| AMENDMEN | T OF SOLICITATION/MOD | IFICATION OF CONTRACT | | 1. CONTRACT ID CODE | | PAGE OF PAGES | | | | |
|--|---|---|---|--|--------------|-------------------------------------|--|--|--|--|
| 2 AMENDMEN | /MODIFICATION NO. | 3. EFFECTIVE DATE | 4. RI | EQUISITION/PURCHASE REQ. NO. | 5. PR | OJECT NO. (If applicable) | | | | |
| 0009 | | 10/26/2009 | | | | | | | | |
| 6. ISSUED BY | Ç | DDE FMPS | 7. A | DMINISTERED BY (If other than Item 6) | CODE | FMPS | | | | |
| CONSUMER PRODUCT SAFETY COMMISSION DIV OF PROCUREMENT SERVICES 4330 EAST WEST HWY ROOM 517 BETHESDA MD 20814 | | | | CONSUMER PRODUCT SAFETY COMMISSION DIV OF PROCUREMENT SERVICES 4330 EAST WEST HWY ROOM 517 BETHESDA MD 20814 | | | | | | |
| 8. NAME AND A | DDRESS OF CONTRACTOR (No., | street, county, State and ZIP Code) | (4) 5 | A. AMENDMENT OF SOLICITATION NO. | | | | | | |
| 3. 14 and 7 (18) (18) (18) (18) (18) (18) (18) (18) | | | | <u> (X)</u> | | | | | | |
| THE CHILDRENS HOSPITAL OF PHILADELPHIA ATTN BRANDON CALDERON 34TH ST AND CIVIC CENTER BLVD ER DEPT ROOM 8416 MAIN | | | | 9B. DATED (SEE ITEM 11) 10A. MODIFICATION OF CONTRACT/ORDER NO. CPSC-N-08-0066 | | | | | | |
| PHILADELPHIA PA 19104-4318 | | | | | | | | | | |
| CODE | | FACILITY CODE | \ | 0B. DATED <i>(SEE ITEM 13)</i> 01/02/2008 | | | | | | |
| | | 11. THIS ITEM ONLY APPLIE | | | | | | | | |
| THE PLACE I virtue of this a reference to the 12. ACCOUNTIN | DESIGNATED FOR THE RECEIPT mendment you desire to change at a solicitation and this amendment, G AND APPROPRIATION DATA | OF OFFERS PRIOR TO THE HOUR A n offer already submitted, such change and is received prior to the opening ho (If required) | AND DATE S may be made our and date s | | YOUR OF | FFER. If by makes | | | | |
| 09 PS EX | FM 4310 11179 2521 | | | · · · · · · · · · · · · · · · · · · · | | | | | | |
| | 13. THIS ITEM ONLY APPLIES | TO MODIFICATION OF CONTRACTS/0 | RDERS. IT | MODIFIES THE CONTRACT/ORDER NO. AS | DESCRIBE | ID IN ITEM 14. | | | | |
| CHECK ONE | A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A. | | | | | | | | | |
| | B. THE ABOVE NUMBERED CONTRACT/ORDER IS MODIFIED TO REFLECT THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation date, etc.) SET FORTH IN ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b). | | | | | | | | | |
| (| C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF: | | | | | | | | | |
| - 1 | D. OTHER (Specify type of modification and authority) | | | | | | | | | |
| X | UNILATERAL MODIFICATION, FAR 43.103(b) | | | | | | | | | |
| E. IMPORTANT: | Contractor X is no | ot, is required to sign this docume | ent and retur | copies to the issu | uing office. | | | | | |
| DUNS Numb | er:4 ID# 3P824022 | | | solicitation/contract subject matter where fea | | | | | | |
| | | | | illance reports for FY- | -2009 | as follows: | | | | |
| TIEMS #4 | and #5 are change | ed as follows: (see | page 2 | | | | | | | |
| For FY-20 \$61,122.5 | | nt of this contract | is in | creased by \$592.53, fro | m \$60 | ,530.00 to | | | | |
| | | | | | | | | | | |
| Continued | | | | | | | | | | |
| Except as provided herein, all terms and conditions of the document referenced in Item 9A or 10A 15A. NAME AND TITLE OF SIGNER (Type or print) | | | | 16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print) | | | | | | |
| | | | Do | ris B. Kessler | | | | | | |
| 15B. CONTRAC | OR/OFFEROR | 15C. DATE SIGN | IED 16B | UNITED STATES OF MERICA | 1. | 16C. DATE SIGNED | | | | |
| (\$ | gnature of person authorized to sign) | | 1 | (Signature of Contracting Officer) | m | 10/26/2009 | | | | |
| NSN 7540-01-15 Previous edition | | | | | | RD FORM 30 (REV. 10-83) d by GSA | | | | |
| | | | | | | CFR) 53.243 | | | | |

REFERENCE NO OF DOCUMENT BEING CONTINUED CPSC-N-08-0066/0009

PAGE OF

2

NAME OF OFFEROR OR CONTRACTOR

THE CHILDRENS HOSPITAL OF PHILADELPHIA

| ITEM NO. | SUPPLIES/SERVICES (B) | QUANTITY UNIT | UNIT PRICE | AMOUNT (F) |
|----------|---|---------------|------------|--------------------------|
| (A) | (D) | (0) | | (17) |
| | TOTAL QTY FOR ITEM #4: 17,171/ea TOTAL QTY FOR ITEM #5: 1,801/ea | | | |
| | Change Item 0004 to read as follows(amount shown is the obligated amount): | | | |
| 0004 | OPTION PERIOD: 10/01/08 THRU 09/30/09 | 171 EA | 3.46 | 591.66 |
| | ESTIMATED QUANTITY NEISS SURVEILLANCE REPORTS AND SPECIAL SURVEY REPORTS. | | | |
| | MINIMUM QTY: 3,000 MAXIMUM QTY: 17,171 | | | |
| | Period of Performance: 10/01/2008 to 09/30/2009 | | | |
| | Change Item 0005 to read as follows(amount shown is the obligated amount): | | | |
| 0005 | ESTIMATED QUANTITY SUPPLEMENTAL/SPECIAL STUDY REPORTS. | 1 EA | 0.87 | .87 |
| | MINIMUM QTY: 10 MAXIMUM QTY: 1,801 | | | |
| | Period of Performance: 10/01/2008 to 09/30/2009 | | | |
| | ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED AND IN FULL FORCE AND EFFECT. | | | |
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| | | <u> </u> | | OPTIONAL FORM 336 (4-86) |