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.	1 2 5. PROJECT NO. (if applicable)			
0002	09/30/2011	. Augustivist grothet new ng.	J. P. NOJEGS RO. (II applicatio)			
6. ISSUED BY CODE	CPSC	7. ADMINISTERED BY (if other than Item 6)	CODE FMPS			
CONSUMER PRODUCT SAFETY COMM 4330 EAST WEST HIGHWAY BETHESDA MD 20814	L	CONSUMER PRODUCT SAFETY COMMISSION DIV OF PROCUREMENT SERVICES 4330 EAST WEST HWY ROOM 517 BETHESDA MD 20814				
8. NAME AND ADDRESS OF CONTRACTOR (No., street	I, county, State and ZIP Code)	(A) 9A. AMENDMENT OF SOLICITATION NO.				
		(X) SAL AMENDMENT OF SOLICITATION NO.				
CUYAHOGA COUNTY CORONERS OFF ATTN KATHLEEN SPINOS ACCOUNT 11001 CEDAR AVENUE CLEVELAND OH 44106-3043		98 DATED (SEE ITEM 11) x 10A MODIFICATION OF CONTRACT/ORD. CPSC-G-11-0008	ER NO.			
		10B. DATED (SEE ITEM 13)	/			
CODE COLLEGE	FACILITY CODE	12/03/2010				
	11. THIS ITEM ONLY APPLIES TO	AMENDMENTS OF SOLICITATIONS				
CHECK ONE A. THIS CHANGE ORDER IS ISSUED FORDER NO. IN ITEM 10A.	ODIFICATION OF CONTRACTS/ORDEPURSUANT TO: (Specify authority) TH	RB. IT MODIFIES THE CONTRACT/ORDER NO. A E CHANGES SET FORTH IN ITEM 14 ARE MADE T THE ADMINISTRATIVE CHANGES (such as chairthority OF FAR 43.103(b).	IN THE CONTRACT			
C THIS SUPPLEMENTAL AGREEMEN		AUTHORITY OF:				
D OTHER (Specify type of modification						
X UNILATERAL MODIFICAT E IMPORTANT: Contractor	☐ Is required to sign this document a	ind return 0 copies to the it	Andrea office			
14 DESCRIPTION OF AMENDMENT/MODIFICATION DUNS Number: PROJECT OFFICER: Randolph Mi PHONE: (301) 504-6962 EMAIL: rmitchell@cpsc.gov	(Organized by UCF section headings,		<u>-</u>			
Modification No. 0002 adjust	s the quantity of M	ECAP reports for FY-2011.				
ITEM #1 is changed as follow	s: (see page 2).					
The total amount of this con	tract is decreased	by \$390.00, from \$10,200.0	00 to \$9,810.00.			
Continued						
Except as provided herein, eliterms and conditions of the	ne document referenced in Item 9A or 1					
15A. NAME AND TITLE OF SIGNER (Type or print)		Doris B. Kessler	OFFICER (1998 OF PRINT)			
15B CONTRACTOR/OFFEROR	15C. DATE SIGNED	16B UNITED STATES OF AMERICA	16C DATE SIGNED 09/30/2011			
(Signature of person authorized to sign)		(Signature of Contracting Officer)	STANDARD FORM 30 (REV. 10-83)			
NSN 7540-01-152-8070 Previous edition unusable		/	Prescribed by GSA FAR (48 CFR) 53.243			

7	REFERENCE NO. OF DOCUMENT BEING CONTINUED	PAGE C	F
CONTINUATION SHEET	CPSC-G-11-0008/0002	2	2

NAME OF OFFEROR OR CONTRACTOR

CUYAHOGA COUNTY CORONERS OFFICE

ITEM NO.	SUPPLIES/SERVICES	QUANTITY	1	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	TOTAL QTY FOR ITEM #1: 654/EA Discount Terms: Net 30 Payment: CPSC Accounts Payable Branch AMZ 160 P. O. Box 25710 Oklahoma City OK 73125 FOB: Destination Period of Performance: 10/01/2010 to 09/30/2011 Change Item 0001 to read as follows(amount shown is the obligated amount):				
0001	MEDICAL EXAMINER'S/CORONER'S ALERT PROGRAM (MECAP) REPORTS TO BE SUBMITTED FOR THE PERIOD OCTOBER 1, 2010 THROUGH SEPTEMBER 30, 2011, IN ACCORDANCE WITH THE ATTACHED STATEMENT OF WORK.	-26	EA	15.00	-390.0
	ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED AND IN FULL FORCE AND EFFECT.				