AMENDMENT/MODIFICATION NO.  1003  ISSUED BY CODE  CONSUMER PRODUCT SAFETY COMN	3. EFFECTIVE DATE	4 RE				1 -	
CODE CONSUMER PRODUCT SAFETY COMP	00/12/2010		DUISITION/PURCHASE REQ. NO.	5. PR	1 OJECT NO	). (If applicable)	
CONSUMER PRODUCT SAFETY COMM	09/13/2010						
	FMPS	7. AD	MINISTERED BY (If other than Item 6)	CODE	FMPS	3	
THE AR PROPERTIONAL CONTINUES.	MISSION	CON	SUMER PRODUCT SAFETY	COMMIS	SION		
IV OF PROCUREMENT SERVICES		1	DIV OF PROCUREMENT SERVICES				
4330 EAST WEST HWY			4330 EAST WEST HWY				
DOM 517 ETHESDA MD 20814		1	ROOM 517				
SINESDA ND 20014		DEI	HESDA MD 20814				
NAME AND ADDRESS OF CONTRACTOR (No., stree	if, county, State and ZIP Code)	(x) 9A	. AMENDMENT OF SOLICITATION NO.				
NLEY MICHELE							
		98	. DATED (SEE ITEM 11)				
NESBOROUGH TN 37659-6118							
		x 10	A. MODIFICATION OF CONTRACT/ORDE	R NO.			
		C	PSC-N-10-0055				
		1-1	B. DATED (SEE ITEM 13)		~~~		
DE	FACILITY CODE	→ 1.					
IZ		1 1	2/30/2009				
The above numbered solicitation is amended as set for	11. THIS ITEM ONLY APPLIES TO			xtended.	(****************	udondo d	
Offers must acknowledge receipt of this amendment p					American Committee		
tems 8 and 15, and returning co	pies of the amendment; (b) By acknow	redging re	ceipt of this amendment on each copy of the	offer subn	nitted; or (d	:) By	
separate letter or telegram which includes a reference							
THE PLACE DESIGNATED FOR THE RECEIPT OF intue of this amendment you desire to change an offe						<i>(</i>	
eference to the solicitation and this amendment, and	is received prior to the opening hour a						
ACCOUNTING AND APPROPRIATION DATA (If rec	quired) N∈	et Inc	rease:	\$1,70	1.00		
e Schedule  13. THIS ITEM ONLY APPLIES TO M	MODIFICATION OF CONTRACTS/ORD	ERS. IT M	ODIFIES THE CONTRACT/ORDER NO. AS	DESCRIBE	D IN ITEM	114.	
A. THIS CHANGE ORDER IS ISSUED FORDER NO. IN ITEM 10A.	PURSUANT TO: (Specify authority) Th	HE CHANG	GES SET FORTH IN ITEM 14 ARE MADE I	N THE COI	NTRACT		
B. THE ABOVE NUMBERED CONTRAC	CT/ORDER IS MODIFIED TO REFLEC	T THE AD	MINISTRATIVE CHANGES (such as chang OF FAR 43.103(b).	es in payin	g office,		
appropriation date, etc.) SET FOR TR	TIN ITEM 14, PURSUANT TO THE AC	UINORIII	OF PAR 43, 103(b).				
C. THIS SUPPLEMENTAL AGREEMEN	IT IS ENTERED INTO PURSUANT TO	AUTHOR	ITY OF:				
D. OTHER (Specify type of modification							
X   Unilaterial Modifica	tion , FAR 43.103 (	(b)					
MPORTANT: Contractor Sis not	Is required to sign this document a	and return	O copies to the issu	uing office.			
DESCRIPTION OF AMENDMENT/MODIFICATION	(Organized by UCF section headings,	including s	colicitation/contract subject matter where fe	asible.)	•••		
NS Number:							
OSPITAL ID#126913446							
•							
dification 0003 adjusts the	e quantity of surve	illan	ce reports for FY-2010	as f	ollow	s:	
EM #1 is changed as follow	s: (see page 2).						
r FY-2010 the total amount	of this contract i	s inc	reased by \$1,701.00, f	from \$	24,81	3.52 to	
6,514.52.							
•							
	ie document referenced in Item 9A or 1	IOA, as her	etofore changed, remains unchanged and it	n full force :	and effect.		
ntinued		1464	NAME AND TITLE OF CONTRACTING OF	FICER (Ty	pe or print)		
ntinued pept as provided herein, all terms and conditions of the		IDA.					
ntinued cept as provided herein, all terms and conditions of th		- 1	is B. Kessler				
ontinued cept as provided herein, all terms and conditions of the A. NAME AND TITLE OF SIGNER (Type or print)		Dor	is B. Kessler		100	NATE SIGNED	
ontinued cept as provided herein, all terms and conditions of the A. NAME AND TITLE OF SIGNER (Type or print)	15C. DATE SIGNED	Dor	is B. Kessler	1.	160	C. DATE SIGNED	
ontinued cept as provided herein, all terms and conditions of the A. NAME AND TITLE OF SIGNER (Type or print)  B. CONTRACTOR/OFFEROR  (Signature of person authorized to sign)		Dor		der		2. DATE SIGNED 9/13/2010	

CONTRACTOR OFFEE	REFERENCE NO. OF DOCUMENT BEING CONTINUED	PAGE	OF
CONTINUATION SHEET	CPSC-N-10-0055/0003	2	2

NAME OF OFFEROR OR CONTRACTOR HENLEY MICHELE

ITEM NO.	SUPPLIES/SERVICES		UNIT	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
0001	TOTAL QTY FOR ITEM #1: 5,132/EA  Change Item 0001 to read as follows(amount shown is the obligated amount):  ESTIMATED QUANTITY NEISS SURVEILLANCE REPORTS AND SPECIAL SURVEY REPORTS IN ACCORDANCE WITH THE ATTACHED STATEMENT	350	EΑ	4.86	1,701.0
	OF WORK.  MINIMUM QTY: 1,350  MAXIMUM QTY: 6,750				
	Accounting Info: 10-PS-EXFM-4310 Funded: \$0.00 Accounting Info: 0100A10DPS-2010-1117900000-EXFM004310-252E0 Funded: \$1,701.00  ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED AND IN FULL FORCE AND EFFECT.				