

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT				1. CONTRACT ID CODE J	PAGE OF PAGES 1 3	
2. AMENDMENT/MODIFICATION NO. P00007		3. EFFECTIVE DATE 17-Oct-2019	4. REQUISITION/PURCHASE REQ. NO.		5. PROJECT NO.(If applicable)	
6. ISSUED BY DISA/DITCO-SCOTT-PL84 2300 EAST DRIVE SCOTT AFB IL 62225		CODE HC1084	7. ADMINISTERED BY (If other than item 6) See Item 6		CODE	
8. NAME AND ADDRESS OF CONTRACTOR (No., Street, County, State and Zip Code) EC AMERICA, INC. 8444 WESTPARK DR STE 200 MCLEAN VA 22102-5112 MITCHELL SONI				9A. AMENDMENT OF SOLICITATION NO.		
				9B. DATED (SEE ITEM 11)		
				X	10A. MOD. OF CONTRACT/ORDER NO. HC102818A0004	
				X	10B. DATED (SEE ITEM 13) 02-Apr-2018	
CODE 1QTH6		FACILITY CODE				
11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS						
<input type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offer <input type="checkbox"/> is extended, <input type="checkbox"/> 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 <input checked="" type="checkbox"/> is not, <input type="checkbox"/> 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: reinharm20200 The purpose of this modification is to: A. Update Exhibit I – Air Force Transmittal Fee letter. B. Add clauses FAR 52.204-23, Prohibition on Contracting for Hardware, Software, and Services Developed or Provided by Kaspersky Lab and Other Covered Entities and FAR 52.204-25, Prohibition on Contracting for Certain Telecommunications and Video Surveillance Services or Equipment. C. 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) CODY R. SEELHOEFER / CONTRACTING OFFICER TEL: 618-418-6348 EMAIL: cody.r.seelhoefer.civ@mail.mil			
15B. CONTRACTOR/OFFEROR (Signature of person authorized to sign)		15C. DATE SIGNED	16B. UNITED STATES OF AMERICA BY <i>Cody R. Seelhoefer</i> (Signature of Contracting Officer)		16C. DATE SIGNED 17-Oct-2019	

SECTION SF 30 BLOCK 14 CONTINUATION PAGE

SUMMARY OF CHANGES

SECTION G - CONTRACT ADMINISTRATION DATA

The following have been modified:

EXHIBIT I - AF TRANS LTR

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 FY20

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: 05700034000000002020R F47GU 4G4XCC 257.1103 04010000041B 999900.999951 0702806F
387700 NA 05700034000000002020R # 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

ATTN: 3801 Limestone Field Site

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: licifinance@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, 1QFY20, Vendor]

- d. Please follow your contract regarding the applicable ACT Fee rates.

(Signed)

Signature Block

SECTION I - CONTRACT CLAUSES

The following have been added by reference:

52.204-23

52.204-25

(End of Summary of Changes)