

ORDER FOR SUPPLIES OR SERVICES

1. CONTRACT/PURCH. ORDER/ AGREEMENT NO. DASG60-99-D-0002		2. DELIVERY ORDER/ CALL NO. 0003		3. DATE OF ORDER/CALL 1999 Feb 18		4. REQ./ PURCH. REQUEST NO. DH9B180000-02C		5. PRIORITY		
6. ISSUED BY US ARMY SPACE AND MISSILE DEFENSE COMMAN PO BOX 1500 HUNTSVILLE AL 35807-3801				7. ADMINISTERED BY SEE ITEM 6		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		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		15. PAYMENT WILL BE MADE BY DFAS-COLUMBUS CENTER DFAS-CO/SOUTH ENTITLEMENT OPERATION P.O. BOX 182264 COLUMBUS OH 43218-2264		16. MARK ALL PACKAGES AND PAPERS WITH IDENTIFICATION NUMBERS IN BLOCKS 1 AND 2.				
16. TYPE OF ORDER		DELIVERY/ CALL		X		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)	
<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		
		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	\$187,539.00		
26. QUANTITY IN COLUMN 20 HAS BEEN				BY:			29. DIFFERENCES			
<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. INITIALS		
DATE	SIGNATURE OF AUTHORIZED GOVT. REP.		<input type="checkbox"/> PARTIAL	<input type="checkbox"/> FINAL	31. PAYMENT	32. PAID BY	33. AMOUNT VERIFIED CORRECT FOR			
			<input type="checkbox"/> COMPLETE	<input type="checkbox"/> PARTIAL	<input type="checkbox"/> FINAL		34. CHECK NUMBER			
36. I certify this account is correct and proper for payment.								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 SHEETREFERENCE NO. OF DOCUMENT BEING CONTINUED
DASG60-99-D-0002-0003PAGE
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
0002	Hardware and Software Parts and Maintenance (Mat) Work as stated in CAS Proposal CP347, III - Facilities Plan PURCHASE REQUEST NUMBER DH9B180000-02C FOB Destination SUPPLEMENTARY address				\$ \$

MAX COST

BASE FEE

SUBTOTAL MAX COST + BASE

MAX AWARD FEE

TOTAL MAX COST + FEE

GUARANTEED MINIMUM AMOUNT

ACRN AA Funded Amount

\$187,539.00

\$0.00

\$187,539.00

\$187,539.00

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED	PAGE	
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NAME OF OFFEROR OR CONTRACTOR
CAS INC

DRAFT

SECTION G Contract Administration Data

ACCOUNTING AND APPROPRIATION DATA

CONTRACT ACRN	FUNDING DATA	COST CODE	AMOUNT
AA	9790400.2501 36-6011 P40800000000 2552 DH9B180000 S01021 DH9B180000/9HHN06/H	TO #0003	\$187,539.00000

FUNDING ACRN	JOB ORDER NO	JOB ORDER QTY	JOB ORDER AMOUNT
AB			