

**ORDER FOR SUPPLIES OR SERVICES**

1. CONTRACT/PURCH. ORDER/ AGREEMENT NO. <b>W911QY-13-D-0080</b>	2. DELIVERY ORDER/ CALL NO. <b>W911QY20F0217</b>	3. DATE OF ORDER/CALL (YYYYMMDD) <b>2020 Apr 24</b>	4. REQ/PURCH. REQUEST NO.  See Schedule	5. PRIORITY
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6. ISSUED BY W6QK ACC-APG NATICK CONTRACTING DIVISION BLDG 1 GENERAL GREENE AVENUE NATICK MA 01760-5011	CODE	<b>W911QY</b>	7. ADMINISTERED BY (if other than 6) DCMA SALT LAKE CITY 6038 ASPEN AVE, BLDG 1289 HILL AFB, DODAAC: S SALT LAKE CITY UT 84056	CODE	<b>S4501A</b>	8. DELIVERY FOB <input checked="" type="checkbox"/> DESTINATION <input type="checkbox"/> OTHER  (See Schedule if other)
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9. CONTRACTOR BIOFIRE DEFENSE, LLC 79 W 4500 S STE 14 SALT LAKE CITY UT 84107-2663	CODE	<b>088J2</b>	FACILITY	10. DELIVER TO FOB POINT BY (Date) (YYYYMMDD) <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 Net 14 Days	
13. MAIL INVOICES TO THE ADDRESS IN BLOCK See Item 15					

14. SHIP TO  <b>SEE SCHEDULE</b>	CODE		15. PAYMENT WILL BE MADE BY DEFENSE FINANCE AND ACCOUNTING SERVICE DFAS-COLUMBUS CENTER WEST ENTITLEMENT OPERATIONS P.O. BOX 182317 COLUMBUS OH 43218-2381	CODE	<b>HQ0339</b>	MARK ALL PACKAGES AND PAPERS WITH IDENTIFICATION NUMBERS IN BLOCKS 1 AND 2.
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16. TYPE OF ORDER	DELIVERY/ CALL	<input checked="" type="checkbox"/>	This delivery order/call is issued on another Government agency or in accordance with and subject to terms and conditions of above numbered contract.
	PURCHASE	<input type="checkbox"/>	Reference your quote dated Furnish the following on terms specified herein. REF:

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 type="checkbox"/> 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 TEL: 301-619-8532 EMAIL: lee.a.hess.civ@mail.mil BY: LEE A HESS	25. TOTAL <b>(b) (6)</b>	\$2,999,000.00
		26. DIFFERENCES	

27a. QUANTITY IN COLUMN 20 HAS BEEN  
 INSPECTED  RECEIVED  ACCEPTED, AND CONFORMS TO THE CONTRACT EXCEPT AS NOTED

b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE	c. DATE (YYYYMMDD)	d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE
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e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE	28. SHIP NO.	29. DO VOUCHER NO.	30. INITIALS
f. TELEPHONE NUMBER	g. E-MAIL ADDRESS		32. PAID BY
			33. AMOUNT VERIFIED CORRECT FOR

36. I certify this account is correct and proper for payment.			
a. DATE (YYYYMMDD)	b. SIGNATURE AND TITLE OF CERTIFYING OFFICER		
		31. PAYMENT <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL	34. CHECK NUMBER
			35. BILL OF LADING NO.

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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## Section B - Supplies or Services and Prices

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
5033 EXERCISED OPTION	Commercial Assay Kit Delivery FFP IAW Section C.3.3.2.2, Section J and Section B.12 The contractor shall deliver (b) (4) Respiratory Panel IVD (RP2.1 Kit) pouches in -Pac Configuration (BFDf PN. 423738) at a price of (b) (4) per pouch. The shelf- life on the commercial RP2.1 kits shall be a minimum of 4 months, on shipment to the Govt site.  The Contractor shall deliver (b) (4) pouches per month and may invoice for partial deliveries of items recieved by the Government. FOB: Destination PURCHASE REQUEST NUMBER: 0011491058 PSC CD: 6640	(b) (4)	Each	(b) (4)	\$2,997,000.00
				NET AMT	\$2,997,000.00
	ACRN AA CIN: GFEB001149105800001				\$2,997,000.00

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
5064			Each	(b) (4)	\$2,000.00
EXERCISED OPTION	PD Phase Operational Non-BWA IVD Assay D FFP PD Phase Operational Non-BWA IVD Assay Delivery IAW Section C.3.3.2.7, Section J and Section B.12, the Contractor shall deliver ECM kits in -pack configuration (PN 423748) at the price of (b) (4) per kit to the location specified in the delivery schedule.  FOB: Destination PURCHASE REQUEST NUMBER: 0011486097 PSC CD: 6640				
				NET AMT	\$2,000.00
	ACRN AB CIN: GFEBS001148609700001				\$2,000.00

Section E - Inspection and Acceptance

INSPECTION AND ACCEPTANCE TERMS

Supplies/services will be inspected/accepted at:

CLIN	INSPECT AT	INSPECT BY	ACCEPT AT	ACCEPT BY
5033	Destination	Government	Destination	Government
5064	N/A	N/A	N/A	Government



Section G - Contract Administration Data

ACCOUNTING AND APPROPRIATION DATA

(b) (4) [REDACTED] [REDACTED] [REDACTED]  
[REDACTED]  
[REDACTED]

(b) (4) [REDACTED] [REDACTED] [REDACTED]  
[REDACTED]  
[REDACTED]

ACRN	CLIN/SLIN	CIN	AMOUNT
AA	5033	GFEB001149105800001	\$2,997,000.00
AB	5064	GFEB001148609700001	\$2,000.00



(ii) For fixed price line items—

(A) That require shipment of a deliverable, submit the invoice and receiving report specified by the Contracting Officer.

2-in-1 \_\_\_\_\_

(Contracting Officer: Insert applicable invoice and receiving report document type(s) for fixed price line items that require shipment of a deliverable.)

(B) For services that do not require shipment of a deliverable, submit either the Invoice 2in1, which meets the requirements for the invoice and receiving report, or the applicable invoice and receiving report, as specified by the Contracting Officer.

(Contracting Officer: Insert either “Invoice 2in1” or the applicable invoice and receiving report document type(s) for fixed price line items for services.)

(iii) For customary progress payments based on costs incurred, submit a progress payment request.

(iv) For performance based payments, submit a performance based payment request.

(v) For commercial item financing, submit a commercial item financing request.

(2) Fast Pay requests are only permitted when Federal Acquisition Regulation (FAR) 52.213-1 is included in the contract.

[Note: The Contractor may use a WAWF “combo” document type to create some combinations of invoice and receiving report in one step.]

(3) Document routing. The Contractor shall use the information in the Routing Data Table below only to fill in applicable fields in WAWF when creating payment requests and receiving reports in the system.

Routing Data Table\*

<i>Field Name in WAWF</i>	<i>Data to be entered in WAWF</i>
Pay Official DoDAAC	HQ0490
Issue By DoDAAC	W911QY
Admin DoDAAC**	S4501A
Inspect By DoDAAC	W56XNH
Ship To Code	CLIN 5033: W62G2X CLIN 5064: W56XNH

(\*Contracting Officer: Insert applicable DoDAAC information. If multiple ship to/acceptance locations apply, insert “See Schedule” or “Not applicable.”)

\*\*Contracting Officer: If the contract provides for progress payments or performance-based payments, insert the DoDAAC for the contract administration office assigned the functions under FAR 42.302(a)(13).)



(4) Payment request. The Contractor shall ensure a payment request includes documentation appropriate to the type of payment request in accordance with the payment clause, contract financing clause, or Federal Acquisition Regulation 52.216-7, Allowable Cost and Payment, as applicable.

(5) Receiving report. The Contractor shall ensure a receiving report meets the requirements of DFARS Appendix F.

(g) WAWF point of contact.

(1) The Contractor may obtain clarification regarding invoicing in WAWF from the following contracting activity's WAWF point of contact.

COR: Om Handa, om.p.handa.civ@mail.mil

KO: Lee Hess, lee.a.hess.civ@mail.mil

KS: Susan Ruzicka, susan.e.ruzicka2.civ@mail.mil

(Contracting Officer: Insert applicable information or "Not applicable.")

(2) Contact the WAWF helpdesk at 866-618-5988, if assistance is needed.

(End of clause)