSN 2530-00-278-6624

## ITEM DESCRIPTION:

LINING MATERIAL, FRICTION. FLEXIBLE (WOVEN),  
25 FOOT ROLL, 5 INCHES WIDE, 3/8 INCH THICK.

IF AQLS ARE LISTED IN THE SPECIFICATION(S)  
OR DRAWING(S) THEY MAY BE USED TO ESTABLISH THE  
AUTHORIZED SAMPLE SIZE, HOWEVER, THE ACCEPTANCE  
NUMBER FOR THIS CONTRACT IS ZERO; I.E., THIS  
CONTRACT REQUIRES A SAMPLING PLAN THAT ACCEPTS  
ON ZERO DEFECTS AND REJECTS ON ONE OR MORE  
DEFECT(S).

"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."

FULL AND OPEN COMPETITION APPLY

SCREEN THE DOD 6050.5LR HAZARDOUS MATERIALS  
INFORMATION SYSTEM MICROFICHE TO DETERMINE IF  
ITEM HAS BEEN ENTERED ON THE HAZARDOUS MATERIALS  
MICROFICHE. IF THE ITEM APPEARS ON THE MICRO-  
FICHE, UPDATE TO "HAZARDOUS". IF CORRESPONDENCE  
IS RECEIVED FROM DGSC-STF THAT THE ITEM IS "NOT  
HAZARDOUS", THEN DOWNGRADE. USE PROCEDURE CITED  
IN DCSC-S 6050.1SM, DATED 16JUL84.

I/A/W A-A-52522B  
BASIC  
AMEND NR 00 DTD 97 JUN 10  
TYPE NUMBER: TYPE II

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## SECTION B

<u>ITEM</u>	<u>PR</u>	<u>PRLI</u>	<u>QUANTITY</u>	<u>UNIT</u>	<u>UNIT PRICE</u>	<u>AMOUNT</u>
0001	0010717105	0001	140	FT	<u>\$13.97000</u>	<u>\$1955.80</u>

QTY VARIANCE: PLUS 0% MINUS 0%  
 INSP/ACCEP POINT: I/A/W FAST PAY PROCEDURES

PREP FOR DELIVERY

PKGING DATA - MIL-STD-2073-1D, 15 DEC 1999  
 QUP = 001: PRES MTHD = 10: CLNG/DRY = 1: PRESV MAT = 00:  
 WRAP MAT = XX: CUSH/DUNN MAT = XX: CUSH/DUNN THKNESS = X:  
 UNIT CONT = ED: OPI = O:  
 PACK CODE = Q: PACKING LEVEL = B:  
 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

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: ORIGIN BY: 2004 NOV 13

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SECTION B

PARCEL POST ADDRESS:

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

M/F: (TCN) PTWB5442370017 XXX  
RDD CONTACT TRANS OFFICE AT ADMIN OFFICE PRIOR TO SHIPMENT  
PROJ TP 1  
SUP ADD PA4JUW SIG L

FOR GOVERNMENT USE ONLY: IPD 03

DIC A01 DIST F9B ADV 2L FC 48

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REMIT PAYMENT TO:

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CONTINUATION SHEET

Order Number:

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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/>