

ORDER FOR SUPPLIES OR SERVICES

| | | | | |
|--|--|---|---|-------------|
| 1. CONTRACT/PURCH. ORDER/ AGREEMENT NO. DASG60-02-D-0011 | 2. DELIVERY ORDER/ CALL NO. 004401 | 3. DATE OF ORDER/CALL 2003 May 05 | 4. REQ./ PURCH. REQUEST NO. MIPR3KSMD00008-01 | 5. PRIORITY |
|--|--|---|---|-------------|

| | | | | |
|--|-----------------------|--|-----------------------|--|
| 6. ISSUED BY US ARMY SPACE & MISSILE DEFENSE COMMAND ██████████ P.O. BOX 1500 HUNTSVILLE AL 35807-3801 | CODE W9113M | 7. ADMINISTERED BY DCMA HUNTSVILLE BUILDING 4505, SUITE 301 MARTIN ROAD REDSTONE ARSENAL AL 35898-0001 | CODE S0107A | 8. DELIVERY FOB <input checked="" type="checkbox"/> DEST <input type="checkbox"/> OTHER (See Schedule if other) |
|--|-----------------------|--|-----------------------|--|

| | | | | |
|--|----------------------|----------|---|---|
| 9. CONTRACTOR TELEDYNE SOLUTIONS, INC 5000 BRADFORD DRIVE HUNTSVILLE AL 35805 | CODE 1P9G8 | FACILITY | 10. DELIVER TO FOB POINT BY (Date) SEE SCHEDULE | 11. MARK IF BUSINESS IS <input type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISADVANTAGED <input type="checkbox"/> WOMEN-OWNED |
| | | | 12. DISCOUNT TERMS | |
| 13. MAIL INVOICES TO THE ADDRESS IN BLOCK See Item 15 | | | | |

| | | | | |
|--|------|---|-----------------------|--|
| 14. SHIP TO SEE SCHEDULE | CODE | 15. PAYMENT WILL BE MADE BY DFAS-COLUMBUS CENTER DFAS-CO/SOUTH ENTITLEMENT OPERATION P.O. BOX 182264 COLUMBUS OH 43218-2264 | CODE HQ0338 | MARK ALL PACKAGES AND PAPERS WITH IDENTIFICATION NUMBERS IN BLOCKS 1 AND 2. |
|--|------|---|-----------------------|--|

| | | | |
|-------------------|----------------|-------------------------------------|--|
| 16. TYPE OF ORDER | DELIVERY/ CALL | <input checked="" type="checkbox"/> | This delivery order/call is issued on another Govt. agency or in accordance with and subject to terms and conditions of above numbered contract. |
| | PURCHASE | | Reference your quote dated Furnish the following on terms specified herein. REF: |

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 (YYYYMMDD) |
|--------------------|-----------|----------------------|------------------------|

If this box is marked, supplier must sign Acceptance and return the following number of copies:

17. ACCOUNTING AND APPROPRIATION DATA/ LOCAL USE
See Schedule

| 18. ITEM NO. | 19. SCHEDULE OF SUPPLIES/ SERVICES | 20. QUANTITY ORDERED/ ACCEPTED* | 21. UNIT | 22. UNIT PRICE | 23. AMOUNT |
|--------------|------------------------------------|---------------------------------|----------|----------------|------------|
| | SEE SCHEDULE | | | | |

| | | | |
|--|--|----------------------------------|-----------------|
| * 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 \$222,500.00 | 29. DIFFERENCES |
|--|--|----------------------------------|-----------------|

| | | | | |
|---|--------------|--------------------|--------------|---------------------------------|
| 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 GOVT. REP. _____ | 27. SHIP NO. | 28. DO VOUCHER NO. | 30. INITIALS | 33. AMOUNT VERIFIED CORRECT FOR |
|---|--------------|--------------------|--------------|---------------------------------|

| | | | | |
|---|--|-------------|------------------|------------------------|
| 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 | 32. PAID BY | 34. CHECK NUMBER | 35. BILL OF LADING NO. |
|---|--|-------------|------------------|------------------------|

| | | | | | |
|-----------------|-----------------|------------------------------|----------------------|---------------------|---------------------|
| 37. RECEIVED AT | 38. RECEIVED BY | 39. DATE RECEIVED (YYYYMMDD) | 40. TOTAL CONTAINERS | 41. S/R ACCOUNT NO. | 42. S/R VOUCHER NO. |
|-----------------|-----------------|------------------------------|----------------------|---------------------|---------------------|

Section B - Supplies or Services and Prices

| ITEM NO | SUPPLIES/SERVICES | MAX QUANTITY | UNIT | UNIT PRICE | MAX AMOUNT |
|---------|---|--------------|------|------------|--------------|
| 0001 | SETAC - FP Labor COST | 1 | Lot | UNDEFINED | UNDEFINED |
| | Provide services outlined in the scope of work (SOW), as defined in a given task order (T/O), at the fixed prices/government labor category specified in Section B paragraph entitled, "GOVERNMENT LABOR CATEGORIES AND ASSOCIATED FIXED PRICES PER DPPH" | | | | |
| | PURCHASE REQUEST NUMBER: MIPR3KSMDC0008-01 | | | | |
| | | | | MAX COST | \$213,414.00 |

FOB: Destination

| ITEM NO | SUPPLIES/SERVICES | MAX QUANTITY | UNIT | UNIT PRICE | MAX AMOUNT |
|---------|---|--------------|------|------------|------------|
| 0003 | Consultants COST | 1 | Lot | UNDEFINED | UNDEFINED |
| | Provide services outlined in the scope of work (SOW) at the cost reimbursable amounts as approved on a task-order-by-task-order basis. Total Fee, including prime and subcontractor/consultant, shall not exceed 3% of the estimated costs. This CLIN is valid during the three-year base period as well as any/all award term extensions earned by the contractor. | | | | |
| | PURCHASE REQUEST NUMBER: MIPR3KSMDC0008-01 | | | | |
| | | | | MAX COST | \$0.00 |

FOB: Destination

| ITEM NO | SUPPLIES/SERVICES | MAX QUANTITY | UNIT | UNIT PRICE | MAX AMOUNT |
|---------|-------------------|--------------|------|------------|------------|
| 0004 | | 1 | Lot | UNDEFINED | UNDEFINED |

Materials and STE
COST

Provide materials, special test equipment (STE), and associated services outlined in the individual task orders at the cost reimbursable amounts as approved by the T/OM and the Contracting Officer. NO FEE ON THIS CLIN. This CLIN is valid during the three-year base period as well as any/all award term extensions earned by the contractor.

PURCHASE REQUEST NUMBER: MIPR3KSMDC0008-01

MAX COST \$0.00

FOB: Destination

| ITEM NO | SUPPLIES/SERVICES | MAX QUANTITY | UNIT | UNIT PRICE | MAX AMOUNT |
|---------|-------------------|--------------|------|------------|------------|
| 0005 | | 1 | Lot | UNDEFINED | UNDEFINED |

Travel
COST

Travel as directed in the individual task orders. Travel must be completed within the cost reimbursable amounts allowed per the Joint Travel Regulations and the DCAA-approved Company-Implemented Policy and Procedures. NO FEE ON THIS CLIN. This CLIN is valid during the three-year base period as well as any/all award term extensions earned by the contractor.

PURCHASE REQUEST NUMBER: MIPR3KSMDC0008-01

MAX COST \$9,086.00

FOB: Destination

BLOCK 17/BLOCK 18 CONTINUED

BLOCK 17 (DD1155) CONTINUED:

TASK ORDER FUNDS REQUIRED \$222,500

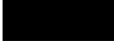
TASK ORDER FUNDS AVAILABLE \$222,500

UNFUNDED BALANCE \$0

BLOCK 18 (DD1155) CONTINUED: In the performance of this Task Order (T/O), the contractor shall provide the total Direct Productive Person Hours (DPPHs), plus or minus 10 percent, as stated for fixed-price labor categories stated in Section B of the contract listed in Block 1 of the DD Form 1155. These DPPHs shall be billed at the fixed price stated in Exhibit V of the contract. The contractor shall not exceed the DPPHs, nor the total dollars, stated for consultant below. The contractor is allowed to provide up to 10 percent less than the DPPHs stated for consultant

and still expend the total dollars as stated in the T/O. Furthermore, under no circumstance shall the contractor exceed the dollars stated for Materials, Travel, or Total T/O.

LABOR CATEGORIES: Labor categories are as listed in the contract, Section B, paragraph entitled "GOVERNMENT LABOR CATEGORIES AND ASSOCIATED FIXED PRICES PER DPPH"

| | DPPHs ORDERED | NTE AMOUNT |
|-------------------------|---|------------|
| FIXED-PRICE LABOR TOTAL |  DPPHs | \$213,414 |
| *CONSULTANT TOTAL |  DPPHs | \$0 |
| T/O TOTAL LABOR |  DPPHs | \$213,414 |
| MATERIAL | NTE | \$0 |
| TRAVEL | NTE | \$ 9,086 |
| T/O TOTAL | | \$222,500 |

**Consultant requirements must have prior written approval of the Administrative Contracting Officer (ACO) (via subcontract consent package) before any costs are incurred under the consultant CLIN.

Section C - Descriptions and Specifications

A STATEMENT OF WORK

“Space Based Radar Representation in AWARS”

1.0 Objective

The objective of this effort is to develop and implement an appropriate methodology to provide space-based radar (SBR) functionality in the Advanced Warfighting Simulation (AWARS).

2.0 Scope

The scope of this effort includes:

2.1 Determining the SBR, communications network, and ancillary functionality required in AWARS.

2.2 Development of a methodology to implement desired functionality.

2.3 Development of an implementation plan for selected methodology.

2.4 Implementation of the methodology within AWARS.

3.0 Background

There is a need to include SBR simulation capability in AWARS to support the analysis of future Army space requirements. The proposed methodology should minimize impact on run time and data collection requirements. The Training and Doctrine Command Analysis Center at Ft. Leavenworth (TRAC-FLVN) will establish a minimum acceptable set of standards for the SBR capability to be added to AWARS.

4.0 Tasks/Technical Requirements

The contractor shall accomplish the following:

4.1 Requirements Definition: Determine the SBR, communications network, and ancillary functions necessary to appropriately model an SBR system in AWARS to support future Army analyses.

4.2 Methodology Development: Develop a methodology to integrate the determined SBR functionality into AWARS, estimate the impact of the proposed methodology on run time, and identify sources of required data.

4.3 Implementation: Create and/or modify the necessary modules to implement the SBR functionality in AWARS.

4.4 Testing: Test the modifications to AWARS to validate the enhancements made, verify the runtime estimates, and confirm data support requirements.

4.5 Documentation: Provide documentation of the requirements determination results, detailed methodology, AWARS modifications, and User's Manual to support configuration management, future verification, validation, and accreditation efforts and user training.

B PERIOD OF PERFORMANCE

PERIOD OF PERFORMANCE: 5 MAY 03 – 28 MAY 04

C KEY PERSONNEL

KEY PERSONNEL:

D DELIVERABLES

DELIVERABLES:

| Item/Title | CDRL# | # Copies | Delivery Date |
|----------------------------|-------|----------|---------------|
| Task Order Management Plan | A001 | 1 * | Per CDRL |
| FMER | A003 | 1 * | Per CDRL |
| Progress Report | A004 | 1 | Monthly |
| Interim Technical Report | A004 | 1 | As Required |
| Final Technical Report | A005 | 2 */** | 30 APR 04 |
| Data Accession | A007 | 1 | Per CDRL |

* Plus Electronic Version.

** One (1) hardcopy to the T/OM, and one (1) hardcopy to the SMDC Command Library (SMDC-IM-PL).

E TRAVEL

ESTIMATED TRAVEL: Except for the locations listed below, the contractor has no authority to incur travel costs without explicit written approval (email acceptable) of the Task Order Monitor. Under no circumstance shall the contractor incur travel costs in excess of the NTE amount stated herein. NTE: \$9,086

Washington DC

Kansas City, MO

Ft. Leavenworth, KS

Colorado Springs, CO

F MATERIALS

ESTIMATED COST FOR MATERIALS AND/OR SPECIAL TEST EQUIPMENT: The contractor has no authority to incur material costs without the explicit prior written approval of the contracting officer. Prior to forwarding requests to the contracting officer, the contractor shall obtain the Task Order Monitor's concurrence. Electronic Mail (email) shall be utilized for both steps in this process. Under no circumstance shall the contractor incur materials costs in excess of the NTE amount stated herein. NTE: \$0

G SPECIAL INSTRUCTIONS

Cost data shall be segregated/vouchered/reported/paid at the ACRN level.

The "Limitation of Funds" clause is applicable at the ACRN level.

The effort described in the Task Order Statement of Work anticipated to be performed in FY03 and FY04 is subject to the Clause at FAR 52.232-18, Availability of Funds.

All of the terms and conditions of the contract listed in Block 1 above are applicable to this T/O.

All of the provisions and clauses of the contract listed in Block 1 above are applicable to this T/O.

It is incumbent upon the contractor and/or subcontractor to ensure that appropriate Technical Assistance Agreements (TAAs) and/or applicable export licenses are in place before conducting any activity under the SOW which requires such approval and documentation.

No Government Furnished Property or Test Facilities are available for use in performance of this Task Order.

H DISTRIBUTION

TASK ORDER MONITOR: [REDACTED]

MAILING ADDRESS: [REDACTED]

Section G - Contract Administration Data

ACCOUNTING AND APPROPRIATION DATA

AA: 21 3 2020 0 22-2010 000000 435612.000000 2512 MIPR3KSMDC0008 CIMS MS4D S23185
AMOUNT: \$222,500.00