

| AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT | | | 1. CONTRACT ID CODE R | PAGE OF PAGES 1 4 |
|--|----------------------------------|--|--|------------------------|
| 2. AMENDMENT/MODIFICATION NO. P00016 | 3. EFFECTIVE DATE 01-Dec-2000 | 4. REQUISITION/PURCHASE REQ. NO. | 5. PROJECT NO.(If applicable) SB1A710000-01 | |
| 6. ISSUED BY CODE US ARMY SPACE AND MISSILE DEFENSE COMMAN PO BOX 1500 HUNTSVILLE AL 35807-3801 | W31RPD | 7. ADMINISTERED BY (If other than item 6) CODE DCMC SANTA ANA 34 CIVIC CENTER PLAZA P.O. BOX C 12700 SANTA ANA CA 92712-2700 | | S0513A |
| 8. NAME AND ADDRESS OF CONTRACTOR (No., Street, County, State and Zip Code) LOGICON INC., INFO TECHNOLOGY GROUP 222 WEST 6TH STREET SAN PEDRO CA 90733-0471 | | | 9A. AMENDMENT OF SOLICITATION NO. | |
| | | | 9B. DATED (SEE ITEM 11) | |
| | | | X 10A. MOD. OF CONTRACT/ORDER NO. DASG60-99-C-0002 | |
| | | | X 10B. DATED (SEE ITEM 13) 25-Jan-1999 | |
| CODE 56474 | 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, providing 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 | | | | |
| 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). | | | | |
| X C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF: FAR 52.222-41; 52.232-22; 52.243-2, Alt 1 | | | | |
| D. OTHER (Specify type of modification and authority) | | | | |
| E. IMPORTANT: Contractor <input type="checkbox"/> is not, <input checked="" type="checkbox"/> 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.) | | | | |
| 1. The contractor's remittance address is changed as shown herein. | | | | |
| 2. Estimated cost for CLINs 0005, 0007, 0009, 0014, 0016, and 0018 are increased as a result of incorporation (via Modification P00015) of Wage Determination 94-2512, Rev. 15. | | | | |
| 3. Option II, CLIN 0005, for HELSTF O&M Support for the period 8 Dec 2000 through 7 Dec 2001, is hereby exercised. | | | | |
| 4. Incremental funding is hereby obligated as follows: CLIN 0003: \$ 152,615 CLIN 0005: \$2,590,273 | | | | |
| 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) | |
| | | | CONTRACTING OFFICER | |
| 15B. CONTRACTOR/OFFEROR | 15C. DATE SIGNED | 16B. UNITED STATES OF AMERICA | | 16C. DATE SIGNED |
| (Signature of person authorized to sign) | | BY | | 01-Dec-2000 |
| | | (Signature of Contracting Officer) | | |

SECTION SF 30 BLOCK 14 CONTINUATION PAGE

SUMMARY OF CHANGES

Changes in Solicitation/Contract/Order Form

The total cost has increased from \$7,568,665.06 by \$3,910,431.00 to \$11,479,096.06

Changes in Section B

CLIN 0003

The estimated/max cost has increased from \$3,485,124.00 by \$19,743.00 to \$3,504,867.00

CLIN 0005

The Option set forth in CLIN 0005 has been exercised
The estimated/max cost has increased from \$3,580,163.00 by \$41,030.00 to \$3,621,193.00

CLIN 0007

The estimated/max cost has increased from \$3,644,308.00 by \$41,030.00 to \$3,685,338.00

CLIN 0009

The estimated/max cost has increased from \$3,706,145.00 by \$41,030.00 to \$3,747,175.00

CLIN 0014

The estimated/max cost has increased from \$2,019,723.00 by \$23,784.00 to \$2,043,507.00

CLIN 0016

The estimated/max cost has increased from \$2,051,877.00 by \$23,784.00 to \$2,075,661.00

CLIN 0018

The estimated/max cost has increased from \$2,081,225.00 by \$23,784.00 to \$2,105,009.00

Changes in Section G

Summary for the Payment Office

As a result of this modification, the total funded amount of the contract is increased by \$2,742,888.00 from \$7,435,793.00 to \$10,178,681.00

NOTE: ACRN AQ will not be used.

CLIN :0003

AR: 211 2040.0000 36-6020 P665605.E97-255Y SB1A710000 S01021 SB1A710000/IHHHEL/H

is increased by \$152,615.00 from \$0.00 to \$152,615.00

CLIN :0005

AR: 211 2040.0000 36-6020 P665605.E97-255Y SB1A710000 S01021 SB1A710000/IHHHEL/H

is increased by \$2,590,273.00 from \$0.00 to \$2,590,273.00

The following clauses which are incorporated by full text have been added or modified:

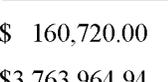
SUMMARY OF FUNDING

| | <u>CLIN</u> | <u>ORDER NO.</u> | <u>AMOUNT</u> | <u>MODIFICATION</u> |
|---------|-------------|------------------------|----------------|---------------------|
| ACRN AA | 0001 | JS9A730000 | \$3,139,381.00 | various |
| ACRN AB | | Funds moved to ACRN AP | | |
| ACRN AC | 0001 | JS9R205700-01 | \$30,000.00 | P00006 |
| ACRN AD | 0001 | JS9R205300-01 | \$10,600.00 | P00006 |
| ACRN AE | | Funds moved to ACRN AN | | |
| ACRN AF | | Funds moved to ACRN AN | | |
| ACRN AG | 0003 | SB0R205000-01 | \$30,136 | P00009 |
| ACRN AH | | Funds moved to ACRN AN | | |
| ACRN AJ | | Funds moved to ACRN AN | | |
| ACRN AK | 0003 | SB0A750600-01 | \$343,500.00 | P00012 |
| ACRN AL | 0003 | SB0206100-01 | \$4,726.00 | P00013 |
| ACRN AM | 0003 | SB0205700-01 | \$140,000.00 | P00013 |
| ACRN AN | 0001 | JS0A710800-01/02 | \$395,011.06 | P00015 |
| | 0003 | JS0A710800-02/03/04/05 | \$3,092,987.94 | P00015 |
| | 0011AA | JS0A710800-04 | \$230,000.00 | P00015 |
| ACRN AP | 0001 | JS9A750100-01 | \$105,450.00 | P00015 |
| ACRN AQ | | NOT USED | | |
| ACRN AR | 0003 | SB1A710000-01 | \$ 152,615.00 | P00016 |
| | 0005 | SB1A710000-01 | \$2,590,273.00 | P00016 |

IMPLEMENTATION OF AND EXPLANATION OF THE RELATIONSHIP OF THE LIMITATION OF FUNDS (LOF) CLAUSE TO FEE OBLIGATIONS: The amount of funds estimated to be required for full performance, including fee(s); the amount of funds allotted pursuant to the Contract Clause hereof entitled, Limitations of Funds; and the amount of funds currently obligated for fee are set forth below. Amounts obligated for fee are separate from and

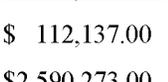
are not to be commingled with the amounts allotted for costs and are not available to the contractor to cover costs in excess of those allotted to the contract for cost.

CLIN 0003:

| | |
|--|---|
| (1) Amount Required for Full Funding, Including Fee(s): | \$3,763,965.00 |
| (2) Amount Allotted Under the LOF Clause for Payment of Costs: |  |
| (3) Amount Separately Obligated for Payment of Base Fee: |  |
| (4) Amount Separately Obligated for Payment of Award Fee: | \$ 160,720.00 * |
| (4) Total Amount Allotted and Obligated: | \$3,763,964.94 |
| (5) Net Amount Required for Full Funding: | \$ 0.06 |

* \$77,864 earned to date

CLIN 0005:

| | |
|--|---|
| (1) Amount Required for Full Funding, Including Fee(s): | \$3,890,688.00 |
| (2) Amount Allotted Under the LOF Clause for Payment of Costs: |  |
| (3) Amount Separately Obligated for Payment of Base Fee: |  |
| (4) Amount Separately Obligated for Payment of Award Fee: | \$ 112,137.00 * |
| (4) Total Amount Allotted and Obligated: | \$2,590,273.00 |
| (5) Net Amount Required for Full Funding: | \$1,300,415.00 |

* \$0 earned to date

REMITTANCE ADDRESS

Payments on the contract shall be paid via electronic funds transfer to:



If payment must be made via check from DFAS, use the following mailing address:

