

**ORDER FOR SUPPLIES OR SERVICES**

1. CONTRACT/PURCH. ORDER/ AGREEMENT NO. DASG60-99-D-0002	2. DELIVERY ORDER/ CALL NO. 0001	3. DATE OF ORDER/CALL 1999 Feb 12	4. REQ./ PURCH. REQUEST NO. DH9B180900-01	5. PRIORITY
---	-------------------------------------	--------------------------------------	--	-------------

6. ISSUED BY US ARMY SPACE AND MISSILE DEFENSE COMMAN PO BOX 1500 HUNTSVILLE AL 35807-3801	CODE DASG60	7. ADMINISTERED BY <b>SEE ITEM 6</b>	CODE	8. DELIVERY FOB <input checked="" type="checkbox"/> DEST <input type="checkbox"/> OTHER  (See Schedule if other)
---	----------------	---	------	--

9. CONTRACTOR CAS INC PO BOX 11190 HUNTSVILLE AL 35814	CODE 4S077	FACILITY	10. DELIVER TO FOB POINT BY (Date) <b>SEE SCHEDULE</b>	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 <b>SEE SCHEDULE</b>	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	<b>MARK ALL PACKAGES AND PAPERS WITH IDENTIFICATION NUMBERS IN BLOCKS 1 AND 2.</b>
------------------------------------	------	---	----------------	--

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	<input type="checkbox"/>	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)
<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  
**See Schedule**

18. ITEM NO.	19. SCHEDULE OF SUPPLIES/ SERVICES	20. QUANTITY ORDERED/ ACCEPTED*	21. UNIT	22. UNIT PRICE	23. AMOUNT
	<b>SEE SCHEDULE</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	
BY: [Redacted]	CONTRACTING / ORDERING OFFICER	25. TOTAL \$136,946.00

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 NO.	28. DO VOUCHER NO.	30. DIFFERENCES	33. AMOUNT VERIFIED CORRECT FOR
DATE _____ SIGNATURE OF AUTHORIZED GOVT. REP. _____	<input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL	32. PAID BY		34. CHECK NUMBER

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	32. PAID BY	30. INITIALS	35. BILL OF LADING NO.
DATE _____ SIGNATURE AND TITLE OF CERTIFYING OFFICER _____				

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

**CONTINUATION SHEET**REFERENCE NO. OF DOCUMENT BEING CONTINUED  
DASG60-99-D-0002-0001PAGE  
2 OF 3NAME OF OFFEROR OR CONTRACTOR  
CAS INC***DRAFT***

## SECTION B Supplies or Services and Prices

ITEM NO	SUPPLIES/SERVICES	MAX QUANTITY	UNIT	UNIT PRICE	MAX AMOUNT
0004	Provide the facility, insurance, build main, park CPAF PURCHASE REQUEST NUMBER DH9B180900-01				\$

MAX COST

BASE FEE

SUBTOTAL MAX COST + BASE

MAX AWARD FEE

TOTAL MAX COST + FEE

GUARANTEED MINIMUM AMOUNT

ACRN AA Funded Amount

\$136,946.00

\$0.00

\$136,946.00

\$136,946.00

<b>CONTINUATION SHEET</b>	REFERENCE NO. OF DOCUMENT BEING CONTINUED DASG60-99-D-0002-0001	PAGE 3	OF 3
---------------------------	--	-----------	---------

NAME OF OFFEROR OR CONTRACTOR  
CAS INC

*DRAFT*

SECTION G Contract Administration Data

ACCOUNTING AND APPROPRIATION DATA

AA: 9790400.2501 36-6011P40800000000 2552 DH9B180900 S01021 HD9B180900/9HHNO6/H 00000000000  
AMOUNT: \$136,946.00