CONSUMER PRODUCT SAFETY COMMISSION
DIV OF PROCUREMENT SERVICES
4330 EAST WEST HWY
ROOM 517
BETHESDA MD 20814

YALE-NEW HAVEN HOSPITAL
ATTN TUCKER LEARY VP ADMINISTRATION
20 YORK STREET
TMP 109
NEW HAVEN CT 06504

The purpose of this modification is to provide additional funding for FY-2011.

Additional funds in the amount of $42,390.00 are provided for the period of April 1, 2011 through June 30, 2011. The remaining funds will be provided, by modification, at a later date.

The total amount of this contract is increased by $42,390.00, from $107,910.00 to $150,300.00.

Doris B. Kessler

03/28/2011

DUNS Number: 6B683034

HOSPITAL ID: 6B683034

STANDARD FORM 30 (REV. 10-93)
Prev. edition unavailable
Total Qty for Item #3: 32,000/EA  
Total Qty for Item #4: 8,500/EA  

Change Item 0003 to read as follows: (Amount shown is the obligated amount):  
0003 NEISS Surveillance Reports and Special Survey Reports for the Quantity of 9,000 EA @ $4.41 = $39,690.00.  
Obligated Amount: $39,690.00  

Change Item 0004 to read as follows: (Amount shown is the obligated amount):  
0004 Supplemental/Special Study Reports for the Quantity of 2,500 EA @ $1.08 = $2,700.00.  
Obligated Amount: $2,700.00  

All other terms and conditions remain unchanged and in full force and effect.