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	, NG	t Inc	rease:	\$2,093.00	
13. THIS NEW ONLY APPLIES TO MOUN					
	IFICATION OF CONTRACTS/ORDE	- KS. 11 MC	DIFIES THE CONTRACT/ORDER NO. AS	DESCRIBED IN ITEM 14.	
A. THIS CHANGE ORDER IS ISSUED PUR ORDER NO IN ITEM 10A. B THE ABOVE NUMBERED CONTRACT/C appropriation date, etc.) SET FORTH IN					
appropriation date, etc.) SETFORTHIN	THEM 14, PURSDANT TO THE AU	HORNY	OF FAR 43.103(b)		
C. THIS SUPPLEMENTAL AGREEMENT IS	SENTERED INTO PURSUANT TO	AUTHORI	TY OF:		
D. OTHER (Specify type of modification and					
X UNILATERAL MODIFCATION			0 conjes to the issu		
	is required to sign this document a				
DESCRIPTION OF AMENDMENT/MODIFICATION (Org	ganized by UCF section headings, i	iriciuaing s	plicitation/contract subject matter where fea	3SIDIE.)	
SPITAL ID#: 6A802016					
SIC CONTRACT: 10/01/09 THRU	09/30/10				
dification 0001 to contract	CPSC+N-10-0088 is	herek	by issued to provide f	full funding for	C
e period of April 1, 2010 th	rough September 30	D, 201	_0.	-	
a result, the contract is h	ereby increased by	y \$2,0)93 from \$2,093 to a t	otal of \$4,186.	.00
scount Terms:					
ntinued					
cept as provided herein, all terms and conditions of the do	ocument referenced in Item 9A or 10				
A. NAME AND TITLE OF SIGNER (Type or print)		16A. N	NAME AND TITLE OF CONTRACTING OF	FIGER (Type or print)	
		Don	na Hutton		
B CONTRACTOR/OFFEROR	15C. DATE SIGNED	16B L	INITED STATES OF AMERICA	16C. DATE	SIGNED
		1	Jour Glatte	1 ->!	1.
	- 1		(Signature of Contracting Officer)	<u> </u>	<u>, , , 0,</u>
(Signature of person authonzed to sign)					^{(*} 10-83)
N 7540-01-152-8070				STANDARD FORM 30 (REV Prescribed by GSA	
	J	٨	Gtenluson	STANDARD FORM 30/(REV Prescribed by GSA FAR (48 CFR) 53 243	

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CONTINUATION SHEET	CPSC-N-10-0088/0001	2	2
NAME OF OFFEROR OR CONTRAC	TOR		

NORTHEAST ALABAMA REGIONAL MED CTR

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ITEM NO	SUPPLIES/SERVICES	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
(A)	(B)	(,,)		(上)	(Г)
	Net 30 Payment: CONSUMER PRODUCT SAFETY COMMISSION DIVISION OF FINANCIAL SERVICES 4330 EAST WEST HWY ROOM 522 BETHESDA MD 20814 FOB: Destination				
	Change Item 0001 to read as follows(amount shown is the obligated amount):		}		
0001	ESTIMATED QUANTITY ACCESS ONLY TO NEISS SURVEILLANCE REPORTS, SPECIAL SURVEY REPORTS AND SUPPLEMENTAL/SPECIAL STUDY REPORTS IN ACCORDANCE WITH THE ATTACHED STATEMENT OF WORK.	2300	EA	0.91	2,093.
	MINIMUM QTY: 1,150 MAXIMUM QTY: 5,750				
	Period of Performance: 10/01/2009 to 09/30/2010				