1. CONTRACT ID CODE 1

2 AMENDMENT/MODIFICATION NO. 001

3. EFFECTIVE DATE 04/14/2011

4. REQUISITION/PURCHASE REQ. NO.

5. PROJECT NO. (If applicable)

CONSUMER PRODUCT SAFETY COMMISSION
4330 EAST WEST HIGHWAY
BETESDA MD 20814

6. NAME AND ADDRESS OF CONTRACTOR
CARLE FOUNDATION HOSPITAL
ATTN MS LYNNE BARNES VP OPERATIONS
HEALTH INFORMATION MANAGEMENT
611 WEST PARK STREET
URBANA IL 61801

7. ADMINISTERED BY (If other than item 6) CODE CPSC

8. CODE

9. AMENDMENT OF SOLICITATION NO.

10. MODIFICATION OF CONTRACT/ORDER NO. CPSC-N-11-0008

11. AMENDMENT OF MODIFICATION NO.

12. AMENDMENT/ MODIFICATION NO. 001

13. DATED (SEE ITEM 11) 02/24/2011

14. PERIOD OF PERFORMANCE: 10/01/10 THRU 09/30/11

The purpose of this modification is to correct the hospital's ID number:
FROM: 9V212018
TO: 8C203018

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

Continued...

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