


ORDER FOR SUPPLIES OR SERVICES (FINAL)

1. CONTRACT NO. N00178-16-D-8806		2. DELIVERY ORDER NO. N6600117F3505		3. EFFECTIVE DATE 2017 Jul 28		4. PURCH REQUEST NO. 1300606017-0001		5. PRIORITY Unrated	
6. ISSUED BY SPAWAR Systems Center, Pacific 53560 Hull Street San Diego CA 92152-5001 Megan M Ashley/22530 619-553-2244			CODE N66001	7. ADMINISTERED BY DCMA HAMPTON 2000 Enterprise Parkway, Suite 200 Hampton VA 23666			CODE S5111A	8. DELIVERY FOB DESTINATION OTHER (See Schedule if other)	
9. CONTRACTOR Intellect Solutions, LLC 312-F East Market Street , Ste 114 Leesburg VA 20176-4101			CODE 341D6	FACILITY	10. DELIVER TO FOB POINT BY (Date) See Schedule		11. X IF BUSINESS IS		
					12. DISCOUNT TERMS Net 30 Days WIDE AREA WORK FLOW		X	SMALL DISADVANTAGED	
					13. MAIL INVOICES TO THE ADDRESS IN BLOCK See Section G		X	WOMEN-OWNED	
14. SHIP TO See Section D			CODE	15. PAYMENT WILL BE MADE BY DFAS Columbus Center, South Entitlement Operations P.O. Box 182264 Columbus OH 43218-2264			CODE HQ0338	MARK ALL PACKAGES AND PAPERS WITH IDENTIFICATION NUMBERS IN BLOCKS 1 AND 2.	
16. TYPE OF ORDER	DELIVERY/ CALL	x	This delivery order/call is issued on another Government agency or in accordance with and subject to terms and conditions of numbered contract.						
PURCHASE			Reference your _____ 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.						
Intellect Solutions, LLC				Mandeep President		7/28/2017			
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
	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 BY: /s/Larry D Hartpence		25. TOTAL	[REDACTED]	
					07/28/2017 CONTRACTING/ORDERING OFFICER		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		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	
					PARTIAL	32. PAID BY		33. AMOUNT VERIFIED CORRECT FOR	
f. TELEPHONE					g. E-MAIL ADDRESS				
					FINAL				
36. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT.					31. PAYMENT		34. CHECK NUMBER		
					COMPLETE				
a. DATE					b. SIGNATURE AND TITLE OF CERTIFYING OFFICER				
					PARTIAL		35. BILL OF LADING NO.		
					FULL				
37. RECEIVED AT		38. RECEIVED BY (Print)	39. DATE RECEIVED		40. TOTAL CON-TAINERS	41. S/R ACCOUNT NUMBER		42. S/R VOUCHER NO.	