AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT			1. CONTRACT ID CODE		PAGE OF	PAGES			
					1	2			
2. AMENDMENT/MODIFICATION NO	3. EFFECTIVE DATE	'	QUISITION/PURCHASE REQ. NO.	5, PR	ROJECT NO. (	(If applicable)			
0004	See Block 16C		REQ-4310-17-0073						
B. ISSUED BY CODE	FMPS	7. AD	MINISTERED BY (if other than item 6)	CODI	E				
CONSUMER PRODUCT SAFETY COMM DIV OF PROCUREMENT SERVICES 4330 EAST WEST HWY ROOM 523 BETHESDA MD 20814	ISSION								
8. NAME AND ADDRESS OF CONTRACTOR (No., street	, county, State and ZIP Code)	(x) 9A	A. AMENDMENT OF SOLICITATION NO.						
MICHIGAN PUBLIC HEALTH INSTITUTE 2436 WOODLAKE CIR SUITE 300 DKEMOS MI 48864-6002			9B. DATED (SEE ITEM 11)  X 10A. MODIFICATION OF CONTRACT/ORDER NO. CPSC-G-14-0047  10B. DATED (SEE ITEM 13)						
CODE	FACILITY CODE		•						
	1	1 1	01/06/2014 MENTS OF SOLICITATIONS						
The above numbered solicitation is amended as set if Offers must acknowledge receipt of this amendment (Items 8 and 15, and returning conseparate letter or telegram which includes a reference THE PLACE DESIGNATED FOR THE RECEIPT OF virtue of this amendment you desire to change an ofference to the solicitation and this amendment, and	orior to the hour and date spenion to the amendment; (b) I to the solicitation and amer OFFERS PRIOR TO THE Here already submitted, such ci	ecified in the solicita By acknowledging reduced in the control of	tion or as amended, by one of the following eceipt of this amendment on each copy of the ALLURE OF YOUR ACKNOWLEDGEMEN ECIFIED MAY RESULT IN REJECTION Of the by telegram or letter, provided each telegram.	he offer sul TTO BE R FYOUR O	(a) By complete the complete th	leting ) By			
12. ACCOUNTING AND APPROPRIATION DATA (If req	uired)	Net In	crease:	\$1,2	07.56				
0100A17DSE 2017 1128200000 I						<u> </u>			
13. THIS ITEM ONLY APPLIES TO N	ODIFICATION OF CONTRA	CTS/ORDERS. IT A	MODIFIES THE CONTRACT/ORDER NO. AS	S DESCRII	BED IN ITEM	14.			
	CT/ORDER IS MODIFIED TO H IN ITEM 14, PURSUANT	O REFLECT THE A TO THE AUTHORIT	IGES SET FORTH IN ITEM 14 ARE MADE  DMINISTRATIVE CHANGES (such as char Y OF FAR 43.103(b).  RITY OF:						
D. OTHER (Specify type of modification	and authority)								
X Exercise Option - U	*·	fication F	AR 52 217-9						
				anulaa offic	PA :				
E. IMPORTANT: Contractor is not.	s required to sign this				ce.	···			
14. DESCRIPTION OF AMENDMENT/MODIFICATION DUNS Number:  COR: Randolp	(Organized by OCF Section	neaangs, including	, solicitation/contract subject maiter where i	reasible)					
Modification 0004 to Contract period as follows:	ct CPSC-G-14-00	047 is her	eby issued to exercise	e the	fourth	option			
1. In accordance with contract, the Consumer Productive period beginning August Continued	oct Safety Com 1, 2017 through	mission he gh July 31	reby exercises option , 2018. Pricing is in	perio	od four rdance	with			
Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 15A. NAME AND TITLE OF SIGNER (Type or print)			A. NAME AND TITLE OF CONTRACTING						
		G	reg A. Grayson						
15B CONTRACTOR/OFFEROR	15C DAT	E SIGNED 16	B UNITED STATES OF AMERICA	pur	16	2 17 /20			
(Signature of person authorized to sign)		- 1	(Signature of Contracting Officer)	CTAN	DARD FORM	30 (REV. 10-83)			

NSN 7540-01-152-8070 Previous edition unusable Prescribed by GSA FAR (48 CFR) 53:243

 CONTINUATION SHEET
 REFERENCE NO. OF DOCUMENT BEING CONTINUED
 PAGE
 OF

 CPSC-G-14-0047/0004
 2
 2

NAME OF OFFEROR OR CONTRACTOR
MICHIGAN PUBLIC HEALTH INSTITUTE

TEM NO.	SUPPLIES/SERVICES	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
(A)	(B)	(0)	(0)	(5)	(1)
	2. The funded quantity for line item 0005 is increased from 0 to 12.  3. As a result, funding is added for line item				
	4. As a result of the above, funding is added in the amount of \$1,207.56 for option period four for the performance period August 1, 2017 through July 31, 2018. This contract is now fully funded for FY-2017.				
	Change Item 0005 to read as follows(amount shown is the obligated amount):				
	OPTION YEAR 4 AUGUST 1, 2017 THROUGH JULY 31, 2018				
005	NOT TO EXCEED: 12	12	EA	100.63	1,207.
	Electronic monthly files of Medical Examiner's/Coroner's Alert Program (MECAP) Reports to be submitted for the period August 1, 2017 through July 31, 2018, in accordance with the attached Statement of Work.				
	ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED AND IN FULL FORCE AND EFFECT.				