

MATERIAL INSPECTION AND RECEIVING REPORT

Form Approved
OMB No. 0704-0248

Public reporting burden for this collection of information is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports, 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302, and to the Office of Management and Budget, Paperwork Reduction Project(0704-0248), Washington, DC 20503. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.

**PLEASE DO NOT RETURN YOUR COMPLETED FORM TO EITHER OF THESE ADDRESSES.
SEND THIS FORM IN ACCORDANCE WITH THE INSTRUCTIONS CONTAINED IN THE DFARS, APPENDIX F-401.**

1. PROCUREMENT INSTRUMENT ID (CONTRACT) NO. SPRDL1-15-C-9001		ORDER NO.	6. INVOICE NO./DATE	7. PAGE 1	OF 2	8. ACCEPTANCE POINT Source
2. SHIPMENT NO. MPT0001	3. DATE SHIPPED 2020JUL18	4. B/L TCN X1HLD90200A001XXX	5. DISCOUNT TERMS B			
9. PRIME CONTRACTOR Mil-Pac Technology 1672 Main Street Ramona, CA 92065			10. ADMINISTERED BY DCMA ORLANDO 3555 MAGUIRE BLVD ORLANDO, FL 32803-3726			
11. SHIPPED FROM (if other than 9) Mil-Pac Technology 1672 Main Street Ramona, CA 92065		11. SHIPPED FROM CODE 1HLD9	11. SHIPPED FROM FOB: D	12. PAYMENT WILL BE MADE BY DFAS-COLUMBUS CENTER SOUTH ENTITLEMENT OPERATIONS P.O BOX 182264 COLUMBUS, OH 43218-2264		
13. SHIPPED TO SU W4GG HQ US ARMY TACOM TEAM ARMOR PARTNERSHIP FACILITY WHSE BLDG 88037 LOGISTICS LANE FORT HOOD, TX 76544-5060			14. MARKED FOR RECEIVING OFFICER NON-MILSTRIP			

15. ITEM NO.	16. STOCK/PART NO. <small>(Indicate number of shipping containers - type - container number.)</small>	DESCRIPTION	17. QUANTITY SHIP/REC'D *	18. UNIT	19. UNIT PRICE	20. AMOUNT
0001AA	5998-01-562-6596 MICROWAVE RECEIVER ASSM P/N: 12472808-2 UID: D2429012472808-2000001 D2429012472808-2000002 D2429012472808-2000003		3	EA	12,765.00	\$38,295.00
	----- RFID Container Data -----					
Pallet Case 0001AA 0001AA 0001AA	2F02031323334350000000F4 2F12031323334350000000F5 UID: D2429012472808-2000001 UID: D2429012472808-2000002 UID: D2429012472808-2000003					
	SHIPPING WT: 22	CUBE:	CNTRS:		Sub-Total: \$38,295.00 Freight Charge: \$0.00 Total Amount: \$38,295.00	

21. CONTRACT QUALITY ASSURANCE		22. RECEIVER'S USE	
<input checked="" type="checkbox"/> CQA <input checked="" type="checkbox"/> ACCEPTANCE of listed items has been made by me or under my supervision and they conform to contract, except as noted herein or on supporting documents.		Quantities shown in column 17 were received in apparent good condition except as noted.	
<input type="checkbox"/> CQA <input type="checkbox"/> ACCEPTANCE of listed items has been made by me or under my supervision and they conform to contract, except as noted herein or on supporting documents.		DATE RECEIVED _____ SIGNATURE OF AUTHORIZED GOVT REP _____ TYPED NAME: _____ TITLE: _____ ADDRESS: _____ COMMERCIAL PHONE NO: _____	
DATE _____ SIGNATURE OF AUTHORIZED GOVT REP _____ TYPED NAME: SW3218 TITLE: MPC DLA DISTRIBUTION SAN DIEGO RECV ADDRESS: 3581 CUMMINGS ROAD BLDG 3581 SAN DIEGO, CA 92136-3581 (US)	DATE _____ SIGNATURE OF AUTH GOVT REP _____ TYPED NAME: _____ TITLE: _____ ADDRESS: _____ COMMERCIAL PHONE NO: _____	*If quantity received by the Government is the same as quantity shipped, indicate by a checkmark; if different, enter actual quantity received below quantity shipped and encircle.	

This is a basic shipment which can be used as the framework for any number of other tests.

WAWF Receiving Report / Invoice (continuation)

Form Complies
With FAR 53.105

PAGE 2 OF 2

SHIPMENT NO. MPT0001		DATE SHIPPED 2020JUL18	PROC. INSTRUMENT IDEN. (CONTRACT) SPRDL1-15-C-9001	(ORDER) NO.	INVOICE NO.
-------------------------	--	---------------------------	---	-------------	-------------

ITEM NO.	STOCK/PART NO. <small>(Indicate number of shipping containers - type of container - container number.)</small>	DESCRIPTION	QUANTITY SHIP/RECD	UNIT	UNIT PRICE	AMOUNT
Pallet 0001AA 0001AA	2F02031323334350000000F6 2F12031323334350000000F7 2F12031323334350000000F8	D2429012472808-2000001 D2429012472808-2000002				
Pallet 0001AA	2F02031323334350000000F9 2F12031323334350000000FA	D2429012472808-2000003				