AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT

1. CONTRACT ID CODE  4. REQUISITION/PURCHASE REQ. NO.  5. PROJECT NO. (if applicable)
2. AMENDMENT/MODIFICATION NO.  3. EFFECTIVE DATE  7. ADMINISTERED BY (if other than item 6) CODE
0004  09/29/2010  FMPS

CONSUMER PRODUCT SAFETY COMMISSION
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

6. ISSUED BY CODE  8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)
6. ISSUED BY CODE
FMPS

9A. AMENDMENT OF SOLICITATION NO.

9B. DATED (SEE ITEM 11)

10A. MODIFICATION OF CONTRACT/OFFER NO.
CPSC-N-10-0042

10B. DATED (SEE ITEM 13)
11/27/2009

11. THE ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS

☐ The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of offers is extended. ☐ is not extended.
Offer must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning ___ copies of the amendment, (b) By acknowledging receipt of this amendment on each copy of the offer submitted, or (c) By separate letter or telegram which includes a reference to the solicitation and amendment numbers. Failure of your acknowledgement to be received at the place designated for the receipt of offers prior to the hour and date specified may result in rejection of your offer. If by virtue of this amendment you desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified.

12 ACCOUNTING AND APPROPRIATION DATA (if required)

Net Increase: $877.80

See Schedule

13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.

CHECK ONE

☐ A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A

☐ B. THE ABOVE REFERENCED CONTRACT/OFFER IS MODIFIED TO REFLECT THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation date, etc.) SET FORTH IN ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b)

☐ C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:

☐ D. OTHER (Specify type of modification and authority)

☐ UNILATERAL MODIFICATION, FAR 43.103(b)

E. IMPORTANT: Contractor ☑ is not ☐ is required to sign this document and return ___ copies to the issuing office

14 DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible)

DUNS Number: [redacted]
HOSPITAL ID# 6N553042
BASIC CONTRACT: 10/01/009 THRU 09/30/10

Modification No. 0004 adjusts the quantity of surveillance reports for FY-2010 as follows:

ITEM #1 is changed as follows: (see page 2).

For FY-2010 the total amount of this contract is increased by $877.80, from $45,480.00 to $46,357.80.

Continued ...

Except as provided herein, all terms and conditions of the document referenced in Item 9A or 10A, as hereafter changed, remains unchanged and in full force and effect.

15A. NAME AND TITLE OF SIGNER (Type or print)

16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)

Doris B. Kessler

15B. CONTRACTOR/OFFEROR  15C. DATE SIGNED  16B. UNITED STATES OF AMERICA

16C. DATE SIGNED

09/29/2010

(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
TOTAL QTY FOR ITEM #1: 19,180/EA
Discount Terms:
    Net 30
Payment:
    CONSUMER PRODUCT SAFETY COMMISSION
    DIVISION OF FINANCIAL SERVICES
    4330 EAST WEST HWY
    ROOM 522
    BETHESDA MD 20814
FOB: Destination
Period of Performance: 10/01/2009 to 09/30/2010
Change Item 0001 to read as follows (amount shown is the obligated amount):

<table>
<thead>
<tr>
<th>ITEM NO.</th>
<th>SUPPLIES/SERVICES</th>
<th>QUANTITY</th>
<th>UNIT PRICE</th>
<th>AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>0001</td>
<td>ESTIMATED QUANTITY</td>
<td>380 EA</td>
<td>2.31</td>
<td>877.80</td>
</tr>
</tbody>
</table>

NEISS SURVEILLANCE REPORTS AND SPECIAL SURVEY REPORTS IN ACCORDANCE WITH THE ATTACHED STATEMENT OF WORK.

MINIMUM QTY: 3,600
MAXIMUM QTY: 19,180

Accounting Info:
10-PS-EXFM-4310
Funded: $0.00

Accounting Info:
010GA10DPS-2010-11179000000-EXFM004310-252E0
Funded: $877.80

ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED AND IN FULL FORCE AND EFFECT.