AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT			1. CONTRACT ID CODE		PAGE OF PAGES		
2 AMENDMENT/MODIFICATION NO.	3. EFFECTIVE DATE	4. F	REQUISITION/PURCHASE REQ. NO	5. PF	ROJECT NO (If applicable)		
0003	01/23/2013	RE	Q-4310-13 - 0150	İ			
6 ISSUED BY	CODE FMPS	7.	ADMINISTERED BY (If other than Item 6)	COD	E		
CONSUMER PRODUCT SAFETY DIV OF PROCUREMENT SERVING 4330 EAST WEST HWY ROOM 523 BETHESDA MD 20814							
8 NAME AND ADDRESS OF CONTRACTOR (N	o , street, county, State and ZIP Code)	(x)	9A AMENDMENT OF SOLICITATION NO.		1 to		
BROOKHAVEN MEMORIAL MEDIC 101 HOSPITAL ROAD PATCHOGUE NY 11772-4870	AL CENTER		9B DATED (SEE ITEM 11) 10A MODIFICATION OF CONTRACT/ORG	DER NO			
			10B DATED (SEE ITEM 13)	,			
CODE	FACILITY CODE		02/22/2012				
The same of the sa	11. THIS ITEM ONLY APP	LIES TO AMEN	DMENTS OF SOLICITATIONS				
Items 8 and 15, and returning separate letter or telegram which includes a rel THE PLACE DESIGNATED FOR THE RECEIF virtue of this amendment you desire to change reference to the solicitation and this amendment	ference to the solicitation and amendr PT OF OFFERS PRIOR TO THE HOU an offer already submitted, such char	ment numbers. UR AND DATE nge may be mai	SPECIFIED MAY RESULT IN REJECTION de by telegram or letter, provided each teleg	IT TO BE RE	ECEIVED AT PEFER. If by		
12 ACCOUNTING AND APPROPRIATION DATA			ncrease:	\$31,9	925.0C		
0100A13DSE 2013 111790000			MODIFIES THE CONTRACT/ORDER NO. /				
C. THIS SUPPLEMENTAL AGRE	EEMENT IS ENTERED INTO PURSU		ADMINISTRATIVE CHANGES (such as cha ITY OF FAR 43.103/b) ORITY OF	anges in pay	ing office,		
D. OTHER (Specify type of modil	ication and authority)						
X UNILATERAL MODIF	ICATION, FAR 43.103	3 (b)			/////// // // // // // // // // // // /		
: IMPORTANT: Contractor 🕸 is	•			-	•		
14 DESCRIPTION OF AMENDMENT/MODIFICA DUNS Number: 26 Hospital ID# 6N701034 COR: Dennis B. Wierdak Email: DWierdak@cpsc.gov Cel: 301-504-7430	THERE (DIGBINZED BY OUR SECTION RE	eaunys, Inc.yoli	ig sommanorveomraet Subject matter Where	(eda)0(6.)			
Modification # 0003 to co period of 7/1/2012 throug			nereby issued to provi	de fun	ding for the		
The quantity for Line	item 0003 is incre	ased by	11,000 to a new total	qty o	£ 21,000.		
Continued	And the second second				6		
Except as provided herein, all terms and condition ISA_NAME AND TITLE OF SIGNER (Type or pro			heretoforo changed, remains unchanged ar A NAME AND TITLE OF CONTRACTING		·		
			oris B. Kessler	- Unit OLIV	, gara or printy		
15B. CONTRACTOR/OFFEROR (Signature of person authorized to sign)	15C DATE S	SIGNED 16	B. UNITED STATES OF AMERICA (Signature of Confacting Officer)	le	16C. DATE SIGNED 01/23/2013		
NSN 7540-01.152-8070			(Signification Confeating Oroces)	STANDA	ARD FORM 30 (REV. 10-83)		

NSN 7540-01-152-8070 Previous edition unusable STANDARD FORM 3D (REV 10-83) Prescribed by GSA FAR (48 CFR) 53.243

CONTINUE TION CUEFT	REFERENCE NO. OF DOCUMENT BEING CONTINUED	PAGE 0	F
CONTINUATION SHEET	CPSC-N-12-0109/0003	2	2

NAME OF OFFEROR OR CONTRACTOR
BROOKHAVEN MEMORIAL MEDICAL CENTER

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	As a result of the above, funding is added for	107	(0)	(6)	\E /
	line item 0003 in the amount of \$30,250.00.				
	2- The quantity for Line item 0004 is increased by 2,500 to a new total qty of 4,900.				
	As a result of the above, funding is added for line item 0004 in the amount of \$1,675.00.				
	3- As a result of the above, funding for the first option period (July 1, 2012 through June 30, 2013) is increased by \$31,925.00 to a new total of \$61,033.00.	:			
	Change Item 0003 to read as follows(amount shown is the obligated amount):				
	FIRST OPTION PERIOD - JULY 1, 2012 THROUGH JUNE 30, 2013				
NEI:	NOT TO EXCEED NEISS SURVEILLANCE REPORTS AND SPECIAL SURVEY REPORTS IN ACCORDANCE WITH THE ATTACHED STATEMENT OF WORK.	21000	EA	2.75	30,250.0
	Quantity: 11,000 @ \$2.75 = \$30,250.00 Fully Funded Obligation Amount\$57,750.00				
	Change Item 0004 to read as follows(amount shown is the obligated amount):				
	NOT TO EXCEED SUPPLEMENTAL/SPECIAL STUDY REPORTS IN ACCORDANCE WITH THE ATTACHED STATEMENT OF WORK. Quantity: 2,500 @ \$0.67 = \$1,675.00 Fully Funded Obligation Amount\$3,283.00	-35	EA	0.67	1,675.0
	ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED AND IN FULL FORCE AND EFFECT.				
	222201				
]		