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| AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT | | 1. CONTRACT ID CODE | PAGE OF PAGES 1 1 | |
| 2. AMENDMENT/MODIFICATION NO. 0102 | 3. EFFECTIVE DATE 03/18/2014 | 4. REQUISITION/PURCHASE REQ. NO. 14NA001100 | 5. PROJECT NO. (If applicable) | |
| 6. ISSUED BY Savannah River Operations U.S. Department of Energy Savannah River Operations P.O. Box A Aiken SC 29802 | CODE 00901 | 7. ADMINISTERED BY (If other than Item 6) Savannah River Operations U.S. Department of Energy Savannah River Operations P.O. Box A Aiken SC 29802 | | CODE 00901 |
| 8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code) G4S GOVERNMENT SOLUTIONS INC Attn: MIKE GALLAGHER 7121 FAIRWAY DRIVE, SUITE 301 PALM BEACH GARDENS FL 334183766 | | (x) | 9A. AMENDMENT OF SOLICITATION NO. | |
| | | | 9B DATED (SEE ITEM 11) | |
| | | x | 10A. MODIFICATION OF CONTRACT/ORDER NO. DE-AC30-10CC60025 | |
| | | | 10B DATED (SEE ITEM 13) 10/08/2009 | |
| CODE 073891921 | FACILITY CODE | | | |
| 11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS | | | | |
| <input 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 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 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) See Schedule | | Net Increase: | | \$600,000.00 |
| 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: | | | |
| X | D. OTHER (Specify type of modification and authority) FAR 52.232-22 -- Limitation of Funds (APR 1984) | | | |
| E. IMPORTANT: Contractor <input checked="" type="checkbox"/> is not. <input type="checkbox"/> is required to sign this document and return _____ 0 _____ copies to the issuing office. | | | | |
| 14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.) | | | | |
| Tax ID Number: 59-0940269 | | | | |
| DUNS Number: 073891921 | | | | |
| A. The purpose of this modification is to obligate funds to CLIN 0001. Funds in the amount of \$600,000.00 are hereby obligated to CLIN 00001, increasing the total funds obligated to CLIN 00001 from \$413,292,641.48 to \$413,892,641.48 | | | | |
| B. The contract total estimated cost (inclusive of options) remains at \$989,012,019.00. | | | | |
| C. All other terms and conditions remain unchanged. FOB: Destination Period of Performance: 10/08/2009 to 09/30/2019 | | | | |
| 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) | | |
| | | Johnsell L. Christian | | |
| 15B. CONTRACTOR/OFFEROR | 15C. DATE SIGNED | 16B. UNITED STATES OF AMERICA | 16C. DATE SIGNED | |
| _____ (Signature of person authorized to sign) | | Signature on File | 03/18/2014 | |
| | | _____ (Signature of Contracting Officer) | | |