

# ORDER FOR SUPPLIES OR SERVICES

1. CONTRACT/PURCH. ORDER/ AGREEMENT NO. DAKF11-99-D-0005-	2. DELIVERY ORDER/ CALL NO. 0018	3. DATE OF ORDER/CALL 2000Jan01	4. REQ./ PURCH. REQUEST NO. W33BL0-0362-NJ4E	5. PRIORITY
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6. ISSUED BY ARMY ATLANTA CONTRACTING CENTER INSTALLATION, LOGISTICS, & ENVIRONMENTAL CONTRACTS 1309 ANDERSON WAY SW  FORT MCPHERSON, GA 30330-1096	CODE DAKF11	7. ADMINISTERED BY (if other than 6)  <b>SEE ITEM 6</b>	CODE	8. DELIVERY FOB <input checked="" type="checkbox"/> DEST <input type="checkbox"/> OTHER  (See Schedule if other)
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9. CONTRACTOR STANLEY ASSOCIATES INC ATTN RALPH I. SEBACHER 300 N WASHINGTON STREET SUITE 400 ALEXANDRIA, VA 22314-2121	CODE 6G280	FACILITY	10. DELIVER TO FOR 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 schedule				

14. SHIP TO <b>SEE SCHEDULE</b> ATTN:	CODE	15. PAYMENT WILL BE MADE BY DEFENSE FINANCE AND ACCOUNTING SERVICE DIR OF NETWORK OPERATIONS ATTN VENDOR PAY DIV DEPT 3200 8899 EAST 56TH STREET  INDIANAPOLIS, IN 46249-3200	CODE HQ0105	<b>MARK ALL PACKAGES AND PAPERS WITH IDENTIFICATION NUMBERS IN BLOCKS 1 AND 2.</b>
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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. Reference your quote dated _____	Furnish the following on terms specified herein.
	PURCHASE	<input 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 (YYYYMMDD)
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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 <i>Katherine E. Williams</i> BY: Katherine E. Williams CONTRACTING / ORDERING OFFICER	25. TOTAL <b>\$1,112,606.59</b>	29. DIFFERENCES
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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. <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL	28. DO VOUCHER NO.	30. INITIALS	33. AMOUNT VERIFIED CORRECT FOR
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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.
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37. RECEIVED AT	38. RECEIVED BY	39. DATE RECEIVED (YYYYMMDD)	40. TOTAL CONTAINERS	41. S/R ACCOUNT NO.	42. S/R VOUCHER NO.
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NAME OF OFFEROR OR CONTRACTOR  
STANLEY ASSOCIATES INC

This is a cost plus fixed fee task order to support the HQ FORSCOM Inland Petroleum Distribution System (IPDS) Training Module. Performance at Fort Pickett, VA. Logistical support services include logistical task areas 1, 2, 3, 4, 7, 13 and 16.

Contractor shall invoice per instructions in the schedule.

1. Cost proposal dated January 17, 2000, is hereby accepted and placed in the official file for this task order.

**PERFORMANCE PERIODS:**

PERIOD	DATES
Base Period	Jan 1, 2000 – Jun 30, 2000
Option One	Jul 1, 2000 – Dec 31, 2000

**3. OBLIGATED FUND RECAP:**

a. ACRN AA and AB Base year CLINs 0003, 0004 and 0005 are funded for total amount of \$578,101.74 under requisition No. W33BL0 0362 NJ4E

b. ACRN AC, Option period CLINs 0008, 0009, and 0010 are subject to availability of funds. Total value shown at Page 1, Block 25.

**4. INVOICING INSTRUCTIONS:**

a. The contractor shall submit **original** plus one copy of invoice [SF 1034] Public Voucher for Purchases and Services, through their cognizant DCAA to the Contracting Officer at address in Block 6.

b. Submit one "copy" of the SF 1034 to the primary task order monitor as identified in the performance Work Statement. Invoices shall not be submitted more often than once every two weeks.

Cost plus fixed fee award vouchers shall be submitted pursuant to FAR 52.216-7, and shall, as a minimum, include the following documentation.

a. The total price for the current billing period and the cumulative billed for the current fiscal year. These costs shall be shown by CLIN or sub-CLIN level.

b. Include supporting documentation, by CLIN, for amounts invoiced. Supporting documentation must be broke-out in detail to substantiate the total amount requested for reimbursement.