## Amendment of Solicitation/Modification of Contract

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<tr>
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<tbody>
<tr>
<td>FMPS</td>
<td>1</td>
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<tr>
<td>FMPS</td>
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</tbody>
</table>

### 2. Amendment/Modification No.
- 0001

### 3. Effective Date
- 09/13/2010

### 4. Requisition/Purchase Req. No.
- \[\text{If applicable}\]

### 5. Project No. (If applicable)
- \[\text{If applicable}\]

### 6. Issued By
- CONSUMER PRODUCT SAFETY COMMISSION
- DIV OF PROCUREMENT SERVICES
- 4330 EAST WEST HWY
- ROOM 517
- BETHESDA MD 20814

### 7. Administered By (If other than Item 6)
- CONSUMER PRODUCT SAFETY COMMISSION
- DIV OF PROCUREMENT SERVICES
- 4330 EAST WEST HWY
- ROOM 517
- BETHESDA MD 20814

### 8. Name and Address of Contractor
- WINONA COMMUNITY MEMORIAL HOSPITAL
- ATTN: RACHELLE SCHULTZ, CEO/ADMIN
- 855 MANKATO AVENUE
- WINONA, MN 55987-0600

### 9. Amendment of Solicitation No.
- \[\text{If applicable}\]

### 10. Modification of Contract/Order No.
- CPSC-N-10-0132

### 11. Dated (See Item 11)
- 03/22/2010

### 12. Accounting and Appropriation Data (If required)
- Net Decrease: $-1,301.12
- 0100A10DPS-2010-1117900000-EXFM004310-252E0

### 13. This Item Only Applies to Modifications of Contracts/Orders. It Modifies the Contract/Order No. As Described in Item 14.

### 14. Description of Amendment/Modification

**Modification No. 0001 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 decreased by $1,301.12, from $12,185.60 to $10,884.48.

**Continued...**

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

### 15A. Name and Title of Signer (Type or Print)
- Doris B. Kessler

### 15B. Contractor/Offeror
- NSN 7540-01-152-6070
- Previous edition unusable

### 16A. Name and Title of Contracting Officer (Type or Print)

### 16B. United States of America
- Standard Form 30 (REV 10-83)
- Prescribed by DSA
- FAR (49 CFR) 53.243
<table>
<thead>
<tr>
<th>ITEM NO.</th>
<th>SUPPLIES/SERVICES</th>
<th>QUANTITY</th>
<th>UNIT</th>
<th>UNIT PRICE</th>
<th>AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>0001</td>
<td>NEISS SURVEILLANCE REPORTS AND SPECIAL SURVEY REPORTS IN ACCORDANCE WITH THE ATTACHED STATEMENT OF WORK.</td>
<td>-214 EA</td>
<td>6.08</td>
<td>-1,301.12</td>
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</tbody>
</table>

TOTAL QTY FOR ITEM #1: 1,786/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

Change Item 0001 to read as follows (amount shown is the obligated amount):

ESTIMATED QUANTITY

MINIMUM QTY: 500
MAXIMUM QTY: 2,500

Period of Performance: 10/01/2009 to 09/30/2010

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