

SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS				1. REQUISITION NUMBER Contracting Office issuing order - enter requisition number (s).		PAGE 1 OF	
<i>Offeror to complete blocks 12, 17, 23, 24, & 30</i>							
2. CONTRACT NO. N68939-97-D-0041		3. AWARD/EFFECTIVE DATE As required.		4. ORDER NUMBER See DFAR 204.7004(d)(2)(i) for instructions		5. SOLICITATION NUMBER	
7. FOR SOLICITATION INFORMATION CALL:		A. NAME Contracting Office issuing Order, enter name of responsible person			B. TELEPHONE (No Collect Calls) Contracting Office issuing order, enter Telephone # and/or e-mail address of responsible person.		8. OFFER DUE DATE
9. ISSUED BY		CODE		10. THIS ACQUISITION IS		11. DELIVERY FOR FOB DESTINATION UNLESS BLOCK IS MARKED. <input checked="" type="checkbox"/> SEE SCHEDULE	12. DISCOUNT TERMS Net
Address of Contracting Office issuing the Delivery Order . Contract paragraph G5.1 authorizes Contracting Officers whose warrant allows purchase of this type/dollar to issue orders.				<input type="checkbox"/> UNRESTRICTED <input type="checkbox"/> SET-ASIDE: % FOR <input type="checkbox"/> SMALL BUSINESS <input type="checkbox"/> SMALL DISADV. BUSINESS <input type="checkbox"/> 8 (A) SIC: 3669 SIZE STANDARD: 750 Employees		<input type="checkbox"/> 13a. THIS CONTRACT IS A RATED ORDER UNDER DPAS (15 CFR 700) 13 b. RATING DO	14. METHOD OF SOLICITATION <input type="checkbox"/> RFQ <input type="checkbox"/> IFB <input type="checkbox"/> RFP
15. DELIVER TO:		CODE		16. ADMINSTERED BY		CODE	
Contracting Office issuing order, enter appropriate "ship to" information in this block.				DCMC Boston-GD 77 "A" Street Needham Heights, MA 02494-2892		S2203A	
17 CONTRACTOR/OFFEROR		CODE		FACILITY		18a. PAYMENT WILL BE MADE BY	
General Dynamics Government Systems Corporation Worldwide Telecommunication Systems 77 "A" Street Needham Heights, MA 02494-2892 Telephone No: (781) 455-5021		2D423				DFAS - Columbus Center DFAS-CO/Bunker Hill Division P.O. Box 182077 Columbus OH 43218-2077	
<input type="checkbox"/> 17b. CHECK IF REMITTANCE IS DIFFERENT AND PUT SUCH ADDRESS IN OFFER				18b. SUBMIT INVOICES TO ADDRESS SHOWN IN BLOCK 18a. UNLESS BLOCK BELOW IS CHECKED <input type="checkbox"/> SEE ADDENDUM			
19. ITEM NO.	20. SCHEDULE OF SUPPLIES/SERVICES			21. QUANTITY	22. UNIT	23. UNIT PRICE	24. AMOUNT
0001	9999AA – High Speed Gigabox, ABC Corp, p/n 12345-67			3	EA	\$ 4,200.10	\$ 12,600.30
<i>Attach Continuation Sheet as Necessary</i>							
25. ACCOUNTING AND APPROPRIATION DATA						26. TOTAL AWARD AMOUNT (For Government Use Only)	
Contracting Office issuing order, enter appropriate Accounting and Appropriation data in this block.						Enter Total Amount of Order	
<input type="checkbox"/> 27a. SOLICITATION INCORPORATES BY REFERENCE FAR 52.212-1, 52.212-4, FAR 52.212-3, AND 52.212-5, ARE ATTACHED. ADDENDA <input type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED. <input type="checkbox"/> 27b. CONTRACT/PURCHASE ORDER INCORPORATES BY REFERENCE FAR 52.212-4, FAR 52.212-5 IS ATTACHED. ADDENDA <input type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED.							
28. CONTRACTOR IS REQUIRED TO SIGN THIS DOCUMENT AND RETURN 2 COPIES TO ISSUING OFFICE. CONTRACTOR AGREES TO FURNISH AND DELIVER ALL ITEMS SET FORTH OR OTHERWISE IDENTIFIED ABOVE AND ON ANY ADDITIONAL SHEETS SUBJECT TO THE TERMS AND CONDITIONS SPECIFIED HEREIN.				29. AWARD OF CONTRACT: REFERENCE _____ OFFER DATED _____ YOUR OFFER ON SOLICITATION (BLOCK 5), INCLUDING ANY ADDITIONS OR CHANGES WHICH ARE SET FORTH HEREIN, IS ACCEPTED AS TO ITEMS: SEE BLOCK 19			
30a. SIGNATURE OF OFFEROR/CONTRACTOR				31a. UNITED STATES OF AMERICA (SIGNATURE OF CONTRACTING OFFICER)			
30b. NAME AND TITLE OF SIGNER (TYPE OR PRINT)			30c. DATE SIGNED	31b. NAME OF CONTRACTING OFFICER		31c. DATE SIGNED	
32a. QUANTITY IN COLUMN 21 HAS BEEN				33. SHIP NUMBER		34. VOUCHER NUMBER	34. AMOUNT VERIFIED CORRECT FOR
<input type="checkbox"/> RECEIVED <input type="checkbox"/> INSPECTED <input type="checkbox"/> ACCEPTED, AND CONFORMS TO THE CONTRACT. EXCEPT AS NOTED				<input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL			
32b. SIGNATURE OF AUTHORIZED GOV'T REPRESENTATIVE			32c. DATE SIGNED	36. PAYMENT		37. CHECK NUMBER	
				<input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL			
				38. S/R ACCOUNT NUMBER		39. S/R VOUCHER NUMBER	40. PAID BY
				42a. RECEIVED BY (Print)			
41a. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT			41c. DATE	42b. RECEIVED AT (Location)			
41b. SIGNATURE AND TITLE OF CERTIFYING OFFICER				42c. DATE REC'D (YY/MM/DD)		42d. TOTAL CONTAINERS	