

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. SPM540-04-V-0026		2. DELIVERY ORDER NO.		3. DATE OF ORDER (YYMMDD) 2004 SEP 20		4. REQUISITION/PURCH REQUEST NO. 0010677717		5. PRIORITY DOC9	
6. ISSUED BY Defense Supply Center Phila G & I 700 Robbins Ave. Philadelphia, PA 19111-5092 Local Administrator: PEPFRA2 () 737-8794 / FAX: (215)737-8578 E-mail: thomas.bruckshaw@dla.mil			CODE SP0500		7. ADMINISTERED BY (If other than 6) DEFENSE SUPPLY CENTER PHILADELPHIA GENERAL AND INDUSTRIAL 700 ROBBINS AVE PHILADELPHIA PA 19111-5096			CODE SP0500	
9. CONTRACTOR TRIMAN INDUSTRIES INC 1042 INDUSTRIAL DRIVE WEST BERLIN NJ 08091-9164 Vendor's Copy was sent EDI. Do not Duplicate shipment.		CODE OZBE8		FACILITY CODE		10. DELIVER TO FOB POINT BY (Date) (YYMMDD) 95 DAYS ADO		8. DELIVERY FOB <input checked="" type="checkbox"/> DEST <input type="checkbox"/> OTHER <i>(See Schedule if other)</i>	
NAME AND ADDRESS		12. DISCOUNT TERMS 00.500% 10 days		11. MARK IF BUSINESS IS <input checked="" type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISADVANTAGED <input type="checkbox"/> WOMEN-OWNED		13. MAIL INVOICES TO See Block 15			
14. SHIP TO See Schedule - Do Not Ship to Address in Block 6			CODE		15. PAYMENT WILL BE MADE BY DFAS BVDP (SL4701) P.O. BOX 369031 COLUMBUS OH 43236-9031			CODE SL4701	
								MARK ALL PACKAGES AND PAPERS WITH CONTRACT OR ORDER NUMBER	

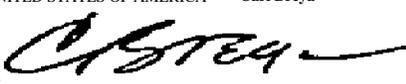
16. DELIVERY		This delivery order is issued on another Government agency or in accordance with and subject to terms and conditions of above numbered contract.									
PURCHASE		<input checked="" type="checkbox"/>		Reference your offer dated 2004 AUG 30 and furnish the following on terms specified herein.							
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)
<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

Other: 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
		TOTAL: 316			

* 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 Carl Brea PEPFRA1		25. TOTAL \$ 502.44	
BY: 		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		27. SHIP. INO. <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		30. INITIALS	
DATE _____ SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE _____		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	
37. RECEIVED AT		38. RECEIVED BY (Print)		35. BILL OF LADING NO.	
39. DATE RECEIVED (YYMMDD)		40. TOTAL CONTAINERS		41. S/R ACCOUNT NUMBER	
				42. S/R VOUCHER NO.	

SECTION B

PR 0010677717
NSN 5331-01-303-2169

ITEM DESCRIPTION:

O-RING
MINNESOTA RUBBER CO (07322)
MINNEAPOLIS MN
P/N Q4252-366Y

WHEN THE PURCHASE ITEM DESCRIPTION (PID) DESCRIBES THE REQUIRED PRODUCT(S) BY NAME AND PART NUMBER OF A SPECIFIC ENTITY, BY THE NAMES AND PART NUMBERS OF A NUMBER OF SPECIFIC ENTITIES, OR BY THE NAME(S) AND PART NUMBER(S) OF SPECIFIC ENTITY/ENTITIES AS MODIFIED BY ADDITIONAL REQUIREMENTS SET FORTH IN THE PID, ONLY THAT/THOSE PRODUCT(S) HAVE BEEN DETERMINED TO MEET THE NEEDS OF THE GOVERNMENT AND ARE ACCEPTABLE. SUCH PRODUCT(S) ARE "EXACT PRODUCT(S)" AS DEFINED IN "DLAD 52.217-9002, CONDITIONS FOR EVALUATION AND ACCEPTANCE OF OFFERS FOR PART NUMBERED ITEMS."

A VENDOR OFFER/QUOTATION, "BID WITHOUT EXCEPTION," IS A CERTIFICATION THAT THE "EXACT PRODUCT," MANUFACTURED BY ONE OF THE ENTITIES CITED IN THE PID WILL BE FURNISHED UNDER THE CONTRACT OR ORDER. ANY PRODUCT MANUFACTURED BY OTHER THAN ONE OF THE ENTITIES CITED IN THE PID IS AN "ALTERNATE PRODUCT," EVEN THOUGH IT MIGHT BE MANUFACTURED IN ACCORDANCE WITH THE DRAWING(S) AND/OR SPECIFICATIONS OF ONE OF THE ENTITIES CITED IN THE PID.

IF AN ALTERNATE PRODUCT IS FURNISHED UNDER A CONTRACT OR ORDER FOR AN EXACT PRODUCT, THE ALTERNATE PRODUCT WILL BE AN UNAUTHORIZED SUBSTITUTION, AND MAY YIELD CRIMINAL PENALTIES IN ADDITION TO ANY CIVIL REMEDIES AVAILABLE TO THE GOVERNMENT.

MINNESOTA RUBBER CO	(07322)	P/N	Q4252-366Y
BUSAK	(D7040)	P/N	QRAR04252-N7004

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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	0010677717	0001	316	EA	\$1.59000	\$502.44

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 = 33: CLNG/DRY = X: PRESV MAT = 00:
 WRAP MAT = 00: CUSH/DUNN MAT = XX: CUSH/DUNN THKNESS = X:
 UNIT CONT = XX: OPI = 0:
 INTRMDTE CONT = XX: INTRMDTE CONT QTY = ZZZ:
 PACK CODE = U:
 MARKING SHALL BE IN ACCORDANCE WITH MIL-STD-129.
 SPECIAL MARKING CODE: ZZ - Special Requirements
 SUPPLEMENTAL INSTRUCTIONS
 INTERMEDIATE CONTAINER QUANTITY AND
 MARKING IAW PRESERVATION SPEC.

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 24

PARCEL POST/FREIGHT ADDRESS:

CONTINUED ON NEXT PAGE

SECTION B

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

PROJ

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REMIT PAYMENT TO:

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CONTINUED ON NEXT PAGE

CONTINUATION SHEET

Order Number:

SPM540-04-V-0026

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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/>