AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT

1. CONTRACT ID CODE	PAGE OF PAGES	
J	1	4

2. AMENDMENT/MODIFICATION NO.	3. EFFECTIVE DATE	4. REQUISITION/PURCHASE REQ. NO.	5. PROJECT NO.(If applicable)
P00015	23-Nov-2016	FY14REDHAT	

6. ISSUED BY CODE HC1028

DISA/DITCO-SCOTT-PL83
2300 EAST DRIVE
SCOTT AFB IL 62225-5406

7. ADMINISTERED BY (If other than item 6) CODE

See Item 6

8. NAME AND ADDRESS OF CONTRACTOR (No., Street, County, State and Zip Code)
CARAHSOFT TECHNOLOGY CORP
1860 MICHAEL FARADAY DR SUITE 100
RESTON VA 20190
JENNIFER LOHMANN

CODE 1P3C5 FACILITY CODE

	9A. AMENDMENT OF SOLICITATION NO.
	9B. DATED (SEE ITEM 11)
X	10A. MOD. OF CONTRACT/ORDER NO. HC1028-14-A-0002
X	10B. DATED (SEE ITEM 13) 16-Jun-2014

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 Offer ☐ is extended, ☐ is not extended.

Offer 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.

	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.
X	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 [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.)
Modification Control Number: morrism17297

The purpose of this modification is to:
1. Update the transmittal letter for DISA, Air Force and Army.
2. Update the report of sales template.
All other terms and conditions remain the same.

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) DANETTE L WESSELMANN / CONTRACTING OFFICER TEL: 618-229-9273 EMAIL: Danette.L.Wesselmann.civ@mail.mil	
15B. CONTRACTOR/OFFEROR (Signature of person authorized to sign)	15C. DATE SIGNED	16B. UNITED STATES OF AMERICA BY Danette L Wesselmann (Signature of Contracting Officer)	16C. DATE SIGNED 23-Nov-2016

SECTION SF 30 BLOCK 14 CONTINUATION PAGE

SUMMARY OF CHANGES

SECTION G - CONTRACT ADMINISTRATION DATA

The following have been modified:
AIR FORCE SALES TRANSMITTAL
Date: _____

To: Defense Finance and Accounting Service (DFAS)

From: Company Name, Address, City, State, and ZIP Code
POC: Name, Telephone Number and E-Mail Address

Purpose: Collection of Acquisition, Contracting, and Technical (**ACT**) Fee FY17
Contract Number: _____

Period of Performance: **Month, Year or Quarter the fee check represents**

Authority for Entering into Agreement: Refer to each contract "Recovery of Usage Fee Statement"

Amount Paid: **Check Amount:** _____ **Check Number:** _____

Performing Organization's:
DEAMS: 0570003400000000001717R F47GU 4G4XCC 257.1103 04010000041B 999900.999951 0702806F 2017 387700 NA 0570003400000000001717R # NA SC97
Delivery Requirements: See Addendum

Payment Provisions: Please make your check payable to "DSSN3801LI" and forward your payment with a copy of the Request for Advance Payment from Public to:

Paper checks:

Payable to: DSSN3801LI

DFAS Indy-Disbursing Operations

C/O 3801 Limestone
8899 E 56TH Street
Indianapolis, IN 46249

US Dollars from an American Bank. (FEDWIRE or ACH)

Bank Name/Account Name: TREAS NYC, NEW YORK, NY US

FEDWIRE routing # 021030004 ACH routing # 051036706

Account Name: TREAS NYC, NEW YORK, NY US

Account #: 800003801117; this is the 12 digit Credit Gateway

Account number/ Collection Information

Repository (CIR) Agency Account ID.

Please include the Contract Number cited above on the "memo line" of your check. This will assist us in processing your check to the correct location in a timely manner.

1. **If sending funds via Electronic Funds Transfer (EFT): US Dollars from an American Bank. (FEDWIRE or ACH)**

Addendum: Must include this info - will assist us in posting your funds

a. Email both copy of check and copy of this Request for Advance Payment from Public transmittal letter to: hicifinance@us.af.mil
b. Also, email an electronic (Excel format) copy of the Sales Report (as per BPA requirements) to the same email box as above.
c. Subject line format of e-mail MUST be as follows:
Contract Number with hyphens, Month or FY Quarter, Year, and Vendor Name
[Example: FA8771-04-A-0001, 1QFY17, Vendor]
d. Please follow your contract regarding the applicable ACT Fee rates.

(Signed)
Signature Block

ARMY SALES TRANSMITTAL

LETTER OF TRANSMITTAL FOR ARMY FEE PAYMENTS

MEMORANDUM FOR
Project Lead, Computer Hardware, Enterprise Software and Solutions (PL CHESS)
PEO Enterprise Information Systems
SFAE-PS-CH (Attn: Miguel Campos)
9351 Hall Road, Bldg 1456
Fort Belvoir, VA 22060

From: Company Name
Street Address
City, State, Zip Code
POC: (Name, Phone Number & Email address)

SUBJECT: Collection of Checks for (**Company Name**)
(**BPA/Contract Number**)
(**FY/Quarter**)

1. Collection of the check will include the following:

a. Please make check payable to United States Treasury
b. Mail original check and a copy of this letter to address above

2. Direct questions to Miguel Campos: 703-806-0611

NOTE: This letter MUST provide the correct information and accompany the check for contract tracking purposes.

DISA SALES TRANSMITTAL

FY17 LETTER OF TRANSMITTAL FOR DISA FEE PAYMENTS

MEMORANDUM FOR DFAS-CO
Finance and Accounting Office
Attn: Disbursement Office (Tom Triplett)
3990 East Broad St., Bldg. 21
Columbus, Ohio 43213

From: Company Name
Street Address
City, State, Zip Code
POC: (Name, Phone Number & Email address)

SUBJECT: Collection of Checks for (Company Name)
(BPA/Contract Number)
(Quarter/FY)

1. Collection of the check will include the following:

   c. Please make check payable to **Treasurer of the United States**
   d. Mail original check to address above
   e. Checks must be accompanied by this transmittal letter.

2. To ensure proper crediting of the payment, DISA shall use the following accounting data.
   - **LOA : 9770100.4300 P70303148K ZZDI0 SE 2531 DSEMO70000 S12137**

3. Direct questions to Jonnice Medley, 301-225-8081.

4. Provide copies of this letter and check to: jonnice.medley.civ@mail.mil.

REPORT OF SALES

REPORT OF SALES FORMAT

Below is the Report of Sales Format (Government Microsoft Excel format) that the contractor shall use when submitting reports as required and outlined in the BPA document.

BPA Attachment F
Report of Sales with

(End)

(End of Summary of Changes)