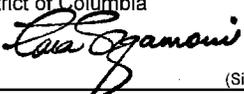


AMENDMENT OF SOLICITATION / MODIFICATION OF CONTRACT				1. HCA Solicitation Number	Page of Pages
				DCRL-2013-H-0039	1 8
2. Amendment/Modification Number	3. Effective Date	4. Requisition/Purchase Request No.		5. Solicitation Caption	
DCRL-2013-H-0039-A004	See Block 16C			Case Management and Family Based Foster Care Services	
6. Issued by:		Code	7. Administered by (If other than line 6)		
Child and Family Services Agency Contracts and Procurement Administration 200 I Street, S.E., Suite 2031 Washington, DC 20003			Child and Family Services Agency Foster Care Resources Administration 200 I Street, S.E., Suite 3201 Washington, DC 20003		
8. Name and Address of Contractor (No. street, city, county, state and zip code)			9A. Amendment of HCA No. DCRL-2013-H-0039		
			9B. Dated (See Item 11) November 14, 2012		
			10A. Modification of Contract/Order No.		
Code	DUNS:	TIN	FEIN:	10B. Dated (See Item 13)	
11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS					
<input checked="" type="checkbox"/> The above numbered solicitation is amended as set forth in item 14. The hour and date specified for receipt of Offers <input type="checkbox"/> is extended <input checked="" type="checkbox"/> is not extended. Offeror's/Providers 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 fax which includes a reference to the solicitation and amendment number. 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 may be made by letter or fax, provided each letter or telegram 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) <i>To be cited on individual orders issued on behalf of participating agencies</i>					
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 data etc.) set forth in item 14, pursuant to the authority of					
C. This supplemental agreement is entered into pursuant to authority of:					
D. Other (Specify type of modification and authority)					
E. IMPORTANT: Contractor: <input checked="" type="checkbox"/> is not required to sign this document and return 2 copies at the time of proposal submission. <input type="checkbox"/> is required to sign this document and return 2 copies at the time of proposal submission.					
14. Description of Amendment/Modification (Organized by UCF Section headings, including solicitation/contract subject matter where feasible)					
1. This amendment attaches the Human Care Qualifications Record form labeled "Attachment - Part I". 2. Please contact Linda Thomas at Lindar.Thomas@dc.gov ; 202-724-5300 for questions					
ALL OTHER TERMS OF THE SOLICITATION REMAINS UNCHANGED.					
Except as provided herein, all terms and conditions of the document is referenced in Item 9A or 10A remain unchanged and in full force and effect.					
15A. Name and Title of Signer (Type or print)			16A. Name of Contracting Officer		
			Tara Sigamoni		
15B. Name of Contractor	15C. Date Signed	16B. District of Columbia		16C. Date Signed	
(Signature of person authorized to sign)				1/3/2013	
		(Signature of Contracting Officer)			