

2 AMENDMENT/MODIFICATION NO 0007 3 EFFECTIVE DATE See Block 16C 4 REQUISITION/PURCHASE REQ. NO 5 PROJECT NO (If applicable)

6 ISSUED BY CODE FMPS 7 ADMINISTERED BY (If other than Item 6) CODE  
 CONSUMER PRODUCT SAFETY COMMISSION  
 DIV OF PROCUREMENT SERVICES  
 4330 EAST WEST HWY  
 ROOM 523  
 BETHESDA MD 20814

8 NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)  
 PUBLIC HEALTH CONNECTICUT DEPARTMENT OF  
 ATTN ELIZABETH FRUGALE REG VITAL REC  
 410 CAPITOL AVENUE  
 PO BOX 340308  
 MS 13ACT  
 HARTFORD CT 06106-1367  
 9A AMENDMENT OF SOLICITATION NO.  
 9B DATED (SEE ITEM 11)  
 X 10A MODIFICATION OF CONTRACT/ORDER NO.  
 CPSC-H-13-0005  
 10B DATED (SEE ITEM 13)  
 02/11/2013  
 CODE FACILITY CODE

11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS

The above numbered solicitation is amended as set forth in Item 14 The hour and date specified for receipt of Offers  is extended  is not extended  
 Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing items 8 and 15, and returning \_\_\_\_\_ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By separate letter or telegram which includes a reference to the solicitation and amendment numbers. FAILURE OF YOUR ACKNOWLEDGEMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If by virtue of this amendment you desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified

12. ACCOUNTING AND APPROPRIATION DATA (If required)

SUBJECT TO THE AVAILABILITY OF FUNDS

13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.

CHECK ONE  
 A THIS CHANGE ORDER IS ISSUED PURSUANT TO (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO IN ITEM 10A  
 B THE ABOVE NUMBERED CONTRACT/ORDER IS MODIFIED TO REFLECT THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation date, etc.) SET FORTH IN ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b)  
 C THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF  
 D OTHER (Specify type of modification and authority)  
 X Exercise Option - Unilateral Modification, FAR 52.517-9

E. IMPORTANT: Contractor  is not  is required to sign this document and return \_\_\_\_\_ copies to the issuing office

14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)

DUNS Number: [REDACTED]  
 COR: Dennis B. Wierdak  
 PHONE: (301) 504-7430  
 EMAIL: dwierdak@cpsc.gov

Modification 0007 to contract CPSC-H-13-0005 is hereby issued to exercise the fourth option period beginning October 1, 2016 through September 30, 2017, in accordance with FAR Clause 52.217-9, Option to Extend the Term of the Contract. The exercise of this option shall be at the rates specified in the schedule of services, line items 0009-0010.

This option is being issued subject to the Availability of Funds Clause (SAF). The Continued ...

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

15A NAME AND TITLE OF SIGNER (Type or print) 16A NAME AND TITLE OF CONTRACTING OFFICER (Type or print)  
 15B CONTRACTOR/OFFEROR 15C DATE SIGNED 16B UNITED STATES OF AMERICA 16C DATE SIGNED  
 (Signature of person authorized to sign) (Signature of Contracting Officer)  
 Greg A. Grayson  
 8/30/2016

NAME OF OFFEROR OR CONTRACTOR  
PUBLIC HEALTH CONNECTICUT DEPARTMENT OF

ITEM NO (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	Government is not liable for, and shall not, provide payment to the Contractor until written notification to the Contractor, via modification, that funds are now available.				
	Change Item 0009 to read as follows (amount shown is the obligated amount):  OPTION PERIOD 4: OCTOBER 1, 2016 THROUGH SEPTEMBER 30, 2017				
0009	NOT TO EXCEED DEATH CERTIFICATES/ELECTRONIC DEATH DATA IN SPECIFIED CATEGORIES SHALL BE SUBMITTED FOR DEATHS OCCURRING DURING, OR REQUESTED FOR, THE PERIOD OCTOBER 1, 2016 THROUGH SEPTEMBER 30, 2017.  Accounting Info: 0100A17DSE-2017-1128200000-EXHR004310-252E0 \$0.00 (Subject to Availability of Funds)	50	EA	0.00	0.00
	Change Item 0010 to read as follows (amount shown is the obligated amount):				
0010	NOT TO EXCEED COMPUTER PRINTOUT(S) IN ACCORDANCE WITH THE ATTACHED STATEMENT OF WORK.  Accounting Info: 0100A17DSE-2017-1128200000-EXHR004310-252E0 \$0.00 (Subject to Availability of Funds) ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED AND IN FULL FORCE AND EFFECT.	1	BT	0.00	0.00