

ORDER FOR SUPPLIES OR SERVICES							PAGE 1 OF 2																								
1. CONTRACT/PURCH ORDER NO N00178-06-D-4875		2. DELIVERY ORDER NO 0001		3. DATE OF ORDER June 1, 2006		4. REQUISITION PURCH REQUEST NO XDS100/40922241																									
6. ISSUED BY Naval Surface Warfare Center, Dahlgren Division Attn: XDS106 17320 Dahlgren Road Dahlgren, VA 22448-5100			7. ADMINISTERED BY (If other than Item 6) DCMA Maryland 217 East Redwood Street Suite 1800 Baltimore, MD 21202-5299		8. DELIVERY FOR <input checked="" type="checkbox"/> DEST OTHER (Source) (See Schedule if other)																										
9. CONTRACTOR SPECTRUM SCIENCES, INC. 44425 Airport Road Suite 100 P.O. Box 788 California, MD 20619			10. DELIVER TO FOB POINT BY (Date) (YYMMDD) See Schedule		12. DISCOUNT TERMS Net 30 days																										
14. SHIP TO See Schedule			15. PAYMENT WILL BE MADE BY DFAS-CO/South Entitlement Operations P.O. Box 182264 Columbus, OH 43218-2264			13. MAIL INVOICES TO See Block 15																									
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%; padding: 2px;">16 TYPE OF ORDER</td> <td style="width:10%; padding: 2px;">DELIVERY</td> <td style="width:10%; padding: 2px;"><input checked="" type="checkbox"/></td> <td style="padding: 2px;">X</td> <td colspan="4" style="padding: 2px;">This delivery order is issued on another Government agency or in accordance with and subject to terms and conditions of above numbered contract.</td> </tr> <tr> <td colspan="3" style="padding: 2px;">PURCHASE</td> <td colspan="5" style="padding: 2px;">Reference your _____ furnish the following on terms specified herein.</td> </tr> <tr> <td colspan="8" style="padding: 2px;">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 THE TERMS AND CONDITIONS SET FORTH, AND AGREES TO PERFORM THE SAME.</td> </tr> </table>								16 TYPE OF ORDER	DELIVERY	<input checked="" type="checkbox"/>	X	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 _____ 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 THE TERMS AND CONDITIONS SET FORTH, AND AGREES TO PERFORM THE SAME.							
16 TYPE OF ORDER	DELIVERY	<input checked="" type="checkbox"/>	X	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 _____ 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 THE TERMS AND CONDITIONS SET FORTH, AND AGREES TO PERFORM THE SAME.																															
<table style="width:100%;"> <tr> <td style="width:30%;"><i>SPECTRUM Sciences</i></td> <td style="width:30%;"></td> <td style="width:30%;"><i>Roy Spicuzza President</i></td> <td style="width:10%;"><i>7/1/06</i></td> </tr> <tr> <td>NAME OF CONTRACTOR</td> <td>SIGNATURE</td> <td>TYPED NAME AND TITLE</td> <td>DATE SIGNED (YYMMDD)</td> </tr> </table>								<i>SPECTRUM Sciences</i>		<i>Roy Spicuzza President</i>	<i>7/1/06</i>	NAME OF CONTRACTOR	SIGNATURE	TYPED NAME AND TITLE	DATE SIGNED (YYMMDD)																
<i>SPECTRUM Sciences</i>		<i>Roy Spicuzza President</i>	<i>7/1/06</i>																												
NAME OF CONTRACTOR	SIGNATURE	TYPED NAME AND TITLE	DATE SIGNED (YYMMDD)																												
<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 ACR AA: 97X4930 NH1C 000 7777 0 000167 2F 000000 99549SEAPORT \$2,501.00 (Document N6554004RC00089, ACR AA)																															
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 <i>Gary W. Byram</i> CONTRACTING/ORDERING OFFICER		25. TOTAL \$2,501.00																									
26. QUANTITY IN COLUMN 20 HAS BEEN <input type="checkbox"/> INSPECTED <input type="checkbox"/> RECEIVED <input type="checkbox"/> ACCEPTED, AND CONFORMS TO THE CONTRACT EXCEPT AS NOTED				27. SHIP NO		28. DO VOUCHER NO																									
DATE _____ SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE _____				<input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		29. DIFFERENCES																									
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		30. INITIALS																									
DATE _____ SIGNATURE AND TITLE OF CERTIFYING OFFICER _____						32. PAID BY																									
						33. AMOUNT VERIFIED CORRECT FOR																									
						34. CHECK NUMBER																									
						35. BILL OF LADING NO																									
37. RECEIVED AT		38. RECEIVED BY (Print)		39. DATE RECEIVED		40. TOTAL CONTAINERS																									
						41. S/R ACCOUNT NUMBER																									
						42. S/R VOUCHER NO																									