Customer #s: <u>COLL02 (Employee Health)</u> <u>& CCHC01 (Elimination Program)</u>

AMENDMENT # 1

This amendment ("Amendment") to that certain Group Customer Agreement dated July 27, 2017 ("Agreement"), between Collin County Health Care Services ("Collin County") on its own behalf and as agent for and on behalf of its Operating Divisions (collectively referred to herein as "Customer") and Oxford Immunotec, Inc. ("Oxford"), is by and between Oxford and Customer and is effective from the later of the following: the date of full execution by the Parties or the date of receipt by Oxford whichever occurs last ("Amendment Date"). Oxford and Customer are collectively referred to herein as the "Parties".

WHEREAS, the Parties are desirous of amending the Agreement.

NOW THEREFORE, in consideration of the agreements, mutual representations and covenants contained herein and for other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the Parties hereby agree as follows:

1. As of the Amendment Date, the Section entitled "Pricing" under the Exhibit B entitled "T-SPOT^{**}-TB Products" shall be deleted in its entirety and replaced with the following::

PRICING

T-SPOT®-TB test ("TB Test(s)") Pricing:

The pricing for TB Tests listed below will be available during the Initial Term. Following the Initial Term, Oxford may adjust the price on an annual basis by providing sixty (60) days' prior written notice thereof to Customer. Oxford will only bill for Services that produce a reportable result (i.e., positive, negative or borderline).

Test Type	Estimated Monthly TB Test Volume	Price Per TB Test
T-SPOT [®] -TB	90	\$36.00

2. Except as modified by this Amendment, all other terms of the Agreement shall remain in full force and effect. All capitalized terms used herein shall have the meaning set forth in the Agreement, unless otherwise defined herein.

IN WITNESS WHEREOF, the Parties hereto have caused this Amendment to the Agreement to be executed by their fully authorized representative.

Accepted and agreed to:

Collin County Health Care Services (by its authorized representative)		Oxford Immunote (by its authorized repr		-
Reith Self, President		Beckywerli	1 Curticats	Oxford's signature is contingent upon Customer signing this
Leth In fell		PAL	3-115 15	Agreement as offered and returning to Oxford on or before the Offer Deadline
Signature	Date	Signature	Date	set forth below.

This Amendment is null and void if it is not executed by Customer and returned to Oxford by March 23, 2018 ("Offer Deadline").

Please fax this Amendment to: 1-508-597-8086

Effective Date is ______(to be filled out by Oxford)