



SUPPLIER DATA SHEET

IF YOU DESIRE TO BECOME A POTENTIAL SUPPLIER TO DRS TEST & ENERGY MANAGEMENT, LLC (TEM), PLEASE COMPLETE THE FOLLOWING AND SEND TO:

DRS Test & Energy Mgt., LLC
 P.O. Box 1929
 110 Wynn Drive
 Huntsville, Alabama 35807-0929
 Attn: Purchasing Department
 Fax: 256-895-2039

1. FULL NAME OF COMPANY:	CONTACT NAME AND TELEPHONE:		
ADDRESS OF SALES OFFICE:	ADDRESS OF PLANT:		
2. PRIMARY PRODUCT OR CAPABILITY:	SECONDARY PRODUCT OR CAPABILITY		
3. CHECK ONE: CORPORATION <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> INDIVIDUAL <input type="checkbox"/>			
TAXPAYER IDENTIFICATION NUMBER (TIN):			
SUBSIDIARY OF:	SUBSIDIARIES:		
NO. OF EMPLOYEES NORMALLY ASSIGNED TO:			
FACTORY _____	TECHNICAL _____	ADMINISTRATION _____	TOTAL _____
PLANT AREA (SQ. FT.) ASSIGNED TO:			
FACTORY _____	TECHNICAL _____	ADMINISTRATION _____	TOTAL _____
4. PLANT MACHINERY AND EQUIPMENT:	DESCRIBE SPECIAL LABORATORY FACILITIES:		
DESCRIBE LIMITING FACTORS SUCH AS MATERIAL SIZE, TOLERANCE, VOLUME:			
5. PRINCIPAL PRODUCTS MANUFACTURED IN THE PAST	PRINCIPAL CUSTOMER	MIL.	NON-MIL.
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

SUPPLIER DATA SHEET (Continued)

6. NAMES OF COMPANIES OR GOV. AGENCIES FOR WHOM WORK IS PRESENTLY BEING DONE IN PLANT.		
NAME	NAME	
_____	_____	
_____	_____	
7. NAMES AND ADDRESSES OF CONCERNS WHO CAN PROVIDE INDEPENDENT DATA ON PAST DELIVERY PERFORMANCE.		
COMPANY	INDIVIDUAL	ADDRESS AND PHONE:
_____	_____	_____
_____	_____	_____
8. PLANT CAPACITY IMMEDIATELY AVAILABLE:		
9. DATE STARTED DOING BUSINESS:		ANNUAL SALES VOLUME FOR PAST THREE YEARS:
APPROXIMATE CAPITAL INVESTMENT \$ _____		NET WORTH \$ _____
LIST PRINCIPAL BANKING REFERENCE:		
10. (A) IF APPROVED EITHER TO ISO-9001 OR 9002 QUALITY ASSURANCE SPECIFICATIONS, BY WHOM:		
(B) IF NOT, BRIEFLY DESCRIBE ORGANIZATIONAL STRUCTURE RELATIVE TO QUALITY ASSURANCE.		
(C) DOES YOUR FIRM USE STATISTICAL PROCESS CONTROL (SPC) METHODS?		
11. THE UNDERSIGNED CERTIFIES TO PEI ELECTRONICS, INC. THAT:		
(A) IT IS <input type="checkbox"/>	IS NOT <input type="checkbox"/>	A SMALL BUSINESS CONCERN AS DEFINED BY THE SMALL BUSINESS ADMINISTRATION - SEE FAR 52.219-1 OR CFR TITLE 13 PART 121
(B) IT IS <input type="checkbox"/>	IS NOT <input type="checkbox"/>	A SMALL BUSINESS CONCERN AT LEAST 51% OWNED AND CONTROLLED BY SOCIALLY AND ECONOMICALLY DISADVANTAGED INDIVIDUALS AS DEFINED BY PUBLIC LAW, FAR 52.219-8 OR 19.101.
(C) IT IS <input type="checkbox"/>	IS NOT <input type="checkbox"/>	AT LEAST 51% OWNED AND CONTROLLED BY A WOMAN OR WOMEN.
(D) IT IS <input type="checkbox"/>	IS NOT <input type="checkbox"/>	A HUBZONE SMALL BUSINESS CONCERN.
(E) IT IS <input type="checkbox"/>	IS NOT <input type="checkbox"/>	A SERVICE-DISABLED VETERAN OWNED SMALL BUSINESS CONCERN.
(F) IT IS <input type="checkbox"/>	IS NOT <input type="checkbox"/>	A VETERAN-OWNED SMALL BUSINESS CONCERN.
SUBMITTED BY:	TITLE:	DATE: