

ORDER FOR SUPPLIES OR SERVICES

PAGE OF PAGES
1 14

IMPORTANT: Mark all packages and papers with contract and/or order numbers.

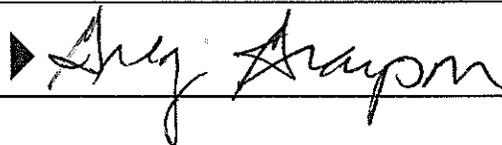
| | | | | | |
|--|--|--|---------------------------|--|----------------------|
| 1. DATE OF ORDER 05/10/2016 | | 2. CONTRACT NO. (If any) CPSC-A-16-0003 | | 6. SHIP TO: | |
| 3. ORDER NO. | | 4. REQUISITION/REFERENCE NO. REQ-4310-16-0181 | | a. NAME OF CONSIGNEE CONSUMER PRODUCT SAFETY COMMISSION | |
| 5. ISSUING OFFICE (Address correspondence to) CONSUMER PRODUCT SAFETY COMMISSION DIV OF HAZARD & INJURY DATA SYS 4330 EAST WEST HIGHWAY ROOM 604-26 BETHESDA MD 20814 | | | | b. STREET ADDRESS DIV OF HAZARD & INJURY DATA SYS 4330 EAST WEST HIGHWAY ROOM 604-26 | |
| d. CITY AUSTIN | | e. STATE TX | f. ZIP CODE 78756-3101 | | e. ZIP CODE 20814 |
| 7. TO: GERALDINE HARRIS | | | | f. SHIP VIA | |
| a. NAME OF CONTRACTOR STATE HEALTH SERVICES TEXAS DEPARTMENT OF | | | | 8. TYPE OF ORDER | |
| b. COMPANY NAME | | | | <input checked="" type="checkbox"/> a. PURCHASE | |
| c. STREET ADDRESS 1100 WEST 49TH STREET | | | | REFERENCE YOUR: | |
| d. CITY AUSTIN | | | | Please furnish the following on the terms and conditions specified on both sides of this order and on the attached sheet, if anv. including delivery as indicated. | |
| e. STATE TX | | | | f. ZIP CODE 78756-3101 | |
| 9. ACCOUNTING AND APPROPRIATION DATA See Schedule | | | | 10. REQUISITIONING OFFICE CONSUMER PRODUCT SAFETY COMMISSION | |
| 11. BUSINESS CLASSIFICATION (Check appropriate box(es)) <input type="checkbox"/> a. SMALL <input type="checkbox"/> b. OTHER THAN SMALL <input type="checkbox"/> c. DISADVANTAGED <input type="checkbox"/> d. WOMEN-OWNED <input type="checkbox"/> e. HUBZone <input type="checkbox"/> f. SERVICE-DISABLED VETERAN-OWNED <input type="checkbox"/> g. WOMEN-OWNED SMALL BUSINESS (WOSB) ELIGIBLE UNDER THE WOSB PROGRAM <input type="checkbox"/> h. EDWOSB | | | | 12. F.O.B. POINT | |
| 13. PLACE OF a. INSPECTION | | b. ACCEPTANCE | | 14. GOVERNMENT B/L NO. | |
| | | | | 15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date) | |
| | | | | 16. DISCOUNT TERMS Net 30 | |

17. SCHEDULE (See reverse for Rejections)

| ITEM NO. (a) | SUPPLIES OR SERVICES (b) | QUANTITY ORDERED (c) | UNIT (d) | UNIT PRICE (e) | AMOUNT (f) | QUANTITY ACCEPTED (g) |
|-----------------|--|-------------------------|-------------|-------------------|---------------|--------------------------|
| | DUNS Number: [REDACTED] COR: Zsuzsanna Kocsis PHONE: (301) 504-7402 EMAIL: zkocsis@cpsc.gov THE CONTRACTOR SHALL PROVIDE THE FOLLOWING SERVICES FOR THE CONSUMER PRODUCT SAFETY Continued ... | | | | | |

| | | | | | | |
|---|--|---------------------------|----------------------|-----------------|--|------------------------------------|
| 18. SHIPPING POINT | | 19. GROSS SHIPPING WEIGHT | | 20. INVOICE NO. | | 17(h) TOTAL (Cont. pages) |
| 21. MAIL INVOICE TO: | | | | | | |
| a. NAME CPSC Accounts Payable Branch | | | | \$10,000.00 | | 17(i) GRAND TOTAL |
| b. STREET ADDRESS (or P.O. Box) AMZ 160 P.O. Box 25710 | | | | \$10,000.00 | | |
| c. CITY Oklahoma City | | d. STATE OK | e. ZIP CODE 73125 | | | |

22. UNITED STATES OF AMERICA BY (Signature)



23. NAME (Typed)
Greg A. Grayson
TITLE: CONTRACTING/ORDERING OFFICER

**ORDER FOR SUPPLIES OR SERVICES
SCHEDULE - CONTINUATION**

PAGE NO

2

IMPORTANT: Mark all packages and papers with contract and/or order numbers.

| | | |
|-----------------------------|--------------------------------|-----------|
| DATE OF ORDER 05/10/2016 | CONTRACT NO. CPSC-A-16-0003 | ORDER NO. |
|-----------------------------|--------------------------------|-----------|

| ITEM NO. (a) | SUPPLIES/SERVICES (b) | QUANTITY ORDERED (c) | UNIT (d) | UNIT PRICE (e) | AMOUNT (f) | QUANTITY ACCEPTED (g) |
|-----------------|--|----------------------------|-------------|----------------------|---------------|-----------------------------|
| 0001 | <p>COMMISSION, EPIDEMIOLOGY DATA SERVICE DEPARTMENT, IN ACCORDANCE WITH THE ATTACHED TERMS AND CONDITIONS: Accounting Info: 0100A16DSE 2016 1128200000 EXHR004310 252E0</p> <p>BASE PERIOD OCTOBER 1, 2015 THROUGH SEPTEMBER 30, 2016</p> <p>NOT TO EXCEED: 500</p> | | | 500 EA | 20.00 | 10,000.00 |
| 0002 | <p>ALL DEATH CERTIFICATES IN SPECIFIED CATEGORIES SHALL BE SUBMITTED FOR DEATHS OCCURRING DURING, OR REQUESTED FOR, THE PERIOD OCTOBER 1, 2015, THROUGH SEPTEMBER 30, 2016.</p> <p>COMPUTER PRINTOUT(S) IN ACCORDANCE WITH THE ATTACHED STATEMENET OF WORK FOR DEATHS OCCURRING DURING, OR REQUESTED FOR, THE PERIOD OCTOBER 1, 2015 THROUGH SEPTEMBER 30, 2016.</p> | | | EA | 0.00 | 0.00 |
| 0003 | <p>FIRST OPTION PERIOD OCTOBER 1, 2016 THROUGH SEPTEMBER 30, 2017</p> <p>NOT TO EXCEED: 500</p> | | | 500 EA | 0.00 | 0.00 |
| 0004 | <p>ALL DEATH CERTIFICATES IN SPECIFIED CATEGORIES SHALL BE SUBMITTED FOR DEATHS OCCURRING DURING, OR REQUESTED FOR, THE PERIOD OCTOBER 1, 2016 THROUGH SEPTEMBER 30, 2017. Amount: \$0.00 (Option Line Item)</p> <p>COMPUTER PRINTOUT(S) IN ACCORDANCE WITH THE ATTACHED STATEMENT OF WORK FOR DEATHS OCCURRING DURING, OR REQUESTED FOR, THE PERIOD OCTOBER 1, 2016 THROUGH SEPTEMBER 30, 2017. Amount: \$0.00 (Option Line Item)</p> | | | BT | 0.00 | 0.00 |

TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))

CPSC-A-16-0003
COOPERATIVE AGREEMENT
Between The
Texas Department of State Health Services
Vital Statistics
And The
U. S. Consumer Product Safety Commission

A. BACKGROUND INFORMATION:

The mission of the U.S. Consumer Product Safety Commission (CPSC) is to provide an effective program to assure the safety of consumer products. The reporting of fatalities caused by or relating to consumer products to the Commission enables the Commission to assess the causes and magnitude of the injury problem for which it is responsible under the Consumer Product Safety Act, Public Law 92-573.

As part of its program, CPSC collects either death certificates or electronic data of deaths caused by or relating to consumer products from 51 state health jurisdictions in the United States. The continued receipt of these death certificates or electronic data files will provide needed information for the ongoing study of the causes of death from consumer products and ways to prevent such deaths in the future. The collection of such data is essential to giving proper perspective to hazard analysis related to particular products and in giving trend data on product-related deaths.

As soon as the death certificates are received by CPSC's Division of Hazard and Injury Data Systems, they are scanned and coded for entry into the CPSC computer system. The original certificates are destroyed by CPSC after the data entry process is complete.

As soon as electronic death data is received by CPSC's Division of Hazard and Injury Data System, a PDS file is created using the pertinent information and this information is coded into the CPSC computer system.

Follow-up investigation of selected cases by CPSC may be conducted, but only in accordance with state health department criteria. Confidentiality of the identity of the victim is strictly observed at all times by CPSC and its representatives.

B. OBJECTIVE

The objective of the Death Certificate Project is to provide the Commission with timely information of deaths caused by or related to consumer products under the jurisdiction of CPSC. The collection of such data by either death certificates or

electronic death data is essential to analysis of the hazards of particular products, and in evaluating trends on product-related deaths.

C. STATEMENT OF WORK

Independently, and not as an agent of the Government, the Texas Department of State Health Services (DSHS), herein referred to as PERFORMING AGENCY, shall furnish all necessary personnel, materials, services, and facilities to conduct the work set forth below:

1. If the PERFORMING AGENCY provides death certificates:
 - a. The PERFORMING AGENCY shall collect and furnish copies of all death certificates as specified in Line Items 1 and 3. These death certificates are classified under specific external cause of death codes (ICD-10 Codes), as set forth in Attachment A for Fiscal Year 2016, for deaths occurring during or requested for, the applicable period in which the death occurred in the PERFORMING AGENCY'S jurisdiction. The search for ICD-10 codes will include underlying and contributing causes of death. Copies of death certificates as specified in Items 1 and 3 do NOT have to be certified. The PERFORMING AGENCY shall clearly mark the underlying or Contributing ICD-10 Code requested on all death certificates submitted. These codes have been selected because of the likelihood that consumer products of interest to the Commission, herein referred to as the RECEIVING AGENCY, may be involved.
 - b. The PERFORMING AGENCY shall provide the RECEIVING AGENCY with a copy of a computer printout if such printout is generated in identifying death certificates that meet the selection criteria contained in this agreement (Line Items 2 and 4), with each group/batch (BT) of certificates submitted. The listing shall include, as a minimum, the underlying and contributing ICD-10 Codes and death certificate number, and shall cover the time period of the batch submitted.
 - c. Copies of death certificates, other than those specified in Attachment A for Fiscal Year 2016, are NOT required. PAYMENT WILL ONLY BE MADE FOR THOSE CERTIFICATES WHOSE ICD-10 CODES ARE LISTED IN ATTACHMENT A FOR FISCAL YEAR 2016.
 - d. The RECEIVING AGENCY will protect the confidentiality of the certificates and the personally identifying information contained therein. No certificate or electronic death data file will be released to the public. Only non-identifying coded information will be released to the public under a FOIA request or in reports produced by CPSC staff.

2. If the PERFORMING AGENCY provides electronic death data:

- a. The PERFORMING AGENCY shall collect and furnish to CPSC electronic data as specified in Line Items 1 and 3. these data are classified under specific external cause of death codes (ICD-10 Codes), as set forth in Attachment A for Fiscal Year 2016, for deaths occurring during or requested for, the applicable period in which the death occurred in the PERFORMING AGENCY'S jurisdiction. The search for ICD-10 codes will including underlying and contributing causes of death. The PERFORMING AGENCY shall clearly mark the underlying or contributing ICD-10 Code requested on all death data submitted. These codes have been selected because of the likelihood that consumer products of interest to the Commission may be involved.
- b. Death data, other than specified in Attachment A for Fiscal Year 2016 are NOT required. PAYMENT WILL ONLY BE MADE FOR DEATHS WHOSE ICD-10 CODES ARE LISTED IN ATTACHMENT A FOR FISCAL YEAR 2016.
- c. The RECEIVING AGENCY will protect the confidentiality of the certificates and the personally identifying information contained therein. No certificate or electronic death data file will be released to the public. Only non-identifying coded information will be released to the public under a FOIA request or in reports produced by CPSC staff.

Data files shall NOT be used for any purpose other than that specifically set forth above and shall be deleted after serving the purpose set forth above.

- d. The RECEIVING AGENCY will acknowledge that data files may not be matched in the process instituted by RECEIVING AGENCY due to
 - 1) Occasional errors on the face of the death certificate; and
 - 2) Normal key-entry errors (see ACCEPTANCE PERIOD).

D. AGREEMENT PERIOD

This Agreement is effective upon signature of both parties and commences October 1, 2015, and shall continue through September 30, 2016, unless the period is extended by modification to this Agreement, or the latest delivery of death certificates for deaths which occurred during or requested for, the effective period (October 1, 2015 through September 30, 2016), whichever is later. Option year performance periods shall be as indicated in the Statement of work, if exercised.

Modification of this Agreement shall be by mutual consent of the parties; however, if either party desires to terminate this Agreement, a written notice to the other party shall be forwarded and received thirty (30) days in advance of the desired termination date.

E. PRIVACY ACT

This Agreement does not require PERFORMING AGENCY to maintain a system of records as defined in the Privacy Act of 1974. More specifically, the PERFORMING AGENCY is not required to, and agrees not to, maintain any system of records for or on behalf of the RECEIVING AGENCY, in which any records or any personal data are indexed by, or retrieved by, a person's name, social security number, or any other unique identification.

F. PRICE

The cost of each death certificate or the electronic death data, whichever is provided by the PERFORMING AGENCY, shall be the price as stated in each applicable line item. **WITH RESPECT TO EACH DEATH CERTIFICATE PROVIDED UNDER THE AGREEMENT, THE PERFORMING AGENCY WILL BE REIMBURSED AT THE RATE APPLICABLE TO THE YEAR THE DEATH OCCURRED, REGARDLESS OF THE DATE CPSC REQUESTS THE CERTIFICATE OR ELECTRONIC DATA.**

If the PERFORMING AGENCY submits death certificates and uses a computer printout to generate the list of death certificates, the PERFORMING AGENCY will be reimbursed for computer printout batches (BT) at the price stated in Line Items 2 and 4 of this Agreement.

G. ECONOMIC PRICE ADJUSTMENT

- a. The PERFORMING AGENCY warrants that the unit price stated in the Schedule for Line Items 1-4 (odd numbers) are not in excess of the PERFORMING AGENCY'S applicable established price in effect on the Agreement date for like quantities of the same item. The term "established price" means the price that the State has established as the statutory rate which is paid for a single certificate.
- b. The PERFORMING AGENCY shall promptly notify the Contracting Officer of the amount and effective date of any increases or decreases in the statutory rate.
- c. Revisions in established Agreement price shall be effective on the date that the State publishes revised current, statutorily set single certificate rates.

- d. The unit price of this Agreement will be modified upon verification of revision of the established price for the certificate rate.

H. DELIVERY

- a. If the PERFORMING AGENCY provides death certificates:

Death Certificates shall be delivered (mailed/faxed) either monthly, quarterly, semi-annually, or annually to the following address:

Death Certificate Project
Division of Hazard and Injury Data Systems
U.S. Consumer Product Safety Commission
4330 East West Highway
Bethesda, Maryland 20814
Attention: CPSC Contracting Officer Representative (COR)
FAX #: (800) 809-0924

- b. If the PERFORMING AGENCY provides electronic death data:

Death Data shall be delivered in an electronic format agreeable to both the PERFORMING AGENCY and CPSC COR either monthly, quarterly, semi-annually, or annually to the following address:

Death Certificate Project
Division of Hazard and Injury Data Systems
U.S. Consumer Product Safety Commission
4330 East West Highway
Bethesda, Maryland 20814
Attention: CPSC Contracting Officer Representative (COR)

OR

e-mail: first initial last name of COR@cpsc.gov (i.e., jdoe@cpsc.gov)

I. NOT TO EXCEED

This Agreement is issued on a "NOT TO EXCEED" basis because it is not possible to determine the exact quantities/services that will be required during performance of the Agreement. The total expended amount under the Agreement shall not exceed the grand total, nor is the PERFORMING AGENCY entitled to perform work and expect reimbursement beyond that amount, without approval of the contracting officer. The Contracting Officer Representative (COR) must provide the Contracting Officer with a revised quantity, "Not to Exceed" total, and funding to process a modification to the Agreement. The PERFORMING AGENCY is not authorized to invoice and/or receive payment

for additional work above the specified Agreement total without receipt of a formal, written modification to the Agreement.

J. CONTRACTING OFFICER REPRESENTATIVE (COR)

FOR CPSC:
Zsuzsanna Kocsis
(301) 504-7402

FOR TX DEPT. OF STATE HEALTH SVC
Geraldine Harris
(512) 458-7721

K. COMPENSATION

RECEIVING AGENCY will reimburse PERFORMING AGENCY the estimated total amount of \$10,000.00 for services rendered pursuant to this Agreement. This amount is for the following:

| <u>Item</u> | <u>Supplies/Services</u> | <u>Quantity</u> (Estimated) | <u>Unit Price</u> | <u>Amount</u> |
|-------------|--|--------------------------------|-------------------|---------------|
| 1 | Collection and duplication of Death Certificates | 500 ea. | \$20.00 | \$10,000.00 |
| 2 | Computer Printout(s) | 1 BT | -0- | -0- |

Option Periods:

First option period:

Items 3-4: 10/01/16 thru 09/30/17 – quantity and unit price remains unchanged

L. ACCOUNTING AND APPROPRIATION DATA

0100A16DSE 2016 1128200000 EXHR004310 252E0

M. BILLING INSTRUCTIONS

Pursuant to the Prompt Payment Act (P.L. 97-177) and the Prompt Payment Act Amendments of 1988 (P.L. 100-496) all Federal agencies are required to pay their bills on time, pay interest penalties when payments are made late, and to take discounts only when payments are made within the discount period. To assure compliance with the Act, vouchers and/or invoices shall be submitted on any acceptable invoice form which meets the criteria listed below.

Examples of government vouchers that may be used are the Public Vouchers for Purchase and Services Other Than Personal, SF 1034, and Continuation Sheet, SF 1035. At a minimum, each invoice shall include:

1. The name and address of the business concern (and separate remittance address, if applicable).
2. Do NOT include Taxpayer Identification Number (TIN) on invoices sent via e-mail.
3. Invoice date.
4. Invoice number.
5. The contract or purchase order number (see block 2 of OF347 and block 4 of SF1449 on page 1 of this order), or other authorization for delivery of goods or services.
6. Description, price and quantity of goods or services actually delivered or rendered.
7. Shipping cost terms (if applicable).
8. Payment terms.
9. Other substantiating documentation or information as specified in the contract or purchase order.
10. Name, title, phone number and mailing address of responsible official to be notified in the event of a deficient invoice.

ORIGINAL VOUCHERS/INVOICES SHALL BE SENT TO:

U.S. Mail
CPSC Accounts Payable Branch, AMZ-160
PO Box 25710
Oklahoma City, Ok. 73125

FEDEX
CPSC Accounts Payable Branch, AMZ-160
6500 MacArthur Blvd.
Oklahoma City, Ok. 73169

OR

Via email to:

9-AMC-AMZ-CPSC-Accounts-Payable@faa.gov

Invoices not submitted in accordance with the above stated minimum requirements will not be processed for payment. Deficient invoices will be returned to the vendor within seven days or sooner. Standard forms 1034 and 1035 will be furnished by CPSC upon request of the contractor.

Inquiries regarding payment should be directed to the Enterprise Service Center (ESC), Office of Financial Operations, Federal Aviation Administration (FAA) in Oklahoma City, 405-954-7467.

PAYMENT

Payment will be made as close as possible to, but not later than, the 30th day after receipt of a proper invoice as defined in "Billing Instructions," except as follows:

When a time discount is taken, payment will be made as close as possible to, but not later than, the discount date. Discounts will be taken whenever economically justified. Otherwise, late payments will include interest penalty payments. Inquiries regarding payment should be directed to Debbie Young at 405-954-7467 or at the U.S. Mail and Fedex addresses listed above:

Complaints related to the late payment of an invoice should be directed to Eldona Canterbury at the same the same address (above) or 405-954-5351.

Customer Service inquiries may be directed to Adriane Clark at AClark@cpsc.gov.

N. PROMPT PAYMENT

1. In accordance with the Prompt Payment Act (P.L. 97-177), payments under this Agreement will be due on the 30th calendar day after the later of:
 - a. The date of actual receipt of a proper invoice in the office designated to receive the invoice, or
 - b. The seventh (7th) day after the computer printouts are actually delivered and accepted by the Government.
2. The date of the check issued in payment shall be considered to be the date payment is made.

O. CLAUSES INCORPORATED BY REFERENCE

This Agreement incorporates the following clauses by reference from the Federal Acquisition Regulation (48 CFR CHAPTER 1) with the same force and effect as if

set forth in full text. Upon request, the Contracting Officer will make its full text available.

| Clause | Title | Date |
|----------|---|-----------|
| 52.204-4 | Printed or Copied Double-Sided On Recycled Paper | May 2011 |
| 52.243-1 | Changes - Fixed Price | Aug. 1987 |

P. ACCEPTANCE PERIOD

All materials submitted for approval will be reviewed and either accepted or rejected by the CPSC COR in the Division of Hazard and Injury Data Systems, Room 506, 4330 East West Highway, Bethesda, Maryland 20814-4408, within five (5) working days after date of receipt. Acceptance or rejection of materials submitted will be based on the List of Death Certificate ICD-10 Codes that will be collected in Fiscal Year 2016, see Attachment A. All certificates considered to be out-of-scope, i.e., those not falling within the ICD-10 Codes listed in Attachment A, will be returned to the PERFORMING AGENCY and will not be reimbursed.

Q. CLAUSES INCORPORATED IN FULL TEXT

52.204-7 System for Award Management (SAM) (Jul, 2013)

(a) Definitions. As used in this provision—

“Data Universal Numbering System (DUNS) number” means the 9-digit number assigned by Dun and Bradstreet, Inc. (D&B) to identify unique business entities.

“Data Universal Numbering System +4 (DUNS+4) number” means the DUNS number assigned by D&B plus a 4-character suffix that may be assigned by a business concern. (D&B has no affiliation with this 4-character suffix.) This 4-character suffix may be assigned at the discretion of the business concern to establish additional System for Award Management records for identifying alternative Electronic Funds Transfer (EFT) accounts (see the FAR at [Subpart 32.11](#)) for the same concern.

“Registered in the System for Award Management (SAM) database” means that—

(1) The offeror has entered all mandatory information, including the DUNS number or the DUNS+4 number, the Contractor and Government Entity (CAGE) code, as well as data required by the Federal Funding Accountability and Transparency Act of 2006 (see [Subpart 4.14](#)) into the SAM database;

(2) The offeror has completed the Core, Assertions, and Representations and Certifications, and Points of Contact sections of the registration in the SAM database;

(3) The Government has validated all mandatory data fields, to include validation of the Taxpayer Identification Number (TIN) with the Internal Revenue Service (IRS). The offeror will be required to provide consent for TIN validation to the Government as a part of the SAM registration process; and

(4) The Government has marked the record “Active”.

(b)(1) By submission of an offer, the offeror acknowledges the requirement that a prospective awardee shall be registered in the SAM database prior to award, during performance, and through final payment of

any contract, basic agreement, basic ordering agreement, or blanket purchasing agreement resulting from this solicitation.

(2) The offeror shall enter, in the block with its name and address on the cover page of its offer, the annotation "DUNS" or "DUNS +4" followed by the DUNS or DUNS +4 number that identifies the offeror's name and address exactly as stated in the offer. The DUNS number will be used by the Contracting Officer to verify that the offeror is registered in the SAM database.

(c) If the offeror does not have a DUNS number, it should contact Dun and Bradstreet directly to obtain one.

(1) An offeror may obtain a DUNS number—

(i) Via the Internet at <http://fedgov.dnb.com/webform> or if the offeror does not have internet access, it may call Dun and Bradstreet at 1-866-705-5711 if located within the United States; or

(ii) If located outside the United States, by contacting the local Dun and Bradstreet office. The offeror should indicate that it is an offeror for a U.S. Government contract when contacting the local Dun and Bradstreet office.

(2) The offeror should be prepared to provide the following information:

(i) Company legal business.

(ii) Tradestyle, doing business, or other name by which your entity is commonly recognized.

(iii) Company Physical Street Address, City, State, and ZIP Code.

(iv) Company Mailing Address, City, State and ZIP Code (if separate from physical).

(v) Company Telephone Number.

(vi) Date the company was started.

(vii) Number of employees at your location.

(viii) Chief executive officer/key manager.

(ix) Line of business (industry).

(x) Company Headquarters name and address (reporting relationship within your entity).

(d) If the Offeror does not become registered in the SAM database in the time prescribed by the Contracting Officer, the Contracting Officer will proceed to award to the next otherwise successful registered Offeror.

(e) Processing time, which normally takes 48 hours, should be taken into consideration when registering. Offerors who are not registered should consider applying for registration immediately upon receipt of this solicitation.

(f) Offerors may obtain information on registration at <https://www.acquisition.gov>.

52.217-08 OPTION TO EXTEND SERVICES (Nov 1999)

The Government may require continued performance of any services at the rates specified in the contract. The option provision may be exercised more than once, but the total extension of performance hereunder shall not exceed 6 months. The Contracting Officer may exercise the option by written notice to the Contractor within 30 days before the contract is to expire.

52.217-09 OPTION TO EXTEND THE TERM OF THE CONTRACT (Mar 2000)

(a) The Government may extend the term of this contract by written notice to the Contractor within fifteen (15) days; provided that the Government gives the

Contractor a preliminary written notice of its intent to extend at least thirty (30) days before the contract expires. The preliminary notice does not commit the Government to an extension.

- (b) If the Government exercises this option, the extended contract shall be considered to include this option clause.
- (c) The total duration of this contract, including the exercise of any options under this clause, shall not exceed 5 years.

52.232-18 AVAILBILITY OF FUNDS (Apr 1984)

The Government's obligation under this contract is contingent upon the availability of appropriated funds from which payment for contract purposes can be made. No legal liability on the part of the Government for any payment may arise until funds are made available to the Contracting Officer for this contract and until the Contractor receives notice of such availability, to be confirmed in writing by the Contracting Officer.

R. DISAGREEMENTS

In the event that CPSC and the Texas Department of Health have a disagreement arising under this Agreement, the parties shall cooperatively seek to resolve the disagreement by themselves. If the disagreement cannot be resolved between them, the parties agree to seek the assistance of a third party in resolving the disagreement.

S. SEVERABILITY

Nothing in this Agreement shall prevent either agency from carrying out their statutory duties. If any provision of this Agreement is construed to be illegal or invalid, it will not affect the legality or validity of any of the other provisions. The illegal or invalid provision will be deleted, but all other provisions will continue.

T. AUTHORITY

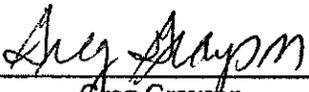
This Agreement is entered into pursuant to the authority of Sections 5(c) and 27(g) of the Consumer Product Safety Act, 15 U.S.C. 2054(c) and 2076(g), and Chapter 2260 of the Texas Government Code.

U. APPROVAL

The signatures below signify approval of these arrangements.
Executed in duplicate originals on the dates indicated below.

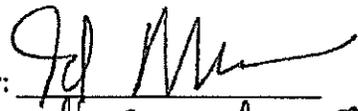
RECEIVING AGENCY

Consumer Product Safety
Commission

By: 
 Greg Grayson
Title: Contracting Officer
Date: 5 May 2016

PERFORMING AGENCY

Texas Department of State
Health Services

By: 
Title: Chief Operating Officer
Date: 5/4/2016

Attachment A

List of ICD-10 DEATH CERTIFICATE CODES THAT WILL BE COLLECTED IN FY16 (10/01/15 - 09/30/2016) , All States
Except Florida and Pennsylvania

| ICD-10 Code | Description per ICD-10 Text |
|---|--|
| V86 | Occupant of special all-terrain or other motor vehicle designed primarily for off-road use |
| V10-V11, V16-V18 | Transport accidents involving a pedalcycle or pedalcyclist |
| X40-X45; only ages <5 | Accidental poisonings by exposure to various drugs |
| X46, X49 | Accidental poisonings by and exposure to noxious substances and their vapors (solvents, paints, chemicals, etc.) |
| X47 | Accidental poisonings by and exposure to other gases and vapors |
| W16 | Jumping/diving into water - not drowning/submersion |
| W09 | Fall involving playground equipment |
| X05-X06 | Ignition of nightwear and other clothing & apparel |
| W65-W68, (W73-W74, only loc=.0-.3, .5) V90.7, V90.8 | Accidental drowning and submersion |
| W80; only ages <5 | Inhalation/ingestion of other objects causing obstruction of respiratory tract |
| W75, W76, W81, W83 | Accidental suffocation, hanging, strangulation |
| W44 | Foreign body entering into or through eye or natural orifice |
| W20; only ages <20 | Struck by thrown, projected or falling objects |
| W21, W50, W51 | Striking against/by sports equip., BB gun, other person (in sports) |
| W22 | Striking against or struck by other objects |
| W23 | Caught, crushed, jammed or pinched in or between objects |
| W25-W29, (W31; only loc=.0-.2) | Contact with other an unspecified machinery, mowers, knives, etc. |
| W35-W36, W40 | Explosion and rupture of boiler, gas cylinder |
| W39 | Discharge of firework |
| X11-X19 | Contact with heat and hot substances |
| W85-W87 | Exposure to other specified or unspecified electric current |
| Y10-Y15 only age <5; Y16, Y19 | Poisoning/exposure of undetermined intent: to drugs (<5), solvents, corrosives |
| Y17 | Poisoning/exposure of undetermined intent to gases and vapors |
| Y20 | Hanging, strangulation and suffocation, undetermined intent |
| Y21 | Drowning and submersion, undetermined intent |
| Y26-Y27 | Exposure to smoke, fire, steam, of undetermined intent |