۲,	······				6			
AMENDMENT OF SOLICITATION/MO	DIFICATION OF CONT	RACT	1 CONTRACT ID CODE		PAGE OF PAGES			
2 AMENDMENT/MODIFICATION NO.	3. EFFECTIVE DATE	4	REQUISITION/PURCHASE REQ.	NO. 5. F	ROJECT NO. (If applicable)			
0003	03/01/2010							
5. ISSUED BY	CODE FMPS		7. ADMINISTERED BY (If other than Item 6) CODE FMPS					
CONSUMER PRODUCT SAFETY COMMISSION			CONSUMER PRODUCT SAFETY COMMISSION					
DIV OF PROCUREMENT SERVICES			DIV OF PROCUREMENT SERVICES					
4330 EAST WEST HWY			4330 EAST WEST HWY					
ROOM 517 BETHESDA MD 20814			ROOM 517 BETHESDA MD 20814					
B. NAME AND ADDRESS OF CONTRACTOR (No	o., street, county, State and ZIP Co	de) (x	) SA. AMENDMENT OF SOLICITA	TION NO.				
DENISE BALES			9B DATED (SEE ITEM 11)					
ASTRO VALLEY CA 94546-36	09							
			10A. MODIFICATION OF CONTI	RACT/ORDER NO.				
			× CPSC-N-10-0021					
			TOB. DATED (SEE ITEM 13)					
CODE	FACILITY CODE	1	11/18/2009					
		Y ADDULES TO AM	ENDMENTS OF SOLICITATIONS					
					lis not extended			
The above numbered solicitation is amended a Offers must acknowledge receipt of this amend		-						
Items 8 and 15, and returning	•		ng receipt of this amendment on eac	-	••••			
separate letter or telegram which includes a ref								
THE PLACE DESIGNATED FOR THE RECEIF virtue of this amendment you desire to change					•			
reference to the solicitation and this amendmer	•							
ACCOUNTING AND APPROPRIATION DATA			Increase:	\$11,	096.00			
100A10DPS 2010 111790000								
13. THIS ITEM ONLY APPLIES	TO MODIFICATION OF CON	TRACTS/ORDERS.	IT MODIFIES THE CONTRACT/OR	DER NO. AS DESCRI	BED IN ITEM 14.			
CHECK ONE A. THIS CHANGE ORDER IS ISS	UED PURSUANT TO: (Speci	fy authority) THE CI	HANGES SET FORTH IN ITEM 14	ARE MADE IN THE C	ONTRACT			
ORDER NO IN ITEM 10A.								
B. THE ABOVE NUMBERED COL	NTRACT/ORDER IS MODIFIE	D TO REFLECT TH	E ADMINISTRATIVE CHANGES (s RITY OF FAR 43.103(b).	uch as changes in pa	ying office,			
	ORTHING CONTA, FORSOM		R117 OF FAR 40. 100(0).					
C. THIS SUPPLEMENTAL AGRE	EMENT IS ENTERED INTO P	URSUANT TO AUT	HORITY OF.					
	_							
D. OTHER (Specify type of modifi	cation and authority)							
X UNILATERAL MODIFI	CATION, FAR 43	.103(b)						
. IMPORTANT: Contractor 🗵 is	not. 🗌 is required to sign t	his document and re	turn 0 cop	ies to the issuing offic	e.			
4. DESCRIPTION OF AMENDMENT/MODIFICA	TION (Organized by UCF sec	tion headings, inclu	ding solicitation/contract subject ma	tter where feasible.)				
UNS Number:	þ							
OSPITAL ID# 75012042								
odification No. 0001 pro	vides additiona	1 funding	in the amount of	\$11,096.00	through			
eptember 30, 2010. THIS	CONTRACT IS NO	W FULLY FU	NDED FOR FY-2010.					
OTAL QTY FOR ITEM #1: 6	,000/EA							
OTAL QTY FOR ITEM #2:	300/EA							
ontinued								
xcept as provided herein, all terms and condition	is of the document referenced	in Item 9A or 10A. a	s heretofore changed, remains und	nanged and in full for	e and effect			
5A. NAME AND TITLE OF SIGNER (Type or prin	and the second		16A. NAME AND TITLE OF CONTI					
			Doris B. Kessler					
58 CONTRACTOR/OFFEROR	15C. DATE SIGNED		16B. UNITED STATES OF AMERICA / 16C. DATE SIGNED					
JE CONTRACTOR/UFFERUR	130. L		NUL UNITED STATES OF AMERIC	1. 1	INU, DATE BIGNED			
		{	Uno (0.1	) Lesel	2 03/01/2010			
(Signature of person authorized to sign) ISN 7540-01-152-8070		l	(Signature of Contract		ARD FORM 30 (REV. 10-83)			
Previous edition unusable				Prescri	bed by GSA			
				FAR (4	8 CFR) 53 243			

05

CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED CPSC-N-10-0021/0003

NAME OF OFFEROR OR CONTRACTOR DENISE BALES

ITEM NO	SUPPLIES/SERVICES	QUANTITY	1 1		AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	TOTAL AMOUNT FUNDED FOR FY-2010: \$16,644.00				
	Discount Terms: 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 NEISS SURVEILLANCE REPORTS AND SPECIAL SURVEY REPORTS IN ACCORDANCE WITH THE ATTACHED STATEMENT OF WORK.	4000	EA	2.74	10,960.0
	MINIMUM QTY: 1,500 MAXIMUM QTY: 7,500				
	Period of Performance: 10/01/2009 to 09/30/2010				
	Change Item 0002 to read as follows(amount shown is the obligated amount):				
002	ESTIMATED QUANTITY SUPPLEMENTAL/SPECIAL STUDY REPORTS IN ACCORDANCE WITH THE ATTACHED STATEMENT OF WORK.	200	EA	0.68	136.0
	MINIMUM QTY: 30 MAXIMUM QTY: 300				
	Period of Performance: 10/01/2009 to 09/30/2010 ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED AND IN FULL FORCE AND EFFECT.				
		}			

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