ORDER FOR SUPPLIES OR SERVICES

1. CONTRACT/PURCH ORDER/AGREEMENT NO.	2. DELIVERY ORDER/CALL NO.	3. DATE OF ORDER/CALL (YYYYMMMDD)	4. REQUISITION/PURCH REQUEST NO.	5. PRIORITY
SPE300-21-A-9427		2021 JUL 15		

6. ISSUED BY CODE SPE300

DLA TROOP SUPPORT
DIRECTORATE OF SUBSISTENCE
700 ROBBINS AVENUE
PHILADELPHIA PA 19111-5096
USA
Local Admin: Amy Paradis Tel: 215-737-3637
Email: Amy.Paradis@dla.mil

7. ADMINISTERED BY (*If other than 6*) CODE SPE300

DLA TROOP SUPPORT
DIRECTORATE OF SUBSISTENCE
700 ROBBINS AVENUE
PHILADELPHIA PA 19111-5096
USA
Criticality: Pre-Award Survey : None

8. DELIVERY FOB
- [X] DESTINATION
- [ ] OTHER (*See Schedule if other*)

9. CONTRACTOR CODE 0FU76 FACILITY

NAME AND ADDRESS
BUFFALO ROCK COMPANY
DBA PEPSICO
2377 SHERMAN AVE
PANAMA CITY FL 32405-6240
USA

10. DELIVER TO FOB POINT BY (*Date*) (*YYYYMMMDD*)

11. X IF BUSINESS IS
- [ ] SMALL
- [ ] SMALL DISAD-VANTAGED
- [ ] WOMEN-OWNED

12. DISCOUNT TERMS
Net 10 days

13. MAIL INVOICES TO THE ADDRESS IN BLOCK
Submit Invoices IAW DFARS 252.232-7003

14. SHIP TO CODE

SEE SCHEDULE, DO NOT SHIP TO ADDRESSES ON THIS PAGE

15. PAYMENT WILL BE MADE BY CODE SL4701

DEF FIN AND ACCOUNTING SVC
BSM
P O BOX 182317
COLUMBUS OH 43218-2317
USA

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 above 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.

Buffalo Rock	Chad	Chad Peak GSM	7-15-21
NAME OF CONTRACTOR	SIGNATURE	TYPED NAME AND TITLE	DATE SIGNED (YYYYMMMDD)

[X] If this box is marked, supplier must sign Acceptance and return the following number of copies: 1

17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE

18. ITEM NO.	19. SCHEDULE OF SUPPLIES/SERVICES	20. QUANTITY ORDERED/ ACCEPTED*	21UNIT	22. UNIT PRICE	23. AMOUNT
	See Schedule	0.000			

* *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
MCKENDRY.CARRIE.L.1368986620 Digitally signed by MCKENDRY.CARRIE.L.1368986620 Date: 2021.07.15 14:12:25 -04'00'
CONTRACTING/ORDERING OFFICER

25. TOTAL $1.00

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 (*YYYYMMMDD*) | d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE

e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE

f. TELEPHONE NUMBER | g. E-MAIL ADDRESS

28. SHIP. NO.

29. D.O. VOUCHER NO.

30. INITIALS

31. PAYMENT
- [ ] PARTIAL
- [ ] FINAL

32. PAID BY

33. AMOUNT VERIFIED CORRECT FOR

34. CHECK NUMBER

36. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT.

a. DATE (*YYYYMMMDD*) | b. SIGNATURE AND TITLE OF CERTIFYING OFFICER

- [ ] COMPLETE
- [ ] PARTIAL
- [ ] FINAL

35. BILL OF LADING NO.

37. RECEIVED AT	38. RECEIVED BY	39. DATE RECEIVED (*YYYYMMMDD*)	40. TOTAL CON-TAINERS	41. S/R ACCOUNT NUMBER	42. S/R VOUCHER NO.