

<b>SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS</b> Offeror To Complete Block 12, 17, 23, 24, & 30				<b>1. Requisition Number</b> SEE SCHEDULE		<b>Page</b> 1 <b>Of</b> 3	
<b>2. Contract No.</b> W56HZV-04-D-0042		<b>3. Award/Effective Date</b> 2004SEP09		<b>4. Order Number</b> 0004		<b>5. Solicitation Number</b>	
<b>7. For Solicitation Information Call:</b>		<b>A. Name</b> ANTHONY SCALISE			<b>B. Telephone Number (No Collect Calls)</b> (586)574-6359		<b>8. Offer Due Date/Local Time</b>
<b>9. Issued By</b> TACOM WARREN AMSTA-AQ-ATAC WARREN, MICHIGAN 48397-5000  HTTP://CONTRACTING.TACOM.ARMY.MIL  e-mail: SCALISEA@TACOM.ARMY.MIL			<b>Code</b> W56HZV	<b>10. This Acquisition Is</b> <input checked="" type="checkbox"/> Unrestricted <input type="checkbox"/> Set Aside: % For  <input type="checkbox"/> Small Business <input type="checkbox"/> Hubzone Small Business <input type="checkbox"/> 8(A) NAICS: 326211 Size Standard:		<b>11. Delivery For FOB Destination Unless Block Is Marked</b> <input type="checkbox"/> See Schedule  <input checked="" type="checkbox"/> <b>13a. This Contract Is A Rated Order Under DPAS (18 CFR 700)</b>  <b>13b. Rating</b> DOA4  <b>14. Method Of Solicitation</b> <input type="checkbox"/> RFQ <input type="checkbox"/> IFB <input type="checkbox"/> RFP	
<b>15. Deliver To</b> XR W390 RED RIVER MUNITIONS CTR HIGHWAY 82 WEST CL V TPF GATE 44 BLDG 184 TEXARKANA TX 75507-5000			<b>Code</b> W45G19	<b>16. Administered By</b> DCMA PHILADELPHIA 700 ROBBINS AVENUE, BLDG 4-A P.O. BOX 11427 PHILADELPHIA, PA 19111-0427			
<b>Telephone No.</b>			<b>17. Contractor/Offeror</b> <b>Code</b> 62161 <b>Facility</b>	<b>18a. Payment Will Be Made By</b> <b>Code</b> HQ0337 DFAS - COLUMBUS CENTER DFAS-CO/NORTH ENTITLEMENT OPERATION P.O. BOX 182266 COLUMBUS OH 43218-2266			
<b>Telephone No.</b>			<input type="checkbox"/> <b>17b. Check If Remittance Is Different And Put Such Address In Offer</b>	<input type="checkbox"/> <b>18b. Submit Invoices To Address Shown In Block 18a Unless Block Below Is Checked</b> <input type="checkbox"/> See Addendum			
<b>19. Item No.</b>	<b>20. Schedule Of Supplies/Services</b>			<b>21. Quantity</b>	<b>22. Unit</b>	<b>23. Unit Price</b>	<b>24. Amount</b>
	SEE SCHEDULE						
	(Use Reverse and/or Attach Additional Sheets As Necessary)						
<b>25. Accounting And Appropriation Data</b> ACRN: AA 97 X4930AC6D 6D 26FB S20113 W56HZV					<b>26. Total Award Amount (For Govt. Use Only)</b> \$4,936,482.00		
<input type="checkbox"/> <b>27a. Solicitation Incorporates By Reference FAR 52.212-1, 52.212-4, FAR 52.212-3 And 52.212-5 Are Attached. Addenda</b>	<input type="checkbox"/> Are	<input type="checkbox"/> Are Not Attached.					
<input checked="" type="checkbox"/> <b>27b. Contract/Purchase Order Incorporates By Reference FAR 52.212-4. FAR 52.212-5 Is Attached. Addenda</b>	<input checked="" type="checkbox"/> Are	<input type="checkbox"/> Are Not Attached.					
<input type="checkbox"/> <b>28. Contractor Is Required To Sign This Document And Return _____ 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.</b>				<input type="checkbox"/> <b>29. Award Of Contract: Ref. _____ Offer Dated _____ . Your Offer On Solicitation (Block 5), Including Any Additions Or Changes Which Are Set Forth Herein, Is Accepted As To Items:</b>			
<b>30a. Signature Of Offeror/Contractor</b>				<b>31a. United States Of America (Signature Of Contracting Officer)</b>			
<b>30b. Name And Title Of Signer (Type Or Print)</b>		<b>30c. Date Signed</b>		<b>31b. Name Of Contracting Officer (Type Or Print)</b> MARIE T. GAPINSKI /SIGNED/ GAPINSKM@TACOM.ARMY.MIL (586)574-5333		<b>31c. Date Signed</b>	

19. Item No.	20. Schedule Of Supplies/Services	21. Quantity	22. Unit	23. Unit Price	24. Amount

32a. Quantity In Column 21 Has Been

Received  Inspected  Accepted, And Conforms To The Contract, Except As Noted: \_\_\_\_\_

32b. Signature Of Authorized Government Representative	32c. Date	32d. Printed Name and Title of Authorized Government Representative
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32e. Mailing Address of Authorized Government Representative	32f. Telephone Number of Authorized Government Representative
	32g. E-Mail of Authorized Government Representative

33. Ship Number <input type="checkbox"/> Partial <input type="checkbox"/> Final	34. Voucher Number	35. Amount Verified Correct For	36. Payment <input type="checkbox"/> Complete <input type="checkbox"/> Partial <input type="checkbox"/> Final	37. Check Number
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38. S/R Account Number	39. S/R Voucher Number	40. Paid By
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41a. I Certify This Account Is Correct And Proper For Payment	42a. Received By (Print)	
41b. Signature And Title Of Certifying Officer	41c. Date	
	42b. Received At (Location)	
	42c. Date Rec'd (YY/MM/DD)	42d. Total Containers

CONTINUATION SHEET

Reference No. of Document Being Continued  
 PIIN/SIIN W56HZV-04-D-0042/0004 MOD/AMD

Name of Offeror or Contractor: HUTCHINSON INDUSTRIES, INC.

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT																											
0011	SUPPLIES OR SERVICES AND PRICES/COSTS  NSN: 2530-01-493-5859 FSCM: 19207 PART NR: 12460176 SECURITY CLASS: Unclassified																															
0011AA	<p><u>PRODUCTION QUANTITY</u></p> <p>6689</p> <p>NOUN: WHEEL AND RUNFLAT                      PRON: EH43S881EH PRON AMD: 01 ACRN: AA                      AMS CD: 070011</p> <p><u>Packaging and Marking</u>                      PACKAGING/PACKING/SPECIFICATIONS:                      SEE PACKAGING REQUIREMENTS SHEET IN TECH DATA                      LEVEL PRESERVATION: Commercial                      LEVEL PACKING: Commercial</p> <p><u>Inspection and Acceptance</u>                      INSPECTION: Origin ACCEPTANCE: Origin</p> <p><u>Deliveries or Performance</u>                      DOC SUPPL  <table border="1"> <thead> <tr> <th>REL CD</th> <th>MILSTRIP</th> <th>ADDR</th> <th>SIG CD</th> <th>MARK FOR</th> <th>TP CD</th> </tr> </thead> <tbody> <tr> <td>001</td> <td>W56HZV4196T902</td> <td>W45G19</td> <td>J</td> <td></td> <td>2</td> </tr> </tbody> </table> <table border="1"> <thead> <tr> <th>DEL REL CD</th> <th>QUANTITY</th> <th>DEL DATE</th> </tr> </thead> <tbody> <tr> <td>001</td> <td>2,000</td> <td>10-JAN-2005</td> </tr> <tr> <td>002</td> <td>2,000</td> <td>10-FEB-2005</td> </tr> <tr> <td>003</td> <td>2,000</td> <td>10-MAR-2005</td> </tr> <tr> <td>004</td> <td>689</td> <td>10-APR-2005</td> </tr> </tbody> </table> <p>FOB POINT: Destination</p> <p>SHIP TO: <u>FREIGHT ADDRESS</u>                      (W45G19) XR W390 RED RIVER MUNITIONS CTR                      HIGHWAY 82 WEST CL V TPF                      GATE 44 BLDG 184                      TEXARKANA TX 75507-5000</p> <p><u>CONTRACT/DELIVERY ORDER NUMBER</u>                      W56HZV-04-D-0042/0004</p> </p>	REL CD	MILSTRIP	ADDR	SIG CD	MARK FOR	TP CD	001	W56HZV4196T902	W45G19	J		2	DEL REL CD	QUANTITY	DEL DATE	001	2,000	10-JAN-2005	002	2,000	10-FEB-2005	003	2,000	10-MAR-2005	004	689	10-APR-2005	6689	EA	\$ 738.00000	\$ 4,936,482.00
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**Reference No. of Document Being Continued**

**PIIN/SIIN** W56HZV-04-D-0042/0004 **MOD/AMD**

**Name of Offeror or Contractor:** HUTCHINSON INDUSTRIES, INC.

CONTRACT ADMINISTRATION DATA

LINE	PRON/ AMS CD/ <u>ITEM</u>	<u>MIPR</u>	<u>ACRN</u>	<u>STAT</u>	<u>ACCOUNTING CLASSIFICATION</u>	JOB ORDER <u>NUMBER</u>	<u>ACCOUNTING</u> <u>STATION</u>	<u>OBLIGATED</u> <u>AMOUNT</u>
0011AA	EH43S881EH	AA	2	97	X4930AC6D 6D	26FB S20113	W56HZV \$	4,936,482.00
	070011							
							TOTAL \$	4,936,482.00

SERVICE <u>NAME</u>	<u>TOTAL BY ACRN</u>	<u>ACCOUNTING CLASSIFICATION</u>	<u>ACCOUNTING</u> <u>STATION</u>	<u>OBLIGATED</u> <u>AMOUNT</u>
Army	AA	97 X4930AC6D 6D	26FB S20113	W56HZV \$
				TOTAL \$
				4,936,482.00