

ORDER FOR SUPPLIES OR SERVICES

1. CONTRACT/PURCH. ORDER/ AGREEMENT NO. DAKF11-99-D-0008-	2. DELIVERY ORDER/ CALL NO. 0010	3. DATE OF ORDER/CALL 2000Mar17	4. REQ./ PURCH. REQUEST NO. W81PNH0010-4001	5. PRIORITY
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6. ISSUED BY ARMY ATLANTA CONTRACTING CENTER 1301 ANDERSON WAY SW AFLG-PR FORT MCPHERSON, GA 30330-1096	CODE DAKF11	7. ADMINISTERED BY (if other than 6) SEE ITEM 6	CODE
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8. DELIVERY FOB
<input checked="" type="checkbox"/> DEST
<input type="checkbox"/> OTHER
(See Schedule if other)

9. CONTRACTOR EAGLE GROUP INTERNATIONAL INC ATTN: JAMES P. GINN 3475 NORTH DESERT DRIVE BLDG 1 SUITE 100 ATLANTA, GA 30344-5726	CODE 04ES5	FACILITY	10. DELIVER TO FOR POINT BY (Date) SEE SCHEDULE	11. MARK IF BUSINESS IS
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<input type="checkbox"/> SMALL
<input type="checkbox"/> SMALL DISADVANTAGED
<input type="checkbox"/> WOMEN-OWNED

14. SHIP TO SEE SCHEDULE ATTN:	CODE	15. PAYMENT WILL BE MADE BY DFAS DEFENSE FINANCE AND ACCOUNTING SERVICE DNO INDIANAPOLIS DEPARTMENT 3805 8899 EAST 56TH STREET INDIANAPOLIS, IN 46249	CODE HQ0105	13. MAIL INVOICES TO THE ADDRESS IN BLOCK See Item 15
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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.

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
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 <i>Mary Anne Osborn</i> BY: Mary Anne Osborn CONTRACTING / ORDERING OFFICER	25. TOTAL \$2,599,564.43	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.	28. DO VOUCHER NO.	30. INITIALS
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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	33. AMOUNT VERIFIED CORRECT FOR
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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
EAGLE GROUP INTERNATIONAL INC

This is a cost plus fixed fee task order to support Implementation of the Standard Army Retail Supply System (SARSS) at the 55th CMMC located at Ft. Belvoir, MD. Contractor shall invoice per instructions in the schedule.

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

PERFORMANCE PERIODS:

PERIOD	DATES
Base Period	01 Feb 2000 – 31 Jan 2001
Option One	01 Feb 2002 – 31 Jan 2002 <i>3</i>

3. OBLIGATED FUND RECAP:

ACRN AA CLINs 0001, 0003 and are funded for total amount of \$1,296,654.46
Requisition No W81PNH0010-4001

Option Years are subject to exercise and availability of funds.

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.

c. Travel costs shall be broken out by occurrence, with itinerary, dates of travel, number and category of employee travel, per diem costs, transportation costs. Include the government approval with supporting documentation. Travel shall be in accordance with FAR part 31.205-46 and per diem rates will be in accordance with the Joint Travel Regulation.