

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT		1. CONTRACT ID CODE	PAGE OF PAGES 1 2	
2. AMENDMENT/MODIFICATION No. 1	3. EFFECTIVE DATE October 8, 2015	4. REQUISITION/PURCHASE REQ. No.	5. PROJECT No. (If applicable)	
6. ISSUED BY Contracting Officer United States Embassy Guatemala City, Guatemala		7. ADMINISTERED BY (If other than Item 6)	CODE	
8. NAME AND ADDRESS OF CONTRACTOR (NO., street, city, county, State, and ZIP Code) All Prospective Offerors		9A. AMENDMENT OF SOLICITATION No. X SGT50015R0003	9B. DATED (SEE ITEM 11) September 16, 2015	
CODE _____ FACILITY CODE _____		10A. MODIFICATION OF CONTRACT/ORDER No.		
		10B. DATED (SEE ITEM 13)		
11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS				
<p>[X] The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers [] is extended, [X] 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 <u>1</u> 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.</p>				
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.				
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 [] is not, [X] is required to sign this document and return <u>1</u> copies to the issuing office.				
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)				
<p>This Amendment to the Request For Proposal (RFP) corrects typographical errors and clarifies text on specific pages as detailed herein. The due date and time for receipt of proposals remains October 16th, 2015 at 12:00 hours. All other terms and conditions remain the same.</p> <p>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.</p>				
15A. NAME AND TITLE OF SIGNER (Type or print)		16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)		
		Mark S. Mitchell / Contracting Officer		
15B. CONTRACTOR/OFFEROR	15C. DATE SIGNED	16B. UNITED STATES OF AMERICA	16C. DATE SIGNED	
BY _____ (Signature of person authorized to sign)		BY _____ (Signature of Contracting Officer)		

Page No. 2
RFP SGT50015R0003, Amendment No. 1

Page 3 – The chart for the First Year of Contract should be labeled B.2.4

Page 4 – The chart for the Second Year of Contract should be labeled B.2.5

Page 4 – The chart for the Third Year of Contract should be labeled B.2.6

Page 5 – The chart for the Fourth Year of Contract should be labeled B.2.7

Page 14 – The heading for C.1.1.13 should read “Maximum Coverage” instead of “Maximum Annual Coverage.”

Page 17 – The heading for C.2.1.3 should read “Disability Coverage” instead of “Partial and Total Disability Coverage.”

Page 72 – Delete the following text: “Personnel marked with yellow are 65 years or older and are not covered by MDXA.”

Page 73 – Delete the following text: “Personnel marked with yellow are 65 years or older and are not covered by MDXA.”

Page 74 – Delete the following text: “Personnel marked with yellow are 65 years or older and are not covered by MDXA.”

END OF AMENDMENT.