

<b>AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT</b>		1. CONTRACT ID CODE	PAGE OF PAGES 1 3
2. AMENDMENT/MODIFICATION NO. 000072	3. EFFECTIVE DATE 08/10/2009	4. REQUISITION/PURCHASE REQ. NO.	5. PROJECT NO. (If applicable)
6. ISSUED BY NASA/Marshall Space Flight Center Procurement Office Marshall Space Flight Center AL 35812	CODE MSFC	7. ADMINISTERED BY (If other than Item 6) NASA/Marshall Space Flight Center Kimberly Williams/PS33/MGO 256-544-1580 256-544-9080 kimberly.n.williams@nasa.gov Marshall Space Flight Center AL 35812	CODE MSFC
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code) EG&G TECHNICAL SERVICES INC Attn: William J. Clark 20501 Seneca Meadows Pkwy, Ste 500 GAITHERSBURG MD 20878-1360		(x) 9A. AMENDMENT OF SOLICITATION NO.	9B. DATED (SEE ITEM 11)
CODE	FACILITY CODE	x 10A. MODIFICATION OF CONTRACT/ORDER NO. GS-10F-0038M H36049D	10B. DATED (SEE ITEM 13) 04/01/2003

**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 Net Decrease: -\$144,702.00

**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 43.103(a) and 52.232-22, Limitation of Funds

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.)  
Modification 72 processes a deobligation request to remove -\$144,702 incremental funding from the FFP Lump Sum Portion of the contract. This reduces the total funding of CMM line 3, accounting line 23. Therefore, obligations are reduced by -\$144,702 from 50,186,115.22 to \$50,041,413.22.

PLI: 165  
ALI: 1  
FUND: CASX22009D  
GL ACCT: 6100.252  
ORDER: FC000000  
WBS ELEMENT: 736466.11.01.08.40  
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) Kimberly N Williams		
15B. CONTRACTOR/OFFEROR	15C. DATE SIGNED	16B. UNITED STATES OF AMERICA	16C. DATE SIGNED 08/10/2009

**CONTINUATION SHEET**

REFERENCE NO. OF DOCUMENT BEING CONTINUED  
GS-10F-0038M/H36049D/000072

PAGE OF  
2 3

NAME OF OFFEROR OR CONTRACTOR  
EG&G TECHNICAL SERVICES INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>FUND CENTER: 62 COST CENTER: 62ET02 AMOUNT: -\$144,702</p> <p>LIST OF CHANGES: Total Amount for this Modification: \$0.00 New Total Amount for this Version: \$4,967,652.00 New Total Amount for this Award: \$144,564,448.89 Obligated Amount for this Modification: -\$144,702.00 New Total Obligated Amount for this Award: \$50,041,413.23 Incremental Funded Amount changed: from \$44,033,335.34 to \$43,888,633.34</p> <p>CHANGES FOR LINE ITEM NUMBER: 3 Obligated Amount for this modification: -\$144,702.00 Incremental Funded Amount changed from \$4,667,307.80 to \$4,522,605.80</p> <p>CHANGES FOR ACCOUNTING CODE: 62ET02/6100.2520/FC000000/736466.11.01.08.40/000/2 520/62/CASX22009D/361N Account code changed from 62ET02/6100.2520/62/FC000000/736466.11.01.08.40/00 0/2520/62/CASX22009D/361N/1/125 to 62ET02/6100.2520/FC000000/736466.11.01.08.40/000/2 520/62/CASX22009D/361N Amount changed from \$172,000.00 to \$27,298.00 Delivery Location Code: MSFC MSFC MSFC MSFC MSFC MS MSFC</p>				

### Deobligation / Transfer Request (\*)

(\*) This is a request only. Actual deobligation / transfer will be issued via Modification by Procurement  
Please type or print legibly

#### Section A - Contract / PO / Grant

<b>Deob From:</b> Contract / PO / Grant / Other (Circle One)		<b>Indicate:</b>  <input checked="" type="checkbox"/> Finance Only Obligation <input type="checkbox"/> Deobligation Only  <input type="checkbox"/> Deob w/ Cost and/or Disb. <input type="checkbox"/> Cost Transfer	<b>Transfer To:</b> Contract / PO / Grant / Other (Circle One)
Number: H36049D (Contract/Purchase Order/Grant Number)			Number: NNM08AA19D (Contract/Purchase Order/Grant Number)
533 Contract? Yes <input type="checkbox"/> No <input type="checkbox"/> (Circle One)			533 Contract? Yes <input type="checkbox"/> No <input type="checkbox"/> (Circle One)
Name/Code: Kimberly Williams / PS33 (Cognizant Contract Specialist/Code)		<b>Reason for Request:</b> Remove funds from contract	Name/Code: Kimberly Williams / PS33 (Cognizant Contract Specialist)
Phone: 256-544-1580			Phone: 256-544-1580

#### Section B - Accounting / Appropriation

**FROM: TO:**

\*\*\*Please provide all known information regarding the cost to be reduced and/or transferred

Reduce Cost:	PO	PLI#	ALIF#	Fund	GL Acct	Order	WBS Element	Fund Ctr	Amt.	Transfer To: PR	Fund	Cost Ctr	Order	WBS Element	Fund Ctr	Amt.	Comments
<b>Total</b>									144,702.00							144,702.00	

#### Section C - Routing and Signatures

Title	Deobligation					Transfer			
	Route	Typed or Printed Name / Code / Signature		Date	Phone #	Typed or Printed Name / Code / Signature		Date	Phone #
Resources Analyst	1	Stephen Burke RS40		8/5/2009	544-5493				
Finance / Resource Mgr	1	Sharon White for John Alexander/RS20		8/5/2009	544-7334				
Procurement / Mgr	1					Funds Certified for Obligation:			

(\*) Required: 1 = Routine  
2 = Close-Out or Otherwise as Required

Copy as Needed at each Routing