

ORDER FOR SUPPLIES OR SERVICES										PAGE 1 OF 5		
1. CONTRACT PURCH ORDER/AGREEMENT NO. W56HZV-12-D-0055			2. DELIVERY ORDER/CALL NO. 0013		3. DATE OF ORDER/CALL (YYYYMMDD) 2013SEP16		4. REQUISITION/PURCH REQUEST NO. SEE SCHEDULE		5. PRIORITY DOA4			
6. ISSUED BY U.S. ARMY CONTRACTING COMMAND JACOB SILCOX WARREN, MICHIGAN 48397-5000 HTTP://CONTRACTING.TACOM.ARMY.MIL  EMAIL: JACOB.SILCOX@US.ARMY.MIL				CODE W56HZV	7. ADMINISTERED BY (if other than 6) DCMA DAYTON AREA C, BUILDING 30 1725 VAN PATTON DRIVE WRIGHT-PATTERSON AFB, OH 45433-5302				CODE S3605A	8. DELIVERY FOB <input type="checkbox"/> DESTINATION <input checked="" type="checkbox"/> OTHER (See Schedule if other)		
9. CONTRACTOR  GUILD ASSOCIATES, INC. 5750 SHIER-RINGS RD DUBLIN, OH 43016-1234				CODE 4X630	FACILITY	10. DELIVER TO FOB POINT BY (Date) (YYYYMMDD)  SEE SCHEDULE			11. X IF BUSINESS IS <input checked="" type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISADVANTAGED <input type="checkbox"/> WOMAN-OWNED			
NAME AND ADDRESS						12. DISCOUNT TERMS			13. MAIL INVOICES TO THE ADDRESS IN BLOCK See Block 15			
14. SHIP TO SEE SCHEDULE				CODE	15. PAYMENT WILL BE MADE BY DFAS - COLUMBUS CENTER NORTH ENTITLEMENT OPERATIONS P.O. BOX 182266 COLUMBUS, OH 43218-2266				CODE HQ0337	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 IS ISSUED ON ANOTHER GOVERNMENT AGENCY OR IN ACCORDANCE WITH AND SUBJECT TO TERMS AND CONDITIONS OF ABOVE NUMBERED CONTRACT.									
PURCHASE			Reference your <input type="checkbox"/> Oral <input type="checkbox"/> Written Quotation _____, 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)			
<input checked="" type="checkbox"/>	If this box is marked, supplier must sign Acceptance and return the following number of copies: 2											
17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE  SEE CONTRACT ADMINISTRATION DATA												
18. ITEM NO.	19. SCHEDULE OF SUPPLIES/SERVICE				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 CLETUS NWALOZIE /SIGNED/ 2013SEP16 CLETUS.NWALOZIE@US.ARMY.MIL (586)282-7291				25. TOTAL	\$4,573.02			
27a. QUANTITY IN COLUMN 20 HAS BEEN <input type="checkbox"/> INSPECTED <input type="checkbox"/> RECEIVED <input type="checkbox"/> ACCEPTED, AND CONFORMS TO CONTRACT EXCEPT AS NOTED				BY:				26. DIFFERENCES				
b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE					c. DATE (YYYYMMDD)	d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE						
e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE					28. SHIP. NO.	29. D.O. VOUCHER NO.		30. INITIALS				
f. TELEPHONE NUMBER		g. E-MAIL ADDRESS			<input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL	32. PAID BY		33. AMOUNT VERIFIED CORRECT FOR				
36. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT.					31. PAYMENT <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL			34. CHECK NUMBER				
a. DATE (YYYYMMDD)		b. SIGNATURE AND TITLE OF CERTIFYING OFFICER						35. BILL OF LADING NO.				
37. RECEIVED AT		38. RECEIVED BY (Print)	39. DATE RECEIVED (YYYYMMDD)	40. TOTAL CONTAINERS	41. S/R ACCOUNT NUMBER		42. S/R VOUCHER NO.					

**CONTINUATION SHEET****Reference No. of Document Being Continued****Page 2 of 5****PIIN/SIIN** W56HZV-12-D-0055/0013**MOD/AMD****Name of Offeror or Contractor:** GUILD ASSOCIATES, INC.

## SUPPLEMENTAL INFORMATION

Buyer Name: JACOB SILCOX  
Buyer Office Symbol/Telephone Number: CCTA-ADEC/(586)282-3506  
Type of Contract: Firm Fixed Price  
Kind of Contract: Service Contracts  
Type of Business: Other Small Business Performing in U.S.  
Surveillance Criticality Designator: C  
Weapon System: No Identified Army Weapons Systems

\*\*\* End of Narrative A0000 \*\*\*

1. Delivery Order 0012 under contract W56HZV-12-D-0055 awards the following CLINs:

a. CLIN 0081AE- Technical Assistance Visits (TAV), 5.5 days, \$,3159.75.

b. CLIN 0091AE- Travel Expense Reimbursement, \$1,138.82.

2. The total amount of Delivery Order 0011 is \$4,573.02.

3. All other terms and conditions remain unchanged and are in full force and effect.

\*\*\* END OF NARRATIVE A0001 \*\*\*

CONTINUATION SHEET

Reference No. of Document Being Continued  
 PIIN/SIIN W56HZV-12-D-0055/0013 MOD/AMD

Name of Offeror or Contractor: GUILD ASSOCIATES, INC.

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT									
	SUPPLIES OR SERVICES AND PRICES/COSTS													
0081	LADS TAV													
0081AG	<p><u>TECHNICAL ASSISTANCE VISIT- TRENTON, NJ</u></p> <p>GENERIC NAME DESCRIPTION: LADS TAV                      CLIN CONTRACT TYPE:                      Firm Fixed Price                      PRON: S63UJ247EH PRON AMD: 01 ACRN: AA</p> <p>CLIN 0081AG provides for 5.5 days of repair and training in Trenton, NJ. This includes travel and prep time.</p> <p>(End of narrative C001)</p> <p><u>Inspection and Acceptance</u>                      INSPECTION: Destination ACCEPTANCE: Destination</p> <p><u>Deliveries or Performance</u></p> <table border="0"> <tr> <td>DLVR SCH</td> <td></td> <td>PERF COMPL</td> </tr> <tr> <td><u>REL CD</u></td> <td><u>QUANTITY</u></td> <td><u>DATE</u></td> </tr> <tr> <td>001</td> <td>1</td> <td>20-SEP-2013</td> </tr> </table> <p style="text-align: right;">\$ 3,159.75</p>	DLVR SCH		PERF COMPL	<u>REL CD</u>	<u>QUANTITY</u>	<u>DATE</u>	001	1	20-SEP-2013	1	LO		\$ 3,159.75
DLVR SCH		PERF COMPL												
<u>REL CD</u>	<u>QUANTITY</u>	<u>DATE</u>												
001	1	20-SEP-2013												
0091	LADS TAV													
0091AG	<p><u>TRAVEL EXPENSE REIMBURSEMENT</u></p> <p>GENERIC NAME DESCRIPTION: LADS TAV                      CLIN CONTRACT TYPE:                      Firm Fixed Price                      PRON: S63UJ247EH PRON AMD: 01 ACRN: AA</p> <p>Cost reimbursement CLIN. Travel expenses are reimbursed at cost (plus G&amp;A).</p> <p>(End of narrative B001)</p> <p><u>Inspection and Acceptance</u>                      INSPECTION: Destination ACCEPTANCE: Destination</p>	1	LO		\$ 1,413.27									



**CONTINUATION SHEET**

**Reference No. of Document Being Continued**

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**PIIN/SIIN** W56HZV-12-D-0055/0013 **MOD/AMD**

**Name of Offeror or Contractor:** GUILD ASSOCIATES, INC.

CONTRACT ADMINISTRATION DATA

LINE	PRON/ AMS CD/ MIPR/ <u>GFEB</u> <u>ATA</u>	OBLG <u>STAT</u>	JO NO/ <u>ACCT ASSIGN</u>	ACRN	OBLIGATED <u>AMOUNT</u>
0081AG	S63UJ247EH	2	S.0013299.1	AA	\$ 3,159.75
0091AG	S63UJ247EH	2	S.0013299.1	AA	\$ 1,413.27
TOTAL					\$ 4,573.02

ACRN	ACCOUNTING CLASSIFICATION	OBLIGATED <u>AMOUNT</u>
AA	021 201320132020 A60EE 423012ASLT 261B L034651823 S.0013299.1	021001 \$ 4,573.02
TOTAL		\$ 4,573.02

LINE	ACRN	EDI/SFIS ACCOUNTING CLASSIFICATION	OBLIGATED <u>AMOUNT</u>
0081AG	AA	021 201320132020 A60EE 423012ASLT 261B L034651823 S.0013299.1	021001
0091AG	AA	021 201320132020 A60EE 423012ASLT 261B L034651823 S.0013299.1	021001