AMENDMENT OF SOLICITATION/MODIFIC	ATION OF CONTRACT	1 CONTRACT ID GODE	PAGE OF PAGES			
			1 2			
2. AMENDMENT/MODIFICATION NO.	3. EFFECTIVE DATE	4. REQUISITION/PURCHASE REQ. NO.	5. PROJECT NO (if applicable)			
0003	08/30/2012	7. ADMINISTERED BY (If other than item 6)	CODE			
CODE CONSUMER PRODUCT SAFETY COMM DIV OF PROCUREMENT SERVICES 4330 EAST WEST HWY ROOM 517 BETHESDA MD 20814	FMPS MISSION	7. ADMINISTERED OF ITOTHER BEAT HOLD CY				
8. NAME AND ADDRESS OF CONTRACTOR (No., street	t, county, State and ZIP Code)	(x) 9A. AMENDMENT OF SOLICITATION NO				
YALE-NEW HAVEN HOSPITAL 20 YORK STREET TMP 109 NEW HAVEN CT 06504		98 DATED (SEE ITEM 11)  x 10A MODIFICATION OF CONTRACT/ORDER NO. CPSC-N-12-0110  108 DATED (SEE ITEM 13)				
COOE 3000	FACILITY CODE	02/22/2012				
	11. THIS ITEM ONLY APPLIES TO	AMENDMENTS OF SOLICITATIONS				
CHECK ONE A. THIS CHANGE ORDER IS ISSUED ORDER NO. IN ITEM 10A.	IODIFICATION OF CONTRACTS/ORDER PURSUANT TO: (Specify Buthonly) THE	RS. IT MODIFIES THE CONTRACT/ORDER NO. AS E CHANGES SET FORTH IN ITEM 14 ARE MADE THE ADMINISTRATIVE CHANGES (such as chan ITHORITY OF FAR 43 103(b).	IN THE CONTRACT			
	IT IS ENTERED INTO PURSUANT TO A					
D OTHER (Specify type of modification	<i>"</i>					
X UNILATERAL MODIFICAT	YION, FAR 43.103(b)					
8. IMPORTANT: Confractor is not.	is required to sign this document an					
14 DESCRIPTION OF AMENDMENT MODIFICATION DUNS Number: 0 Hospital ID: 68683034 CGR: Tom Schroeder PHONE: 301-504-7431 EMAIL: tschroeder@cpsc.gov	[Constitution of the control of the	escong assertation contract despet tracter where t	essure.)			
Modification # 0003 to contr funding for the period of Ja 522,113.00. As a result:						
i~ The quantity for Line Ite Continued			•			
Except as provided herein, all terms and conditions of the 15A. NAME AND TITLE OF SIGNER (Type or print)	re document referenced in Item 9A or 10	A as heretofore changed, remains unchanged and 16A NAME AND TITLE OF CONTRACTING O Doris B. Kessler				
158. CONTRACTOR/OFFEROR	15C DATE SIGNED	160 UNITED STATES OF AMERICA	16C. DATE SIGNED 08/30/2012			
(Signature of person authorized to sign) NSN 7540-01-152-8078		(Signature of Contracting Officer)				
Previous edition unusable			STANDARD FORM 30 (REV 10-83) Prescribed by GSA FAR (48 CFR) 53.243			

CONTINUATION SHEET CPSC	REFERENCE NO. OF DOCUMENT BEING CONTINUED	PAGE C	)F				
	CPSC-N-12-0110/0003	2	2				

NAME OF OFFEROR OR CONTRACTOR
YALE-NEW HAVEN HOSPITAL

ITEM NO.	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	2- The quantity for Line Item 0004 is increased by 2,100, from 5,000 to 7,100.				
	As a result of the above, funding for option period one is increased by \$22.113.00 to \$114,713.00.				
	Change Item 0003 to read as follows(amount shown is the obligated amount):				
	FIRST OPTION PERIOD - JULY 1, 2012 THROUGH JUNE 30, 2013				
0003	NOT TO EXCEED NEISS SURVEILLANCE REPORTS AND SPECIAL SURVEY REPORTS IN ACCORDANCE WITH THE ATTACHED STATEMENT OF WORK. Quantity: 4,500 @ \$4.41 = \$19,845.00 Fully Funded Obligation Amount\$236,155.50	53550	ΞA	4.41	19,845.00
	Change Item 0004 to read as follows(amount shown is the obligated amount):				
	NOT TO EXCEED SUPPLEMENTAL/SPECIAL STUDY REPORTS IN ACCORDANCE WITH THE ATTACHED STATEMENT OF WORK. Quantity: 2,100 @ \$1.08 = \$2,268.00 Fully Funded Obligation Amount\$14,742.00	13650	EA	1.06	2,268.00
	ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED AND IN FULL FORCE AND EFFECT.				
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SN 7540-01-152-80					