

2. AMENDMENT/MODIFICATION NO. M0012	3. EFFECTIVE DATE See Block 16C	4. REQUISITION/PURCHASE REQ. NO. NRR-18-0035	5. PROJECT NO. (If applicable)
6. ISSUED BY      CODE US NRC - HQ ACQUISITION MANAGEMENT DIVISION MAIL STOP TWFN-8E06M WASHINGTON DC 20555-0001		7. ADMINISTERED BY (If other than Item 6)      CODE	

8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code) INOMEDIC HEALTH APPLICATIONS INC 2 EATON ST STE 908 HAMPTON VA 236694055	(x)	9A. AMENDMENT OF SOLICITATION NO.
		9B. DATED (SEE ITEM 11)
	x	10A. MODIFICATION OF CONTRACT/ORDER NO. NRC-HQ-20-14-C-0002
		10B. DATED (SEE ITEM 13) 09/17/2014
CODE    837359520	FACILITY CODE	

**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)      Net Increase:      \$35,000.00  
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:
X	D. OTHER (Specify type of modification and authority) FAR 52.232-22 Limitation of Funds

**E. IMPORTANT:** Contractor  is not,  is required to sign this document and return \_\_\_\_\_ copies to the issuing office.

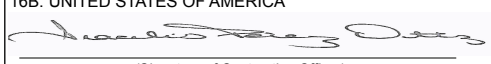
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)  
The purpose of this contract modification is to provide incremental funding in the amount of \$35,000.00, thereby increasing the total obligated amount from \$120,727.02 to \$155,727.02. Accordingly Section B.3 NRCB084A CONSIDERATION AND OBLIGATION-LABOR-HOUR CONTRACT ALTERNATE I, paragraph (e) is revised to read as follows:

"(e) The obligated amount for the Labor-Hour portion is \$139,095.53."

All other terms and conditions remain unchanged.

Base and Exercised Options: \$275,299.42 (Unchanged)  
Total Obligated Amount: \$155,727.02 (Changed)  
Continued ...

Except as provided herein, all terms and conditions of the document referenced in Item 9 A 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) ARACELIS PEREZ-ORTIZ
15B. CONTRACTOR/OFFEROR  (Signature of person authorized to sign)	15C. DATE SIGNED
	16B. UNITED STATES OF AMERICA  (Signature of Contracting Officer)
	16C. DATE SIGNED 01/10/2018

**CONTINUATION SHEET**

REFERENCE NO. OF DOCUMENT BEING CONTINUED  
NRC-HQ-20-14-C-0002/M0012

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NAME OF OFFEROR OR CONTRACTOR  
INOMEDIC HEALTH APPLICATIONS INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>LIST OF CHANGES: Reason for Modification : Funding Only Action Total Amount for this Modification: \$0.00 New Total Amount for this Version: \$275,299.42 New Total Amount for this Award: \$275,299.42 Obligated Amount for this Modification: \$35,000.00 New Total Obligated Amount for this Award: \$155,727.02</p> <p>CHANGES FOR LINE ITEM NUMBER: 1 Obligated Amount for this modification: \$35,000.00 Incremental Funded Amount changed from \$120,727.02 to \$155,727.02</p> <p>NEW ACCOUNTING CODE ADDED: Account code: 2018-X0200-FEEBASED-20-20D003-1061-11-4-165-252A-1 1-4-165-1061 Period of Performance: 10/01/2014 to 09/30/2019</p>				