

AMENDMENT OF SOLICITATION/MODIFIC	ATION OF CONTRACT	1. CONTRACT ID CODE	PAGE OF PAGES				
2. AMENDMENT/MODIFICATION NO.	3. EFFECTIVE DATE	4. REQUISITION/PURCHASE REQ. NO.	5. PROJECT NO. (If applicable)				
0003	09/21/2010						
6. ISSUED BY CODE	FMPS	7. ADMINISTERED BY (If other than Item 6) CODE FMPS					
CONSUMER PRODUCT SAFETY COMM 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 ADDRESS OF CONTRACTOR (No., stree	t, county, State and ZIP Code)	(x) 9A. AMENDMENT OF SOLICITATION NO.					
TARALE ANDERSON		 					
CAROLE ANDERSON ATTN CAROLE ANDERSON		9B. DATED (SEE ITEM 11)					
TITY CAROLL AND INCOM		os. syntas (ota y y y					
PITTSFIELD MA 01201		x CPSC-N-10-0013					
CODE	TACH TO CODE	10B. DATED (SEE ITEM 13)					
CODE	FACILITY CODE 11. THIS ITEM ONLY APPLIES TO	11/13/2009					
The above numbered solicitation is amended as set for Offers must acknowledge receipt of this amendment of Items 8 and 15, and returning separate letter or telegram which includes a reference THE PLACE DESIGNATED FOR THE RECEIPT OF I	onor to the hour and date specified in the pies of the amendment; (b) By acknowled to the solicitation and amendment numb	solicitation or as amended, by one of the following dging receipt of this amendment on each copy of the bers. FAILURE OF YOUR ACKNOWLEDGEMENT	ne offer submitted; or (c) By TTO BE RECEIVED AT				
virtue of this amendment you desire to change an offe	r already submitted, such change may b	e made by telegram or letter, provided each telegra					
reference to the solicitation and this amendment, and 12. ACCOUNTING AND APPROPRIATION DATA (If rec		· · · · · · · · · · · · · · · · · · ·	A2 F00 00				
0100A10DPS 2010 1117900000 E		: Increase:	\$3,598.00				
13. THIS ITEM ONLY APPLIES TO M	ODIFICATION OF CONTRACTS/ORDER	IS. IT MODIFIES THE CONTRACT/ORDER NO. AS	S DESCRIBED IN ITEM 14.				
		CHANGES SET FORTH IN ITEM 14 ARE MADE THE ADMINISTRATIVE CHANGES (such as char- HORITY OF FAR 43.103(b).					
C. THIS SUPPLEMENTAL AGREEMEN	T IS ENTERED INTO PURSUANT TO A	UTHORITY OF:	•				
D. OTHER (Specify type of modification	and authority)						
X UNILATERAL MODIFICAT	'ION, FAR 43.103(b)						
E. IMPORTANT: Contractor X is not.	is required to sign this document an	d return O copies to the is	suing office.				
14 DESCRIPTION OF AMENDMENT, MODIFICATION DUNS Number: HOSPITAL ID# 3B031112	(Organized by UCF section headings, in	ciuding solicitation/contract subject matter where fi	easible.)				
Modification No. 0003 adjust	-	rveillance reports for FY	-2010 as follows:				
ITEM #1 is changed as follow	s: (see page 2).		•				
For FY-2010 the total amount \$43,123.92.	of this contract is	increased by \$3,598.00,	from \$39,525.92 to				
Oambia wad							
Continued	is document informated in them DA == 40	as haralatara channed cameias unchanned	l in full force and effect				
Except as provided herein, all terms and conditions of the 15A. NAME AND TITLE OF SIGNER (Type or print)	io qualifierit referenceu in stem 9A 01 10/	16A, NAME AND TITLE OF CONTRACTING C					
		Doris B. Kessler					
15B. CONTRACTOR/OFFEROR	. 15C. DATE SIGNED	16B. UNITED STATES OF AMERICA	18C. DATE SIGNED 09/21/2010				
(Signature of person authorized to sign)		(Signature of Contracting Officer)					
NSN 7540-01-152-8070 Previous edition unusable			STANDARD FORM 30 (REV. 10-83) Prescribed by GSA FAR (48 CFR) 53.243				

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED	PAGE ()F
	CPSC-N-10-0013/0003	2	2

NAME OF OFFEROR OR CONTRACTOR CAROLE ANDERSON

ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	· (E)	(F)
	TOTAL QTY FOR ITEM #1: 15,900/EA		\Box		
	Diagount Torms		li		
	Discount Terms: Net 30				
	Payment:				
	CONSUMER PRODUCT SAFETY COMMISSION				
	DIVISION OF FINANCIAL SERVICES				
	4330 EAST WEST HWY	1	1 1		
	ROOM 522 BETHESDA MD 20814		1 1	·	
	FOB: Destination				
	Period of Performance: 10/01/2009 to 09/30/2010		li		
	Change Item 0001 to read as follows(amount shown				
	is the obligated amount):		1 1		
0001	ESTIMATED QUANTITY	1400	E A	2.57	3,598.
300T	NEISS SURVEILLANCE REPORTS AND SPECIAL SURVEY	1400	EA	2.3/	3,090.
	REPORTS IN ACCORDANCE WITH THE ATTACHED STATEMENT	1	1 1		
	OF WORK.				
	2.605		li		
	MINIMUM QTY: 3,625 MAXIMUM QTY: 18,125				
	10,125		1 1		
			11		
	ALL ORNER TERMS AND GOVERNMENT AND INVOICED AND		11		
	ALL OTHER TERMS AND CONDITIONS ARE UNCHANGED AND IN FULL FORCE AND EFFECT.		11		
	IN FULL FORCE AND EFFECT.	1	1 1		
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