AMENDMENT OF SOLICITATION/MODIFIC	ATION OF CONTRACT	1. CONTRACT ID CODE	PAGE OF PAGES				
2. AMENDMENT/MODIFICATION NO.	3. EFFECTIVE DATE	4. REQUISITION/PURCHASE REQ. NO. 5. P	PROJECT NO. (If applicable)				
0003	03/28/2011						
6. ISSUED BY CODE	FMPS	7. ADMINISTERED BY (if other than Item 6) COI	DE				
CONSUMER PRODUCT SAFETY COMM DIV OF PROCUREMENT SERVICES 4330 EAST WEST HWY ROOM 517 BETHESDA MD 20814	ISSION						
8. NAME AND ADDRESS OF CONTRACTOR (No., street	county, State and ZIP Code)	(x) 9A. AMENDMENT OF SOLICITATION NO.					
YALE-NEW HAVEN HOSPITAL ATTN TUCKER LEARY VP ADMINISTRATION 20 YORK STREET TMP 109 NEW HAVEN CT 06504		9B. DATED (SEE ITEM 11) x 10A MODIFICATION OF CONTRACT/ORDER NO. CPSC-N-10-0079					
		108. DATED (SEE ITEM 13)					
CODE	FACILITY CODE	03/19/2010					
The state of the s	11. THIS ITEM ONLY APPLIES TO	AMENDMENTS OF SOLICITATIONS					
separate letter or telegram which includes a reference THE PLACE DESIGNATED FOR THE RECEIPT OF (to the solicitation and amendment num PFFERS PRIOR TO THE HOUR AND r aiready submitted, such change may s received prior to the opening hour ar uired) Ne		RECEIVED AT OFFER. If by				
		RS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRI	BEO IN ITEM 14.				
CHECK ONE A THIS CHANGE ORDER IS ISSUED FORDER NO. IN ITEM 10A.	URSUANT TO: (Specify authority) TH	HE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE C	CONTRACT				
B. THE ABOVE NUMBERED CONTRAC appropriation data, etc.) SET FORTH	T/ORDER IS MODIFIED TO REFLEC IN ITEM 14, PURSUANT TO THE AU	T THE ADMINISTRATIVE CHANGES (such as changes in pa THORITY OF FAR 43 103(b).	ying office,				
C. THIS SUPPLEMENTAL AGREEMEN	T IS ENTERED INTO PURSUANT TO	AUTHORITY OF:					
D. OTHER (Specify type of modification	and authority)						
X UNILATERAL MODIFICAT	ION, FAR 43.103(b)						
E. IMPORTANT: Contractor X is not.	is required to sign this document a	and return 0 copies to the issuing offic	ie.				
14 DESCRIPTION OF AMENDMENT/MODIFICATION OF DUNS Number: HOSPITAL ID#6B683034	Organized by UCF section headings, i	including soliditation/contract subject matter where feasible.)					
The purpose of this modification	tion is to provide a	additional funding for FY-2011.	,				
	•	e provided for the period of Ap 1 be provided, by modification,	•				
The total amount of this con \$150,300.00. Continued	tract is increased	by \$42,390.00, from \$107,910.00) to				
Except as provided herein, all terms and conditions of the	e document referenced in Item 9A or 1	OA, as heretofore changed, remains unchanged and in full for					
15A. NAME AND TITLE OF SIGNER (Type or print)		16A NAME AND TITLE OF CONTRACTING OFFICER	(Type or print)				
AED OOUTDAGTOD OFFICE OR	120 5 210	Doris B. Kessler	IEC GATE BIOURS				
15B. CONTRACTOR/OFFEROR	15C, DATE SIGNED	168 UNITED STATES OF MERICA	03/28/2011				
(Signature of person authorized to sign) NSN 7540-01-152-8070		(Signature of Ophtracting Officer) STANE) DARD FORM 30 (REV. 10-83)				
Previous edition unusable		Prescri	bed by GSA 8 CFR) 53.243				

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED			-
	CPSC-N-10-0079/0003	2	:	2

NAME OF OFFEROR OR CONTRACTOR

ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	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):				
003	NEISS SURVEILLANCE REPORTS AND SPECIAL SURVEY REPORTS FOR THE QUANTITY OF 9,000 EA @ \$4.41 = \$39,690.00.	9000	EA	4.41	39,690.
	Obligated Amount: \$39,690.00				
	Change Item 0004 to read as follows(amount shown is the obligated amount):				
004	SUPPLEMENTAL/SPECIAL STUDY REPORTS FOR THE QUANTITY OF 2,500 ea @ \$1.08 = \$2,700.00. Obligated Amount: \$2,700.00	2500	EA	1.08	2,700.
	ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED AND IN FULL FORCE AND EFFECT.				