

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT		1. CONTRACT ID CODE	PAGE OF PAGES
			1 11
2. AMENDMENT/MODIFICATION NO.	3. EFFECTIVE DATE	4. REQUISITION/PURCHASE REQ. NO.	5. PROJECT NO. (If applicable)
004	See Block 16C	10EM001319	
6. ISSUED BY	CODE	7. ADMINISTERED BY (If other than Item 6)	CODE
Richland Operations Office U.S. Department of Energy Richland Operations Office P.O. Box 550, MSIN A7-80 Richland WA 99352	00601	Richland Operations Office U.S. Department of Energy Richland Operations Office P.O. Box 550, MSIN A7-80 Richland WA 99352	00601
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)		(x)	9A. AMENDMENT OF SOLICITATION NO.
PENSER NORTH AMERICA INC Attn: PHIL VALDENS 700 SLEATER KINNEY RD SE, SUITE B #170 LACEY WA 985138513			9B. DATED (SEE ITEM 11)
		x	10A. MODIFICATION OF CONTRACT/ORDER NO.
			DE-AC06-09RL15009
			10B. DATED (SEE ITEM 13)
CODE	FACILITY CODE		06/15/2009
129467614			

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)

See Schedule

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	FAR 52.243-1 Changes - Fixed Price (Alt I, APR 1984)

E. IMPORTANT: Contractor is not, 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: 91-2180915

DUNS Number: 129467614

Subj to Retent: N

LIST OF CHANGES:

The purpose of this modification is to insert the following language in to the contract SOW, Section C.3, a, 10:

C.3.a.10. Claimant travel shall be reimbursed pursuant to applicable L&I regulations or pursuant to the current rates and amounts set for Government employees in the Federal Travel Regulations, whichever provides greater benefit to the claimants. Any exceptions must be approved by the COR in advance of payment. Claimants shall be reimbursed at the Continued ...

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)	
		Jewel J. Short	
15B. CONTRACTOR/OFFEROR	15C. DATE SIGNED	16B. UNITED STATES OF AMERICA	16C. DATE SIGNED
_____ (Signature of person authorized to sign)		Signature on File _____ (Signature of Contracting Officer)	03/12/2010

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED	PAGE	OF
	DE-AC06-09RL15009/004	2	11

NAME OF OFFEROR OR CONTRACTOR
PENSER NORTH AMERICA INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
00001	<p>applicable per diem rate, and not be required to provide receipts for food. If medically necessary for a claimant to be accompanied by another person during the claimant's travel, the companion's travel and per diem shall also be reimbursed pursuant to the applicable rates, as specified in the above paragraph. The companion, if he/she is an employee of a DOE Hanford prime contractor or teaming partner, shall also be reimbursed for wages lost during travel. Lost wages for a companion who is not employed by a DOE Hanford prime contractor or teaming partner shall not be reimbursed.</p> <p>A conformed copy of Section C, SOW is attached.</p> <p>FOB: Destination Period of Performance: 10/01/2009 to 09/30/2014</p> <p>Change Item 00001 to read as follows (amount shown is the total amount):</p> <p>CONTRACTOR WILL ADMINISTER THE HANFORD WORKERS' COMPENSATION PROGRAM AS THE THIRD PARTY ADMINISTRATOR ON BEHALF OF DOE. Line item value is: \$1,555,410.13 Incrementally Funded Amount: \$1,037,000.00</p> <p>Accounting Info: 01759-2009-34-421601-25200-1720578-0000000-0421567-0000000-000000 Fund: 01759 Appr Year: 2009 Allottee: 34 Report Entity: 421601 Object Class: 25200 Program: 1720578 Project: 0000000 WFO: 0421567 Local Use: 0000000 Funded: \$0.00</p> <p>Accounting Info: Fund: 01050 Appr Year: 2009 Allottee: 34 Report Entity: 421601 Object Class: 25100 Program: 3184701 Project: 0000000 WFO: 0000000 Local Use: 0000000 Funded: \$0.00</p> <p>Accounting Info: Fund: 01759 Appr Year: 2010 Allottee: 34 Report Entity: 421601 Object Class: 25200 Program: 1720578 Project: 0000000 WFO: 0421567 Local Use: 0000000 Funded: \$0.00</p> <p>Accounting Info: Fund: 01759 Appr Year: 2010 Allottee: 34 Report Entity: 421601 Object Class: 25200 Program: Continued ...</p>				1,555,410.13

CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED
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NAME OF OFFEROR OR CONTRACTOR
PENSER NORTH AMERICA INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	1720578 Project: 0000000 WFO: 0421567 Local Use: 0000000 Funded: \$0.00 Accounting Info: Fund: 01759 Appr Year: 2009 Allottee: 34 Report Entity: 421601 Object Class: 25200 Program: 1720578 Project: 0000000 WFO: 0421567 Local Use: 0000000 Funded: \$0.00				