AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT

1. CONTRACT ID CODE
J

2. AMENDMENT/MODIFICATION NO.	3. EFFECTIVE DATE	4. REQUISITION/PURCHASE REQ. NO.	5. PROJECT NO. *(If applicable)*
P00006	10/28/2024	See Block 14	

6. ISSUED BY CODE SPE2D2

DLA TROOP SUPPORT
MEDICAL SUPPLY CHAIN FSGB
700 ROBBINS AVENUE
PHILADELPHIA PA 19111
USA
Initiator: Jeremy Brown
PHPHDA9 Tel: 215-737-6031 FAX: 215-737-7684 Email: JEREMY.BROWN@DLA.MIL

7. ADMINISTERED BY *(If other than Item 6)* CODE SPE2D2

DLA TROOP SUPPORT
MEDICAL SUPPLY CHAIN FSGB
700 ROBBINS AVENUE
PHILADELPHIA PA 19111
USA

8. NAME AND ADDRESS OF CONTRACTOR (*No., street, county, State and ZIP Code)*

GOLDEN STATE MEDICAL SUPPLY, INC.
DBA GOLDEN STATE MEDICAL SUPPLY INC
5187 CAMINO RUIZ
CAMARILLO CA 93012-8601
USA

CODE 1HT23 FACILITY CODE

(X)

9A. AMENDMENT OF SOLICITATION NO.

9B. DATED (*SEE ITEM 11*)

X

10A. MODIFICATION OF CONTRACT/ORDER NO.
SPE2D2-23-D-0004

10B. DATED *(SEE ITEM 13)*
2022 OCT 28

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 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 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)*

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:
X	D. OTHER *(Specify type of modification and authority)* FAR 52.217-9 Option to Extend the Term of the Contract

E. IMPORTANT: Contractor [X] 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.)*

See Continuation Sheet

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*)	
		Jason C. Wray	
15B. CONTRACTOR/OFFEROR *(Signature of person authorized to sign)*	15C. DATE SIGNED	16B. UNITED STATES OF AMERICA Jason C. Wray *(Signature of Contracting Officer)*	16C. DATE SIGNED 2024 OCT 07

1. Option 2 is hereby exercised effective for the period of October 28, 2024 through October 27, 2025.
2. All other terms and conditions remain the same.