AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT			1. CONTRACT ID CODE	PAGE OF PAGES		
	ATION OF CON		<u> </u>	1 3		
2. AMENDMENT/MODIFICATION NO. 3. EFFECTIVE DATE			4. REQUISITION/PURCHASE REQ. NO. 5. PROJECT NO. (If applicable)			
0003	See Block	100	REQ-4310-17-0114 7. ADMINISTERED BY (If other than Item 6) CODE			
6.ISSUED BY CODE CONSUMER PRODUCT SAFETY COMM DIV OF PROCUREMENT SERVICES 4330 EAST WEST HWY	FMPS MISSION		ADMINISTERED BY (If other than Item 6)	CODE		
ROOM 523 BETHESDA MD 20814						
B. NAME AND ADDRESS OF CONTRACTOR (No., street	t, county, State and ZIP	Code) (X	9A. AMENDMENT OF SOLICITATION NO.			
WELLSTAR DOUGLAS HOSPITAL			9B. DATED (SEE ITEM 11)			
3954 HOSPITAL DRIVE FRNT DOUGLASVILLE GA 30134-2272			BB. UNIED (SEE NEW 11)			
		×	10A. MODIFICATION OF CONTRACT/ORDER CPSC-N-14-0097	R NO.		
			10B. DATED (SEE ITEM 13)			
CODE	FACILITY CODE		06/30/2014			
	11. THIS ITEM	ONLY APPLIES TO AME	ENDMENTS OF SOLICITATIONS			
separate letter or telegram which includes a reference THE PLACE DESIGNATED FOR THE RECEIPT OF virtue of this amendment you desire to change an off reference to the solicitation and this amendment, and	e to the solicitation as OFFERS PRIOR TO er already submitted I is received prior to t	nd amendment numbers THE HOUR AND DATE , such change may be n	E SPECIFIED MAY RESULT IN REJECTION OF nade by telegram or letter, provided each telegra	TO BE RECEIVED AT YOUR OFFER If by		
12. ACCOUNTING AND APPROPRIATION DATA (If req 0100A17RSE 2017 1117900000 1			Increase:	\$5,243.00		
13. THIS ITEM ONLY APPLIES TO A	MODIFICATION OF C	ONTRACTS/ORDERS.	IT MODIFIES THE CONTRACT/ORDER NO. AS	DESCRIBED IN ITEM 14.		
A. THIS CHANGE ORDER IS ISSUED ORDER NO. IN ITEM 10A.	PURSUANT TO: (Sp	ecify authority) THE CI	HANGES SET FORTH IN ITEM 14 ARE MADE I	N THE CONTRACT		
B. THE ABOVE NUMBERED CONTRA appropriation date, etc.) SET FORT	CT/ORDER IS MODE H IN ITEM 14, PURS	FIED TO REFLECT TH SUANT TO THE AUTHO	E ADMINISTRATIVE CHANGES (such as chang RITY OF FAR 43,103(b).	ges in paying office,		
C. THIS SUPPLEMENTAL AGREEMEN	NT IS ENTERED INT	O PURSUANT TO AUT	HORITY OF:			
D. OTHER (Specify type of modification						
X Exercise Option - Un	nilateral N	Modification	, FAR 52.217-9			
E. IMPORTANT: Contractor is not.	100.00	gn this document and r				
14. DESCRIPTION OF AMENDMENT/MODIFICATION DUNS Number: HOSPITAL ID#: 8A272077	I (Organized by UCF	section headings, Inclu	ding solicitation/contract subject matter where fe	asible.)		
COR: Randolph Mitchell						
PHONE: (301) 504-6962						
EMAIL: rmitchell@cpsc.gov						
Modification# 0003 to contra	act CPSC-N-	14-0097 is	hereby issued to provide	additional		
funding for option period to	wo, and exe	ercise option	n period three as follow	s:		
1. The quantity for Line ite	em 0003 is	increased b	y 100 to a new total qua	ntity of 5,100.		
Continued						
Except as provided herein, all terms and conditions of 15A, NAME AND TITLE OF SIGNER (Type or print)	the document referer	nced in Item 9 A or 10A.	as heretofore changed, remains unchanged and 16A, NAME AND TITLE OF CONTRACTING C			
			Greg A. Grayson			
15B CONTRACTOR/OFFEROR	15	iC. DATE SIGNED	16B UNITED STATES OF AMERICA	16C. DATE SIGNED		
(Signature of person authorized to sign)			(Signature of Untracting Officer)	3/1//2		
NSN 7540-01-152-8070				STANDARD FORM 30 (REV. 10-83)		

NSN 7540-01-152-8070 Previous edition unusable STANDARD FORM 30 (REV. 10 Prescribed by GSA FAR (48 CFR) 53.243 CONTINUATION SHEET REFERENCE NO. OF DOCUMENT BEING CONTINUED CPSC-N-14-0097/0003

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NAME OF OFFEROR OR CONTRACTOR
WELLSTAR DOUGLAS HOSPITAL

ITEM NO.	SUPPLIES/SERVICES (B)	QUANTITY (C)	(D)	UNIT PRICE	AMOUNT (F)
	2. As a result, funding is added for line item 0003 in the amount of \$113.00.				
	3. As a result of the above, funding for option period two (July 1, 2016 through June 30, 2017) is increased by \$113.00 to a new total of \$5,763.00.				
	4. In accordance with FAR Clause 52.217-9, Option to Extend the Term of the Contract, the Consumer Product Safety Commission hereby exercises option period three for the period beginning July 1, 2017 through June 30, 2018. Pricing is in accordance with line item 0004.				
	5. The funded quantity for line item 0004 is increased from 0 to 4,500.				
	6. As a result, funding is added for line item 0004 in the amount of \$5,130.00.				
	7. As a result of the above, funding is added in the amount of \$5,130.00 for option period three for the performance period July 1, 2017 through June 30, 2018. Additional funding will be provided via modification at a later date when funding becomes available.				
	Change Item 0003 to read as follows(amount shown is the obligated amount):				
	OPTION PERIOD 2 JULY 1, 2016 THROUGH JUNE 30, 2017				
0003	Not To Exceed: 5,100	100	EA	1.13	113.00
	Access only to NEISS Surveillance Reports, Special Survey Reports, and Supplemental/Special Study Reports in accordance with the attached statement of work.				
	Change Item 0004 to read as follows(amount shown is the obligated amount):				
	OPTION PERIOD 3 JULY 1, 2017 THROUGH JUNE 30, 2018				
0004	Not To Exceed: 4,500	-1400	EA	1.14	5,130.00
	Continued				

		PAGE	OF	
CONTINUATION SHEET	CPSC-N-14-0097/0003	3	3	

NAME OF OFFEROR OR CONTRACTOR
WELLSTAR DOUGLAS HOSPITAL

EM NO.	SUPPLIES/SERVICES	QUANTITY		UNIT PRICE	AMOUNT
A)	(B)	(C)	(D)	(E)	(F)
	Access only to NEISS Surveillance Reports,			1	
	Special Survey Reports, and Supplemental/Special	1			
	Study Reports in accordance with the attached				
	statement of work.				
	Quantity: 4,500 @ \$1.14 = \$5,130.00				
	ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED AND IN FULL FORCE AND EFFECT.				
				1	