2 AMENDMEN	AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT				1. CONTRACT ID CODE	ĺ	PAGE OF PAGES		
0003	IT/MODIFICATION NO.		3. EFFECTIVE DATE	4. R	EQUISITION/PURCHASE REQ. NO.	5. PR	1 2 DJECT NO. (If applicable)		
			02/28/2011				, ., .		
6 ISSUED BY	(FMPS	7. /	ADMINISTERED BY (If other than Item 6)	CODE			
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8. NAME AND	ADDRESS OF CONTRACTOR (No	o., street, e	county, State and ZIP Code)	(x)	9A. AMENDMENT OF SOLICITATION NO.				
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	LIA KOZEL				9B. DATED (SEE ITEM 11)				
243 ELM									
LAKEMON	T NH 03743			x	10A MODIFICATION OF CONTRACT/ORD	ER NO.			
					CFSC-N-10-00/4				
					10B. DATED (SEE ITEM 13)				
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	numbered solicitation is amended a					avianded	☐ is not extended.		
	acknowledge receipt of this amend 15, and returning		· ·		tation or as amended, by one of the following receipt of this amendment on each copy of the				
separate lett	ter or telegram which includes a ref	ference I	o the solicitation and amendr	nent numbers	FAILURE OF YOUR ACKNOWLEDGEMEN	T TO BE RE	CEIVED AT		
					SPECIFIED MAY RESULT IN REJECTION (de by telegram or letter, provided each telegr				
	the solicitation and this amendmen						1)		
	ING AND APPROPRIATION DATA				ncrease:	\$5,32	5,00		
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STANDARD FORM 30 (REV. 10-83) Prescribed by GSA FAR (48 CFR) 53,243

CONTINUATION BUTTER	REFERENCE NO. OF DOCUMENT BEING CONTINUED	PAGE O	F
CONTINUATION SHEET	CPSC-N-10-0074/0003	2	2

NAME OF OFFEROR OR CONTRACTOR
VALLEY REGIONAL HOSPITAL

ITEM NO.	SUPPLIES/SERVICES	QUANTITY		UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	TOTAL QTY FOR ITEM #2: 7,500/EA				
	Change Item 0002 to read as follows(amount shown is the obligated amount):				
0002	ACCESS ONLY TO NEISS SURVEILLANCE REPORTS,	2100		2 12	5 20° 00
0002	SPECIAL SURVEY REPORTS AND SUPPLEMENTAL/SPECIAL STUDY REPORTS.	-2100	EA	2.13	5,325.0
	MINIMUM QTY: 625 MAXIMUM QTY: 3,125				
	ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED AND IN FULL FORCE AND EFFECT.				
	1				
	-				