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| AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT | | | BPA NO. | | 1. CONTRACT ID CODE | | PAGE 1 | | OF PAGES 2 | |
| 2. AMENDMENT/MODIFICATION NUMBER A00001 | | | 3. EFFECTIVE DATE 07-13-2017 | | 4. REQUISITION/PURCHASE REQ. NUMBER 570-17-3-241-0383 | | | 5. PROJECT NUMBER (if applicable) | | |
| 6. ISSUED BY CODE 612MCP Department of Veterans Affairs VA Sierra Pacific Network (VISN 21) VA Northern California HealthCare System 5342 Dudley Blvd, Bldg 209 McClellan CA 95652-2609 | | | 7. ADMINISTERED BY (If other than Item 6) CODE 612MCP Department of Veterans Affairs Department of Veterans Affairs VA Northern California HealthCare System 3230 Peacekeeper Way, Bldg. 209 McClellan CA 95652-1012 | | | | | | | |
| 8. NAME AND ADDRESS OF CONTRACTOR (Number, street, county, State and ZIP Code) To all Offerors/Bidders | | | | | (X) | 9A. AMENDMENT OF SOLICITATION NUMBER VA261-17-Q-0804 | | | | |
| | | | | | | 9B. DATED (SEE ITEM 11) 07-13-2017 | | | | |
| | | | | | X | 10A. MODIFICATION OF CONTRACT/ORDER NUMBER | | | | |
| | | | | | | 10B. DATED (SEE ITEM 13) | | | | |
| CODE | | FACILITY CODE | | | | | | | | |
| 11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS | | | | | | | | | | |
| <input checked="" type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers <input type="checkbox"/> is extended, <input checked="" type="checkbox"/> 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 electronic communication which includes a reference to the solicitation and amendment numbers. FAILURE OF YOUR ACKNOWLEDGMENT 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 letter or electronic communication, provided each letter or electronic communication 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) | | | | | | | | | | |
| 13. THIS ITEM APPLIES ONLY TO MODIFICATIONS 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) | | | | | | | | | | |
| E. IMPORTANT: Contractor <input type="checkbox"/> is not, <input type="checkbox"/> 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.) The purpose of this amendment is to revise the unit of measure in the price schedule for items 0001 and 1001. Previously those two lines items were based on a flat monthly rate. We currently have four technicians working on the current contract. This follow-on requirement is for six technicians. The four existing technicians will receive the right of first refusal under the Nondisplacement clause. Two new technicians will be needed to fullfil the staffing requirement. Time will be needed for the two new technicians to be cleared before starting performance, so a fixed monthly rate is not the best method. The unit of measure has been revised to an hourly rate, so the VA only pays for actual hours performed. See attached revised price schedule. The quote due date remains unchanged. Except as provided herein, all terms and conditions of the document referenced in Item 9A 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) Michael P. Hodahkwen Contracting Officer | | | | | |
| 15B. CONTRACTOR/OFFEROR (Signature of person authorized to sign) | | | 15C. DATE SIGNED | | 16B. UNITED STATES OF AMERICA BY (Signature of Contracting Officer) | | | 16C. DATE SIGNED 07/13/2017 | | |

B.2 PRICE/COST SCHEDULE

ITEM INFORMATION

| ITEM NUMBER | DESCRIPTION OF SUPPLIES/SERVICES | QUANTITY | UNIT | UNIT PRICE | AMOUNT |
|----------------|--|-----------|------|--------------------|--------|
| 0001 | Sterile Processing Technicians Contract Period: Base POP Begin: 08-01-2017 POP End: 07-31-2018 | 12,480.00 | HR | | |
| 0002 | Estimated Overtime Hours Contract Period: Base POP Begin: 08-01-2017 POP End: 07-31-2018 | 300.00 | HR | | |
| 1001 | Sterile Processing Technicians Contract Period: Option 1 POP Begin: 08-01-2018 POP End: 07-31-2019 | 12,480.00 | HR | | |
| 1002 | Estimated Overtime Hours Contract Period: Option 1 POP Begin: 08-01-2018 POP End: 07-31-2019 | 300.00 | HR | | |
| | | | | GRAND TOTAL | |