. United States Department of Justice

United States Marshals Service

Intergovernmental ! ice Agreement Housing of Federal Prisoners

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1. AGREEMENT NUM	1BER	2. EFFE	CTIVE DATE		REQUISITION/	PURCHA	SER/REQUEST N	10.		4. CONTR	OL NO.	
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Intergovernmental Service Agreement Schedule	IGA No. 12-92-0024	Page No. 2_ of6_

ARTICLE I - PURPOSE

The purpose of this Intergovernmental Service Agreement (IGA) is to establish a formal binding relationship between the U.S. Marshals Service (USMS) and other federal user agencies (the Federal Government) and Contra Costa County (the Local Government) for the detention of persons charged with or convicted of violations of Federal law or held as material witnesses (federal prisoners) at the West County Justice Center (the facility).

ARTICLE II - SUPPORT AND MEDICAL SERVICES

- 1. The Local Government agrees to accept and provide for the secure custody, care and safekeeping of federal prisoners in accordance with state and local laws, standards, policies, procedures, or court orders applicable to the operations of the facility.
- 2. The Local Government agrees to provide federal prisoners with the same level of medical care and services provided local prisoners including the transportation and security for prisoners requiring removal from the facility for emergency medical services. All costs associated with hospital or health care services provided outside the facility will be paid directly by the Federal Government.
- 3. The Local Government agrees to notify the U.S. Marshal as soon as possible of all emergency medical cases requiring removal of a prisoner from the facility and to obtain prior authorization for removal for all other medical services required.

ARTICLE III - RECEIVING AND DISCHARGE

- 1. The Local Government agrees to accept as federal prisoners those persons committed by federal law enforcement officers for violations of federal laws only upon presentation by the officer of proper law enforcement credentials.
- 2. The Local Government agrees to release federal prisoners only to law enforcement officers of agencies initially committing the prisoner (i.e. DEA, INS, etc.) or to a Deputy United States Marshal. Those prisoners who are remanded to custody by a U.S. Marshal (USM) may only be released to a USM or an agent specified by the USM of the Judicial District.
- 3. The Federal Government agrees to maintain federal prisoner population levels at or below the level established by the facility administrator.

Intergovernmental Service Agreement Schedule	IGA No. 12-92-0024	Page No3_ of6_
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4. Federal prisoners may not be released from the facility or placed in the custody of state or local officials for any reason except for medical emergency situations. Federal prisoners sought for a state or local court proceeding must be acquired through a Writ of Habeas Corpus or the Interstate Agreement of Detainers and then only with the concurrence of the District U.S. Marshal.

ARTICLE IV - PERIOD OF PERFORMANCE

This Agreement shall be in effect indefinitely until terminated in writing by either party. Should conditions of an unusual nature occur making it impractical or undesirable to continue to house prisoners, the Local Government may suspend or restrict the use of the facility by giving written notice to the U.S. Marshal. Such notice will be provided 30 days in advance of the effective date of formal termination and at least two weeks in advance of a suspension or restriction of use unless an emergency situation requires the immediate relocation of prisoners.

ARTICLE V - PER DIEM RATE AND ECONOMIC PRICE ADJUSTMENT

- 1. Per diem rates shall be established on the basis of actual and allowable costs associated with the operation of the facility during a recent annual accounting period or as provided for in an approved annual operating budget for detention facilities.
- 2. The Federal Government shall reimburse the Local Government at the fixed day rate identified on page 1 of this Agreement. The rate may be renegotiated not more than once per year, after the agreement has been in effect for twelve months.
- 3. The rate covers one (1) person per "prisoner day". The Federal Government may not be billed for two days when a prisoner is admitted one evening and removed the following morning. The Local Government may bill for the day of arrival but not for the day of departure.
- 4. When a rate increase is desired, the Local Government shall submit a written request to the USM at least 60 days prior to the desired effective date of the rate adjustment. All such requests must contain a completed Cost and Pricing Data Sheet which can be obtained from the USM. The Local Government agrees to provide additional cost information to support the requested rate increase and to permit an audit of accounting records upon request of the USM.

Intergovernmental Service Agreement Schedule

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_4___ of ___6

- 5. Criteria used to evaluate the increase or decrease in the perdiem rate shall be those specified in the federal cost standards for contracts and grants with State and Local Governments issued by the Office of Management and Budget.
- 6. The effective date of the rate modification will be negotiated and specified on the IGA Modification form approved and signed by a USMS Contracting Officer. The effective date will be established on the first day of the month for accounting purposes. Payments at the modified rate will be paid upon the return of the signed modification by the authorized local official to the USM.
- 7. Unless other justifiable reasons can be documented by the Local Government, per-diem rate increases shall not exceed the National Inflation rate as established by the U.S. Department of Labor, Bureau of Labor Statistics.

ARTICLE VI - BILLING AND FINANCIAL PROVISIONS

1. The Local Government shall prepare and submit original and separate invoices each month to the Federal Agencies listed below for certification and payment.

United States Marshals Service P.O. Box 36056 San Francisco, CA 94102

(215) 556-3930

Bureau of Prisons Western Region 7950 Dublin Blvd. - 4th Floor Dublin, CA 94568

(510) 803-4736

- 2. To constitute a proper monthly invoice, the name and address of the facility, the name of each Federal prisoner, their specific dates of confinement, the total days to be reimbursed, the appropriate per-diem rate as approved in the IGA, and the total amount billed (total days multiplied by the rate per day) shall be listed. The name, title, complete address and phone number of the local official responsible for invoice preparation should also be listed on the invoice.
- 3. The Prompt Payment Act, Public Law 97-177 (96 stat. 85, 31 USC 1801) is applicable to payments under this agreement and requires the payment to the Local Government of interest on overdue payments. Determinations of interest due will be made in accordance with the provisions of the Prompt Payment Act and the Office of Management and Budget Circular A-125.

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4. Payment under this agreement will be due on the thirtieth (30th) calendar day after receipt of a proper invoice, in the office designated to receive the invoice. If the due date falls on a nonworking day (e.g. Saturday, Federal holiday), then the due date will be the next working day. The date of the check issued in payment shall be considered to be the date payment is made.

ARTICLE VII - GOVERNMENT FURNISHED PROPERTY

- 1. It is the intention of the USMS to furnish excess Federal property to local governments for the specific purpose of improving jail conditions and services. Accountable excess property, such as furniture and equipment, remains titled to the USMS and shall be returned to the custody of the USMS upon termination of the agreement.
- 2. The Local Government agrees to inventory, maintain, repair, assume liability for and manage all federally provided accountable as well as controlled excess property. Such property cannot be removed from the jail without the prior written approval of USMS Headquarters. The loss or destruction of any such excess property shall be immediately reported to the U.S. Marshal and USMS Headquarters. Accountable and controlled excess property includes any property with a unit acquisition value of \$1,000.00 or more, all furniture, as well as equipment used for security and control, communication, photography, food service, medical care, inmate recreation, etc.
- 3. The suspension of use or restriction of bed space made available to the Marshals Service are agreed to be grounds for the recall and return of any or all government furnished property.
- 4. The dollar value of property provided each year will not exceed the annual dollar payment made by the USMS for prisoner support unless a specific exemption is granted by the Chief, Prisoner Operations Division.
- 5. It is understood and agreed that the Local Government shall fully defend, indemnify, and hold harmless the United States of America, its officers, employees, agents, and servants, individually and officially, for any and all liability caused by any act of any member of the Local Government or anyone else arising out of the use, operation or handling of any property (to include any vehicle, equipment, and supplies) furnished to the Local Government in which legal ownership is retained by the United States of America, and to pay all claims, damages, judgments, legal costs, adjuster fees, and attorney fees related thereto. The Local Government will be solely responsible for all maintenance, storage, and other expenses related to the care and responsibility for all property furnished to the Local Government.

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ARTICLE VIII - MODIFICATIONS/DISPUTES

- 1. Either party may initiate a request for modification to this agreement in writing. All modifications negotiated will be written and approved by the USMS Chief, Prisoner Operations Division and submitted to the Local Government on form USM 241a for approval.
- 2. Questions or concerns pertaining to this agreement are to be directed to the U.S. Marshal. Disputes, space guarantee questions, and unresolved issues are to be directed to the Chief, Prisoner Operations Division, USMS Headquarters.

ARTICLE IX - INSPECTION AND TECHNICAL ASSISTANCE

- 1. The Local Government agrees to allow periodic inspections of the facility by USMS Inspectors. Findings of the inspection will be shared with the facility administrator in order to promote improvements to facility operations, conditions of confinement and levels of services.
- 2. The USMS will endeavor to provide or acquire technical training and management assistance from other federal, state or local agencies or national organizations upon the request of the facility administrator.

ARTICLE X - AVAILABILITY OF FUNDS

The Federal Government's obligation under this agreement is contingent upon the availability of appropriated funds from which payment can be made and no legal liability on the part of the Government for any payment may arise until such funds are available.

AMENDME	NT OF SOLICITATION/MODIFIC	ATION OF CONTRACT		1. CONTRACT ID CODE		PAGE OF	PAGES
2. AMENDME	NT/MODIFICATION NO.	3 EFFECTIVE DATE	A RE	QUISITION/PURCHASE REQ. NO	15 DO	1	(If applicable)
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X	C. THIS SUPPLEMENTAL AGREEMEN					·	
	D OTHER (Specify type of modification	and authority)					
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15B CONTRA	ACTOR/OFFEROR	15C DATE SIGNED	168	UNITED STATES OF AMERICA			C. DATE SIGNED

NSN 7540-01-152-8070 Previous edition unusable STANDARD FORM 30 (REV. 10-83) Prescribed by GSA FAR (48 CFR) 53 243

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED	PAGE ()F
CONTINUATION SHEET	SEE SCHEDULE/HSCEDM-10-F-IG085/P00001	2	3

(A)	SUPPLIES/SERVICES	QUANTITY	l 1	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
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NAME AND ADDRESS OF CONTRACTOR (No., str	med county State and 7/B Code)	Laguna Niguel CA 92677	
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		HSCEDM-15-F-IG130 10B. DATED (SEE ITEM 13)	
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13. THIS ITEM ONLY APPLIES TO	MODIFICATION OF CONTRACTS/ORDS	ERS. IT MODIFIES THE CONTRACT/ORDER NO. AS O	ESCRIBED IN ITEM 14.
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B. THE ABOVE NUMBERED CONTRAPPROPRIATION OF APPROPRIATION OF AMENDMENT/MODIFICATION OF STATEMENT OF AMENDMENT/MODIFICATION OF STATEMENT OF AMENDMENT/MODIFICATION OF STATEMENT	ACT/ORDER IS MODIFIED TO REFLECT THE IN ITEM 14, PURSUANT TO THE AU NOTIS ENTERED INTO PURSUANT TO In and authority) ion / FAR 4.804 Clos [x] is required to sign this document at I (Organized by UCF section headings, if . dhs.gov, Phone Number v, Phone Number: (916) thee Brown ths.gov, Phone Number ation is to de-obligate	THE ADMINISTRATIVE CHANGES (such as change THORITY OF FAR 43.103(b). AUTHORITY OF: eout and return 1 copies to the issuinctuting solicitation/contract subject matter where feasing er: (661) 328-4503 1 329-4326 1 (202) 732-2675 ate the amount of \$5,509,744 OA as heretofore changed, remains unchanged and in	THE CONTRACT s in paying office, ing office. ible.)
B. THE ABOVE NUMBERED CONTRAPPOPARATION date, etc.) SET FOR C. THIS SUPPLEMENTAL AGREEME O. OTHER (Specify type of modification of the contractor is not.) II. DESCRIPTION OF AMENDMENT/MODIFICATION OF AMENDMENT/MODIFICATION OF SUNS Number: 007669216 FOR: Nathan R. Lindsey in the contract of the con	ACT/ORDER IS MODIFIED TO REFLECT THE IN ITEM 14, PURSUANT TO THE AU NOTIS ENTERED INTO PURSUANT TO In and authority) ion / FAR 4.804 Clos [x] is required to sign this document at I (Organized by UCF section headings, if . dhs.gov, Phone Number v, Phone Number: (916) the Brown this gov, Phone Number ation is to de-obligate the document referenced in tem 9 A or 1	THE ADMINISTRATIVE CHANGES (such as change ITHORITY OF FAR 43.103(b). AUTHORITY OF. BOUL Including solicitation/contract subject matter where feasure: (661) 328-4503 Carrier (202) 732-2675 The ate the amount of \$5,509,744 CA as heretofore changed, remains unchanged and in 16A NAME AND TITLE OF CONTRACTING OFF	THE CONTRACT s in paying office, ing office. ible.)
ORDER NO. IN ITEM 10A. B. THE ABOVE NUMBERED CONTR. appropriation dale, etc.) SET FOR C. THIS SUPPLEMENTAL AGREEME O. OTHER (Specify type of modification of the contract Specialist: Kimber on the contract Specialist: Kimber on the contract of the contr	ACT/ORDER IS MODIFIED TO REFLECT HIN ITEM 14, PURSUANT TO THE AU NOT IS ENTERED INTO PURSUANT TO In and authority) ion / FAR 4.804 Clos is required to sign this document at (Organized by UCF section headings, i) dhs.gov, Phone Number v, Phone Number: (916) lee Brown dhs.gov, Phone Number ation is to de-obligate the document referenced in Item 9 A or 1	THE ADMINISTRATIVE CHANGES (such as change THORITY OF FAR 43.103(b). AUTHORITY OF: eout and return 1 copies to the issuinctuting solicitation/contract subject matter where feasing er: (661) 328-4503 1 329-4326 1 (202) 732-2675 ate the amount of \$5,509,744 OA as heretofore changed, remains unchanged and in	THE CONTRACT s in paying office, ing office. ible.)
DOTHER (Specify type of modification of the normal): Nathan R. Lindsey@ice. Internate COR: Donna Ore mail: Donna.Ore@ice.dhs.gov. Internate CoR: Donna Ore mail: Momentate CoR: Donna Ore mail: Donna.Ore@ice.dhs.gov. Internate CoR: Donna Ore mail: Momentate CoR: Donna Ore mail: Donna.Ore@ice.dhs.gov. Internate CoR: Donna Ore mail: Momentate CoR: Donna Ore mail: Donna.Ore@ice.dhs.gov. Internate CoR: Donna Ore mail: Momentate CoR: Donna Ore mail: Donna.Ore@ice.dhs.gov. Internate CoR: Donna Ore mail: Momentate CoR: Donna	ACT/ORDER IS MODIFIED TO REFLECT THE IN ITEM 14, PURSUANT TO THE AU NOTIS ENTERED INTO PURSUANT TO In and authority) ion / FAR 4.804 Clos [x] is required to sign this document at I (Organized by UCF section headings, if I che brown the Brown the Brown at ion is to de-obligate the document referenced in item 9 A or 1	THE ADMINISTRATIVE CHANGES (such as change THORITY OF FAR 43.103(b). AUTHORITY OF: eout Indiretum 1 copies to the issuinctuding solicitation/contract subject matter where feasing er: (661) 328-4503 er: (202) 732-2675 ate the amount of \$5,509,744 DA as heretofore changed, remains unchanged and in 16A NAME AND TITLE OF CONTRACTING OFF Virginia Collie	THE CONTRACT s in paying office, ing office. ible.) 1.00, and to full force and effect. ICER (Type or print)

Prescribed by GSA FAR (48 CFR) 53.243

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED	PAGE	OF
CONTINUATION SHEET	IGA 11-09-0034/HSCEDM-15-F-IG130/P00007	2	1 3

ITEM NO.	SUPPLIES/SERVICES	QUANTITY		UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	closeout the task order number under HSCEDM-15-F-IG130. All deliverables have been				
	received, and all invoices have been paid. In				
	accordance with the closeout procedures of FAR				
	4.804, this task order is hereby modified as follows:				
	TOTIONS.				
	a. Within this closeout modification, the				
	contractor hereby releases the Government from				
	any and all liability under this task order.				
	The total amount of this task order is decreased				
	as follows:				
	From: \$5,514,582.00 By: \$4,838.00 To:				
	\$5,509,744.00				
	Exempt Action: Y Discount Terms:				
	Net 30				
	FOB: Destination				
	Period of Performance: 07/01/2015 to 06/30/2016				
	Change Item 0001 to read as follows(amount shown				
	is the total amount):				
0001	HOUSING FOR DETAINEES (WEST FACILITY)	67192	EA	82.00	5,509,744.
	CLIN 0001 is decreased as follows:				
	From: \$5,514,582.00 By: \$4,838.00 To:				
	\$5,509,744.00				
	The total quantity is decreased as follows:				
	From: 67,251 By: 59 To: 67,192				
	Product/Service Code: S206				
	Product/Service Description: HOUSEKEEPING- GUARD				
	Dogguesting To 6				
	Accounting Info: ERODETN-R02 BA 31-12-00-000				
	18-63-0500-05-00-00-00 GE-25-72-00 Funded: \$0.00			T	
	Accounting Info:				
	ERODETN-R02 UP 31-12-00-000				
	18-63-0500-05-00-00-00 GE-25-72-00				
	Funded: \$0.00				
	Accounting Info:				
	ERODETN-R02 BA 31-12-00-000		E 9 e 5		
	18-63-0500-05-00-00-00 GE-25-72-00				
	Funded: \$0.00				
	Accounting Info:				
	USP0000-R02 UP 31-12-00-000				
	18-63-0500-05-00-00-00 GE-25-72-00				
	Continued				
7540-01-152-	0007				

CONTINUATION SHEET REFERENCE NO. OF DOCUMENT BEING CONTINUED IGA 11-09-0034/HSCEDM-15-F-IG130/P00007	REFERENCE NO. OF DOCUMENT BEING CONTINUED	PAGE C)F
CONTINUATION SHEET	IGA 11-09-0034/HSCEDM-15-F-IG130/P00007	3	3

M NO.	SUPPLIES/SERVICES	QUANTITY		UNIT PRICE	AMOUNT
A)	(B)	(C)	(D)	(E)	(F)
	000000		П		
	Funded: \$0.00				
	Accounting Info:				
	ERODETN-R02 BA 31-12-00-000				
	18-63-0500-05-00-00-00 GE-25-72-00				
	Funded: \$0.00	Principle of the second			
	Accounting Info: ERODETN-R02 BA 31-12-00-000				
	18-63-0500-05-00-00-00 GE-25-72-00				
	Funded: \$0.00				
	Accounting Info:				
	ERODETN-R02 BA 31-12-00-000				
	18-63-0500-05-00-00-00 GE-25-72-00				
	Funded: \$0.00				
	Accounting Info:				
	ERODETN-R02 BA 31-12-00-000				
	18-63-0500-05-00-00-00 GE-25-72-00				
	Funded: -\$4,838.00				
	The Government hereby requests that the vendor				
	execute, scan, and return this bilaterally signed				
	modification. Failure of response from the				
	vendor, the modification shall be considered				
	concurrence and will be processed as an				
	unilateral modification with the Government's				
	signature only.				
	All other terms and conditions referenced within				
	the IGA remain the same.				
7-1					

AMENDMENT OF SOLICITATION/MODIFICA	ATION OF CO	ONTRACT		1. CONTRACT ID CODE	F	PAGE OF	PAGES
2 AMENDMENT/MODIFICATION NO	3. EFFECTIVE	DATE	4. R	REQUISITION/PURCHASE REQ. NO.	5 PRO	JECT NO	(If applicable)
P00005	See Bloc	sk 160	19	2116FSFCOCOWR02.05			, - ,, -,,
6 ISSUED BY CODE			7. /	ADMINISTERED BY (If other than Item 6)	CODE	ICE/	DCR
ICE/Detent Mngt/Detent Contr Immigration and Customs Enfo Office of Acquisition Manage 24000 Avila Road, Room 3104 Laguna Niguel CA 92677	rcement		In Of 80 At	CE/Detention Compliance & migration and Customs Englished of Acquisition Manager 1 Street NW, suite 930 ctn: Kimberlee Brown	force	ovals ement	
8. NAME AND ADDRESS OF CONTRACTOR (No., street,	county, State and	7/D Codel		shington DC 20536 9A AMENDMENT OF SOLICITATION NO			
CONTRA COSTA COUNTY INC 651 PINE ST 7TH FLOOR MARTINEZ CA 945531229		-	x	98. DATED (SEE ITEM 11) 10A. MODIFICATION OF CONTRACT/ORDER NO IGA 11-09-0034 HSCEDM-15-F-IG130			
0005	I			108. DATED (SEE ITEM 13)			
CODE 0076692160000	FACILITY COD			04/16/2015			
The above numbered solicitation is amended as set fo		 		DMENTS OF SOLICITATIONS			
	r already submitt s received prior : iired)	ed , such change may be to the opening hour and d Net	ma tate In	de by telegram or latter, provided each telegram or specified.	57,6	00.00	
B THE ABOVE NUMBERED CONTRAC appropriation date, etc.) SET FORTH				ADMINISTRATIVE CHANGES (such as changes in TY OF FAR 43 103(b) ORITY OF	n paying	office.	
D OTHER (Speaty type of modification X Unilateral Modificat	• • • • • • • • • • • • • • • • • • • •	P 43 103/b)					
· · · · · · · · · · · · · · · · · · ·			eat.				
EIMPORTANT: Contractor x is not 14 DESCRIPTION OF AMENDMENTAMODIFICATION (DUNS Number: 007669216 COR: Nathan R. Lindsey Email: Nathan.R.Lindsey@ice.com	Organized by UC		udin	g solicitation/contract subject matter where feasibl			
Alternate COR: Donna Ore Email: Donna.Ore@ice.dhs.gov	, Phone Ni	umber: (916)	32	9-4326			
Contract Specialist: Kimberlo Email: Kimberlee.Brown@ice.dl The purpose of this modificat	ns.gov, l				0.00	to th	ne task
Continued							
Except as provided herein, all terms and conditions of the	e document refe	renced in Item 9 A or 10A	_				
15A. NAME AND TITLE OF SIGNER (Type or pnnt)				A NAME AND TITLE OF CONTRACTING OFFIC	EK (Typ	e or pnnt)	
15B CONTRACTOR/OFFEROR		15C. DATE SIGNED	₩.	B. UNITED STATES OF AMERICA			DATE SIGNED
(Signature of person authorized to sign)			1	(Signature of Contracting Officer)			2/23/14

NSN 7540-01-152-8070 Previous edition unusable STANDARD FORM 30 (REV. 10-83) Prescribed by GSA FAR (48 CFR) 53 243
 CONTINUATION SHEET
 REFERENCE NO. OF DOCUMENT BEING CONTINUED
 PAGE
 OF

 IGA 11-09-0034/HSCEDM-15-F-IG130/P00005
 2
 3

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A)	(B)	- (C)	(D)	(E)	(F)
ITEM NO			(D)		
	Accounting Info: ERODETN-R02 BA 31-12-00-000 18-63-0500-05-00-00-C0 GE-25-72-00 Funded: \$0.00 Accounting Info: USP0000-R02 UP 31-12-00-000 18-63-0500-05-00-00-C0 GE-25-72-00 000000 Funded: \$0.00 Accounting Info: ERODETN-R02 BA 31-12-00-000 18-63-0500-05-00-00-00 GE-25-72-00 Continued				

CONTINUATION SHEET	REFERENCE NO OF DOCUMENT BEING CONTINUED			
	IGA 11-09-0034/HSCEDM-15-F-IG130/P00005	3	3	

EM NO	SUPPLIES/SERVICES	QUANTITY		UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	Funded: \$0.00				
	Accounting Info:	ŀ			
	ERODETN-R02 BA 31-12-00-000				
	18-63-0500-05-00-00 GE-25-72-00	<u> </u>			
	Funded: \$557,600.00	İ			
	All other terms and conditions referenced within	i			
	the IGA remain the same.				
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AMENDMENT OF SOLICITATION/MODIFIC	ATION OF CONTRACT	1. CONTRACT ID CODE	PAGE OF PAGES
2 AMENDMENT/MODIFICATION NO.	3 EFFECTIVE DATE	4 REQUISITION/PURCHASE REQ. NO	5 PROJECT NO (If applicable)
P00008	See Block 16C	192117FSFCOCOMR08.08	The second
6 ISSUED BY CODE	ICE/DM/DC-LAGUNA	7. ADMINISTERED BY (If other than Item 6)	CODE ICE/DCR
ICEDETENT MNGTDETENT CONTRACTION AND CUSTOMS ENFO OFFICE OF ACQUISITION MANAGE 24000 AVILA ROAD ROOM 3104 LAGUNA NIGUEL CA 92677	T-LAG DRCEMENT	ICEDETENTION COMPLIANCE R IMMIGRATION AND CUSTOMS EN OFFICE OF ACQUISITION MANA 801 I STREET NW SUITE 930 ATTN KIMBERLEE BROWN	EMOVALS FORCEMENT
8 NAME AND ADDRESS OF CONTRACTOR (No. street		WASHINGTON DC 20536	
CONTRA COSTA COUNTY INC ATTN CONTRA COSTA COUNTY INC 651 PINE ST 7TH FLOOR MARTINEZ CA 945531229	County, State and ZIP Code)	98 DATED (SEE ITEM 11) 100 MODIFICATION OF CONTRACT/ORDER N 11GA-11-92-0024 HSCEDM-16-F-1G208 110B DATED (SEE ITEM 13)	0
CODE 0076692160000	FACILITY CODE	04/28/2016	
	11. THIS ITEM ONLY APPLIES TO	AMENDMENTS OF SOLICITATIONS	
CHECK ONE A THIS CHANGE ORDER IS ISSUED PORDER NO. IN ITEM 10A.	DDIFICATION OF CONTRACTS/ORDER PURSUANT TO (Specify authority) THE		HE CONTRACT
C. THIS SUPPLEMENTAL AGREEMENT			
D OTHER (Specify type of modification)			
X IAW 4.804 Closeout o	f Contract Files		
E. IMPORTANT: Contractor	[x] is required to sign this document and		
14 DESCRIPTION OF AMENDMENT/MODIFICATION (CDUNS Number: 007669216 Contracting Officer Represent Nathan.R.Lindsey@ice.dhs.gov; Alternate (COR): Donna Ore, E	tative (COR): Nathan Phone: (661) 328-4	R. Lindsey Email:	
The purpose of this modificate task order HSCEDM-16-F-IG208 this task order is modified at A. The program office certificantinued	and close the order as follows:	. In accordance with FAR 4.4	804 procedures
	determent reference d = h == 0.5 == 10		
Except as provided herein, all terms and conditions of the 15A NAME AND TITLE OF SIGNER (Type or pnnt)	document referenced in item 9 A or 10	A, as heretofore changed, remains unchanged and in fu 16A NAME AND TITLE OF CONTRACTING OFFIC	
	WENANT	Virginia L. Collie	,,,,,,
B < (Supposed of person outhonzed to sign)	15C DATE SIGNED	168 UNITED STATES OF AMERICA (Signature of Contracting Officer)	16C DATE SIGNED
N\$N 7540-01-752-8070 Previous edition unusable		Pro	ANDARD FORM 30 (REV 10-83) escribed by GSA R (48 CFR) 53 243

CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED

IGA-11-92-0024/HSCEDM-16-F-IG208/P00008

PAGE OF

3

this task order have been delivered and funds in the amount of \$2,040.00 may be deobligated. B. CLIN 0001: Temporary Detainee Housing is decreased by \$2,040.00 from \$54,570.00 to \$52,530.00. therefore the total obligated value of this task order is decreased from \$54,570.00 to \$52,530.00. C. The total value of this task order is hereby decreased by \$2,040.00 from \$54,570.00 to \$52,530.00. D. With this closeout modification the Contractor hereby releases the Government from any and all liability und this task order. Exempt Action: Y Sensitive Award: NONE FOB: Destination Period of Performance: 07/01/2016 to 06/30/2017 Change Item 0001 to read as follows (amount shown is the total amount): TEMPROARY DETAINEE HOUSING (MANDAYS) MAIN JAIL 618 EA 85.00 CLIN 0001 decreases as follows: From: \$54,570.00 By: \$-2,040.00 To: \$52,530.00 The total quantity remains the same as follows: From: 642 By: -24 To: 618 Product/Service Code: \$206 Product/Service Description: HOUSEKEEPING- GUARD Accounting Info: ERODETN-ROB BA 31-12-00-000 18-63-0500-00-00-00-00 GE-25-72-00 Funded: \$0.00 Accounting Info: ERODETN-ROB BB 31-12-00-000 18-63-0500-00-00-00 GE-25-72-00 Funded: \$0.00 Accounting Info: ERODETN-ROB BI 31-12-00-000 18-63-0500-00-00-00-00 GE-25-72-00 Funded: \$0.00 Accounting Info: ERODETN-ROB BI 31-12-00-000 18-63-0500-00-00-00-00 GE-25-72-00 Funded: \$0.00 Accounting Info: ERODETN-ROB BI 31-12-00-000 18-63-0500-00-00-00-00 GE-25-72-00 Funded: \$0.00 Accounting Info: ERODETN-ROB BI 31-12-00-000 18-63-0500-00-00-00-00 GE-25-72-00 Funded: \$0.00 Accounting Info: ERODETN-ROB BI 31-12-00-000 18-63-0500-00-00-00-00 GE-25-72-00 Funded: \$0.00 Accounting Info: ERODETN-ROB BI 31-12-00-000 18-63-0500-00-00-00-00-00 GE-25-72-00 Funded: \$0.00 Accounting Info: ERODETN-ROB BI 31-12-00-000 18-63-0500-00-00-00-00-00 GE-25-72-00 Funded: \$0.00 Accounting Info: ERODETN-ROB BI 31-12-00-000 18-63-0500-00-00-00-00-00 GE-25-72-00 Funded: \$0.00 Accounting Info: ERODETN-ROB BI 31-12-00-000 BI-25-72-00 Funded: \$0.00 Accounting Info: ERODETN-ROB BI 31	(A)	SUPPLIES/SERVICES	QUANTITY		UNIT PRICE	AMOUNT
the amount of \$2,040.00 may be deobligated. B. CLIN 0001: Temporary Detainee Housing is decreased by \$2,040.00 from \$54,570.00 to \$52,530.00. therefore the total obligated value of this task order is decreased from \$54,570.00 to \$52,530.00. C. The total value of this task order is hereby decreased by \$2,040.00 from \$54,570.00 to \$52,530.00. D. With this closeout modification the Contractor hereby releases the Government from any and all liability und this task order. Exempt Action: Y Sensitive Award: NONE FOB: Destination Period of Performance: 07/01/2016 to 06/30/2017 Change Item 0001 to read as follows(amount shown is the total amount): CLIN 0001 decreases as follows: From: 554,570.00 By: \$-2,040.00 To: \$52,530.00 The total quantity remains the same as follows: From: 642 By: -24 To: 618 Product/Service Code: \$206 Product/Service Description: HOUSEKEEPING- GUARD Accounting Info: ERODETN-ROB BA 31-12-00-000 18-63-0500-00-00-000 GE-25-72-00 Funded: \$0.00 Accounting Info: ERODETN-ROB BA 31-12-00-000 18-63-0500-00-00-000 GE-25-72-00 Funded: \$0.00 Accounting Info: ERODETN-ROB EI 31-12-00-000 18-63-0500-00-00-000 GE-25-72-00 Funded: \$0.00 Accounting Info: ERODETN-ROB EI 31-12-00-000 18-63-0500-00-00-000 GE-25-72-00 Funded: \$0.00 Accounting Info: ERODETN-ROB EI 31-12-00-000 18-63-0500-00-00-000 GE-25-72-00 Funded: \$0.00 Accounting Info: ERODETN-ROB EI 31-12-00-000 18-63-0500-00-00-000 GE-25-72-00 Funded: \$0.00 Accounting Info: ERODETN-ROB EI 31-12-00-000 18-63-0500-00-00-000 GE-25-72-00 Funded: \$0.00 Accounting Info: ERODETN-ROB EI 31-12-00-000 18-63-0500-00-00-000 GE-25-72-00 Funded: \$0.00 Accounting Info: ERODETN-ROB EI 31-12-00-000 18-63-0500-00-00-000 GE-25-72-00			(C)	(D)	(E)	(F)
Continued	001 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	the amount of \$2,040.00 may be deobligated. B. CLIN 0001: Temporary Detainee Housing is decreased by \$2,040.00 from \$54,570.00 to \$52,530.00, therefore the total obligated value of this task order is decreased from \$54,570.00 to \$52,530.00. C. The total value of this task order is hereby decreased by \$2,040.00 from \$54,570.00 to \$52,530.00. D. With this closeout modification the Contractor hereby releases the Government from any and all liability und this task order. Exempt Action: Y Sensitive Award: NONE FOB: Destination Period of Performance: 07/01/2016 to 06/30/2017 Change Item 0001 to read as follows(amount shown is the total amount): TEMPROARY DETAINEE HOUSING (MANDAYS) MAIN JAIL CLIN 0001 decreases as follows: From: \$54,570.00 By: \$-2,040.00 To: \$52,530.00 The total quantity remains the same as follows: From: 642 By: -24 To: 618 Product/Service Code: \$206 Product/Service Description: HOUSEKEEPING- GUARD Accounting Info: ERODETN-RO8 BA 31-12-00-000 BB-63-0500-00-00-00-00 GE-25-72-00 Funded: \$0.00 Accounting Info: ERODETN-RO8 BA 31-12-00-000 BB-63-0500-00-00-00-00 GE-25-72-00 Funded: \$0.00 Accounting Info: ERODETN-RO8 B1 31-12-00-000 BB-63-0500-00-00-00-00 GE-25-72-00 Funded: \$0.00 Accounting Info: ERODETN-RO8 B1 31-12-00-000 BB-63-0500-00-00-00-00 GE-25-72-00 Funded: \$0.00 Accounting Info: ERODETN-RO8 B1 31-12-00-000 BB-63-0500-00-00-00-00 GE-25-72-00 Funded: \$0.00 Accounting Info: ERODETN-RO8 B1 31-12-00-000 BB-63-0500-00-00-00-00 GE-25-72-00 Funded: \$0.00 Accounting Info: ERODETN-RO8 B1 31-12-00-000 BB-63-0500-00-00-00-00 GE-25-72-00 Funded: \$0.00 Accounting Info: ERODETN-RO8 B1 31-12-00-000 BB-63-0500-00-00-00-00-00 GE-25-72-00 Funded: \$0.00	618	EA	85.00	52,530.C
Continued		continued				

CONTINUATION	SHEET

REFERENCE NO OF DOCUMENT BEING CONTINUED IGA-11-92-0024/HSCEDM-16-F-IG208/P00008 PAGE 3

3

TEM NO	SUPPLIES/SERVICES	QUANTITY		UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	Funded: \$0.00				
	Accounting Info:				
	ERODETN-R08 E1 31-12-00-000				
	18-63-0500-00-00-00 GE-25-72-00				
	Funded: \$0.00				
	Accounting Info:				
	ERODETN-R08 E1 31-12-00-000				
	18-63-0500-00-00-00-00 GE-25-72-00				
	000000				
	Funded: \$0.00				
	Accounting Info:				
	ERODETN-R08 E1 31-12-00-000				
	18-63-0500-00-00-00 GE-25-72-00				
	Funded: -\$765.00				
	Accounting Info:				
	ERODETN-R08 E1 31-12-00-000				
	18-63-0500-00-00-00-00 GE-25-72-00				
	Funded: -\$1,275.00				
	All terms and conditions of the IGSA remain the				
	same.				
				Edit Male II	
1979					

AMENDMENT OF SOLICITATION/MODIFIC	ONTRACT		1. CONTRACT ID CODE		PAGE O	F PAGES	
2. AMENDMENT/MODIFICATION NO.	3. EFFECTIVE	DATE	4 0	EQUISITION/PURCHASE REQ. NO.	16.00	1	2
P00003			I	2117FSFCOCOMR08.02	5. PK	OJECT NO). (If applicable)
6. ISSUED BY CODE	See Bloc	C-LAGUNA		DMINISTERED BY (If other than Item 6)	CODE	FILER	/DM /DC TACINIA
ICEDETENT MNGTDETENT CONTRACTION AND CUSTOMS ENFO OFFICE OF ACQUISITION MANAGE 24000 AVILA ROAD ROOM 3104 LAGUNA NIGUEL CA 92677	CT-LAG DRCEMENT	C-LAGUNA	IC IM OF 24 AT	EDETENT MNGTDETENT CONTR MIGRATION AND CUSTOMS EN FICE OF ACQUISITION MANA 000 AVILA ROAD ROOM 3104 TN JOSE R MUNOZ JR	ACT-	-LAG CEMENT	/DM/DC-LAGUNA
8. NAME AND ADDRESS OF CONTRACTOR (No., stroot	t, county, State and	ZIP Code)	-	GUNA NIGUEL CA 92677 PA. AMENDMENT OF SOLICITATION NO.			
CONTRA COSTA COUNTY INC ATTN CONTRA COSTA COUNTY INC 651 PINE ST 7TH FLOOR MARTINEZ CA 945531229	98. DATED (SEE ITEM 11) x 10A. MODIFICATION OF CONTRACT/ORDER NO. 1GA-11-92-0024 HSCEDM-16-F-1G208 10B. DATED (SEE ITEM 13)						
CODE 0076692160000	CODE 0076692160000 FACILITY CODE						
	11. THIS ITE	M ONLY APPLIES TO A	MEN	DMENTS OF SOLICITATIONS			
CHECK ONE A. THIS CHANGE ORDER IS ISSUED FORDER NO. IN ITEM 10A.	OFFERS PRIOR or afready submitt is received prior ulrod) IODIFICATION OF PURSUANT TO:	TO THE HOUR AND DA ed , such change may b to the opening hour and F CONTRACTS/ORDER: (Specify authority) THE	S. IT	PECIFIED MAY RESULT IN REJECTION OF YO de by telegram or letter, provided each telegram o	SCRIB	FER If by makes ED IN ITEM	
C. THIS SUPPLEMENTAL AGREEMEN	T IS ENTERED I	NTO PURSUANT TO AL	JTHO	RITY OF:		- •	
D. OTHER (Specify type of modification	• • •					-	
X Unilateral Modificat		··					
		o sign this document and			-) .	
14. DESCRIPTION OF AMENDMENT/MODIFICATION DUNS Number: 007669216 . Contracting Officer Represen Nathan.R.Lindsey@ice.dhs.gov	tative (COR): Nathan (661) 328-4	R. 503	Lindsey Email:			
Alternate (COR): Donna Ore,							
This modification is issued 12/09/2016. It is estimated							
The total amount of the task From: \$26,605.00 By: \$0.00 Continued	To: \$2	6,605.00			L.n.c.	4 ~	
Except as provided herein, all terms and conditions of the 15A. NAME AND TITLE OF SIGNER (Type or print)	ie oocument refe	renced in item 9 A or 10		heretofore changed, remains unchanged and in t A. NAME AND TITLE OF CONTRACTING OFFII			
Sienen (jype ai pinny				irginia Collie	0EK [/]	ype or prin	'
15B. CONTRACTOR/OFFEROR		15C. DATE SIGNED	16	B. UNITED STATES OF AMERICA		16	SC. DATE SIGNED
(Signature of person authorized to sign)			10	(Signature of Contracting Officer)		-	(4)/8/14

NSN 7540-01-152-8070 Previous edition unusable STANDARD FORM 30 (REV. 10-83)
Prescribed by GSA
FAR (48 CFR) 53.243

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED	PAGE C	F
	IGA-11-92-0024/HSCEDM-16-F-IG208/P00003	2	2

ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
(A) 0001	Exempt Action: Y Discount Terms: Net 30 FOB: Destination Period of Performance: 07/01/2016 to 12/09/2016 Change Item 0001 to read as follows(amount shown is the total amount): TEMPROARY DETAINEE HOUSING (MANDAYS) MAIN JAIL CLIN 0001 remains the same as follows: From: \$26,605.00 By: \$0.00 To: \$26,605.00 The total quantity remains the same as follows: From: 313 By: 0 To: 313 Product/Service Code: \$206		EA	(E) 85.00	(F) 26,605.
	Accounting Info: ERODETN-R08 BA 31-12-00-000 18-63-0500-00-00-00-00 GE-25-72-00 Funded: \$0.00 Accounting Info: ERODETN-R08 BA 31-12-00-000 18-63-0500-00-00-00-00 GE-25-72-00 Funded: \$0.00 Accounting Info: ERODETN-R08 E1 31-12-00-000 18-63-0500-00-00-00-00 GE-25-72-00 Funded: \$0.00 Accounting Info: ERODETN-R08 E1 31-12-00-000 18-63-0500-00-00-00-00 GE-25-72-00 Funded: \$0.00 Accounting Info: ERODETN-R08 E1 31-12-00-000 18-63-0500-00-00-00-00 GE-25-72-00 Funded: \$0.00 . All terms and conditions of the IGA remain the same.				

AMENDMENT	OF SOLICITATION/MODIFICA	TION OF CONTRAC	т	1. CONTRACT ID CODE PAGE OF PAGES						
2. AMENDMENT/	MODIFICATION NO.	3. EFFECTIVE DATE	4 REC	L UISITION/PURCHASE REQ. NO.	OJECT NO. (If applicable)					
P00002		See Block 160	1921	192116FSFC0C0WR02.12						
6. ISSUED BY	CODE	ICE/DM/DC-LAG	<u> </u>	7 ADMINISTERED BY (If other than Item 6) CODE ICE/DCR						
IMMIGRATI OFFICE OF 24000 AVI	MNGTDETENT CONTRACTION AND CUSTOMS ENFORMANAGE ACQUISITION MANAGE LA ROAD ROOM 3104 GUEL CA 92677	IMM OFF 801 ATT	ICEDETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW SUITE 930 ATTN KIMBERLEE BROWN							
				HINGTON DC 20536						
CONTRA COS 651 PINE S	DRESS OF CONTRACTOR (No., stroot.) STA COUNTY INC ST 7TH FLOOR CA 945531229	county, State and ZIP Code)	× 10.	SB. DATED (SEE ITEM 11)						
CODE 0076	6692160000	FACILITY CODE	 ₀	4/29/2016						
		11. THIS ITEM ONLY A		IENTS OF SOLICITATIONS						
12. ACCOUNTING ERODETN-R		ired) 18–63–0500–05 DDIFICATION OF CONTRA	Net Inc -00-00-00 G ACTS/ORDERS. IT MA	rease:	DESCRIB					
	THE ABOVE NUMBERED CONTRAC appropriation date, etc.) SET FORTH THIS SUPPLEMENTAL AGREEMENT			MINISTRATIVE CHANGES (such as chang OF FAR 43.103(b) TY OF:	ges in payi	ng affice,				
	OTHER (Specify type of modification	and authority								
	Cunding Action Per F	**	al Eulle Eu	ndina						
E. IMPORTANT:				· · · · · · · · · · · · · · · · · · ·						
14 DESCRIPTION DUNS Numb	er: 007669216		headings, including s	copies to the iss	•	<u>. </u>				
Nathan.R.	ng Officer Represen Lindsey@ice.dhs.gov Donna Ore, Email: De	; Phone: (661)	328-4503							
performan	ce end date from 08 that the funds obl	/31/2016 to 0	9/30/2016 i	001 for detention bed n the amount of \$614, riod through 09/30/20	098.0					
Continued	•••									
		e document referenced in l		retofore changed, remains unchanged and						
15A. NAME AND	TITLE OF SIGNER (Type or print)			NAME AND TITLE OF CONTRACTING OF	FFICER (1	ype or print)				
158. CONTRACT	TOR/OFFEROR	15C. DAT		UNITED STATES OF AMERICA		16C. DATE SIGNED				
(Sk	gnature of person authorized to sign)	<u> </u>	[//	(Signature of Contracting Officer)		- DI3111W				

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED	PAGE O	F
	11-09-0034/HSCEDM-16-F-IG203/P00002	2	2

ITEM NO.	SUPPLIES/SERVICES	QUANTITY	TINU	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	FOB: Destination	- 		-	
	Period of Performance: 07/01/2016 to 09/30/2016	1			
	Change Item 0001 to read as follows(amount shown				
	is the obligated amount):				
	and the obligated amounty.				
0001	DETAINEES HOUSING (WEST FACILITY)	7489	EA	82.00	614,098.0
	All terms and condition of the IGA remain the				
	same.				
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		OF	RDER FOR	SUI	PPLIES OR SERV	/ICES				- 1	PAGE	OF PAG	E\$
IMPORTANT	Mark all	packages and papers with	contract and	or or	der numbers.				-		1	İ	8
1. DATE OF OF		2 CONTRACT NO. (If any) 11-09-0034				1			6. SHIP TO.		l-		
04/29/20	116	11-09-0034				a NAME	OF CC	NSIGNEE	-				
04/23/20		L	т										
3. ORDER NO.			4. REQUISIT	ION/R	EFERENCE NO.	ICE-ERC-FOD-FSF							
HSCEDM-	16-F-I	G203	192116	FSFC	COCOWR02.07	TOD DIO LOP LOP							
ICEDETER IMMIGRAT	NT MNG TION A	ress comespondence to) ETDETENT CONTRAC AND CUSTOMS ENFO	RCEMENT			1	RAT	PRESS ION CUSTOMS E TOL MALL ROOM		NT			
24000 AV	/ILA R	OAD ROOM 3104											
LAGUNA 1	NIGUEL	CA 92677				c CITY SACRA	MEN	то			d STATE CA	e ZIP 9581	
7. TO:						f. SHIP V	IA .	· · · · · · · · · · · · · · · · · · ·			·		·
a NAME OF CONTRA		OR COUNTY INC						9.77	E OF ORDER			_	
b. COMPANY N	IAME					- Bu	IRCHA		E OF ORBER	X .	DELIVERY		· · · · ·
c. STREET ADI	ORESS	-				REFERE				Λ.D.	DELIVERY		
		TH FLOOR									nt for billing i		
						l				-	ct to instruct		
						ne following on the terms		this side online issued subjection					
d. CITY	-		1	TATE	f. ZIP CODE	_		pecified on both sides of the attached sheet, if			ions of the a	ipove-ur	mbered
MARTINEZ			-	A	945531229			elivery as indicated.		contra	ict.		
9. ACCOUNTING		PROPRIATION DATA						NING OFFICE RCEMENT REMO	י				
		CATION (Check appropriate b	ox(es))			1100 0		REMORE REMO	VAL	T 12	F.O.B. POI	NT	
a. SMALL	í	b. OTHER THAN SMALL	. —	ADVAN	NTAGED d. W	OMEN-OWNE	D	e. HUBZone					
1 SERVIC	E-DISABLI	ED g WOMEN-OWNE	D SMALL BUS	SINESS	s (WOSB)	EDWOSB				De	stinat	ion	
VETER	AN-OWNE	D ELIGIBLE UNDER	THE WOSB	PROGE	RAM — — —								
		13. PLACE OF			14. GOVERNMENT B/L	NO.		15. DELIVER TO F.O.B. ON OR BEFORE (Date		10	6. DISCOU	NT TER	MS
a INSPECTION		b. ACCEPTANCE						30 Days Afte					
Destinat	1011	Destinati	.on		47 004477447					\bot			
	1				17. SCHEDULE (Se	.,	-	T					
ITEM NO.			OR SERVICES	,		ORDERED	QUANTITY UNIT PRICE			UNT			CCEPTED
	DBA: Contr Natha Email (661)	Number: 0076692 SHERIFF'S DEPT acting Officer In R. Lindsey : Nathan.R.Linds 328-4503 nued	Represer			(c)	(d)	(e)		<u>n</u>			(9)
	18. SHIP	PING POINT			19. GROSS SHIPPING	WEIGHT	!	20. INVOICE NO.	<u> </u>				17(h) TOTAL
			•										(Cont. pages)
					I. MAIL INVOICE TO:								
SEE BILLING	a. NAME		ICE				_		\$508,	\$508,400.00			
INSTRUCTIONS ON REVERSE	1	b STREET ADDRESS BURLINGTON FINANCE CENTER (or P.O Box) PO BOX 1620 ATTN ICE-EROFOD-FSF										17(i) GRAND TOTAL	
	c. CITY					d. STA		e. ZIP CODE		\$508,400.00			
	WI	LLISTON				rv		05495-1620	<u> </u>				
22. UNITED	STATES O	F	١		11101-			23. NAME (Typed)	0.334				
AMERIC	ABY (Sigi	nature)	icizen	N	L. Collie			Virginia L TITLE: CONTRACTING		FICER			

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 CONTRACT NO.

04/29/2016 11-09-0034

ORDER NO

HSCEDM-16-F-IG203

ITEM NO.	SUPPLIES/SERVICES	QUANTITY		UNIT PRICE	AMOUNT	QUANTITY ACCEPTED
(a)	(b)	(c)	(d)	(e)	(f)	(g)
0001	ALT COR: Donna Ore Email: Donna.Ore@ice.dhs.gov; Phone: (916)329-4326 Contract Specialist: Kimberlee Brown Email: Kimberlee.Brown@ice.dhs.gov; (202)732-2675 This task order is hereby issued against the Department of Justice, US Marshalls Inter- governmental Services Agreement (IGA) 11-09-0034 for the detention and care of aliens housed at Contra Costa County, CA. All terms and condition of the IGA apply to this task order, and replaces task order HSCEDM-15-F-IG130. Exempt Action: Y Accounting Info: ERODETN-R02 BA 31-12-00-000 18-63-0500-05-00-00-00 GE-25-72-00 Period of Performance: 07/01/2016 to 07/31/2016 DETAINEES HOUSING(WEST FACILITY) Invoice Instructions: ICE - ERO Contracts Service Providers/Contractors shall use these procedures when submitting an invoice. 1. Invoice Submission: Invoices shall be submitted in a ".pdf" format in accordance with the contract terms and conditions via email, United States Postal Service (USPS) or facsimile as follows: a) Email: • Invoice.Consolidation@ice.dhs.gov • Contracting Officer Representative (COR) or Government Point of Contact (GPOC) • Contract Specialist/Contracting Officer Continued	6200	EA	82.00	508,400.00	
		4				

ORDER FOR SUPPLIES OR SERVICES

PAGE NO

SCHEDULE - CONTINUATION IMPORTANT: Mark all packages and papers with contract and/or order numbers. DATE OF ORDER CONTRACT NO. ORDER NO. 04/29/2016 11-09-0034 HSCEDM-16-F-IG203 ITEM NO. SUPPLIES/SERVICES QUANTITY UNIT UNIT AMOUNT QUANTITY ORDERED PRICE ACCEPTED (a) (c) (0) **(f)** (q) Each email shall contain only (1) invoice and the invoice number shall be indicated on the subject line of the email. b) USPS: DHS, ICE Financial Operations - Burlington P.O. Box 1620 Williston, VT 05495-1620 ATTN: ICE-ERO/FOD-FSF The Contractors Data Universal Numbering System (DUNS) Number must be registered and active in the System for Award Management (SAM) at https://www.sam.gov prior to award and shall be notated on every invoice submitted to ensure prompt payment provisions are met. The ICE program office identified in the task order/contract shall also be notated on every invoice. c) Facsimile: Alternative Invoices shall be submitted to: (802) - 288 - 7658Submissions by facsimile shall include a cover sheet, point of contact and the number of total pages.

Note: the Service Providers or Contractors

Dunn and Bradstreet (D&B) DUNS Number must be registered in the System for Award Management (SAM) at https://www.sam.gov prior to award and shall be notated on every invoice submitted to ensure prompt payment provisions are met. The ICE program office identified in the task order/contract shall also be notated on every invoice.

2. Content of Invoices: Each invoice shall contain the following information in accordance with 52.212-4 (g), as applicable: Continued ...

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

PAGE NO

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

DATE OF ORDER CONTRACT NO ORDER NO

HSCEDM-16-F-IG203 11-09-0034 04/29/2016 QUANTITY UNIT ITEM NO SUPPLIES/SERVICES UNIT AMOUNT QUANTITY ORDERED PRICE ACCEPTED **(f)** (a) (b) (e) (q) (c) (i). Name and address of the Service Provider/Contractor. Note: the name, address and DUNS number on the invoice MUST match the information in both the Contract/Agreement and the information in the SAM. If payment is remitted to another entity, the name, address and DUNS information of that entity must also be provided which will require Government verification before payment can be processed: (ii). Dunn and Bradstreet (D&B) DUNS Number; (iii). Invoice date and invoice number; (iv). Agreement/Contract number, contract line item number and, if applicable, the order number; (v). Description, quantity, unit of measure, unit price, extended price and period of performance of the items or services delivered; (vi). If applicable, shipping number and date of shipment, including the bill of lading number and weight of shipment if shipped on Government bill of lading; (vii). Terms of any discount for prompt payment offered: (viii). Remit to Address; (ix). Name, title, and phone number of person to resolve invoicing issues; (x). ICE program office designated on order/contract/agreement and (xi). Mark invoice as "Interim" (Ongoing performance and additional billing expected) and "Final" (performance complete

and no additional billing)

Continued ...

ORDER FOR SUPPLIES OR SERVICES SCHEDULE - CONTINUATION

PAGE NO

_

IMPORTANT: Mark all packages and papers with contract and/or order numbers. DATE OF ORDER CONTRACT NO 11-09-0034 04/29/2016 HSCEDM-16-F-IG203 ITEM NO SUPPLIES/SERVICES QUANTITY UNIT UNIT **AMOUNT** QUANTITY ORDERED PRICE ACCEPTED (d) tal (b) (c) (q) (xii). Electronic Funds Transfer (EFT) banking information in accordance with 52.232-33 Payment by Electronic Funds Transfer - System for Award Management or 52-232-34, Payment by Electronic Funds Transfer - Other than System for Award Management. 3. Invoice Supporting Documentation. To ensure payment, the vendor must submit supporting documentation which provides substantiation for the invoiced costs to the Contracting Officer Representative (COR) or Point of Contact (POC) identified in the contract. Invoice charges must align with the contract CLINs. Supporting documentation is required when guaranteed minimums are exceeded and when allowable costs are incurred. Details are as follows: (i). Guaranteed Minimums. If a guaranteed minimum is not exceeded on a CLIN(s) for the invoice period, no supporting documentation is required. When a guaranteed minimum is exceeded on a CLIN (s) for the invoice period, the Contractor is required to submit invoice supporting documentation for all detention services provided during the invoice period which provides the information described below: a. Detention Bed Space Services · Bed day rate; Detainees check-in and check-out dates; · Number of bed days multiplied by the bed day rate; · Name of each detainee; · Detainees identification information (ii). Allowable Incurred Cost. Fixed Unit Price Items (items for allowable incurred costs, such as transportation services, stationary guard or escort services, transportation mileage or other Minor Continued ...

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

\$0.00

ORDER FOR SUPPLIES OR SERVICES SCHEDULE - CONTINUATION

PAGE NO

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

DATE OF ORDER CONTRACT NO 04/29/2016 11-09-0034 ORDER NO

HSCEDM-16-F-IG203

M NO	SUPPLIES/SERVICES	QUANTITY		UNIT	AMOUNT	QUANTITY
(a)	(b)	ORDERED (c)	(d)	PRICE (e)	(f)	ACCEPTEI (g)
	Charges such as sack lunches and detainee					
	wages): shall be fully supported with					
	documentation substantiating the costs				1	
	and/or reflecting the established price in					
	the contract and shall be submitted in .pdf					
	format:					1
	Lorina C.					
	a. Detention Bed Space Services. For				1	
	detention bed space CLINs without a GM, the					į.
	supporting documentation must include:					
	• Bed day rate;					ļ
	• Detainees check-in and check-out dates;					1
	Number of bed days multiplied by the bed					Ì
	1					l
	day rate; Name of each detainee;					İ
	Detainees identification information					
	Detainees identification information					
	h Transportation Sorvices For					
	b. Transportation Services: For					
	transportation CLINs without a GM, the					
	supporting documentation must include:					
	Mileage rate being applied for that					
	invoice;					
	• Number of miles;		Į.		1	
	Transportation routes provided;					
	• Locations serviced;		İ			ļ
	• Names of detainees transported;					
	• Itemized listing of all other charges;		l			ľ
	and,					
	• for reimbursable expenses (e.g. travel					
	1					
	expenses, special meals, etc.) copies of					
	all receipts.		ĺ			
	c. Stationary Guard Services: The itemized				i	ļ
	monthly invoice shall state:					
	monthly invoice shall state.					
	• The location where the guard services					ļ
	were provided,					
	The employee guard names and number of					<u> </u>
	hours being billed,				ļ	1
	The employee guard names and duration of		ŀ			1
	the billing (times and dates), and					1
	• (4) for individual or detainee group			ļ]	1
	1		ľ	:	i	1
	escort services only, the name of the detainee(s) that was/were escorted.				1	1
	detainee(s) that was/were escorted.					[
	Continued					l
					1	l
						1
	1]
	l	<u> </u>	L		<u></u>	
	TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))	>			\$0.00	

ORDER FOR SUPPLIES OR SERVICES SCHEDULE - CONTINUATION

PAGE NO

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

DATE OF ORDER CONTRACT NO 04/29/2016 11-09-0034

ORDER NO.

HSCEDM-16-F-IG203

TEM NO.	SUPPLIES/SERVICES	QUANTITY		UNIT	AMOUNT	QUANTITY
(a)	(b)	ORDERED (c)	(d)	PRICE (e)	(n	ACCEPTED (g)
-	d. Other Direct Charges (e.g. VTC support,					
	transportation meals/sack lunches,					
	volunteer detainee wages, etc.):					
	1) The invoice shall include appropriate					
	supporting documentation for any direct					
	charge billed for reimbursement. For					
	charges for detainee support items (e.g.		1	!		
	meals, wages, etc.), the supporting		1			
	documentation should include the name of		l			
	the detainee(s) supported and the date(s)					
	and amount(s) of support.					
	(iii) Firm Fired Drice CLINE Company					
	(iii) Firm Fixed-Price CLINs. Supporting					
	documentation is not required for charges for FFP CLINs.					
	FOR FEP CLINS.	1				
	4. Safeguarding Information: As a					
	contractor or vendor conducting business	i				
	with Immigration and Customs Enforcement					
	(ICE), you are required to comply with DHS					
	Policy regarding the safeguarding of					
	Sensitive Personally Identifiable					
	Information (PII). Sensitive PII is					
	information that identifies an individual,					
	including an alien, and could result in					
	harm, embarrassment, inconvenience or					
	unfairness. Examples of Sensitive PII		ŀ			
	include information such as: Social					
	Security Numbers, Alien Registration					
	Numbers (A-Numbers), or combinations of		ĺ			
	information such as the individuals name or					i
	other unique identifier and full date of					
	birth, citizenship, or immigration status.					
	As part of your obligation to safeguard				i	
	information, the follow precautions are				·	
	required:					
	(I) Email supporting documents containing					
	Sensitive PII in an encrypted attachment					}
	with password sent separately to the					
	Contracting Officer Representative assigned					
	to the contract.					
	the contract.					
	(ii) Never leave paper documents containing					
	Continued					
				1		
						1
					\$0.00	1

ORDER FOR SUPPLIES OR SERVICES SCHEDULE - CONTINUATION

PAGE NO

8

IMPORTANT: Mark all packages and papers with contract and/or order numbers CONTRACT NO. DATE OF ORDER ORDER NO. HSCEDM-16-F-IG203 04/29/2016 11-09-0034 QUANTITY UNIT ITEM NO. UNIT AMOUNT QUANTITY SUPPLIES/SERVICES ORDERED PRICE ACCEPTED (d) **(f)** (a) (c) (e) (g) Sensitive PII unattended and unsecure. When not in use, these documents will be locked in drawers, cabinets, desks, etc. so the information is not accessible to those without a need to know. (iii) Use shredders when discarding paper documents containing Sensitive PII. (iv) Refer to the DHS Handbook for Safeguarding Sensitive Personally Identifiable Information (March 2012) found at http://www.dhs.gov/xlibrary/assets/privacy/d hs-privacy-safequardingsensitivepiihandbookmarch2012.pdf for more information on and/or examples of Sensitive PII. 5. Invoice Inquiries. If you have questions regarding payment, please contact ICE Financial Operations at 1-877-491-6521 or by e-mail at OCFO.CustomerService@ice.dhs.gov. The total amount of award: \$508,400.00. The obligation for this award is shown in box 17(i).

\$0.00

AMENDMENT OF SOLICITATION/MODIFIC	CATION OF CONTRACT		CONTRACT ID CODE	P	PAGE OF PAGES				
2 AMENDMENT/MODIFICATION NO	3 EFFECTIVE DATE	4. REQ	UISITION/PURCHASE REQ. NO	5 PRO	JECT NO. (If applicable)				
P00006	See Block 16C	1921	17FSFCOCOWR02.04						
6 ISSUED BY CODE	ICE/DM/DC-LAGUNA	7. ADI	INISTERED BY (If other than Item 6)	CODE	ICE/DCR				
ICEDETENT MNGTDETENT CONTRA IMMIGRATION AND CUSTOMS ENF OFFICE OF ACQUISITION MANAG 24000 AVILA ROAD ROOM 3104 LAGUNA NIGUEL CA 92677	ORCEMENT	IMM OFF 801 ATT	ICEDETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW SUITE 930 ATTN KIMBERLEE BROWN WASHINGTON DC 20536						
8. NAME AND ADDRESS OF CONTRACTOR (No., stre	et, county, State and ZIP Code)		AMENDMENT OF SOLICITATION NO						
CONTRA COSTA COUNTY INC 651 PINE ST 7TH FLOOR MARTINEZ CA 945531229		× 100 1 1	DATED (SEE ITEM 11) A MODIFICATION OF CONTRACT/ORDE - 09 - 0034 CCEDM-16-F-IG203 DATED (SEE ITEM 13)	R NO					
CODE 0076692160000	FACILITY CODE		4/29/2016						
	11. THIS ITEM ONLY APPLIES								
separate letter or telegram which includes a referen- THE PLACE DESIGNATED FOR THE RECEIPT OF virtue of this amendment you desire to change an of reference to the solicitation and this amendment, an	to the solicitation and amendment OFFERS PRIOR TO THE HOUR Al fer already submitted, such change d is received prior to the opening hou	numbers. FA ND DATE SPE may be made	CIFIED MAY RESULT IN REJECTION OF by telegram or letter, provided each telegra	TO BE REC	CEIVED AT ER If by				
12 ACCOUNTING AND APPROPRIATION DATA (If re See Schedule	quired)	Net Inc	rease:	\$1,660	,500.00				
	ACT/ORDER IS MODIFIED TO REFI TH IN ITEM 14, PURSUANT TO THE	LECT THE AD E AUTHORITY	ES SET FORTH IN ITEM 14 ARE MADE MINISTRATIVE CHANGES (such as chang OF FAR 43 103(b)						
D. OTHER (See of the of the state of									
D OTHER (Specify type of modification X Unilateral Modifica	•	2.1							
	is required to sign this docume								
E.IMPORTANT: Contractor Ensured to 14 DESCRIPTION OF AMENDMENT/MODIFICATION DUNS Number: 007669216. Contracting Officer Represe Nathan.R.Lindsey@ice.dhs.go	(Organized by UCF section heading	gs.including s							
ALT COR: Donna Ore, Email:	Donna.Ore@ice.dhs.	gov; Ph	one: (916)329-4326						
This modification is issued of \$1,660,500.00, and chang estimated that the funds ob	e the performance	end dat	e from 01/31/2017 to	04/30/					
Continued									
Except as provided herein, all terms and conditions of 15A NAME AND TITLE OF SIGNER (Type or print)	the document referenced in Item 9 A		retofore changed, remains unchanged and NAME_AND TITLE OF CONTRACTING O						
The state of the s			ginia L. Collie	. HOER (19)	≈ or printy				
15B CONTRACTOR/OFFEROR	15C DATE SIGN	ED 16B	INITED STATES OF AMERICA	<u> </u>	16C DATE SIGNED				
(Signature of person authorized to sign)		\Box	(Signature of Contracting Officer)		121111				

NSN 7540-01-152-8070 Previous edition unusable STANDARD FORM 30 (REV. 10-83) Prescribed by GSA FAR (48 CFR) 53 243

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED	PAGE C)F
CONTINUATION SHEET	11-09-0034/HSCEDM-16-F-IG203/P00006	2	3

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	The total amount of the task order is increased	1 -			-
	as follows:				
	From: \$3,778,560.00 By: \$1,660,500.00 To:			!	
	\$5,439,606.00	1			
	Exempt Action: Y Sensitive Award: NONE				
	FOB: Destination			i	
	Period of Performance: 07/01/2016 to 04/30/2017			1	
			1	ŀ	
	Change Item 0001 to read as follows (amount shown		H		
	is the total amount):				
0001	DETAINEES HOUSING (WEST FACILITY)	66330	FΔ	82.00	5,439,060.0
0001	DETAINEES HOUSTRO (NEST TACTETT)	00330	L	02.00	5,459,000.0
	CLIN 0001 is increased as follows:			'	
	From: \$3,778,560.00 By: \$1,660,500.00 To:		1 1		
	\$5,439,060.00				
	The total quantity is increased as follows:				
	From: 46,080 By: 20,250 To: 66,330			Į.	
	Accounting Info:				
	ERODETN-R02 BA 31-12-00-000		l l		
	18-63-0500-05-00-00-00 GE-25-72-00	l .	1 1		
	Funded: \$0.00		1 1		
	Accounting Info:				
	ERODETN-R02 BA 31-12-00-000				
	18-63-0500-05-00-00 GE-25-72-00		H		
	Funded: \$0.00				
	Accounting Info:	:			
	ERODETN-R02 BA 31-12-00-000				
	18-63-0500-05-00-00-00 GE-25-72-00		1 1		
	Funded: \$0.00				
	Accounting Info:		1 1		
	ERODETN-R02 E1 31-12-00-000				
	18-63-0500-05-00-00-00 GE-25-72-00		li		
	Funded: \$0.00				
	Accounting Info: ERODETN-R02 E1 31-12-00-000		1 1		
	18-63-0500-05-00-00-00 GE-25-72-00				
	Funded: \$0.00	ľ			
	Accounting Info: ERODETN-R02 E1 31-12-00-000				
	18-63-0500-05-00-00-00 GE-25-72-00				
	Funded: \$0.00		H		
	Accounting Info:				
	ERODETN-R02 E1 31-12-00-000			İ	
	18-63-0500-05-00-00-00 GE-25-72-00-000000			1	
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	REFERENCE NO. OF DOCUMENT BEING CONTINUED	3		3
CONTINUATION SHEET	11-09-0034/HSCEDM-16-F-IG203/P00006			

RA COSTA COUNT	1 INC	QUANTIT	YUNIT	UNIT PRICE	AMOUNT
NO.	SUPPLIES/SERVICES	(C)	(D)	(E)	(F)
1	(B)	<u> </u>	+		
	1,660,500.00	the			
all terms	1,660,500.00 and condition of the IGA remain	tne			
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AMENDMENT OF SOLICITATION/MODIFICA	ATION OF CONTR	RACT	1. CONTRACT ID CODE	PAGE (OF PAGES					
2. AMENDMENT/MODIFICATION NO.	3. EFFECTIVE DATE	4. RI	EQUISITION/PURCHASE REQ. NO.	5. PROJECT N	IO. (If applicable)					
P00003	See Block	16C 192	192117FSFCOCOMR08.02		1 10 12					
6. ISSUED BY CODE	ICE/DM/DC-		7. ADMINISTERED BY (If other than Item 6) CODE ICE/DM/DC-Li							
ICEDETENT MNGTDETENT CONTRAC IMMIGRATION AND CUSTOMS ENFO OFFICE OF ACQUISITION MANAGE 24000 AVILA ROAD ROOM 3104 LAGUNA NIGUEL CA 92677	IM OF 24	ICEDETENT MNGTDETENT CONTRACT-LAG IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 24000 AVILA ROAD ROOM 3104 ATTN JOSE R MUNOZ JR								
	· · · · · · · · · · · · · · · · · · ·		LAGUNA NIGUEL CA 92677							
8. NAME AND ADDRESS OF CONTRACTOR (No., stroot, CONTRA COSTA COUNTY INC ATTN CONTRA COSTA COUNTY INC 651 PINE ST 7TH FLOOR	, county, State and ZIP Co	(x)	98. DATED (SEE ITEM 11) 104. MODIFICATION OF CONTRACT/ORDER NO. 1GA-11-92-0024 HSCEDM-16-F-1G208 108. DATED (SEE ITEM 13)							
MARTINEZ CA 945531229										
CODE 0076692160000	FACILITY CODE		04/28/2016							
AMERICAN AND AND AND AND AND AND AND AND AND A	11. THIS ITEM OF	NLY APPLIES TO AMEN	DMENTS OF SOLICITATIONS							
CHECK ONE A. THIS CHANGE ORDER IS ISSUED ORDER NO. IN ITEM 10A.	uirod) IODIFICATION OF CO PURSUANT TO: (Spec	NTRACTS/ORDERS. IT	MODIFIES THE CONTRACT/ORDER NO. AS D INGES SET FORTH IN ITEM 14 ARE MADE IN ADMINISTRATIVE CHANGES (such as change) ITY OF FAR 43.103(b).	THE CONTRACT	r					
C. THIS SUPPLEMENTAL AGREEMEN										
D. OTHER (Specify type of modification	and authority)									
X Unilateral Modificat	tion / FAR	43.103(b)								
E. IMPORTANT: Contractor Is is not.	is required to sign	n this document and retu	um copies to the issu	ing office.						
14. DESCRIPTION OF AMENDMENT/MODIFICATION DUNS Number: 007669216 . Contracting Officer Represen Nathan.R.Lindsey@ice.dhs.gov Alternate (COR): Donna Ore,	ntative (COF	R): Nathan R 561) 328-450.	. Lindsey Email: 3		,					
This modification is issued 12/09/2016. It is estimated										
Continued	To: \$26,6	505.00								
Except as provided herein, all terms and conditions of to 15A. NAME AND TITLE OF SIGNER (Type or print)	the document reference	1	6A. NAME AND TITLE OF CONTRACTING OF							
450 CONTRACTOR			'irginia Collie							
15B. CONTRACTOR/OFFEROR	15C	DATE SIGNED	BB. UNITED STATES OF AMERICA		16C. DATE SIGNED					
(Signature of porson authorized to sign) NSN 7540-01-152-8070	1		(Signature of Camfacting Officer)	STANDARD FO	BM 30 (BEV 10.83)					

NSN 7540-01-152-8070 Previous edition unusable

STANDARD FORM 30 (REV. 10-8 Prescribed by GSA FAR (48 CFR) 53.243

CONTINUESTICAL CHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED	PAGE	OF
CONTINUATION SHEET	IGA-11-92-0024/HSCEDM-16-F-IG208/P00003	2	2

ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	Exempt Action: Y		\Box		
	Discount Terms:	1	1		
	Net 30		1 1		
	FOB: Destination		1 1		
	Period of Performance: 07/01/2016 to 12/09/2016		11	l l	
	W				
	Change Item 0001 to read as follows(amount shown				
	is the total amount):	(%)			
0001			11		
0001	TEMPROARY DETAINEE HOUSING (MANDAYS) MAIN JAIL	313	EA	85.00	26,605.0
	CLIN 0001 remains the same as follows:			9.0	
	From: \$26,605.00 By: \$0.00 To: \$26,605.00		1		
	110m: \$20,003.00 By: \$0.00 10: \$20,003.00				
	The total quantity remains the same as follows:				
	From: 313 By: 0 To: 313	1		9	
	Product/Service Code: S206				
	Product/Service Description: HOUSEKEEPING- GUARD				
	Jesus delvice beserved in modeline down	ı			
	Accounting Info:	1			
	ERODETN-R08 BA 31-12-00-000	1			
	18-63-0500-00-00-00 GE-25-72-00				
	Funded: \$0.00				
	Accounting Info:				
	ERODETN-R08 BA 31-12-00-000	- 3		1	
	18-63-0500-00-00-00-00 GE-25-72-00				
	Funded: \$0.00			200	
	Accounting Info:	1			
	ERODETN-R08 E1 31-12-00-000			,	
	18-63-0500-00-00-00-00 GE-25-72-00				
	Funded: \$0.00	1	1		
	Accounting Info:				
	ERODETN-R08 E1 31-12-00-000				
	18-63-0500-00-00-00 GE-25-72-00				
	Funded: \$0.00				
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	All terms and conditions of the IGA remain the				
	same.	ž.			
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AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT				1. CONTRACT ID CODE	PAGE OF PAGES						
2. AMENDMENT/MODIFICATION NO.	3. EFFECTIVE	DATE	4 REQ	UISITION/PURCHASE REQ. NO.	5. PR0	DJECT NO (If applicable)					
P00003	See Blo	ck 16C	1921	17FSFCOCOWR02.01							
6 ISSUED BY CODE		DC-LAGUNA	7. ADI	MINISTERED BY (if other than item 6)	CODE	ICE/DM/DC-LAGUNA					
ICEDETENT MNGTDETENT CONTRACT-LAG IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 24000 AVILA ROAD ROOM 3104 LAGUNA NIGUEL CA 92677				ICEDETENT MNGTDETENT CONTRACT-LAG IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 24000 AVILA ROAD ROOM 3104 ATTN JOSE R MUNOZ JR							
8 NAME AND ADDRESS OF CONTRACTOR (No., street	county. State and	ZIP Code)	LAGUNA NIGUEL CA 92677								
CONTRA COSTA COUNTY INC 651 PINE ST 7TH FLOOR MARTINEZ CA 945531229				98 DATED (SEE ITEM 11) x 10A MODIFICATION OF CONTRACT/ORDER NO. 11-09-0034 HSCEDM-16-F-IG203							
CODE 0076692160000	FACILITY COL	DF		DATED (SEE ITEM 13)							
0076692160000				4/29/2016 ENTS OF SOLICITATIONS							
CHECK ONE A. THIS CHANGE ORDER IS ISSUED FORDER NO. IN ITEM 10A.	r already submit is received prior iired) ODIFICATION O	ted , such change may be to the opening hour and Ne t F CONTRACTS/ORDERS (Specify authority) THE	Inc Inc	by telegram or letter, provided each telegram or actied	97, GERIBE	nakes 614.00 DINITEM 14.					
C. THIS SUPPLEMENTAL AGREEMEN D. OTHER (Specify type of modification	I IS ENTERED										
X Unilateral Modificat	ion / FA	R 43.103(a)									
E. IMPORTANT: Contractor X is not.	is required t	o sign this document and	return	copies to the issuing	office.						
14 DESCRIPTION OF AMENDMENT/MODIFICATION (DUNS Number: 007669216.		·		oliotation/contract subject matter where feasible							
Contracting Officer Represen Nathan.R.Lindsey@ice.dhs.gov ALT COR: Donna Ore, Email: D	; Phone:	(661)328-450)3	•							
This modification is issued of \$797,614.00 and change pe estimated that the funds obl	rformanc igated w	e end date fr ill cover the	com (09/30/2016 to 11/15/2016 riod through 11/15/2016	6. I						
The total amount of the task	order 1	s increased a	as I	DITOM2:							
Continued Except as provided barein all terms and conditions of the	e document refe	renced in Nam 0 A or 104	ae bo	atelera channel management bannad contint	di faras	and afford					
Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10 15A NAME AND TITLE OF SIGNER (Type or print)				OA, as heretofore changed, remains unchanged and in full force and effect. 16A NAME AND TITLE OF CONTRACTING OFFICER (Type or print)							
			1	ginia Collie							
15B CONTRACTOR/OFFEROR		15C. DATE SIGNED	↓	UNITED STATES OF AMERICA		16C DATE SIGNED					
(Signature of person authorized to sign)	_		10	(Signature of Contracting Officers		10/13/14					

CONTINUATION CUEFT	REFERENCE NO OF DOCUMENT BEING CONTINUED	PAGE	OF
CONTINUATION SHEET	11-09-0034/HSCEDM-16-F-IG203/P00003	2	2

ITEM NO.	SUPPLIES/SERVICES	QUANTITY	TINU	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	From: \$1,630,898.00 By: \$797,614.00 To: \$2,428,512.00 Exempt Action: Y Discount Terms: Net 30 FOB: Destination Period of Performance: 07/01/2016 to 11/15/2016 Change Item 0001 to read as follows(amount shown is the total amount):				
0001	DETAINEES HOUSING (WEST FACILITY)	29616	EA	82.00	2,428,512.
	CLIN 0003 is increased as follows: From: \$1,630,898.00 By: \$797,614.00 To: \$2,428,512.00 The total quantity is increased as follows: From: 19,889 By: 9,727 To: 29,616				
	Accounting Info: ERODETN-R02 BA 31-12-00-000 18-63-0500-05-00-00-00 GE-25-72-00 Funded: \$0.00 Accounting Info: ERODETN-R02 BA 31-12-00-000 18-63-0500-05-00-00-00 GE-25-72-00 Funded: \$0.00 Accounting Info: ERODETN-R02 BA 31-12-00-000 18-63-0500-05-00-00-00 GE-25-72-00 Funded: \$0.00 Accounting Info: ERODETN-R02 E1 31-12-00-000 18-63-0500-05-00-00-00 GE-25-72-00 Funded: \$797,614.00 All terms and condition of the IGA remain the same.				

MENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT				1. CONTRACT ID CODE	PAGE OF PAGES			;
2. AMENDMENT/MODIFICATION NO.	3. EFFECTIVE D	ATE	4.0	EQUISITION/PURCHASE REQ. NO.	Jr. 00	1	2 ///	2
				2117FSFCOCOWRO2.02	5. PK	OJECTNO	O. (if applic	cable)
P00004 6. ISSUED BY CODE	See Block	100		ADMINISTERED BY (If other than Item 6)	CODE	- 1		
	ICE/DM/DO	C-LAGUNA	1. 1	ADMINISTERED BY IN Other than Nam 6)	CODE	ICE,	/ DM / DO	C-LAGUNA
ICEDETENT MNGTDETENT CONTRAC				EDETENT MNGTDETENT CONTR				
IMMIGRATION AND CUSTOMS ENFO				MIGRATION AND CUSTOMS EN				
OFFICE OF ACQUISITION MANAGE	MENT			FICE OF ACQUISITION MANA	GEME	ENT		
24000 AVILA ROAD ROOM 3104				1000 AVILA ROAD ROOM 3104				
LAGUNA NIGUEL CA 92677				TN JOSE R MUNOZ JR GUNA NIGUEL CA 92677				
8. NAME AND ADDRESS OF CONTRACTOR (No., street.	county State and 7/	P Codel	1	9A. AMENDMENT OF SOLICITATION NO.				
0. 1741E74157551250 01 001(1700) 01(170), 38801.	county, older and 21	1	(x)	DA. AMENDMENT OF SOCIOTATION NO.				
CONTRA COSTA COUNTY INC								
651 PINE ST 7TH FLOOR				9B. DATED (SEE ITEM 11)				
MARTINEZ CA 945531229								
		}-	┥	10A. MODIFICATION OF CONTRACT/ORDER N	10			
				11-09-0034	Ю.			
				HSCEDM-16-F-IG203				
]	Ì	10B. DATED (SEE ITEM 13)				·
CODE 0076692160000	FACILITY CODE		-	04/29/2016				
	44 70/0 (754	ONLY APPLIES TO A	I O C'AI	DMENTS OF SOLICITATIONS				
								
The above numbered solicitation is amended as set to Offers must acknowledge receipt of this amendment p							extended.	
				receipt of this amendment on each copy of the o				
separate letter or telegram which includes a reference		· · ·		• •				
THE PLACE DESIGNATED FOR THE RECEIPT OF C								
virtue of this amendment you desire to change an offe	-			· · · · · · · · · · · · · · · · · · ·	or letter	makes		
reference to the solicitation and this amendment, and 12. ACCOUNTING AND APPROPRIATION DATA (If required)								
See Schedule	nrea)	Net	Ιı	ncrease: \$	442,	800.0	0	
	ODIECATION OF	CONTRACTS/ORDERS	. IT	MODIFIES THE CONTRACT/ORDER NO. AS DE	ecolor	ED IN ITE		
	ODIFICATION OF	CONTRACTS/ORDERS). II	MODIFIES THE CONTRACTIONDER NO. AS DE	SCRIBI	ED IN ITE	п 14.	
CHECK ONE A THIS CHANGE ORDER IS ISSUED F	PURSUANT TO: /S	Specify authority) THE	СНА	NGES SET FORTH IN ITEM 14 ARE MADE IN T	HE CO	NTRACT		
ORDER NO. IN ITEM 10A.		,,,		INGES SET FORTH IN ITEM 14 ARE MADE IN T				
B THE ABOVE NUMBERED CONTRAC	T/ORDER IS MOI	DIFIED TO REFLECT T	HE.	ADMINISTRATIVE CHANGES (such as changes	in navie	na office		
appropriation date, etc.) SET FORTH	I IN ITEM 14, PUR	SUANT TO THE AUTH	IORI	ADMINISTRATIVE CHANGES (such as changes ITY OF FAR 43.103(b).	payıı	ig omce,		
C. THIS SUPPLEMENTAL AGREEMEN	TIC ENTEDED IN	TO DUIDGUANT TO AU	ITUC	DRITY OF				
C. THIS SOFT ELITERIAL AGREEMENT	1 13 ENTERED IN	TO PORSOANT TO AU	,,,,	oral i Or.				
D. OTHER (Specify type of modification	and authority							
1 '' ''	•							
X Unilateral Modificat	ion / FAR	(43.103(a)						
E. IMPORTANT: Contractor Sis not.	is required to	sign this document and	l retu	rn copies to the issuin	g office			
14. DESCRIPTION OF AMENDMENT/MODIFICATION	(Organized by UC	F section headings, inc	tudin	ng solicitation/contract subject matter where feasi	ble)			
DUNS Number: 007669216								
•								
Contracting Officer Represen	tative (C	OR): Nathar	n F	R. Lindsev. Email:				
Nathan.R.Lindsey@ice.dhs.gov								
				25				
ALT COR: Donna Ore, Email: D	onna.Oree	ice.ans.gov	; ł	Phone: (916)329-4326				
This modification is issued	to add fu	nding to CL:	ΙN	0001 for detention bed d	lays	the a	amount	٥
of \$442,800.00 and change pe	rformance	end date fi	ron	n 11/15/2016 to 12/09/201	6. :	It is		
estimated that the funds obl	igated wi	ll cover the	e r	period through 12/09/2016				
	,		•	3				
The total amount of the task	ordor is	ingressed	a -	follows				
	Order 15	Increased a	23	TOTTOWS.				
Continued								
Except as provided herein, all terms and conditions of the	e document refere	enced in Item 9 A or 10/	_					
15A. NAME AND TITLE OF SIGNER (Type or print)			116	BA. NAME AND TITLE OF CONTRACTING OFFI	CER (T	ype or prir	1 <i>(</i>)	
			Ιv	irginia Collie				
15B. CONTRACTOR/OFFEROR	T ₄	5C. DATE SIGNED	ᆚ_	BB. UNITED STATES OF AMERICA	_	1.	6C. DATE	SIGNED
	 		Τ",	·/ · · · · / · · / ·		Ι'	1	1 ,
	_ [10	Julium Colla		_	1(B)	5114
(Signature of person authorized to sign)			1	(Signature of Contracting Officer)			<u>, , , , , , , , , , , , , , , , , , , </u>	1,

NSN 7540-01-152-8070 Previous edition unusable STANDARD FORM 30 (REV. 10-83) Prescribed by GSA FAR (48 CFR) 53 243
 CONTINUATION SHEET
 REFERENCE NO. OF DOCUMENT BEING CONTINUED
 PAGE 11-09-0034/HSCEDM-16-F-IG203/P00004
 PAGE 2
 2

ITEM NO.	SUPPLIES/SERVICES	QUANTITY	TINU	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	From: \$2,428,512.00 By: \$442,800.00 To: \$2,871,312.00 Exempt Action: Y Discount Terms: Net 30 FOB: Destination Period of Performance: 07/01/2016 to 12/09/2016 Change Item 0001 to read as follows(amount shown				
001	is the total amount): DETAINEES HOUSING(WEST FACILITY)	35016	EA	82.00	2,871,312.
	CLIN 0003 is increased as follows: From: \$2,428,512.00 By: \$442,800.00 To: \$2,871,312.00 The total quantity is increased as follows:				
	From: 29,616 By: 5,400 To: 35,016 Accounting Info: ERODETN-R02 BA 31-12-00-000 18-63-0500-05-00-00-00 GE-25-72-00 Funded: \$0.00 Accounting Info: ERODETN-R02 BA 31-12-00-000 18-63-0500-05-00-00-00 GE-25-72-00 Funded: \$0.00 Accounting Info: ERODETN-R02 BA 31-12-00-000 18-63-0500-05-00-00-00 GE-25-72-00 Funded: \$0.00 Accounting Info: ERODETN-R02 E1 31-12-00-000 18-63-0500-05-00-00-00 GE-25-72-00 Funded: \$0.00 Accounting Info: ERODETN-R02 E1 31-12-00-000 18-63-0500-05-00-00-00 GE-25-72-00 Funded: \$442,800.00 All terms and condition of the IGA remain the same.				

AMENDMENT OF SOLICITATION/MODIFICA	ATION OF CONTRACT		1. CONTRACT ID CODE	PAG	E OF PAGES
					2
2 AMENDMENT/MODIFICATION NO.	3. EFFECTIVE DATE		EQUISITION/PURCHASE REQ NO.	5 PROJEC	CT NO (If applicable)
P00005	See Block 16C		117FSFCOCOWR02.03	<u> </u>	8
6 ISSUED BY CODE	ICE/DM/DC-LAGUNA	7 A	DMINISTERED BY (If other than Item 6)	CODE	CE/DCR
ICEDETENT MNGTDETENT CONTRAC IMMIGRATION AND CUSTOMS ENFO OFFICE CF ACQUISITION MANAGE 24000 AVILA ROAD ROOM 3104 LAGUNA NIGUEL CA 92677	RCEMENT	IMI OF 80 AT	MIGRATION AND CUSTOMS ENE FICE OF ACQUISITION MANAG 1 I STREET NW SUITE 930 TN KIMBERLEE BROWN		
8 NAME AND ADDRESS OF CONTRACTOR (No. street.	county. State and ZIP Code)		SHINGTON DC 20536 A AMENDMENT OF SOLICITATION NO		
		(x)	A ANEXOMENT OF SOCIOTATION NO		
CONTRA COSTA COUNTY INC					
651 PINE ST 7TH FLOOR		9	B DATED (SEE ITEM 11)		
MARTINEZ CA 945531229					
		x !	OA MODIFICATION OF CONTRACT/ORDER NO. 1-09-0034)	
		1 1	HSCEDM-16-F-IG203		×
		1 H	CB DATED (SEE ITEM 13)	-	
CODE 0076692160000	FACILITY CODE	⊣ ∣	04/29/2016		
	11. THIS ITEM ONLY APPLIES TO				
[] The above numbered solicitation is amended as set for					not extended
CHECK ONE A THIS CHANGE ORDER IS ISSUED PORDER NO. IN ITEM 10A	DDIFICATION OF CONTRACTS/ORDE URSUANT TO (Speaty authority) THE T/ORDER IS MODIFIED TO REFLECT IN ITEM 14, PURSUANT TO THE AU	ERS. IT I	MODIFIES THE CONTRACT/ORDER NO. AS DES IGES SET FORTH IN ITEM 14 ARE MADE IN TH DMINISTRATIVE CHANGES (such as changes in Y OF FAR 43 103(b)	IE CONTRA	ITEM 14.
D. OTHER (Specify type of modification a	and authority)				~
X Unilateral Modificat:					
	is required to sign this document a		copies to the issuing	-#	
14 DESCRIPTION OF AMENDMENTAMODIFICATION (CDUNS Number: 007669216. Contracting Officer Represent Nathan.R.Lindsey@ice.dhs.gov;	Organized by UCF section headings.	an R.	solicitation/contract subject matter where feasible		
	(001/320-4	203			
ALT COR: Donna Ore, Email: Do	onna.Ore@ice.dhs.go	v; Ph	none: (916)329-4326		
This modification is issued to	o add funding to C	LIN C	0001 for detention bed da	ys the	amount
of \$907,248.00, and change the	se performance end	aate	from 12/09/2016 to 01/3	1/2017	. It is
estimated that the funds obli	gated Will cover t	ne pe	eriod through 01/31/2017.		
Continued					
Except as provided herein, all terms and conditions of the 15A. NAME AND TITLE OF SIGNER (Type or print)	document referenced in Item 9 A or 1				
and the conditioned trype or print)		- 1	NAME AND TITLE OF CONTRACTING OFFICE	R (Type or	pnnt)
		Vi	rginia Collie		
15B CONTRACTOR/OFFEROR	15C DATE SIGNED	- [/]	UNITED STATES OF AMERICA		16C DATE SIGNED
(Signature of person authorized to sign)		<u> </u>	(Signature of Contracting Officer)		110011

CONTINUATION SHEET	REFERENCE NO OF DOCUMENT BEING CONTINUED	PAGE	OF	
CONTINUATION SHEET	11-09-0034/HSCEDM-16-F-IG203/P00005	2	2	

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	The total amount of the task order is increased		\vdash		
	as follows:		1		
	From: \$2,871,312.00 By: \$907,248.00 To:		1		
	\$3,778,560.00		1		
			1		
	Exempt Action: Y			- 11	
	FOB: Destination		1		
	Period of Performance: 07/01/2016 to 01/31/2017				
	Channe Them 0001 he word on follows (amount about				
	Change Item 0001 to read as follows(amount shown is the total amount):	1	1	2	
	is the total amount):		1	i .	
0001	DETAINEES HOUSING (WEST FACILITY)	46080	EA	82.00	3,778,560.
0001		1.000		02.00	3, 1, 0, 300.
	CLIN 0001 is increased as follows:	1			
	From: \$2,871,312.00 By: \$907,248.00 To:	1	1		
	\$3,778,560.00				
	The total quantity is increased as follows:				
	From: 35,016 By: 11,064 To: 46,080				
			1		
	Accounting Info:				
	ERODETN-R02 BA 31-12-00-000				
	18-63-0500-05-00-00-00 GE-25-72-00				
	Funded: \$0.00				
	Accounting Info:				
	ERODETN-R02 BA 31-12-00-000				
	18-63-0500-05-00-00-00 GE-25-72-00				
	Funded: \$0.00	1	1		
	Accounting Info:		1		
	ERODETN-R02 BA 31-12-00-000	1	1		
	18-63-0500-05-00-00-00 GE-25-72-00		1		
	Funded: \$0.00				
	Accounting Info:				
	ERODETN-R02 E1 31-12-00-000		1		
	18-63-0500-05-00-00-00 GE-25-72-00		1		
	Funded: \$0.00			(4)	
	Accounting Info:				
	ERODETN-R02 E1 31-12-00-000 18-63-0500-05-(0-00-00 GE-25-72-00	1	1		
	Funded: \$0.00		1		
		1	1		
	Accounting Info: ERODETN-R02 E1 31-12-00-000		1		
	18-63-0500-05-00-00-00 GE-25-72-00				
	Funded: \$907,248.00				
	All terms and condition of the IGA remain the	1	1		
	same.		1		
			1		
	* .			383	
		1	1	7	
	9		1	I I	

AMENDMENT OF SOLICITATION/MODIFICA	ATION OF C	ONTRACT		1. CONTRACT ID CODE		PAGE OF	F PAGES 2
2. AMENDMENT/MODIFICATION NO.	3. EFFECTIVE	DATE	4. REQ	UISITION/PURCHASE REQ. NO.	5. PRO	OJECT NO	. (If applicable)
P00001	See Blo	ck 16C	1921	16FSFCOCOWR02.10	l		
6 ISSUED BY CODE	ICE/DM/	DC-LAGUNA	7. ADI	MINISTERED BY (If other than Item 6)	CODE	ICE/	DCR
ICEDETENT MNGTDETENT CONTRAC IMMIGRATION AND CUSTOMS ENFO OFFICE OF ACQUISITION MANAGE 24000 AVILA ROAD ROOM 3104 LAGUNA NIGUEL CA 92677	RCEMENT		IMM OFF 801 ATT	DETENTION COMPLIANCE RIGRATION AND CUSTOMS ENIICE OF ACQUISITION MANAGE ISTREET NW SUITE 930 N KIMBERLEE BROWN HINGTON DC 20536		EMENT	
8. NAME AND ADDRESS OF CONTRACTOR (No. street.	county, State and	ZiP Codo)		AMENDMENT OF SOLICITATION NO.			
CONTRA COSTA COUNTY INC 651 PINE ST 7TH FLOOR MARTINEZ CA 945531229			× 10/ 11 HS	DATED (SEE ITEM 11) A MODIFICATION OF CONTRACT/ORDER NO. 1-09-0034 SCEDM-16-F-IG203	O .		
				9. DATED (SEE ITEM 13)			
CODE 0076692160000	FACILITY COI			4/29/2016			
The above numbered solicitation is amended as set for Offers must acknowledge receipt of this amendment p tems 8 and 15, and returning cop separate letter or telegram which includes a reference THE PLACE DESIGNATED FOR THE RECEIPT OF C virtue of this amendment you desire to change an offer reference to the solicitation and this amendment, and if	nor to the hour a nies of the amen to the solicitatio DFFERS PRIOR r already submit	and date specified in the s adment; (b) By acknowled in and amendment numbo TO THE HOUR AND DA ted, such change may be	solicitati Iging rec ers. FA TE SPE e made	on or as amended, by one of the following met seipt of this amendment on each copy of the off ILLURE OF YOUR ACKNOWLEDGEMENT TO CIFIED MAY RESULT IN REJECTION OF YOU by telegram or letter, provided each telegram o	thods: () fer subn BE RE(UR OFf	a) By comp nitted; or (CEIVED AT FER If by	c) By
12. ACCOUNTING AND APPROPRIATION DATA (If requirements and the second se	rired)	Net	Inc	rease: \$5	08,	400.00)
13. THIS ITEM ONLY APPLIES TO M	ODIFICATION O	F CONTRACTS/ORDERS	S. IT MO	DDIFIES THE CONTRACT/ORDER NO. AS DES	SCRIBE	D IN ITEM	14.
				ES SET FORTH IN ITEM 14 ARE MADE IN TH			
B. THE ABOVE NUMBERED CONTRAC appropriation date, etc.) SET FORTH C. THIS SUPPLEMENTAL AGREEMENT				MINISTRATIVE CHANGES (such as changes in OF FAR 43 103(b). TY OF:	n payin	g office,	
D. OTHER (Specify type of modification	and authority)						
X Funding Action Per F	AR 32.30	7-1 (a) Full	y Fu	nding			
E. IMPORTANT: Contractor X is not.	is required t	to sign this document and	return	copies to the issuing	office.		
14 DESCRIPTION OF AMENDMENTAMODIFICATION (DUNS Number: 007669216 Contracting Officer Represent Nathan.R.Lindsey@ice.dhs.gov	tative (COR): Nathar	n R.	·	le.)		
ALT COR: Donna Ore, Email: Do				one: (916)329-4326			
This modification is issued a performance end date from 07, estimated that the funds oblication. Exempt Action: Y Continued Except as provided herein, all terms and conditions of the	/31/2016 igated w	to 08/31/201	l6 in	n the amount of \$508,400 riod through 08/31/2016.	0.00	. It	is
15A. NAME AND TITLE OF SIGNER (Type or print)		and the second second	16A. I	NAME AND TITLE OF CONTRACTING OFFIC			
15B. CONTRACTOR/OFFEROR		15C. DATE SIGNED	168. (INITED STATES OF AMERICA		l	C. DATE SIGNED 7/18/14
(Signature of person authorized to sign)			10	(Signature of Contracting Officer)			111114

 CONTINUATION SHEET
 REFERENCE NO. OF DOCUMENT BEING CONTINUED
 PAGE 11-09-0034/HSCEDM-16-F-IG203/P00001
 PAGE 2
 2

TEM NO.	SUPPLIES/SERVICES	QUANTITY		UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	LIST OF CHANGES:				· · · · · · · · · · · · · · · · · · ·
	Reason for Mcdification : Funding Only Action		1 1		
	Total Amount for this Modification: \$508,400.00			ŀ	
	New Total Amount for this Award: \$1,016,800.00		1 1		
	Obligated Amount for this Modification:		1		
	\$508,400.00 New Total Obligated Amount for this Award:				
	\$1,016,800.00				
	11,010,000.00	1			
	CHANGES FOR LINE ITEM 0001 - Detention Housing				
	Quantity changed from 6,200 to 12,400				
	Total Amount changed from \$508,400.00 to				
	\$1,016,800.00				
	Obligated Amount for this modification:		li		
	\$508,400.00				
	Delivery Date changed from 05/29/2016 to				
	08/31/2016				
	FOB: Destination				
	Period of Performance: 07/01/2016 to 08/31/2016	i	1		
	•				
	Change Item 0001 to read as follows(amount shown				
	is the obligated amount):				
001	DETAINEES HOUSING (WEST FACILITY)	6200	EA	82.00	508,400.
	All terms and condition of the IGA remain the		1		
	same.				
			1		
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			1	1	

AMENDMENT OF SOLICITATION/MODIFIC	ATION OF CONTRACT		1. CONTRACT ID CODE	1	PAGE OF	PAGES
2. AMENDMENT/MODIFICATION NO.	3. EFFECTIVE DATE	4. REO	UISITION/PURCHASE REQ. NO.	5 PRC	1	3). (If applicable)
P00011	See Block 16C	and the same of	16FSFCOCOWR02.08	J. FRC	NEO! NO	. (ir applicatio)
6. ISSUED BY CODE		7. ADN	MINISTERED BY (If other than Item 6)	CODE	TCE/	DM/DC-LAGUNA
ICE/Detent Mngt/Detent Continuing action and Customs Enfo Office of Acquisition Manage 24000 Avila Road, Room 3104 Laguna Niguel CA 92677	ract-LAG orcement	Off: 2400	Detent Mngt/Detent Con igration and Customs En ice of Acquisition Mana 00 Avila Road, Room 310 n: Jose R. Munoz Jr.	nforce ageme	t-LAG ement	
8. NAME AND ADDRESS OF CONTRACTOR (No., stroot	1		na Niguel CA 92677			
CONTRA COSTA COUNTY INC 651 PINE ST 7TH FLOOR MARTINEZ CA 945531229	, county, State and 21P Code)	98.	AMENDMENT OF SOLICITATION NO. DATED (SEE ITEM 11)			
		HS	. MODIFICATION OF CONTRACT/ORDER A 11-09-0034 CEDM-14-F-IG125 . DATED (SEE ITEM 13)	NO.		
CODE 0076692160000	FACILITY CODE	_	5/01/2014			
	11. THIS ITEM ONLY APPLIES TO	D AMENDM	ENTS OF SOLICITATIONS			
separate letter or telegram which includes a reference THE PLACE DESIGNATED FOR THE RECEIPT OF virtue of this amendment you desire to change an offereference to the solicitation and this amendment, and 12. ACCOUNTING AND APPROPRIATION DATA (If required See Schedule	to the solicitation and amendment nu DFFERS PRIOR TO THE HOUR AND or already submitted, such change ma is received prior to the opening hour a pured) No	mbers. FAI DATE SPEC y be made to and date species. Dec:	CIFIED MAY RESULT IN REJECTION OF YO by telegram or letter, provided each telegram cified.	OBERECOUR OFFI or letter m	EIVED AT ER If by nakes	
			ES SET FORTH IN ITEM 14 ARE MADE IN INSTRATIVE CHANGES (such as changes OF FAR 43,103(b).			
C. THIS SUPPLEMENTAL AGREEMEN						
D. OTHER (Specify type of modification	and authority					
X Bilateral Modificati	ALL STATE OF THE S	Secut				
E. IMPORTANT: Contractor	(X) is required to sign this document		1 copies to the issuir	n office		
14.DESCRIPTION OF AMENDMENT/MODIFICATION DUNS Number: 007669216 COR: Donna Ore COR Email: Donna.Ore@ice.dhs COR Phone Number: (916) 329-	Organized by UCF section headings,		licitation/contract subject matter where feasi	ble.)		
Alt COR: Gwen Zander Alt COR Email: Gwen.Zander@i						
Alt COR Phone Number: (661)	328-4575					
The purpose of this modifica HSCEDM-14-F-IG125. All delive Continued	erables have been r	eceive	d, and all invoices ha	ve be		
Except as provided herein, all terms and conditions of the 15A. NAME AND TITLE OF SIGNER (Type or print)	e document referenced in Item 9 A or		stofore changed, remains unchanged and in AME AND TITLE OF CONTRACTING OFFI			
BRIAN BONTHRON,	HEUTENANT	Vir	ginia L. Collie VLC	/	e or print)	
15B. CONTRACTOR/OFFEROR (Signorati of partin distribution to sign)	15C. DATE SIGNED	16B. U	NITED STATES OF AMERICA (Signature of Contracting Officer)		160	C. DATE SIGNED
NSN 7540-01-152-8070				TANDADI	FORMA	0 (05)(10 83)

NSN 7540-01-152-8070 Previous edition unusable STANDARD FORM 30 (REV. 10-8 Prescribed by GSA FAR (48 CFR) 53.243 CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED

IGA 11-09-0034/HSCEDM-14-F-IG125/P00011

PAGE 2

3

ITEM NO.	SUPPLIES/SERVICES	QUANTITY	201200000	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	accordance with the closeout procedures of FAR				
	4.804, this task order is hereby modified as				
	follows:				
	a. Within this closeout modification, the				
	contractor hereby releases the Government from				
	any and all liability under this task order.		6.5		
	The total amount of this task order is decreased				
	as follows:				
	From: \$4,244,316.00 By: \$9,676.00 To:				
	\$4,234,640.00				
	Exempt Action: Y				
	Discount Terms:				
	Net 30				
	FOB: Destination				
	Period of Performance: 07/01/2014 to 06/30/2015				
	01 101101mance: 07/01/2014 60 00/30/2013				
	Change Item 0001 to read as follows(amount shown				
	is the total amount):				
0001	DETAINEE SERVICE at West Detention Facility				4 200 240
	Estimate 155 beds per day in accordance with US				4,208,240.
	Marshalls Service Agreement No. 11-09-0034.				
	individual delvice Agreement No. 11-03-0034.				
	CLIN 0001 is decreased as follows:				
	From: \$4,217,916.00 By: \$9,676.00 To:				
	\$4,208,240.00				
	Product/Service Code: S206				
	Product/Service Description: HOUSEKEEPING- GUARD				
	FIOGRACIOSETVICE DESCRIPCION: HOUSEKEEPING- GUARD				
	Accounting Info:				
	ERODETN R02 BA 31-12-00-000				
	18-63-0500-05-00-00-00 GE-25-72-00				
	Funded: \$0.00				
	Accounting Info:				
	ERODETN R02 BA 31-12-00-000				
	18-63-0500-05-00-00-00 GE-25-72-00				
	Funded: \$0.00				
	Accounting Info:				
	ERODETN R02 EA 31-12-00-000				
		Bank 1			
	18-63-0500-05-00-00-00 GE-25-72-00				
	Funded: \$0.00				
	Accounting Info:				
	ERODETN-R02 BA 31-12-00-000				
	18-63-0500-05-00-00-00 GE-25-72-00				
	Funded: \$0.00				
	Accounting Info:				
	ERODETN-R02 BA 31-12-00-000				
	18-63-0500-05-00-00-00 GE-25-72-00				
	Continued				
			1		
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CONTINUATION SHEET REFERENCE NO. OF DOCUMENT BEING CONTINUED IGA 11-09-0034/HSCEDM-14-F-IG125/P00011 PAGE OF 3 3

ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	Funded: \$0.00				
	Accounting Info:				
	ERODETN-R02 BA 31-12-00-000				
	18-63-0500-05-00-00-00 GE-25-72-00				
	Funded: \$0.00				
	Accounting Info:				
	ERODETN-R02 BA 31-12-00-000				
	18-63-0500-05-00-00-00 GE-25-72-00				
	Funded: \$0.00				
	Accounting Info:				
	ERODETN-R02 BA 31-12-00-000				
	18-63-0500-05-00-00-00 GE-25-72-00				
	Funded: -\$9,676.00				
	All other terms and conditions referenced within				
	the IGA remain the same				

AMENDMENT OF SOLICITATION/MODIFIC		1. CONTRACT ID CODE		PAGE OF PAGES		
					1	3
2. AMENDMENT/MODIFICATION NO.	3. EFFECTIVE DATE	1		5. PR(DJECT NO). (If applicable)
P00003	09/25/2014		2114FSFCOCOWR02.11			
6. ISSUED BY CODE	ICE/DM/DC-LAGUNA	7.1	ADMINISTERED BY (If other than Item 6)	CODE	ICE/	DM/DC-LAGUNA
ICE/Detent Mngt/Detent Contr	act-LAG	10	E/Detent Mngt/Detent Cont	rac	t-LAG	
Immigration and Customs Enfo			umigration and Customs Enf			
Office of Acquisition Manage	ment	Of	fice of Acquisition Manag	jeme	nt	
24000 Avila Road, Room 3104		1	1000 Avila Road, Room 3104			
Attn: Natasha Nguyen (949)42	5-7030		tn: Natasha Nguyen, (949)	425	-7030	
Laguna Niguel CA 92677 8 NAME AND ADDRESS OF CONTRACTOR (No., stroet.	County State and 71D Code1		guna Niguel CA 92677 BA AMENDMENT OF SOLICITATION NO.			
The same value of the same of	, was, solo and zir couty	(x)	BA AMENDMENT OF SOLICITATION NO			
CONTRA COSTA COUNTY INC						
651 PINE ST 7TH FLOOR			9B. DATED (SEE ITEM 11)			
MARTINEZ CA 945531229						
			10A. MODIFICATION OF CONTRACT/ORDER NO).		
		x	10A MODIFICATION OF CONTRACT/ORDER NO IGA 11-09-0034			
		1 [HSCEDM-14-F-IG125			
		Ιſ	10B. DATED (SEE ITEM 13)			
CODE 0076692160000	FACILITY CODE	1	05/01/2014			
	11. THIS IYEM ONLY APPLIES TO	AMEN	DMENTS OF SOLICITATIONS			
The above numbered schotation is amended as set for	rth in Item 14. The hour and date specif	fied fo	r receipt of Offers is extend	led.	is not ex	dended.
Offers must acknowledge receipt of this amendment pr	nor to the hour and date specified in the	solici	ation or as amended, by one of the following metho	ods: (a)	By comple	eting
	1 20 A 15		receipt of this amendment on each copy of the offe			•
separate letter or telegram which includes a reference						
THE PLACE DESIGNATED FOR THE RECEIPT OF O virtue of this amendment you desire to change an offer						
to the solicitation and this amendment, and is received			o oy tologram or tottor, provided each telegram or t	ottor ter	ands reigi	ciico
12. ACCOUNTING AND APPROPRIATION DATA (If requ	uired) Net	· Ir	crease: \$2	6.40	0.00	
ERODETN R02 BA 31-12-00-000	18-63-0500-00-00-00-	-00	GE-25-72-00	-,		
13. THIS ITEM ONLY APPLIES TO MO	DDIFICATION OF CONTRACTS/ORDER	es. It	MODIFIES THE CONTRACT/ORDER NO. AS DES	CRIBE	D IN ITEM	14.
CHECK ONE A THIS CHANGE ORDER IS ISSUED P	URSUANT TO: (Specify authority) THE	CHA	NGES SET FORTH IN ITEM 14 ARE MADE IN TH	E CON	TRACT	
B. THE ABOVE NUMBERED CONTRAC	T/ORDER IS MODIFIED TO REFLECT	THE	ADMINISTRATIVE CHANGES (such as changes in TY OF FAR 43.103(b).	paying	office,	
appropriation said, stay service.						
C THIS SUPPLEMENTAL AGREEMENT	IS ENTERED INTO PURSUANT TO A	UTHO	ORITY OF:			-
D. OTHER (Specify type of modification a	and authority)		·			
X BILATERAL - Mutual A	Agreement					
E. IMPORTANT: Contractor is not,	$\overline{\mathbf{x}}$ is required to sign this document and	d retu	n 1 copies to the issuing of	office		
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, inc	cludin	g solicitation/contract subject matter where feasible) .)		
DUNS Number: 007669216						
Alternate COR/Finance POC: To	om Weissmiller at 41	5-8	44-5604 or e-mail at			
thomas.j.weissmiller@ice.dhs.						
Program POC: Gwen Zander at 6	•	; 1	at guan zandordice dhe go	**		
riogram roc: Gwen Zander ac o	01-326-4373 Of e-ma	11	ac gwen.zandererce.dns.go	v		
		Comp. State Comp.				
This modification is issued t						
County (West Detention Facili	.ty) as a streamline	to	support with the Immigra	tion	Cour	rt
proceeding for detainees who	are currently in IC	E/E	RO custody in accordance	with	atta	iched
Visiting Center Plans for VTC	2.					
•						
Continued						
Except as provided herein, all terms and conditions of the	document referenced in Itam 9A or 10/	A, as h	eretofore changed, remains unchanged and in full	force a	nd effect.	
15A. NAME AND TITLE OF SIGNER (Type or print)		_	NAME AND TITLE OF CONTRACTING OFFICE			
RRIAL BATILD ALL II	EUTENANT	P	bberta J. Halls			
					1.22	DATE CICLIER
15B. CONTRACTOR/OFFEROR	15C. DATE SIGNED	1100	ONLYED STATES OF AMERICA		160	. DATE SIGNED
B. Bontan	10/2/14	1	XXXXXXXXXXX		10	1-2614
(Signature of person authorized to sign)	1-11-1		(Signature of Gontracting Officer)	NDAR) FORM ?	0 (REV 10-83)
NSN 7840-01-157-8070			SIA	JYANU	PURMS	UINEY IU-03)

NSN 7540-01-152-8070 Previous edition unusable STANDARD FORM 30 (REV 10-83) Prescribed by GSA FAR (48 CFR) 53.243

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED	PAGE C)F
	IGA 11-09-0034/HSCEDM-14-F-IG125/P00003	2	3

-	COSTA COUNTY INC				
ITEM NO.	SUPPLIES/SERVICES (B)	QUANTITY (C)	(D)	UNIT PRICE (E)	AMOUNT (F)
(A) 0002	(B) Exempt Action: Y LIST OF CHANGES: Reason for Modification : Additional Work Total Amount for this Modification: \$26,400.00 New Total Amount for this Award: \$2,195,300.00 Obligated Amount for this Modification: \$26,400.00 New Total Obligated Amount for this Award: \$2,195,300.00 FOB: Destination Period of Performance: 07/01/2014 to 10/15/2014 Add Item 0002 as follows: TO INSTALL VTC SYSTEM FOR ICE USE AT CONTRA COSTA COUNTY (WEST DETENTION FACILITY). County shall invoice only for work actually performed. The telecom not to exceed costs are as follows:		LO	(E) 26,400.00	26,400.00
	\$2,500 for Shielded Cat 6 cable run from wiring closet in building 4 to room 1 in visitation. Two sets of cable will be run to each data box. \$2,500 for Shielded Cat 6 cable run from wiring closet in building 4 to room 2 in visitation. Two sets of cable will be run to each data box.				
	\$2,500 for Shielded Cat 6 cable run from wiring closet in building 4 to room 13 in visitation. Two sets of cable will be run to each data box. \$2,500 for Shielded Cat 6 cable run from wiring closet in building 4 to ICE Admin office in visitation. Two sets of cable will be run to each data box. \$1,000 for phone line to room 3 in visitation. \$1,000 for phone line to be used by fax machine				
	in room 3. \$10,000 to run fiber from the MPOE to wiring closet building 4. \$3,000 for any unexpected costs. \$1,400 to install electrical outlets in rooms 2 and 3. TOTAL ESTIMATE NOT TO EXCEED: \$26,400.00 Continued				
	TOTAL ESTIMATE NOT TO EXCEED: \$26,400.00 Continued				

CONTINUATION SHEET REFERENCE NO. OF DOCUMENT BEING CONTINUED IGA 11-09-0034/HSCEDM-14-F-IG125/P00003		PAGE C)F
CONTINUATION SHEET	IGA 11-09-0034/HSCEDM-14-F-IG125/P00003	3	3

M NO.	SUPPLIES/SERVICES	QUANTITY		UNIT PRICE	AMOUNT
A)	(B)	(C)	(D)	(E)	(F)
	Task Order HSCEDM-14-F-IG125 is hereby issued				
	against US Department of Justice, Marshals				
	Inter-governmental Service Agreement (IGA) Number	l			
	11-09-0034 for the detention and care of aliens		ll		
	housed at Contra Costa County, CA. All other				
	terms and conditions refernced within the IGA				
	remain the same.				
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AMENDMENT OF SOLICITATION/MODIFIC	NTRACT		1. CONTRACT ID CODE	PAGE OF PAGES		
2. AMENDMENT/MODIFICATION NO.	T3. EFFECTIVE DA	ATE 14	4 RE	QUISITION/PURCHASE REQ. NO.	5 PROJE	1 2 ECT NO. (If applicable)
P00007	See Block					zov vo (ii oppiooso)
6 ISSUED BY CODE	ICE/DM/DC		7. A	DMINISTERED BY (if other than Item 6)	CODE	ICE/DM/DC-LAGUNA
ICE/Detent Mngt/Detent Contribution and Customs Enfo Office of Acquisition Manage 24000 Avila Road, Room 3104 Attn: Kathryn Briskie, 949-4 Laguna Niguel CA 92677	orcement ement		Im Of 24 At	E/Detent Mngt/Detent Con migration and Customs En fice of Acquisition Mana 000 Avila Road, Room 310 tn: Kathryn Briskie,949- guna Niguel CA 92677	tract- forcen gement	-LAG nent t
8. NAME AND ADDRESS OF CONTRACTOR (No., street	t, county, State and Zil	P Code) (3	x) ⁹	A AMENDMENT OF SOLICITATION NO.		
CONTRA COSTA COUNTY INC 651 PINE ST 7TH FLOOR MARTINEZ CA 945531229		2	K 1	DATED (SEE ITEM 11) OA MODIFICATION OF CONTRACT/ORDER N IGA 11-09-0034 ISCEDM-14-F-IG125 OB. DATED (SEE ITEM 13)	80.	
CODE 0076692160000	FACILITY CODE			05/01/2014		
	11. THIS ITEM	ONLY APPLIES TO AM	- 1	DMENTS OF SOLICITATIONS		
	d prior to the openin quired) IODIFICATION OF C	g hour and date specific	ed . IT	MODIFIES THE CONTRACT/ORDER NO. AS DE	SCRIBED (IN ITEM 14.
B THE ABOVE NUMBERED CONTRA- appropriation date, etc.) SET FORTI C. THIS SUPPLEMENTAL AGREEMEN				OMINISTRATIVE CHANGES (such as changes IY OF FAR 43.103(b). RITY OF	in paying o	office,
D. OTHER (Specify type of modification	••				·	
X Unilateral Modificat						
E.IMPORTANT: Contractor x.is.not. 14 DESCRIPTION OF AMENDMENT/MODIFICATION DUNS Number: 007669216 . COR: Donna Ore		ign this document and i		 	<u> </u>	
COR Email: Donna.Ore@ice.dhs COR Phone Number: (916) 329- Alt COR: Gwen Zander Alt COR Email: Gwen.Zander@i Alt COR Phone Number: (661)	4326 ce.dhs.gov	7				
This modification is issued 03/31/2015. It is estimated Continued Except as provided herein, all terms and conditions of the	that the f	funds curren	tl	y obligated will cover t	he per	riod
15A NAME AND TITLE OF SIGNER (Type or print)	1			NAME AND TITLE OF CONTRACTING OFFICE OFFICE OF THE AND TITLE OF CONTRACTING OFFICE OF THE AND THE AND THE AND THE AND THE AND THE AND THE AND THE AND THE AND THE AND THE AND THE AND THE AND THE AND THE AND THE AND THE AND	CER (Type	or print)
15B CONTRACTOR/OFFEROR	15	C. DATE SIGNED	46B	UNITED/STATES OF AMERICA	_	16C. DATE SIGNED
(Signature of person authorized to sign)				(Signature of Confracting Officer)		

NSN 7540-01-152-8070 Previous edition unusable STANDARD FORM 30 (REV 10-83) Prescribed by GSA FAR (48 CFR) 53.243

	REFERENCE NO. OF DOCUMENT BEING CONTINUED		
CONTINUATION SHEET	IGA 11-09-0034/HSCEDM-14-F-IG125/P00007	2	2

rem no. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	through 03/31/2015.				
	Exempt Action: Y				
	LIST OF CHANGES: Reason for Modification : Other Administrative				
	Action				
	Period Of Performance End Date changed from				
	2015-02-28 to 2015-03-31				
	Period of Performance: 07/01/2014 to 03/31/2015		1		
	Task Order HSCEDM-14-F-IG125 is hereby issued				
	against US Department of Justice, Marshals				
	Inter-governmental Service Agreement (IGA) Number 11-09-0034 for the detention and care of aliens				
	housed at Contra Costa County, CA. All other				
	terms and conditions refernced within the IGA remain the same.				
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	IT OF SOLICITATION/MODIFIC	ATION OF CONTRACT	1 CONTRACT ID CODE	PAGE	PAGE OF PAGES		
2. AMENDMENT	T/MODIFICATION NO.	3 EFFECTIVE DATE	LA DEO	HISTORIOUS CHASE DEC. AND	1	2	
P00001				UISITION/PURCHASE REQ. NO 17FSFCOCOMR08.09	5 PROJECT	IO. (If applicable)	
6 ISSUED BY	CODE	See Block 16C ICE/DM/DC-LAGUNA		AINISTERED BY (If other than item 6)	CODE I		
ICE/Dete	nt Mngt/Detent Conti		_			/DCR	
Immigrat	ion and Customs Enfo	rcement	TOE	Detention Compliance &	Removal:	S	
Office o	f Acquisition Manage	ement	Off	igration and Customs Engice of Acquisition Manag	orcemen	t	
24000 Av	ila Road, Room 3104		801	I Street NW, suite 930	ement		
Laguna N	iguel CA 92677		Atti	: Kimberlee Brown			
9 NAME AND A	DDDESS OF COURT OF THE			nington DC 20536			
O NAME AND A	DDRESS OF CONTRACTOR (No. street	t, county, State and ZIP Code)	(x) 9A	AMENDMENT OF SOLICITATION NO.		Element of the	
CONTRA CO	STA COUNTY INC						
651 PINE	ST 7TH FLOOR		98	DATED (SEE ITEM 11)			
MARTINEZ	CA 945531229						
			-				
			× 1104	MODIFICATION OF CONTRACT/ORDER NO			
			HS	CEDM-17-F-IG247			
			10B	DATED (SEE ITEM 13)			
CODE 007	6692160000	FACILITY CODE	0	5/27/2017			
		11. THIS ITEM ONLY APPLIES TO	AMENDMI	ENTS OF SOLICITATIONS			
The above num	nbered solicitation is amended as set fo	rth in Item 14. The hour and date spe-	alied for re	coint of Otters	led. Is not	Outnoded	
Oners must ac	knowledge receipt of this amendment p	nor to the hour and date specified in the	e solicitatio	n or as amended , by one of the following met-	nds: (a) Bu com	nlatina	
		ilus of the amendment, (b) By acknowl	odding roce	of this amendment on each convert the attack			
THE PLACE D	or relegiation which includes a reference	to the solicitation and amendment our	hore FAI	TIPE OF YOUR ACKNOWN FROM LINE TO			
	mentantian you desire to charige an olice	already submitted, such change may	he mode h	CIFIED MAY RESULT IN REJECTION OF YOU y telegram or letter, provided each telegram or	R OFFER If by		
			d date spe	provided aschitalegram or	letter makes		
12 ACCOUNTIN	G and appropriation data (# required 808 E1 31-12-00-000	ured)			860.00		
	13 THIS ITEM ONLY APPLIES TO A	18-63-0500-00-00-00	-00 GE	-25-72-00			
	IS. THIS ITEM CALL APPLIES TO ME	DDIFICATION OF CONTRACTS/ORDE	RS. IT MO	DIFIES THE CONTRACT/ORDER NO. AS DES	CRIBED IN ITEA	1 14.	
CHECK ONE A	THIS CHANGE ORDER IS ISSUED P ORDER NO. IN ITEM 10A.	URSUANT TO. (Specify authority) TH	E CHANGE	S SET FORTH IN ITEM 14 ARE MADE IN THI	CONTRACT		
8							
	appropriation date, etc.) SET FORTH	IN ITEM 14 PURSUANT TO THE AUT	HORITY	INISTRATIVE CHANGES (such as changes in F FAR 43 103(b)	paying office.		
	THIS SUPPLEMENTAL AGREEMENT						
		TO A TO A TO A TO A TO A	DINORII	OF .			
D	OTHER (Specify type of modification (and authority)					
	nilateral/ FAR 32.70						
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E. IMPORTANT:	Contractor (X) is not	is required to sign this document an		copies to the issuing of	ffice		
E. IMPORTANT:	Contractor Siss not N OF AMENDMENT/MODIFICATION (C	is required to sign this document an		copies to the issuing of	ffice		
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Prescribed by GSA FAR (48 CFR) 53 243

REFERENCE NO. OF DOCUMENT BEING CONTINUED PAGE CONTINUATION SHEET 11-92-0024/HSCEDM-17-F-IG247/P00001 2 2

Phone: (916) 329-4326	(C) (I	D)	(E)	AMOUNT (F)
			No. of the last of	
Contract Specialist: Kimberlee Brown Email: Kimberlee.Brown@ice.dhs.gov Phone: (202) 732-2675 The purpose of this modification is to: A. Add funds in the amount of \$9,860.00 to task order HSCEDM-17-F-IG247. B. Increase the value of CLIN 0001: Temporary Detainee Housing by: \$9,860.00 from: \$25,500.00 to: \$35,360.00. C. The period of performance end date is 09/30/2017. It is expected that funds in the amount of \$35,360.00 will cover cost until the end of the period of performance. As of this modification the obligated and total value of this task order is increased by \$9,860.00 from \$25,500.00 to \$35,360.00. Exempt Action: N Sensitive Award: NONE FOB: Destination Period of Performance: 07/01/2017 to 09/30/2017 Change Item 0001 to read as follows(amount shown is the obligated amount): TEMPBEARY DETAINEE HOUSING Total Quantity- From: 300 By: 116 To: 416 Total Price - From: 25,500 By: 9,860.00 To: 35,360.00	116 EA		85.0C	9,860.0

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ICE/Det: ICE/Det: Immigra Office of 24000 A Laguna (E. NAME AND CONTRA C 651 PINE	ent Mngt/Detent Contrition and Customs Enfo of Acquisition Manage wila Road, Room 3104	ICE/DM/DC-LAGUNA ract-LAG proement	7. ADMINISTERED BY plother than tem 4) ICE/Detent Mngt/Detent Co Immigration and Customs 1	CODE ICE/DN/DC-LAGUNA CONTRACT-LAG Enforcement
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E NAME AND CONTRA C 651 PINE	arguer on sevin		24000 Avila Road, Room 3: Attn: Jose R. Munoz Jr.	104
CONTRA C			Laguna Niguel CA 92677	
651 PINE	ADDRESS OF CONTRACTOR (No. street	county, Blobs and ZEP Code)	DO SA AMENGMENT OF SCLICTIATION NO.	
651 PINE	COSTA COUNTY INC		Ħ	
MARTINEZ	E ST 7TH FLOOR		98. DATED (BEZ ITEM II)	
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			JOA ACQUERCATION OF CONTRACTORDE	R NO.
			× IGA NODFICATION OF CONTRACTIORDE	
			H8CEDM-15-F-IG282	
AAA -		Transmission	108. DATED (SEE ITEM 13)	
CODE 00	76692160000	FACILITY CODE	06/29/2015	
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	rumbared existation is extended as sat fo t existantialists excelst of this extendment of		icited for receipt of Otters "its e the solicitation or as excended, by one of the following	extended. Die not extended.
			fedging receipt of this emendment on each copy of th	
			mbors. FAILURE OF YOUR ACKNOWLEDGEMENT	
			DATE SPECIFIED MAY RESULT IN REJECTION OF the made by telegram or letter, provided each telegra	
_ radorance to	the solicitation and this amendment, and	is received prior to the opening hour or	nd date specified.	
12 ACCOUNT	TING AND APPROPRIATION DATA (If req		t Decrease:	-310,880.00
See Sch				
	13, THIS ITEM CHILY APPLIES TO M	ODIFICATION OF CONTRACTS/CROS	irs. It modifies the contracticader no. As	i DESCRIBED DI ITEM 44,
CHECK DHE	A THIS CHANGE GREER IS ISSUED F GREEN NO. IN ITEM 19A	PUREUANT TO: (Spearly sustainty) Th	(E CHANGES SET FORTH DI ITEM 14 ARE MADE I	IN THE CONTRACT
	B. THE ABOVE NUMBERED CONTRAC	TIORDER IS MODIFIED TO REFLEC	TTHE ACHINETRATIVE CHANGES (such as chang	pes in paying affice,
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	C. THIS SUPPLEMENTAL AGREEMEN	TIS ENTERED INTO PURSUANT TO	AUTHORITY CF.	
	O. OTHER (Specially type of modification	• • •		
<u>X</u>	Bilateral Modificati	on / FAR 4.804 Clos	eout	
E. DEPORTAN		(E) is required to sign this document o		-
DUNS Nus	mber: 007669216		including solicitation/contract subject matter where A	iceibie.)
	ting Officer Represen			
Email: [Donna.Ore@ice.dha.gov	, Phone Number: (91	6) 329-4326	
	: Gwen Zander			
Email: (Gwen.Zander@ice.dhs.g	ov, Phone Number: (661) 328-4575	
Contract	b Consistints Vinter-5	on Braun		
	t Specialist: Kimberl Kimberles Brownsies d		(202) 720 0/72	
emaji: j	Kimberlee.Brown@ice.d	us.gov, rnone Numbe	r: (202) /32~2675	
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Previous edition unusable

Presented by GSA FAR (48 CFR) 53.243

	REFERENCE NO. OF DOCUMENT BEING CONTINUED	MOE	or
CONTINUATION SHEET	IGA 11-92-0024/HSCEDM-15-F-IG282/P00005	2	3

Closeout the task order number under MSCEDM-15-F-IG282. All deliverables have been received, and all invoices have been paid. In accordance with the closeout procedures of FAR 4.804, this task order is hereby modified as follows: a. Within this closeout modification, the contractor hereby releases the Government from any and all liability under this task order. The total amount of this task order is decreased as follows: Prom: \$60,690.00 By: \$10,880.00 To: \$49,810.00 Exempt Action: Y Discount Terms: Net 30 FOB: Destination Period of Performance: 07/01/2015 to 06/30/2016 Change Item 0001 to read as follows(amount shown is the total amount):	ITEM NO.	GUPPLIES/SERVICES	GUARTITY		UNIT FRICE	AMOUNT
NSCEDM-15-F-IG282. All deliverables have been received, and all invoices have been paid. In accordance with the closeout procedures of FRR 4.804, this task order is hereby modified as follows: a. Within this closeout modification, the contractor hereby releases the Government from any and all liability under this task order. The total amount of this task order is decreased as follows: From: \$60,500.00 By: \$10,880.00 To: \$49,810.00 Except Action: Y Discount Terms: Net 30 FOB: Destination Period of Performance: 07/01/2015 to 06/30/2016 Change Item 0001 to read as follows(amount shown is the total amount): DETAINEE SERVICE at Martinoz Detention Facility CLIN 0001 is decreased as follows: From: \$60,690.00 By: \$10,880.00 To: \$49,810.00 The total quantity is decreased as follows: From: 714 By: 128 To:596 Product/Service Code: \$206 Product/Service Description: HOUSEKEEPING- GUARD Accounting Info: ERODETM-R08 BA 31-12-00-000 18-63-0500-00-00-00-00 GE-25-72-00 Funded: \$0.00 Accounting Info: USP0000-R08 UP 31-12-00-000 18-63-0500-00-00-00-00 GE-25-72-00 Punded: \$0.00 Accounting Info: USP0000-R08 UP 31-12-00-000 18-63-0500-00-00-00-00 GE-25-72-00 Punded: \$0.00 Accounting Info: USP0000-R08 UP 31-12-00-000 18-63-0500-00-00-00-00 GE-25-72-00 Punded: \$0.00 Accounting Info: USP0000-R08 UP 31-12-00-000 18-63-0500-00-00-00-00 GE-25-72-00 Punded: \$0.00 Accounting Info: USP0000-R08 UP 31-12-00-000 18-63-0500-00-00-00-00 GE-25-72-00 Punded: \$0.00 Accounting Info: USP0000-R08 UP 31-12-00-000 18-63-0500-00-00-00-00 GE-25-72-00 Punded: \$0.00 Accounting Info: USP0000-R08 UP 31-12-00-000 18-63-0500-00-00-00-00 GE-25-72-00 Punded: \$0.00 Accounting Info: USP0000-R08 UP 31-12-00-000 18-63-0500-00-00-00-00 GE-25-72-00 Punded: \$0.00 Accounting Info: USP0000-R08 UP 31-12-00-000 R09000-R08 UP 31-12-00-000 R09000-R08 UP 31-12-00-000 R09000-R08 UP 31-12-00-000 R09000-R08 UP 31-12-00-000 R09000-R08 UP 31-12-00-000 R09000-R08 UP 31-12-00-000 R09000-R08 UP 31-12-00-000 R090000-R08 UP 31-12-00-000 R090000-R08 UP 31-12-00-0000 R0900000-R08 UP	(A)	(B)	(C)	(0)	(E)	(F)
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CONTINUATION SHEET	IGA 11-92-0024/HSCEDN-15-F-IG282/P00005	3	3

TEM NO.	SUPPLIES/SERVICES	GAMILLA		UNIT PRICE	THUOMA
(A)	(B)	(C)	(0)	(E)	(F)
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	The Government hereby requests that the vendor	l			
	execute, scan, and return this bilaterally signed				
	modification. Failure of response from the	l			
	vendor, the modification shall be considered	Į.			
	concurrence and will be processed as an	1	l		
	unilateral modification with the Government's	ŀ			
	signature only.				1
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AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT			1. CONTRACT ID CODE PAGE OF PAGES				
2. AMENDMENT/MODIFICATION NO.	3. EFFECTIVE DATE	A REO	UISITION/PURCHASE REQ. NO.	Is pp/	1	2 (If applicable)	
P00002	See Block 16C		17FSFCOCOWR02.11			in approcessor	
6. ISSUED BY CODE	ICE/DM/DC-LAGUNA	7. ADI	MINISTERED BY (If other than Item 6)	CODE	ICE/D	CB	
ICE/Detent Mngt/Detent Contr Immigration and Customs Enfo Office of Acquisition Manage 24000 Avila Road, Room 3104 Laguna Niguel CA 92677	act-LAG rcement	Imm: Off: 801 Atti	Detention Compliance & igration and Customs En ice of Acquisition Mana I Street NW, suite 930 n: Kimberlee Brown	Rem forc	ovals ement	O.A.	
R MANE AND ADDRESS OF CONTRACTOR #1			nington DC 20536				
8. NAME AND ADDRESS OF CONTRACTOR (No. street, CONTRA COSTA COUNTY INC 651 PINE ST 7TH FLOOR MARTINEZ CA 945531229	county, State and ZIP Code)	9B.	AMENDMENT OF SOLICITATION NO. DATED (SEE ITEM 11) A MODIFICATION OF CONTRACT/ORDER NO. 109-0034 SCEDM-17-F-IG261 DATED (SEE ITEM 13)	10.			
CODE 0076692160000	FACILITY CODE	_	6/30/2017				
	11. THIS ITEM ONLY APPLIES TO						
CHECK ONE A. THIS CHANGE ORDER IS ISSUED FORDER NO. IN ITEM 10A.	r atready submitted , such change may is received prior to the opening hour anxired) DDIFICATION OF CONTRACTS/ORDER PURSUANT TO: (Specify authority) THI	be made d date spet Inc	by telegram or letter, provided each telegram o acified	SCRIBE	Makes 42.00 ED IN ITEM 14	1 .	
C. THIS SUPPLEMENTAL AGREEMEN D. OTHER (Spealy type of modification		UTHORI	IY OP.				
X Unilateral/FAR 32.70		4					
E. IMPORTANT: Contractor E is not.	is required to sign this document ar		copies to the issuin	- allian			
14.DESCRIPTION OF AMENDMENT/MODIFICATION (DUNS Number: 007669216 DBA: SHERIFFS DEPT Points of Contact:		Maria Maria Maria		-			
TOTALS OF CONFESCE							
Contracting Officer Represen Email: Nathan.R.Lindsey@ice.							
Alternate COR: Donna Ore Email: Donna.Ore@ice.dhs.gov	, Phone: (916) 329-4	1326					
Continued							
Except as provided herein, all terms and conditions of th ISA. NAME AND TITLE OF SIGNER (Type or print)	e document referenced in Item 9 A or 1	_	retefore changed, remains unchanged and in I				
B- BONTHIMAI 115.4	ENANT		ginia L. Collie	CER (1)	pe or phint)		
16B. CONTRACTORIOFFEROR B. Bontley	15C. DATE SIGNED		UNITED STATES OF AMERICA		16C.	DATE SIGNED	
NSN 7540-01-152-8070	17/1/	0	(Signature of Contracting Officer)	TANDAC	00 5001130	(REV. 10-83)	
Previous edition unusable			Pi	rescribe	d by GSA CFR) 53.243	(DEV. 10-03)	

CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED 11-09-0034/HSCEDM-17-F-IG261/P00002

PAGE 2

OF 2

ITEM NO	SUPPLIES/SERVICES	QUANTITY	The second second	UNIT PRICE	AMOUNT
(A)		(C)	(D)	(E)	(F)
(A)	SUPPLIESSERVICES (B) Contract Specialist: Kimberlee Brown Email: Kimberlee.Brown@ice.dhs.gov, Phone: (202) 732-2675 The purpose of the modification is to: A. Add funding to Task Order HSCEDM-17-F-IG261. B. Increase the funded amount of CLIN 0001 by \$55,842.00 from \$1,660,500.00 to \$1,716,342.00. C. Extend the period of performance end date from 07/31/2017 to 09/30/2017. As of this modification the obligated total of this modification is increased by \$55,842.00 from \$1,660,500.00 to \$1,716,342.00. Exempt Action: Y Sensitive Award: NONE FOB: Destination Period of Performance: 07/01/2017 to 09/30/2017 Change Item 0001 to read as follows(amount shown is the obligated amount): DETAINEE HOUSING (MANDAYS) FOR CONTRA COSTA COUNTY JAIL- WEST Accounting Info: ERODETN-R02 E1 31-12-00-000 18-63-0500-05-00-00-00 GE-25-72-00 Funded: \$0.00 Accounting Info: ERODETB-R02 C8 31-12-00-000 18-63-0500-05-00-00-00 GE-25-72-00 Funded: \$0.00 Accounting Info: ERODETB-R02 E1 31-12-00-000 18-63-0500-05-00-00-00 GE-25-72-00 Funded: \$5,042.00 All terms of the IGA apply to this task order.	QUANTITY (C)	(D)	AND STREET, ST	
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2 AMENOMENTARODIFICATION NO	CATION OF CONTRACT		1 CONTRACT ID CODE	PAGE OF PAGES
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9 ISSUED BY CODE			MISTERED BY (If alhor then from 8)	
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8 NAME AND ADDRESS OF CONTRACTOR (No. SPOR	Charles Charles and Paris Commission		INGTON DC 20536	
CONTRA COSTA COUNTY INC 651 PINE ST 7TH FLOOR MARTINEZ CA 945531229	courty. Stop and I'm Coass	× 10A 1	MENUMENT OF BOLICITATION NO ATED (SEE ITEM 11) ADDIFICATION OF CONTRACTIONDES 09-0034 EDM-16-F-IG203	R NO
CODE ODZECOZICOODO		100 0	ATED (SEE ITEM 13)	
CODE 0076692160000	FACILITY CODE	04	29/2016	
The above humbered solutioner is amended as set for Offers must observe force recent of this emended as	11. YMS FIEM ONLY APPLIES TO	AUCHOMEN	TH BY SOLICITATIONS	
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ACCOUNTING AND APPROPRIATION DATA (II region	~0	Decre		•
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CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED	PAGE (F
	11-09-0034/HSCEDM-16-F-IG203/P00009	2	3

(A)	SUPPLIES/SERVICES (B)	QUANTITY		UNIT PRICE	AMOUNT
	(B)	(C)	(D)	(E)	(F)
	Α.				
	В.			1	
	As of this modification the obligated and total			1	
	value of this task order is increases by			1	
	\$372,608.00 from \$5,876,612.00 to \$6,249,220.00.			1	
	372,000.00 110m \$3,876,612.00 to \$6,249,220.00.				
	From: \$6,249,220.00 By: \$78,392.00 To:				
	\$6,170,828.00			1	
	Exempt Action: Y Sensitive Award: NONE			- 1	
	FOB: Destination				
	Period of Performance: 07/01/2016 to 06/30/2017			1	
	Change Item 0001 to read as follows(amount shown	1 1		i	
	is the total amount):	1 1			
001	DETAINEES HOUSING (WEST FACILITY)	75254	EA	82.00	6,170,828.
	CLIN 0001 is decreased as follows:				
	From: \$6,249,220.00 By: \$78,392.00 To:				
	\$6,170,828.00	1 1			₫ ₁ et
	The total quantity is decreased as follows:				
ı	From: 76,210 By: -956 To: 72,254			1	4
	27. 750 10. 72,254	1 1			i
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CONTINUATION SHEET	11-09-0034/HSCEDM-16-F-IG203/P00009	3	Ĭ	3

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A)	(B)		(D)	(E)	(F)
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CONTRA COSTA COUNTY OFFICE OF THE SHERIFF DAVID O. LIVINGSTON SHERIFF - CORONER

September 17, 2015

Email: Invoice.Consolidation@ice.dhs.gov

DHS ICE
Attn: ICE-ERO/FOD-FSH
Burlington Finance Center

PO Box 1620

Williston, VT 05495-1620

Re: Tax ID 94-6000509 DUNS 007669216

Contract No: IGA 11-09-0034 Order No: HSCEDM-14-F-IG125

Please find enclosed a claim for reimbursement Contra Costa County Office of the Sheriff, in the amount of \$26,400.00. This claim is for installation charges of the Video Teleconferencing (VTC) System at the West County Detention Facility in Richmond, CA.

If you have any questions or need additional information, please give me a call at (925) 335-1527.

Sincerely,

DAVID O. LIVINGSTON, Sheriff-Coroner

Mary Jane Robb, Chief of Management Services

Enclosures

cc: Lt. Brian Bonthron (with enclosures)

OFFICE OF THE SHERIFF-CORONER Contra Costa County

651 Pine Street, 7th Floor Martinez, CA 94553 (925) 335-1526

Invoice

DATE	INVOICE #
9/17/2015	ICE2015

BILL TO

DHS, ICE

Attn: ICE-ERO/FOD-FSH Burlington Finance Center

PO Box 1620

Williston, VT 05495-1620

DESCRIPTION	QTY	RATE	AMOUNT
West County Detention Facility Tax ID #94-6000509 DUNS Number 007669216 Purchase Req #192114FSFCOCOWR02.11 Amendment/Modification No. P00003 Contract No.: IGA 11-09-0034 Order No.: HSCEDM-14-F-IG125 To install Video Teleconferencing (VTC) system at Contra Costa County (West County Detention Facility) as a streamline to support with the Immigration Court proceeding for detainees who are currently in ICE/ERO custody. Email: Invoice.Consolidation@ice.dhs.gov		26,400.00	26,400.00
Supporting Documents Attached.	LO	Total	\$26,400.00

Contra Costa County Office of the Sheriff - West County Detention Facility, Richmond CA

Contract # IGA 11-09-0034 Amendment/Modification # P00003 Purchase Req #192114FSFCC Order #HSCEDM-14-F-IG125 007669216 **DUNS Number**

To install VTC System for ICE use at Contra Costa County (West County Detention Facility). Work Performed:

Contra Costa County Dept of Information Technology (DoIT)

26,400.00 Work Performed by: Approved Budget:

Work Order #	Final Installation Date	Amount Description of Work (DoIT)
A-17394	12/16/2014	2,410.20 Labor tel specialist and parts. Shielded Cat 6 Bldg 4 Rms 1, 2, 13 & Ice Admin Office
A-17394	12/16/2014	3,372.50 Labor tel specialist and parts. Shielded Cat 6 Bldg 4 Rms 1, 2, 13 & Ice Admin Office
A-17393	12/16/2014	9,466.92 Labor tel specialist and parts. Shielded Cat 6 Bldg 4 Rms 1, 2, 13 & Ice Admin Office
A-17393	12/16/2014	14,563.55 Labor tel specialist. Run fiber from the MPOE to wiring closet Bldg 4, misc costs, installation of electrical outlets in Rms 2 & 3
A-17393	12/16/2014	3,168.25 Labor telephone specialist. Run fiber from the MPOE to wiring closet Bldg 4, misc costs, installation of electrical outlets in Rms
	Total Actual Costs	32,981.42
	Less: Over budget. Not eligible for claim	(6,581.42)

ctrical outlets in Rms 2 & 3

Amount per Line Item Detail Work Performed as per Purchase Req #192114FSFCOCOWR02.11; Contract #IGA 11-09-0034; Order #HSCEDM-14-F-IG125

Total Claim

2,500.00 For Shielded Cat 6 cable run from wiring closet in Building 4 to Room 1 in visitation. Two sets of cable will be run to each data box.

2,500.00 For Shielded Cat 6 cable run from wiring closet in Building 4 to Room 2 in visitation. Two sets of cable will be run to each data box.

2,500.00 For Shielded Cat 6 cable run from wiring closet in Building 4 to Room 13 in visitation. Two sets of cable will be run to each data box.

2,500.00 For Shielded Cat 6 cable run from wiring closet in Building 4 to ICE Admin Office in visitation. Two sets of cable will be run to each data box.

1,000.00 For phone line to room 3 in visitation.

1,000.00 For phone line to be used by fax machine in room 3.

10,000.00 To run fiber from the MPOE to wiring closet building 4.

3,000.00 Misc Costs

1,400.00 Install electrical outlets in Rooms 2 and 3

26,400.00 Total Claim

OFFICE OF THE SHERIFF Contra Costa County

Administrative Services Bureau Personnel and Finance Division 651 Pine St., 7th Floor Martinez, CA 94553 (925) 335-1500



DAVID O. LIVINGSTON Sheriff-Coroner

Michael V. Casten Undersheriff

ACH VENDOR/MISCELLANEOUS PAYMENT ENROLLMENT FORM

PAYEE/COMPANY INFORMATION (Include State and Local agency name as written on agreement cover sheet)

Name: Contra Costa County Sheriff's Fiscal Unit	
Address: 651 Pine Street, 7th Floor Martinez, CA 94553	
Taxpayer ID Number: 94-6000509	
Contact Person Name: Liz Arbuckle	Telephone Number: (925) 335-1529

FINANCIAL INSTITUTION INFORMATION

Bank Name: Wells Fargo	
Nine-Digit ABA Routing Transit Number: 121000248	
Depositor Account Number: 4225021617	
Type of Account: (checking/savings) Checking	

Wells Fargo Bank 902 Main Street Martinez, CA 94553 925-672-1619

The Debt Collection Improvement Act of 1996 requires that most payments made by the Federal government, including vendor payments, must be made by electronic funds transfer (EFT).

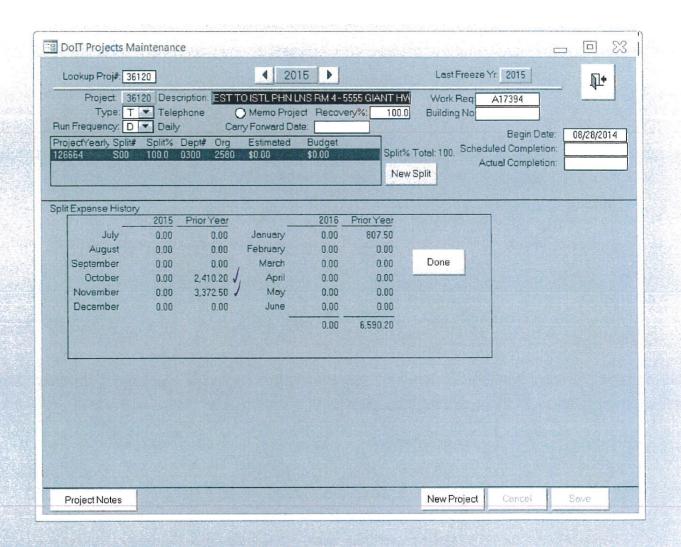
Central Contractor Registration - DUNS Number

Name: Contra Costa County Office of the Sheriff	
Address: 651 Pine Street, 7th Floor Martinez, CA 94553	
DUNS Number: 007669216	
CAGE/NCAGE Number: 4GYA0	



CONTRA COSTA COUNTY DoIT/TELECOMMUNICATIONS WORK REQUEST

WORK REQUEST							Workorder #: A - 17394					
											1. Date: AM	8/28/2014 9:46:02
2. Department/Ags	ency:			uestor: ngland							4. Phone: 510-262-4272	
5. Work Site Cont Sgt England	act:			6. Phone: 7. Pager/Cell 510-262-4272				#:		8. Alter	nate #:	
9. Location of Wo 5555 Glant High				y:							10, Zip 9480 6	
11. Address if different from work site:	12. D 300	Pept #:	13. Org # 2580		14.Ta	sk:		15.0	option:		16. Act	ivity:
17.Date Required	:	9/2/2014				₹ E	stimat	e		Voi	ce Mail	Racking
Attach explanation required completion dates:		Estimate n	eeded AS	AP for I	CE	□ R	adio			7 Tele	ephone	Data
18. Description of	Work	Request: (E	xplain fully	y)			(Sel	ect at	least c	ne of t	he abov	e service types)
We need a written be able to call out						in the	Visiti	ng C	enter v	isit roo	m 4. Th	ese lines should
19. Attachment: No 20. Manager's Comment:												
						21. N	lid-Ma	anag	er's Co	mmen	t:	
22. Authorized S	ignatu		son Vorh	auer						Date:	8/28/20	14 10:57:16 AM
					oIT U	se On	lv		Marie III			
DoIT Project Nu	mber:	36120		Projec	t Assig	ned by	y: Po	wers	, LaSh	elle		Date: 8/28/2014 4:43:36 PM
AT&T Number:												Due Date:
Assigned to: Mo	ntgor	nery, Ralph		Date: 4:43:2.	8/28/20 3 PM)14	С	ompl	eted by	' :		Date:
Completion Note	es:											



REPORT CCWTR038

DEPT OF INFORMATION TECHNOLOGY CIMS JOB ACCOUNTING SYSTEM MONTHLY INVOICE REPORT

PAGE 834 11/05/14

ACCOUNT 0300-2580-36120

EST TO ISTL PHN LNS RM 4 - 5555 GIANT HW

RESOURCE	RATE	UNITS	CHARGE	
TELEPHONE SPECIALIST ADJUSTMENTS 4290 * TELEPHONE 4290	95.000 0.000 0.000	4.50000 997.64000 0.00000	427.50 997.64 1,425.14	
TELEPHONE PARTS * TELEPHONE PARTS 0948-6205	0.000	985.06000 0.00000	985.06 985.06 V	
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DEDODT, AC Alleum by	Descript and Draiget Date	Dange: 10/1/2014 10/21/2014
REPORT: AC-4 Hours by	Resource and Project Date	Range: 10/1/2014 - 10/31/2014

Project/ Description	Task	Hours	Costs	Description
RMONT RALPH MONTGOMERY				
36120 : EST TO ISTL PHN LNS RM 4 - 5555 GIANT HWY BLD4	50	4.50	\$427.50	Engineering
Total		4.50	\$427.50	
REPORT Total		4.50	\$427.50	
			1	

925-557-3000 or ARQuestions@graybar.com

Invoice No:

975634287

Invoice Date:

10/30/2014

Account Number: 0000275841
Account Name: CONTRA COSTA CNTY

D.O.I.T

CONTRA COSTA CATY D.O.I.T 30 DOUGLAS DRIVE MARTINEZ CA 94553

> Ship to: CONTRA COSTA CNTY D.O.I.T 30 DOUGLAS DRIVE MARTINEZ CA 94553

> > Page 1 of 1

D-1-N-26	120					SO#:34921160
Order No: 36 Del. Doc. #:	1PRO #	Routing	Date Shipped	Shipped From	F.O.B.	Rt. To
8000087016	FRO#	GRAYBAR TRUCK	10/30/2014	UNION CITY, CA	S/P - F/A	1
00000001010						
Quantity	Catalog # / D	rescription			Unit Price / Unit	Amour
4000	5EXHO4P24-E	K-R-CMS-NR COMMSCOPE SYS	STIMAX CONNECTIV	ITY	232.01 / 1000	928.04
4000		NF4 CAT 5 OUTDOOR				
	` '			Sub Total		928.04
Terms of F	-ayment			Freight		0.00
				Handling		0.00
1% 15 Days,	net 30 Days		_	Tax		78.88
As a condition	on of the sales ag	reement, a monthly service charge	e of the lesser of	Total Due		1006.92
1-1/2% or the	e maximum perm	nitted by law may be added to all a	coounts not paid	Cash Discount (if	paid within terms)	9.28
by net due d are accepted	ate. Visa, Master d at point of purcl	Card, American Express, and Disc hase only.	Over Gredit Cards		graves per a construir de la construir de la construir de la construir de la construir de la construir de la c	997.6
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(190-233) 36120



Graybar-Hayward Service Center 3089 Whipple Road.

Union City CA 94587 USA



Phone: 925-557-3000 Fax: 925-557-3030

Scheduled Ship Date:10-30-2014 Date Ordered:10-30-2014 Ref. Doc#:0349211608

Customer: 0000275841 CONTRA COSTA CNTY D.O.I.T

Date: 10-30-2014

Packing List

Customer PO: 36120

Ship To:

CONTRA COSTA CNTY D.O.I.T

30 DOUGLAS DRIVE MARTINEZ CA 94553

Description

Delivery # 8000087016

Tracking # : NONE
Bill To:
CONTRA COSTA CNTY D.O.I.T
30 DOUGLAS DRIVE
MARTINEZ CA 94553

Signed _____

Print name _____

Route: GRAYBAR TRUCK - A.M.

Part and Quantity

Ordered Shipped

Backordered Ship

Other Shipments

CWC 5EXHO4P24-BK-R-CMS-NR 4286104/10 5NF4 CAT 5 OUTDOOR 4000 EA Mat#: 4000 EA 96048169

Rus 11/3/14
Philip
Brun

TOTAL NUMBER OF: ____Boxes ___Pieces ___Bundles ___Coils ____Reels ___Pallets IN THIS SHIPMENT

MATERIAL ORDER FORM

ORG.#

DATE: 10/30,

Workorder #: A - 17394

FROM: CONTRA COSTA COUNTY

PROJECT#: YOIZ(ADDRESS: H DGS 4 DESCRIPTION UNIT TOTAL # PART NUMBER QTY PRICE PRICE 3 4 5 6 7 8 9 10 11 12 SUB TOTAL FREIGHT TAX ESTIMATED DATE OF NEED: TOTAL OTHER INSTRUCTIONS: ORDERED APPROVED BY: BY:

Contra Costa County DOIT Inventory

Invoice

30 Douglas Drive Martinez, CA 94553

Date	Invoice #
10/31/2014	507

Bill To	7	
Project # 36120		

Ship To			

Org Number	Terms	Rep	Ship	Via	F.O.B.	Work Order #
2580			10/31/2014			A - 17394

Quantity	Item Code	Description	Price Each	Amount
V 4	T126	Cable, 4 Pair 24AWG Non-Plenum Giga Gray	246.26375	985.06
V				
			1	
			Total	\$985.06
				The same of the sa

MATERIAL ORDER FORM

ORG. # 2580

DATE: (

10/30/14

Workorder # : A -

7394

FROM: CONTRA COSTA COUNTY

INVENTORY

PROJECT#: 36120 ADDRESS: 5555 GIANT H	WY	RKHU	KN)
DESCRIPTION		UNIT	TOTAL
# PART NUMBER	QTY	PRICE	PRICE
GIRA SPEED CATE PUC	14.		
1/126	16	K	
2	-		
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10			
10			
11			
12			
	I B TOTAL		
	EIGHT	-	
this (Som can) TAX		-	
ESTIMATED DATE OF NEED:	TOTA	1	
OTHER INSTRUCTIONS:	ORDER		
APPROVED BY:	ONDLIN		

REPORT CCWTR038

DEPT OF INFORMATION TECHNOLOGY CIMS JOB ACCOUNTING SYSTEM MONTHLY INVOICE REPORT

PAGE 792 12/09/14

ACCOUNT 0300-2580-36120

EST TO ISTL PHN LNS RM 4 - 5555 GIANT HW

RESOURCE	RATE	UNITS	CHARGE	
TELEPHONE SPECIALIST * TELEPHONE 4290	95.000 0.000	35.50000 0.00000	3,372.50 3,372.50	
	AMOUNT DUE	· \$	3,372.50	
· 原制加州				
				100
	and the second s			
				802
		and the second s		

tange: 11/1/2014 Task	- 11/30/2014 Hours	Costs	Description
50	35.50	\$3,372.50 Engineering	
	35.50	\$3,372.50	
	35.50	\$3,372.50	
	Task	50 35.50 35.50	Task Hours Costs 50 35.50 \$3,372.50 Engineering 35.50 \$3,372.50

REPORT CCWTR038

DEPT OF INFORMATION TECHNOLOGY CIMS JOB ACCOUNTING SYSTEM MONTHLY INVOICE REPORT

PAGE 818 02/10/15

ACCOUNT 0300-2580-36120

EST TO ISTL PHN LNS RM 4 - 5555 GIANT HW

RESOURCE	RATE	UNITS	CHARGE	
TELEPHONE SPECIALIST TELEPHONE 4290	95.000 0.000	8.50000 0.00000	807.50 807.50	V Seed
	AMOUNT DUE	\$	807.50	
		The section is		
		68	an literatur kalendari di Labadi di Karaman di Labadi di Karaman da kalendari kalendari da kalendari da kalend	
		Asset Land		

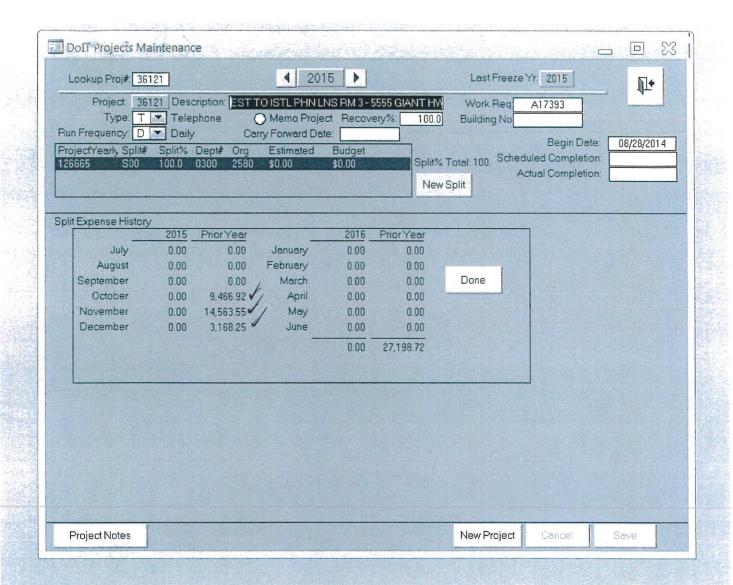
REPORT: AC-4 Hours by Resource and Project Date Range: 1/1/2015 - 1/31/2015

Project/ Description	Task	Hours	Costs	Description
RMONT RALPH MONTGOMERY				
36120 : EST TO ISTL PHN LNS RM 4 - 5555 GIANT HWY BLD4	50	8.50	\$807.50	Engineering
Total		8.50	\$807.50	
REPORT Total		8.50	\$807.50	
			^	



CONTRA COSTA COUNTY DoIT/TELECOMMUNICATIONS WORK REQUEST

The state of the s		110.	KK KI	2QU1						Worko	order #: A - 17393	
											1. Date: 8 AM	8/28/2014 9:39:04
2. Department/Agency: 3. Requestor: SHERIFF Sgt England											4. Phone 510-262	
5. Work Site Contact: 6. Phone: Sgt England 510-262-4272						7.	Pagei	r/Cell#:			8. Alterr	nate #:
9. Location of Wor 5555 Giant Highw				y:							10. Zip: 94806	
11. Address if different from work site: 12. Dept #: 13. Org #: 2580				14.Ta	sk:		15.Opt	ion:		16. Acti	vity:	
17.Date Required: 9/2/2014						☑ E	stimat	e	-	Voi	ce Mail	Racking
Attach explanation required completion dates:	n I	Estimate n project	eeded quid	ekly for	ICE	□ R	adio		[5	Tele	ephone	Data
18. Description of V	Work F	Request: (Ex	xplain fully	·)			(Sel	ect at lea	ast o	ne of t	he above	service types)
Please provide a w should only call ou lines that were inst	t and b	e limited to	calls to in	Californ								
19. Attachment: N	No					20. Manager's Comment:						
						21. Mid-Manager's Comment:					VIII III	
22. Authorized Sig	gnature		son Vorha	uer						Date:	8/28/201	4 10:58:06 AM
				D	oIT U	se On	ly					
DoIT Project Nun	nber:	36121	T	Project	Assig	ned by	: Po	wers, L	aShe	elle		Date: 8/28/2014
AT&T Number:										-		:43:08 PM Due Date:
				Date: 8	128/20	114	Т					Due Date:
Assigned to: Mon	itgome	ery, Ralph		4:42:54		.17	C	omplete	d by	:	I	Date:
Completion Notes	s:					A A A A A A A A A A A A A A A A A A A		Martin Martin Andrean		- Succession	W-11410-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	



REPORT CCWTR038

DEPT OF INFORMATION TECHNOLOGY CIMS JOB ACCOUNTING SYSTEM MONTHLY INVOICE REPORT

PAGE 835 11/05/14

ACCOUNT 0300-2580-36121

EST TO ISTL PHN LNS RM 3 - 5555 GIANT HW

RATE	UNITS	CHARGE	
95.000 0.000 0.000	59.50000 3,814.42000 0.00000	5,652.50 3,814.42 9,466.92	
AMOUNT DUE		9,466.92	
		1	
FEB.08:110:271		RECENT OF LINE OF THE COLUMN	
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			and the state of t
	0.000		

REPORT: AC-4 Hours by Resource and Project Date R	ange: 10/1/2014	- 10/31/2014		
Project/ Description	Task	Hours	Costs	Description
JDAWS JAVIER DAWSON				
36121 : EST TO ISTL PHN LNS RM 3 - 5555 GIANT HWY BLD4	50	24.50	\$2,327.50	Engineering
Total		24.50	\$2,327.50	
JGUTI JAVIER GUTIERREZ				
36121 : EST TO ISTL PHN LNS RM 3 - 5555 GIANT HWY BLD4	50	16.00	\$1,520.00	Engineering
Total		16.00	\$1,520.00	
RMONT RALPH MONTGOMERY				
36121 : EST TO ISTL PHN LNS RM 3 - 5555 GIANT HWY BLD4	50	19.00	\$1,805.00	Engineering
Total		19.00	\$1,805.00	
REPORT Total		59.50	\$5,652.50	

Remit To:



FILE 57071 LOS ANGELES CA 90074-7071

CREDIT MEMO

MB 02 001048 48451 E 8 A CONTRA COSTA CNTY D.O.I.T 30 DOUGLAS DRIVE MARTINEZ CA 94553-4068

Invoice Questions Please Call or Email.

925-557-3000 or ARQuestions@graybar.com

Invoice No:

975462860

Invoice Date:

10/22/2014

Account Number:

0000275841

Account Name: CONTRA COSTA CNTY

D.O.I.T

Ship to: CONTRA COSTA CNTY D.O.I.T 30 DOUGLAS DRIVE MARTINEZ CA 94553

Page 1 of 1

Order No: 36	5121 - JAVIER					SO#:	603692478	
Del. Doc. #:	PRO#	Routing	Date Shipped	Shipped From	F.O.B.	Rt. To		
0894338735		CUST RETURN		MARTINEZ, CA	S/P - F/A			
Quantity	Catalog # / D	escription			Unit Price / Unit		Amount	
4 FAN-BT25-06 CORNING OPTICAL COMMUNICATIONS		NS		13.93 / 1		55.72		
	BUFFER TUBE	FAN-OUT KIT						
Terms of F	Payment			Sub Total			55.72-	
	•			Freight			0.00	
1% 15 Days.	net-30 Days			Handling			0.00	
		reement, a monthly service charge of t	ha lassar of	Tax			4.74-	
		itted by law may be added to all accou		Total Due			60.46-	

-1/2% or the maximum permitted by law may be added to all accounts not paid Cash Discount (if paid within terms) by net due date. Visa, MasterCard, American Express, and Discover credit cards are accepted at point of purchase only. ORIGINAL INVOICE #0975317083

Remit To:



FILE 57071 LOS ANGELES CA 90074-7071

INVOICE

Invoice Questions Please Call or Email

925-557-3000 or ARQuestions@graybar.com

Invoice No:

975397850

Invoice Date:

10/17/2014

Account Number:

0000275841

oodin Hambon o

Account Name: CONTRA COSTA CNTY

D.O.I.T

Ship to: CONTRA COSTA CNTY D.O.I.T

30 DOUGLAS DRIVE MARTINEZ CA 94553

Page 1 of 1

Order No: F4	45869 -36121 -					SO#:34905	2336
Del. Doc. #:	PRO#	Routing	Date Shipped	Shipped From	F.O.B.	Rt. To	
0863880516		PICK-UP	10/17/2014	MARTINEZ, CA	S/P - F/A	į	
Signed For B	By: JAVIER						
Quantity	Catalog # / D	escription			Unit Price / Unit	Am	nount
4	FAN-BT25-12 (CORNING OPTICAL COMM	IUNICATIONS		15.37 / 1	6	1.48
	BUFFER TUBE	FAN OUT KIT					
Terms of F	Payment			Sub Total		61	.48

1% 15 Days, net 30 Days

As a condition of the sales agreement, a monthly service charge of the lesser of 1-1/2% or the maximum permitted by law may be added to all accounts not paid by net due date. Visa, MasterCard, American Express, and Discover credit cards are accepted at point of purchase only.

Sub Total	61.48
Freight	0.00
Handling	0.00
Tax	5.23
Total Due	66.71
Cash Discount (if paid within terms)	0.61-
	66.10

4290.2335

701.0CT 20 AN 1:09



Ref. Doc#:

MARTINEZ, CA 1590 SOLANO WAY STE B CONCORD CA 94520-5351



Phone: 925-557-3000 Fax: 925-557-3030

Scheduled Ship Date: 10/17/2014 Customer: 275841 CONTRA COSTA CNTY D.O.I.T Date Ordered: 10/17/2014

349052336

Date:10/17/2014 Packing List Central Time:10:46:32

Customer PO : F45869 -36121 -

Ship To: CONTRA COSTA CNTY D.O.I.T 30 DOUGLAS DRIVE MARTINEZ CA 94553

Delivery # 863880516

Signed: ____

Print name: JAVIER

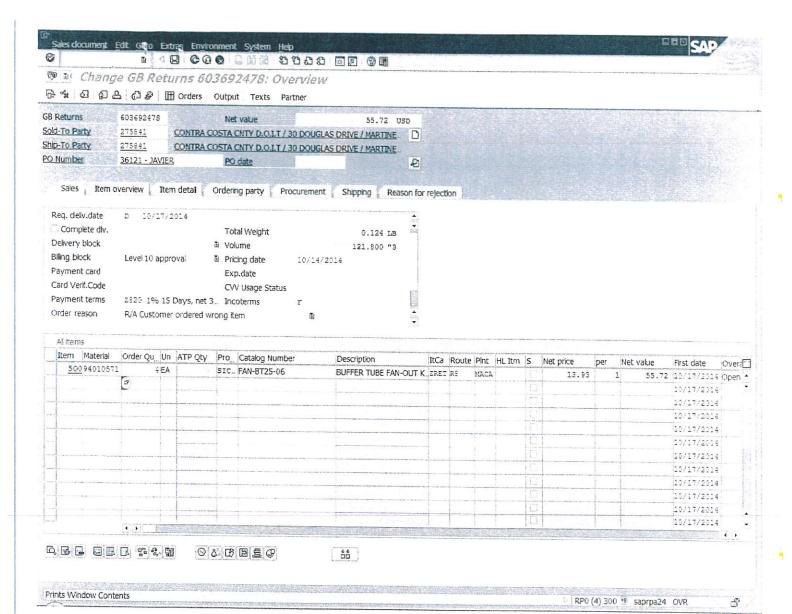
Bill To: CONTRA COSTA CNTY D.O.I.T 30 DOUGLAS DRIVE MARTINEZ CA 94553

Route: GRAYBAR COUNTER

FAN-BT25-12 BUFFER TUBE FAN OUT KIT	4 EA Mat#:	4 EA 94010572		
Description	Ordered	Shipped	Backordered	Shipments
Part and	Q	uanti	t y	Other

Fax Order Form

	-								
Cust No	275	5841	Date	10/20/20	14	Blanket / W	arrant or	P.O.#	
то:			Gre	ybar		From: Contra Cost Department of Infor 30 Douglas Dr. Martinez Ca. 94553 (925) 957-7704 Voi (925) 957-7705 Fax	mation Ted 3 ice		
Job#			36121	Addr	ess:	west cour	ity dete	ntion	
			Part	s Discription			QTY	Unit Price	Total
1	Buffer	tube fa	an out kit			2000	4		
2									
3									
4			27			2			
5						TO THE STATE OF TH			
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7									
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9					The second secon		,		
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12							40/12	1/201	
13			BESTER AN AN AN AN HOUSE STATE						
					200	that op you don't tree to be a second or the			
			D	Date				Sub Total	
								Freight	
	Orde	red By	Ja	vier Dawson				Tax	
								Total	
СОММ	1ENTS:							ā	



Signature
Flease Print Name

925-557-3000 or ARQuestions@graybar.com

Invoice No:

975317083

Invoice Date:

10/14/2014 0000275841

Account Number:

Account Name: CONTRA COSTA CNTY

D.O.I.T

CONTRA COSTA CNTY D.O.LT. 30 DOUGLAS DRIVE MARTINEZ CA 94553

> Ship to: CONTRA COSTA CNTY D.O.I.T 30 DOUGLAS DRIVE MARTINEZ CA 94553

> > Page 1 of 1

	it2t - JAVIER		HELD THE STATE OF			SO#	349002533
Del. Doc. #:	PRO#	Routing	Date Shipped	Shipped From	F.O.B.	Rt. To	
0863811525	1Z1E725W0309265328	UPS	10/14/2014	ZONE-STAFFORD.TX	S/P - F/A		
Quantity	Catalog # / Descript	tion			Unit Price / Unit		Amount
2	760 193 771 COMMS		ONNECTIVITY		198.40 / 1		396.80

Del. Doc. #:	PRO#	Routing	Date Shipped	Shipped From	F.O.B.	Rt. To	
0863811543		GRAYBAR TRUCK	10/14/2014	UNION CITY, CA	S/P - F/A		
4	760 109 363 C0 360G2 BEZEL	DMMSCOPE SYSTIMAX CONNE 12-LC-LS-AQ	СТІVІТУ		51.20 / 1	20	04.80
1000	M-5-OP-12-LT-A-LE-BK-CCS-CUT REEL CORNING OPTICAL COMMUNICATIONS 012TU4-T4780D20			2209.71 / 1000	220	9.71	
50		ORNING OPTICAL COMMUNICA LICAM 50 MM SX	TIONS		13.51 / 1	67	75.50
4	FAN-BT25-06 C	CORNING OPTICAL COMMUNIC FAN-OUT KIT	ATIONS		13.93 / 1		55.72

lerms (

1% 15 Days, net 30 Days

Order No: 36121 - JAVIER

As a condition of the sales agreement, a monthly service charge of the lesser of 1-1/2% or the maximum permitted by law may be added to all accounts not paid by net due date. Visa, MasterCard, American Express, and Discover credit cards are accepted at point of purchase only.

Sub Total	3542.53
Freight	0.00
Handling	0.00
Tax	301.12
Total Due	3843.65
Cash Discount (if paid within terms)	35_43-
	5000 - 5

Subject to standard terms and conditions on the reverse side.



Graybar-Hayward Service Center 3089 Whipple Road. Union City CA 94587 USA

Phone: 925-557-3000 Fax: 925-557-3030

Scheduled Ship Date 10-14-2014 Tate Ordered:10-14-2014 Ref. Doc=:0349002533

Customer: 0000275841 CONTRA COSTA CNTY D.O.I.T

Date: 10-14-2014

Packing List

Distormer PO : 36121 - JAVIER

Ship To: CONTRA COSTA CNIY D.O.I.T 30 DOUGLAS DRIVE MARTINEZ CA 94553

Tracking # : NONE Tracking Bill To: CONTRA COSTA CNTY D.O.I.T 30 DOUGLAS DRIVE MARTINEZ CA 94553

Delivery # 0863811543

Signed -

Route: CRAYBAR TRUCK - A.M. Print name ___

part and Description	. Quant Ordered	i t y Shipped	Backordered	Other Shipmer
MAX 760 109 363 360G ² BEZEL 12-LC-LS-AQ	4 EA Mat#:	4 EA 25267086		OTT PINE
FIB M-5-OP-12-LT-A-LE-BK-CCS-CUT REEL 012TU4-T478OD20	1000 EA Mat#:	1000 EA 25643804		
SIC 95-050-99-X LC SENIOR UNICAM 50 MM SX	50 EA Mat#:	50 EA 22110797		
SIC FAN-BT25-06 BUFFER TUBE FAN-OUT KIT	CONTRA MASTA C	4 EA 94010571		

Received

TOTAL NUMBER OF: _____Boxes_ __Coils_____Reels____Pallets IN THIS SHIPMENT



Graybar-Stafford National Zone 13131 North Promenade Blvd.

Stafford TX 77477 USA



Phone: 925-557-3000 Fax: 925-557-3030

Scheduled Ship Date:10-14-2014

Date Ordered:10-14-2014 Ref. Doc#:0349002533 Customer: 0000275841 CONTRA COSTA CNTY D.O.I.T

Date: 10-14-2014

Packing List

Customer PO: 36121 - JAVIER

Ship To: CONTRA COSTA CNTY D.O.I.T 30 DOUGLAS DRIVE

MARTINEZ CA 94553

Delivery # 0863811525

Tracking # : 1Z1E725W0309285337

Bill To:

CONTRA COSTA CNTY D.O.I.T

30 DOUGLAS DRIVE MARTINEZ CA 94553

Route: UPS - GROUND

Part and	Quant	i t y	Backordered	Other
Description	Ordered	Shipped		Shipments
MAX 760 193 771 360G2-1U-MOD-SD???	2 EA Mat#:	2 EA 25651752		

TOTAL NUMBER OF: _____Boxes ____Pieces ____Bundles ____Coils _____Reels ____Pallets

REPORT CCWTR038

DEPT OF INFORMATION TECHNOLOGY CIMS JOB ACCOUNTING SYSTEM MONTHLY INVOICE REPORT

PAGE 793 12/09/14

ACCOUNT 0300-2580-36121

EST TO ISTL PHN LNS RM 3 - 5555 GIANT HW

RESOURCE	RATE	UNITS	CHARGE
TELEPHONE SPECIALIST	95.000	152.00000	14,440.00 ×
ADJUSTMENTS 4290	0.000	123.55000	123.55
* TELEPHONE 4290	0.000	0.00000	14,563.55

	AMOU	NT DUE	\$ 14,563.55	
	0.*		1	
-	123 • 55+ 87 • 88- 35 • 67- 001			
L				

REPORT: AC-4 Hours by Resource and Project Date R	lange: 11/1/2014	1 - 11/30/2014			
Project/ Description	Task	Hours	Costs	Description	
JDAWS JAVIER DAWSON					
36121 : EST TO ISTL PHN LNS RM 3 - 5555 GIANT HWY BLD4	50	54.00	\$5,130.00	Engineering	
Total		54.00	\$5,130.00		
JGUTI JAVIER GUTIERREZ					
36121 : EST TO ISTL PHN LNS RM 3 - 5555 GIANT HWY BLD4	50	35.50	\$3,372.50	Engineering	
Total		35.50	\$3,372.50		
RMONT RALPH MONTGOMERY					
36121 : EST TO ISTL PHN LNS RM 3 - 5555 GIANT HWY BLD4	50	62.50	\$5,937.50	Engineering	
Total		62.50	\$5,937.50		
REPORT Total		152.00	\$14,440.00		

925-557-3000 or ARQuestions@graybar.com

Invoice No:

975964556

Invoice Date:

11/18/2014

Account Number:

0000275841

Account Name: CONTRA COSTA CNTY D.O.I.T

CONTRA COSTA CNTY D.O.I.T. 30 DOUGLAS DRIVE MARTINEZ CA 94553

> Ship to: CONTRA GOSTA CNTY D.O.I.T 30 DOUGLAS DRIVE MARTINEZ CA 94553

> > Page 1 of 1

Order No: F4	5869-36121-M	ANNY				SO#	t:349404969
Del. Doc. #:	PRO#	Routing	Date Shipped	Shipped From	F.O.B.	Rt. To	
8000375475		PICK-UP	11/18/2014	MARTINEZ, CA	S/P - F/A		
Signed For E	By: MANNY DA	WSON		L			
Quantity	Catalog # / De	scription	1000 1000		Unit Price / Unit		Amount
1	The second secon	TSWORTH PRODUCTS INCO CT 2RMU BLACK	RPORATED		81.75 / 1	1	81.75
Terms of F	ayment			Sub Total			81.75
1-1/2% or the by net due da	n of the sales agre maximum permit	eement, a monthly service char ted by law may be added to all ard, American Express, and Dis se only.	accounts not paid	Freight Handling Tax Total Due Cash Discount (if	paid within terms)		0.00 0.00 6.95 88.70 0.82-

0 34/2/

4290/2335 WO 34/2/



MARTINEZ, CA

1590 SOLANO WAY STE B CONCORD CA 94520-5351



Phone: 925-557-3000 Fax: 925-557-3030

Scheduled Ship Date: 11/18/2014

Date Ordered: 11/17/2014

Ref. Doc#:

349404969

Customer: 275841 CONTRA COSTA CNTY D.O.I.T

Packing List Central Time: 09:53:06

Date: 11/18/2014

Customer PO: F45869-36121-MANNY

Ship To: CONTRA COSTA CNTY D.O.I.T 30 DOUGLAS DRIVE MARTINEZ CA 94553

Bill To: CONTRA COSTA CNTY D.O.I.T 30 DOUGLAS DRIVE MARTINEZ CA 94553

Delivery	#	8000375475	
Signed:			

Print name: MANNY DAWSON Route: GRAYBAR COUNTER

Part and		Q	u	a	n	t	i	t	У	Other
Description	Ordered		Shipped				ed		Backordered	Shipments
11583-719	1 EA					1 E	A			
WALL MNT BRKT 2RMU BLACK	Mat#	:		99	546	539)			

TOT	'AL N	UMBER (OF:	Boxes	Pieces	Bundles	Coils	Reels	Pallets
IN	THIS	SHIPM	ENT						

Fax Order Form

	275	044 -	44/0	4/2044		HIMITAL TIL FORMATI		
Cust No	275	841 Date	11/2	1/2014	Blanket / Wa	rrant or	P.O.#	
TO:		C	From: Contra Costa Department of Inform 30 Douglas Dr. Martinez Ca. 94553 (925) 957-7704 Voice (925) 957-7705 Fax	Information Tec. 14553 4 Voice				
Job#		36121	The second secon	Address:	5555 g	iant hv	vy	
			Parts Discription			QTY	Unit Price	Total
1	LC/SC	10G MM DPL	X AQUA 3M	MATTO HAVORIAAN SOLVAN III MISSIOONI TOO II SEEDING EEN	Manual Control of the	2		
2	WALL	MNT BRKT 2	RMU BLACK			1		
3	- Contraction of the Contraction							
4				2		A-0.000 (100 (100 (100 (100 (100 (100 (100		
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6								
7								
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9								
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11		2						
12								
13								
					OTTO CONTROL STATEMENT OF THE STATEMENT	b	Sub Total	
			Date				Freight	
	Orde	red By	Javier Daws	son	<u> </u>		Tax	
							Total	
COMM	1ENTS:							

Remit To:



FILE 57071 LOS ANGELES CA 90074-7071

INVOICE

Invoice Questions Please Call or Email

925-557-3000 or ARQuestions@graybar.com

Invoice No:

975964555

Invoice Date:

11/18/2014

Account Number: 0000275841
Account Name: CONTRA COSTA CNTY

D.O.I.T

CONTRA COSTA CNTY D.O.LT 30 DOUGLAS DRIVE MARTINEZ CA 94553

3/11/1

Ship to: CONTRA COSTA CNTY D.O.I.T 30 DOUGLAS DRIVE MARTINEZ CA 94553

Page 1 of 1

	15869-42 90 JA	VIER				SO#	:349390417
Del. Doc. #:	PRO#	Routing	Date Shipped	Shipped From	F.O.B.	Rt. To	
8000354227		PICK-UP	11/18/2014	MARTINEZ, CA	S/P - F/A		
Signed For E	By: JAVIER	***************************************					
Quantity	Catalog # / De	escription			Unit Price / Unit	1	Amount
2		ALLEN TEL PRODUCTS IN I DPLX AQUA 3M	CORPORATED	1	16.59 / 1		33.18
Terms of F	Payment			Sub Total			33.18
1-1/2% or the	n of the sales agr maximum permi	eement, a monthly service o tted by law may be added to lard, American Express, and	Freight Handling Tax Total Due Cash Discount (if pa	id within terms)		0.00 0.00 2.82 36.00 0.33-	

4270/2335 WO 36121

814 M8V 21 ATI 11:50



MARTINEZ, CA

1590 SOLANO WAY STE B CONCORD CA 94520-5351



Phone: 925-557-3000 Fax: 925-557-3030

Date Ordered: 11/14/2014

Ref. Doc#:

349390417

Scheduled Ship Date: 11/14/2014 Customer : 275841 CONTRA COSTA CNTY D.O.I.T

Packing List Central Time:10:22:41

Date:11/18/2014

Customer PO : F45869- JAVIER

36121

Ship To:

CONTRA COSTA CNTY D.O.I.T

30 DOUGLAS DRIVE MARTINEZ CA 94553 Bill To:

CONTRA COSTA CNTY D.O.I.T

30 DOUGLAS DRIVE MARTINEZ CA 94553

Delivery # 8000354227

Signed: ____

Print name: JAVIER

Route: GRAYBAR COUNTER

Part and		Q	u	a	n	t	i	t	У	Other
Description	Ordered			Shi		nipped	i		Backordered	Shipments
GBLCC-D4-03	2 EA		2 EA				A			
LC/SC 10G MM DPLX AQUA 3M	Mat#:	:		25	121	288				

TOT	ΓAL	NUMBER	OF:	Boxes	Pieces	Bundles	Coils	Reels	D-11-4-
IN	THI	S SHIP	MENT					reers	Pallets

Fax Order Form

Cust No	2758	341	Date	11/2	1/2014	Blanket / Wa	rrant or	P.O.#	
TO:	Greybar Greybar Greybar From: Contra Costa Cour Department of Information 30 Douglas Dr. Martinez Ca. 94553 (925) 957-7704 Voice (925) 957-7705 Fax								
Job#			36121		Address:	5555 g	iant h	wy	2
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COMM	MENTS:								

REPORT CCWTR038

DEPT OF INFORMATION TECHNOLOGY CIMS JOB ACCOUNTING SYSTEM MONTHLY INVOICE REPORT

PAGE 792 01/08/15

ACCOUNT 0300-2580-36121

EST TO ISTL PHN LNS RM 3 - 5555 GIANT HW

TELEPHONE SPECIALIST 95.000 ADJUSTMENTS 4290 0.000 * TELEPHONE 4290 0.000 AMOUNT DUE	33.00000 33.25000 0.000000	3,135.00 / 33.25 3,168.25 3,168.25	
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F	REPORT: AC-4 Hours by Resource and Project Date Range	ge: 12/1/2014 - 12/3	1/2014		
	Project/ Description	Task	Hours	Costs	Description
15.5	IDAWS JAVIER DAWSON				
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	Total		20.00	\$1,900.00	
	IGUTI JAVIER GUTIERREZ				
	36121 : EST TO ISTL PHN LNS RM 3 - 5555 GIANT HWY BLD4	50	13.00	\$1,235.00 E	Engineering
8	Total		13.00	\$1,235.00	
	REPORT Total		33.00	\$3,135.00	

Invoice No:

976234318

Invoice Date:

12/05/2014

Account Number:

0000275841

Account Name: CONTRA COSTA CNTY

D.O.I.T

CONTRA COSTA CATY DIOLIT 30 DOUGLAS DRIVE MARTINEZ CA 94553

> Ship to: CONTRA COSTA CNTY D.O.I.T 30 DOUGLAS DRIVE MARTINEZ CA 94553

> > Page 1 of 1

Del. Doc. #: PRO # 8000628221 Signed For By: MANNY	Routing PICK-UP	Date Shipped 12/05/2014	Shipped From MARTINEZ, CA	F.O.B. S/P - F/A	Rt. To	349540172
Signed For By: MANNY	PICK-UP	12/05/2014	ALADER OF			
		8000628221 PICK-UP 12/05/2014			1	***
Quantity Catalog # / Description	n			Unit Price / Unit		Amount
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Terms of Payment			Sub Total			30.93
1% 15 Days, net 30 Days As a condition of the sales agreement, a monthly service charge of the lesser of 1-1/2% or the maximum permitted by law may be added to all accounts not paid by net due date. Visa, MasterCard, American Express, and Discover credit cards			Freight Handling		0.00 0.00	
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are accepted at point of purchase only				_	33 14	

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1001 Su. 141 1001 Su. 141

Subject to standard terms and conditions on the reverse side.



M JINEZ, CA 1590 SOLANO WAY STE B CONCORD CA 94520-5351

Phone: 925-557-3000 Fax: 925-557-3030

Scheduled	Ship	Date:	12/	03/2014
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Date Ordered: 12/01/2014

Ref. Doc#:

349540172

Customer: 275841 CONTRA COSTA CNTY D.O.I.T

Packing List Central Time: 12:29:03

Date: 12/05/2014

Customer PO: 36121-MANNY

Ship To: CONTRA COSTA CNTY D.O.I.T 30 DOUGLAS DRIVE MARTINEZ CA 94553

Delivery # 8000628221

Signed:

Bill To: CONTRA COSTA CNTY D.O.I.T 30 DOUGLAS DRIVE MARTINEZ CA 94553

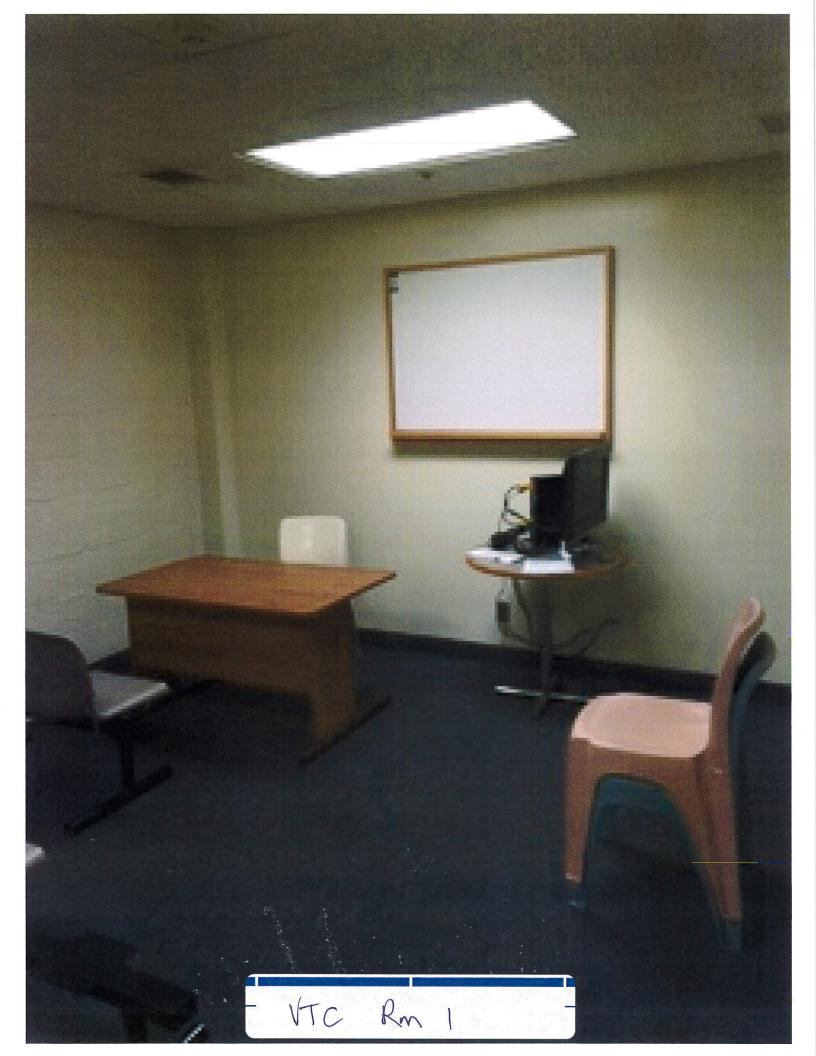
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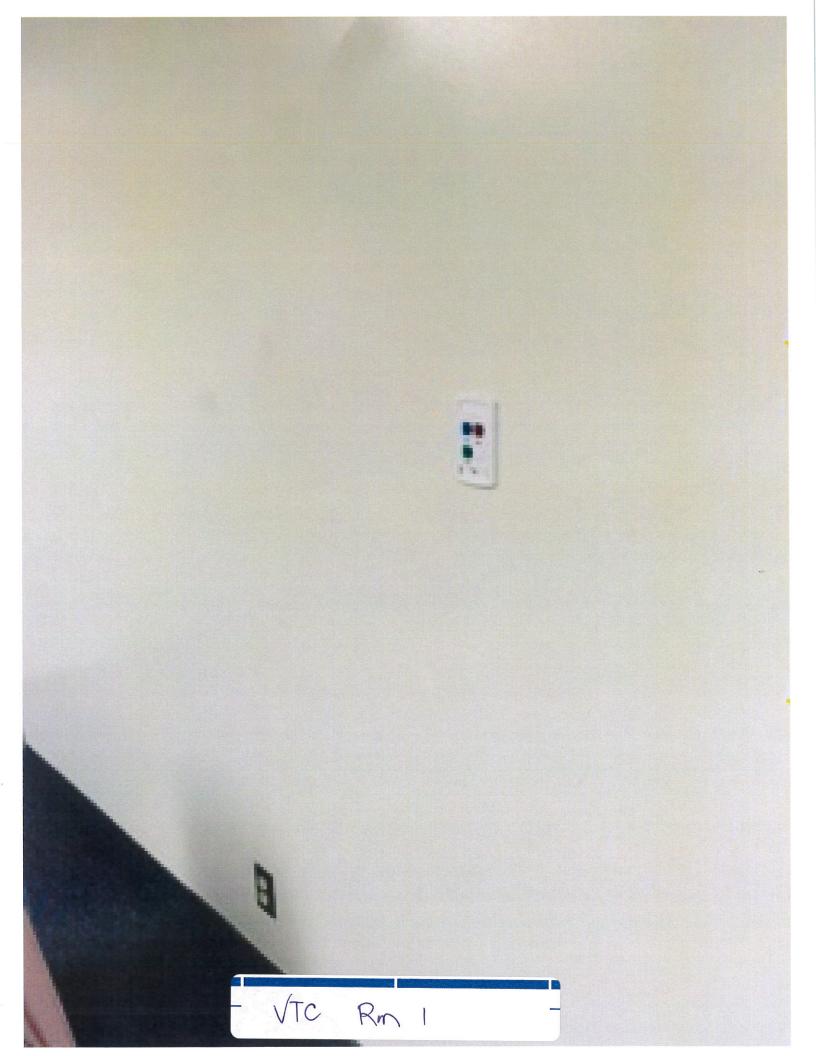
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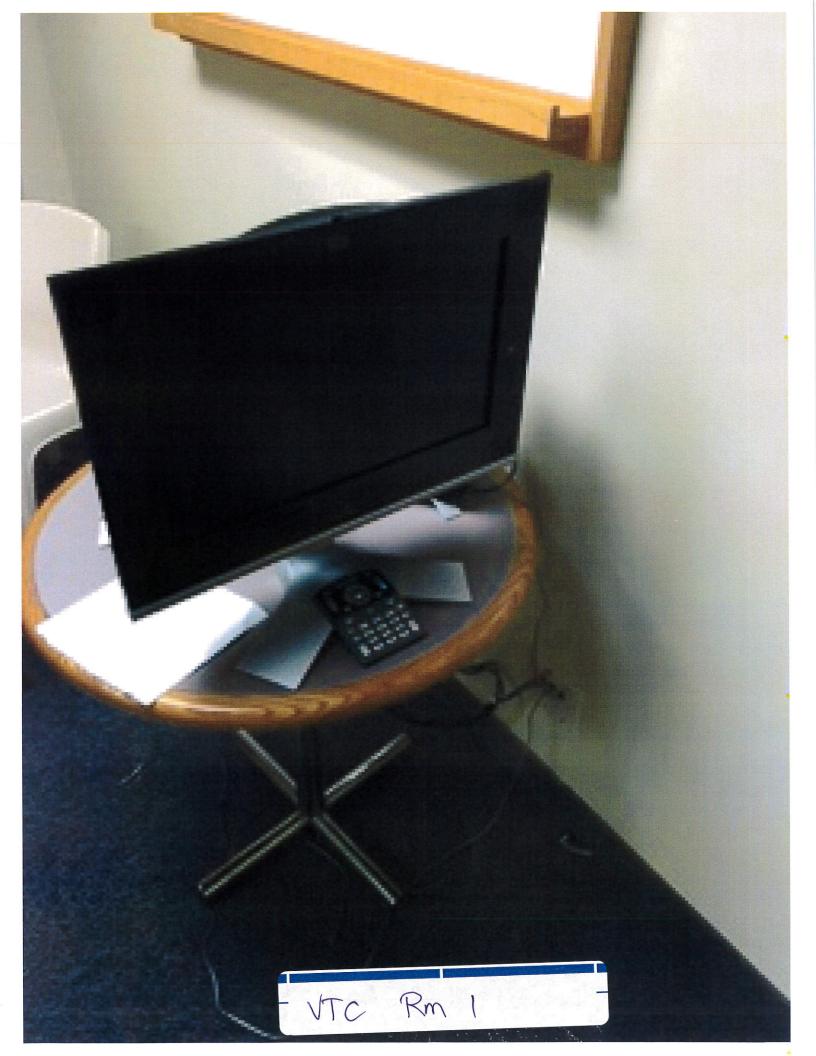
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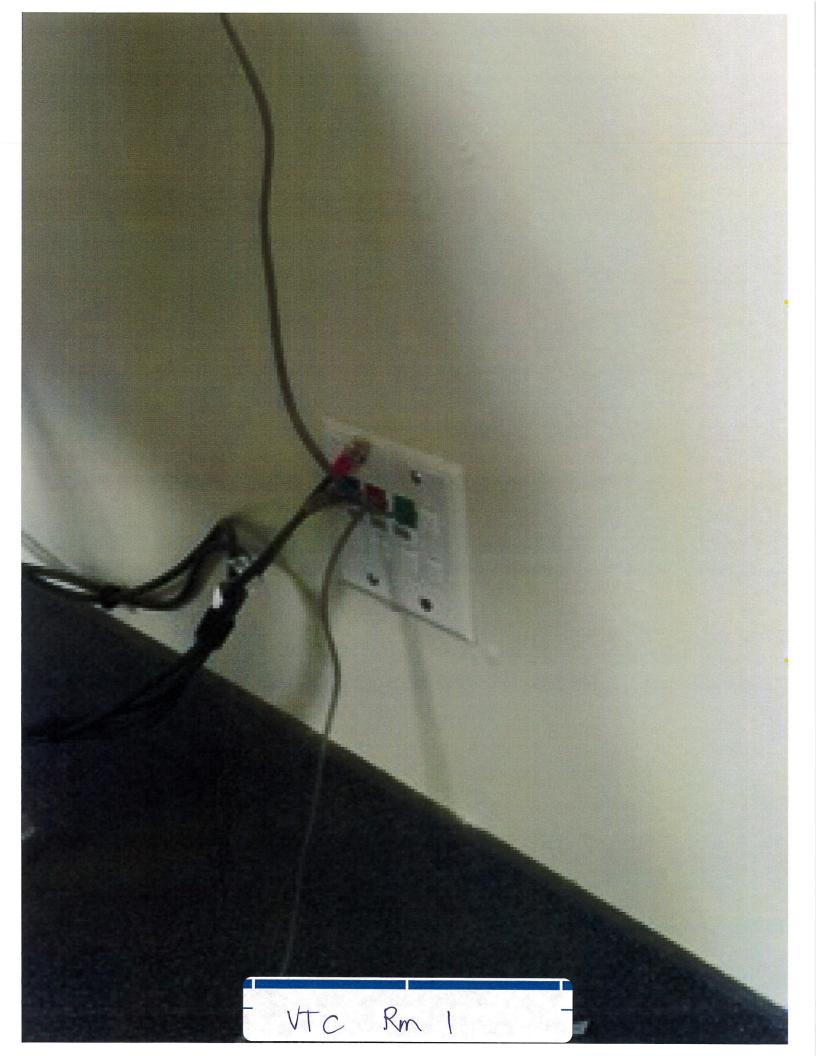
Fax Order Form

Cust No	275841	Date	12/09/2014	Blanket / Wa	rrant or	P.O.#	
TO:		Gre	eybar	From: Contra Costa Department of Inform 30 Douglas Dr. Martinez Ca. 94553 (925) 957-7704 Voic (925) 957-7705 Fax	mation Tec ce		
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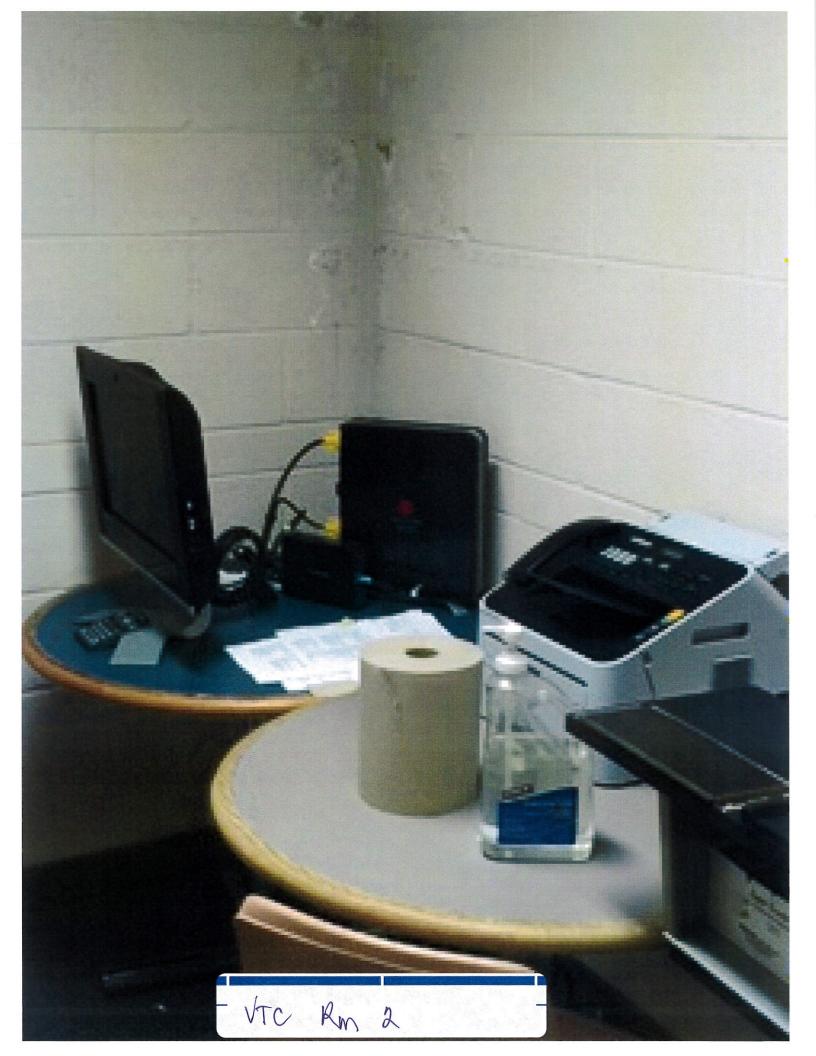


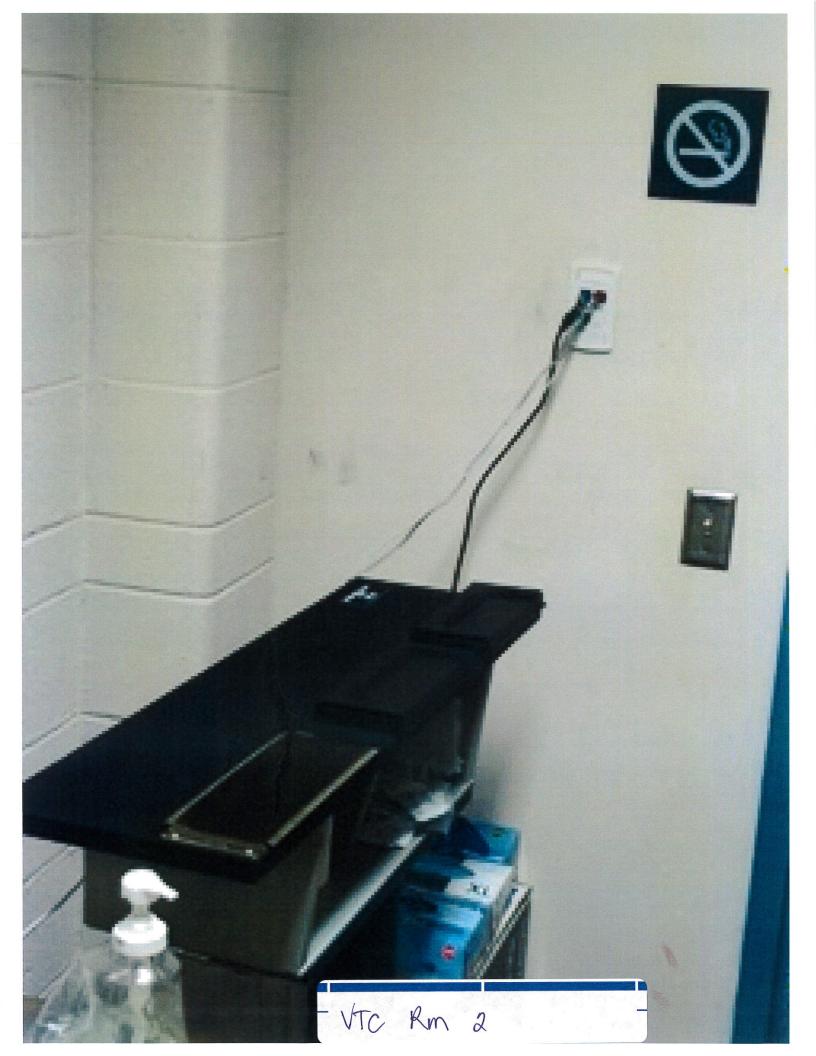


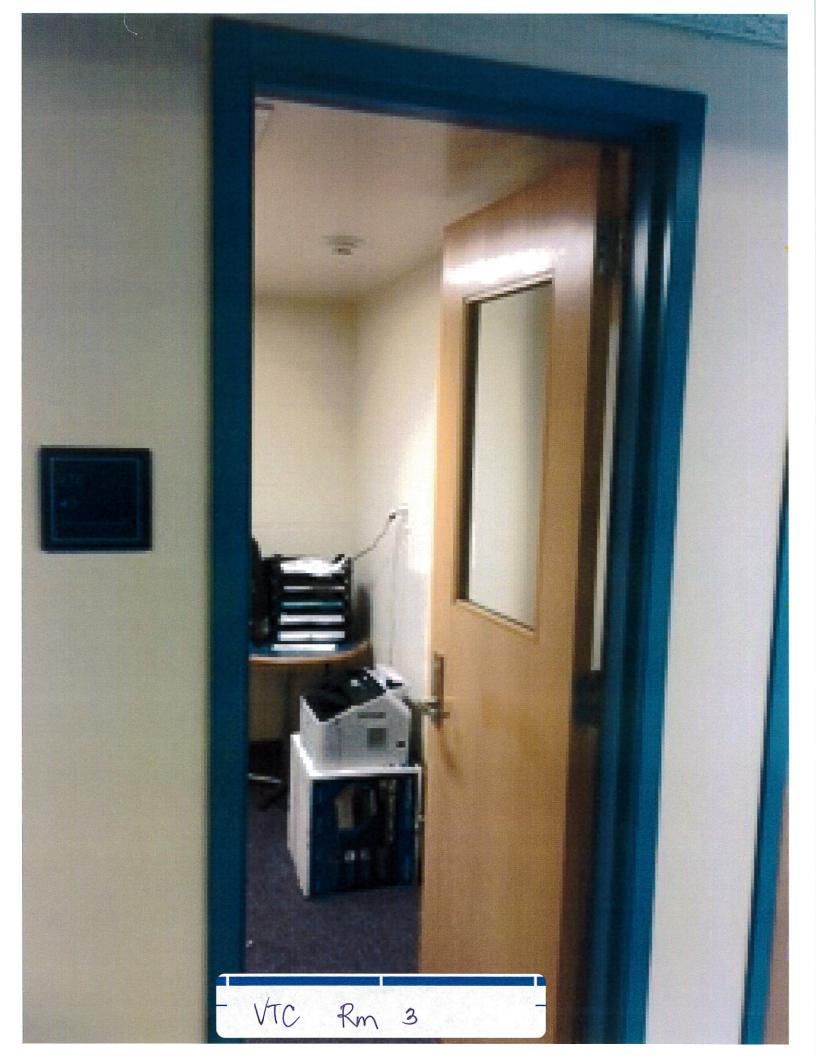


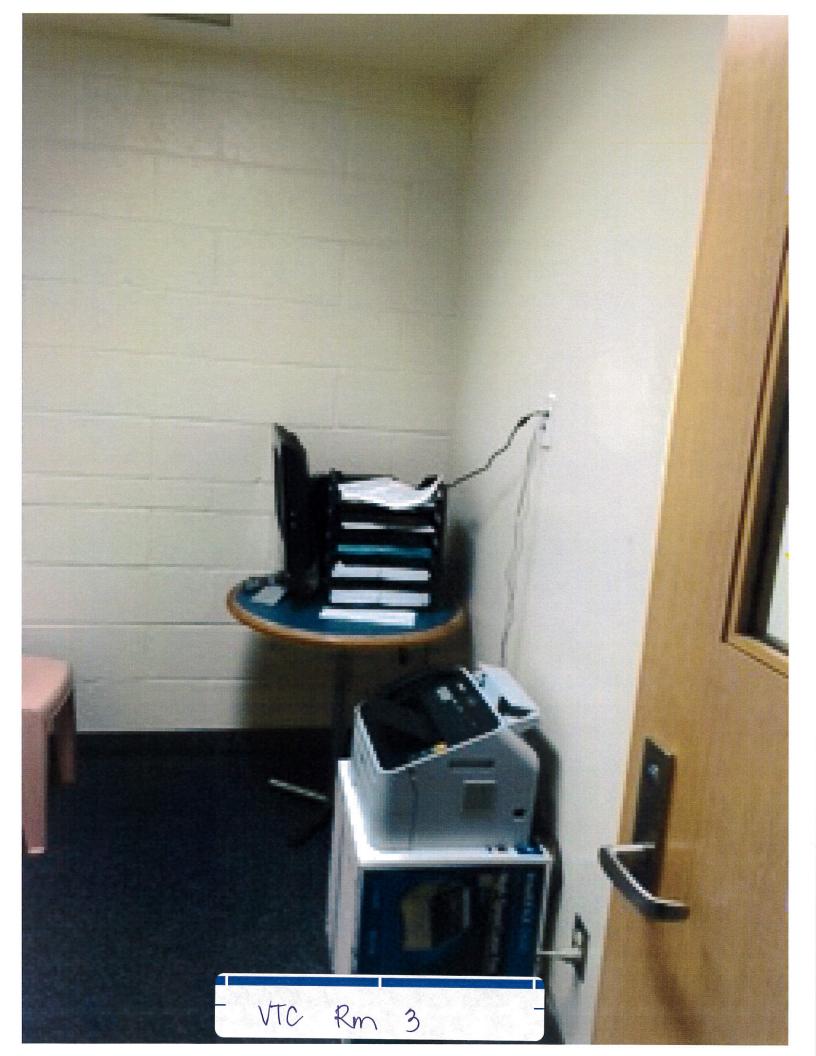


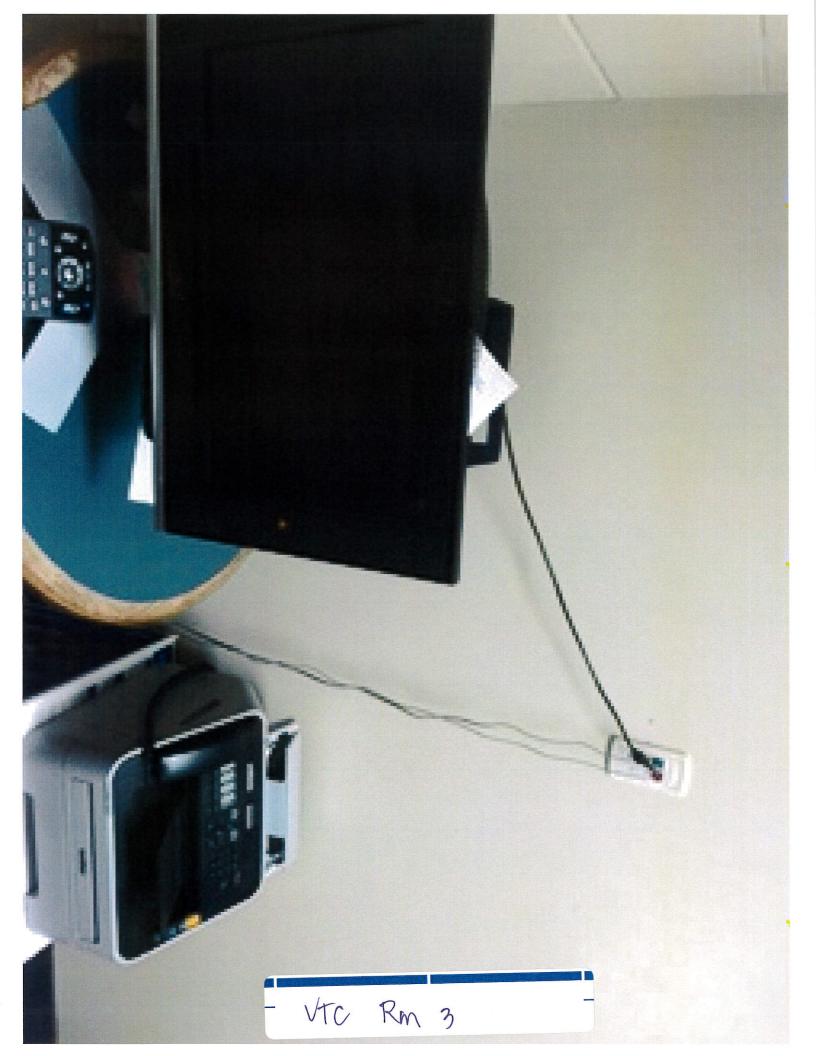


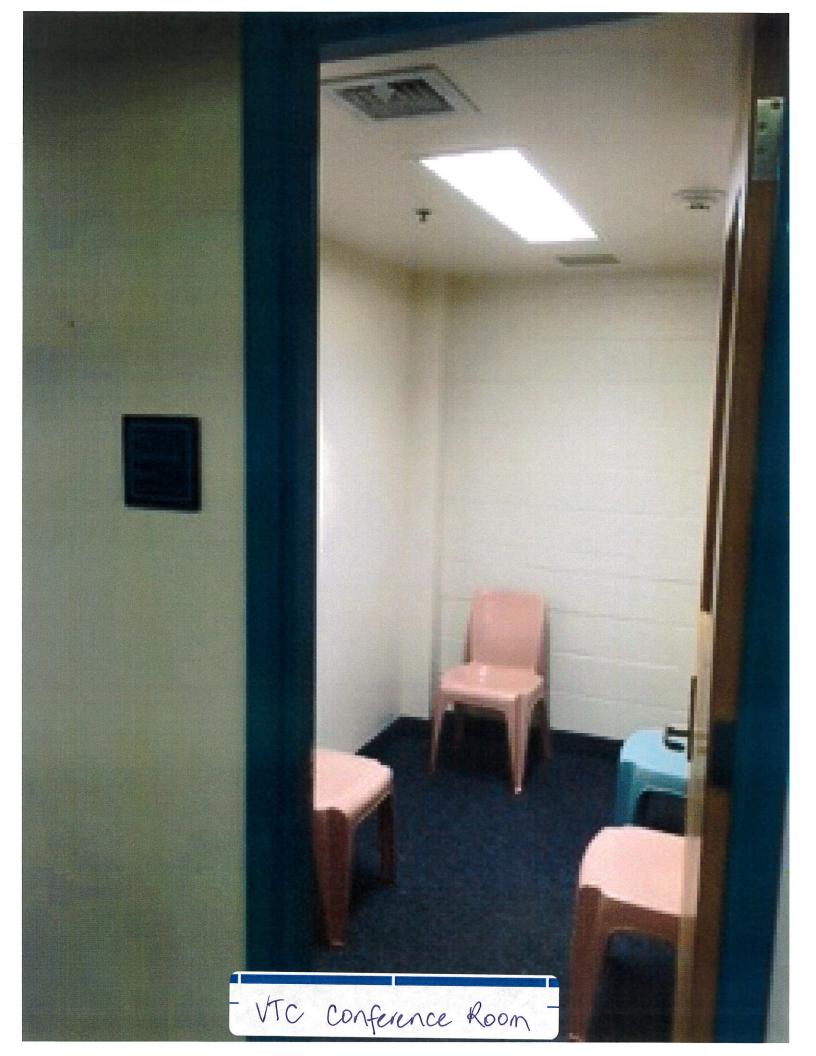




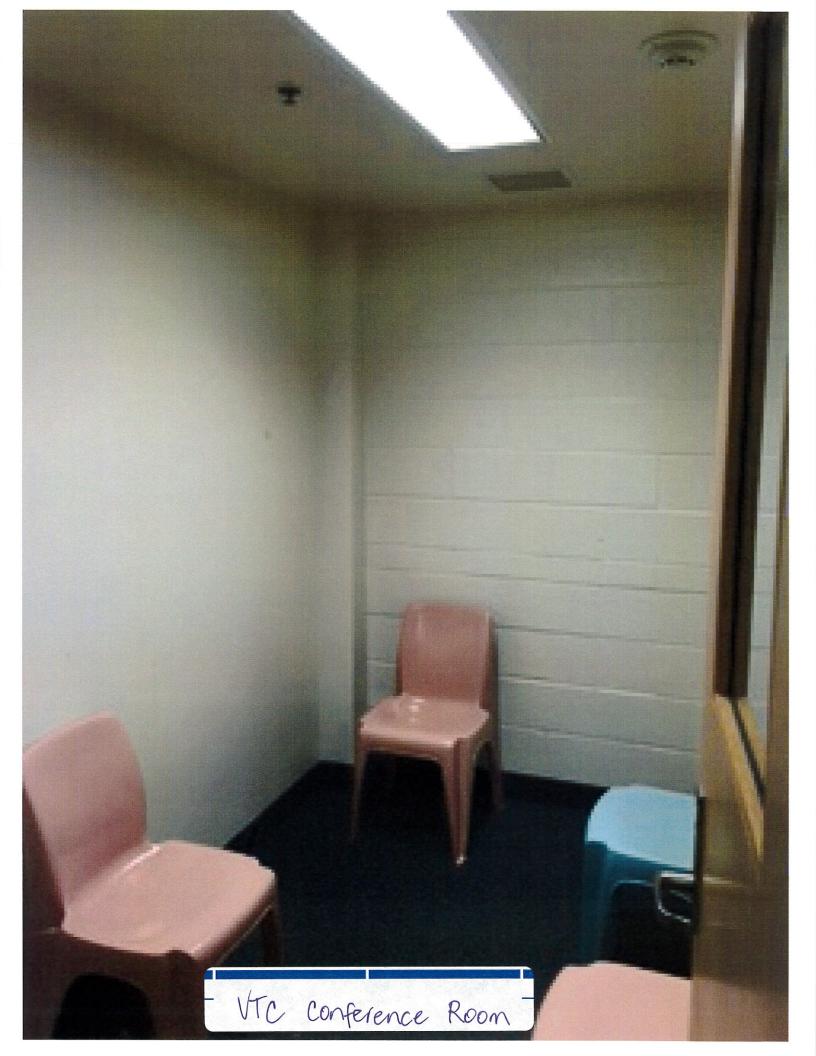




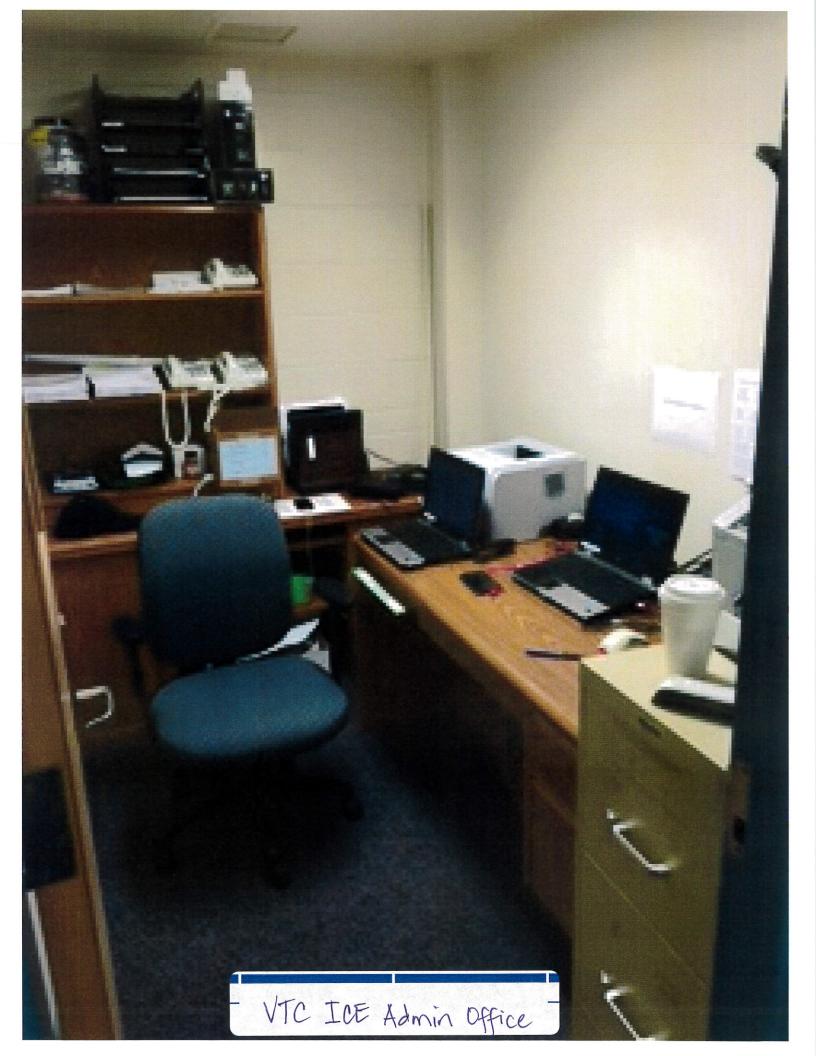


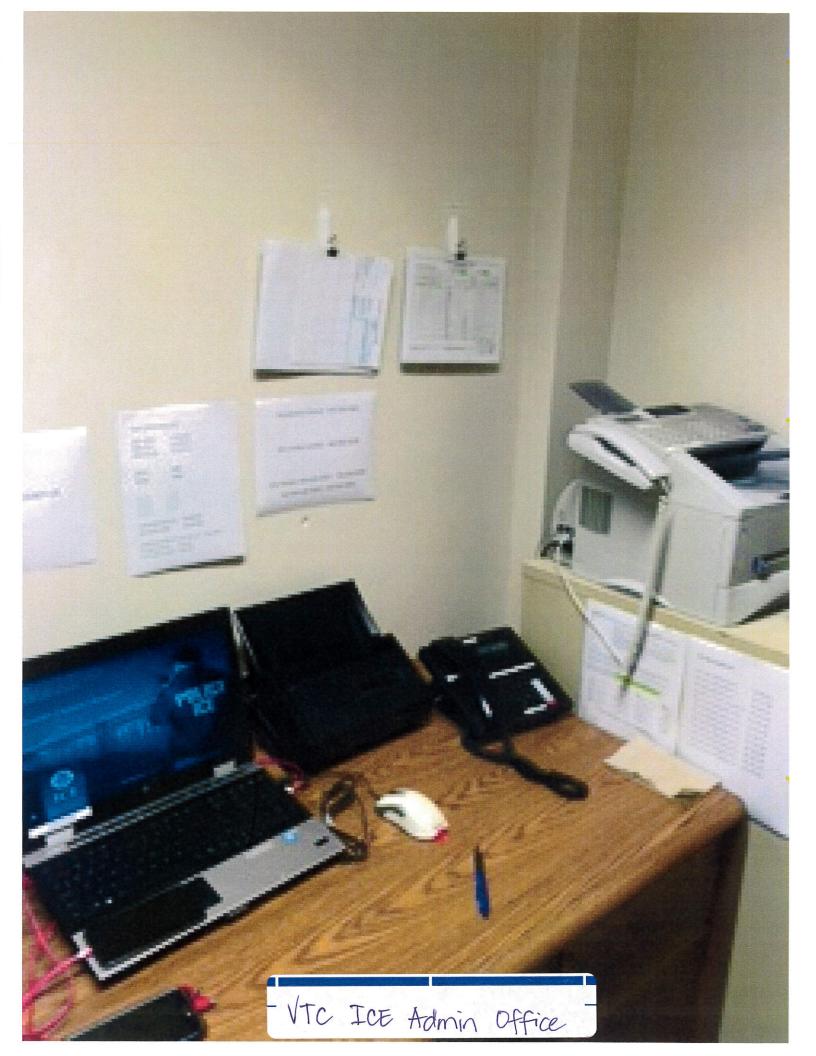












U. S. Department of Justice United States Marshals Service

Detention Services Intergovernmental Agreement

1. Agreement Number	2. Effective Date	3. Facility C	ode(s)	4. DUNS Nun	nber
11-09-0024	See Block 19	9BM 00-766-9216			216
5. Issuing Federal Agenc	6. Local Government				
United States Marsh	Contra Costa County				
Prisoner Operations		Martinez Detention Facility			
Office of Interagence		1000 Ward Street			
Washington, DC 20530-1000		Martinez, CA 94553			
7 Annual Mation Data		Tax ID#: 94-6000509 8. Local Contact Person			
7. Appropriation Data		Elizabeth Arbuckie, Supervising Accountant			
15X1020					
		9, Tel: (925) 335-1601			
Serv	Email: earbu@so.cccounty.us Estimated Number of Per-Diem Rate				
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10. This agreement is for	11.		12.		
safekeeping, and subsistence of federal					
prisoners, in accorda	ince with content set	25		\$85.00	
forth herein.	partation Cardoon to	14,	4	<u></u>	
13. Optional Guard/Trans	sportation pervices to:	14.			
NZ7		Guard/Tran	Guard/Transportation Hourly Rate: \$N/A		
Medical Facility		· ·	•		·
☐ U.S. Courthouse		Mileage shall i	Mileage shall be reimbursed by the Federal Government at the GSA		
		Federal Travel Regulation Mileage Rate.			
15. Local Government Ce	ertification	16. Signature of Person Authorized to Sign (Local)			
		The same of the sa			
To the best of my knowledge and belief, information submitted in support of this					
agreement is true and correct, this document		Signature			
has been duly authorized		- Jigitacui e			
the Department or Agen		Joseph Caruso			
or Agency will comply wi	ith all provisions set	Print Name			
forth herein.		113,10113			
		Command	er	aug	12,209
		Title			Date
17.Prisoner and	18. Other Authorized	19. Signati	ure of Person Au	thorized to Sig	n (Federal)
Detainee Type	Agency User	1 ,	1/		
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☑ Adult Male	⊠ вор	Signature			
☐ Adult Female	□ ICE	Mary Hors	sey		
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☐ Juvenile Male				AUG	1 7 2009
☐ Juvenile Female			pecialist	y	
	4	Title			Date

Authority	3
Purpose of Agreement and Security Provided	. 3
Period of Performance	3
Assignment and Outsourcing of Jail Operations	. 4
Medical Services	4
Receiving and Discharge of Federal Detainees	5
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Authority

Pursuant to the authority of Section 119 of the Department of Justice Appropriations. Acts of 2001 (Public Law 106-553), this Agreement is entered into between the United States Marshals Service (hereinafter referred to as the "Federal Government") and **Contra Costa County** (hereinafter referred to as the "Local Government"), who hereby agree as follows:

Purpose of Agreement and Security Provided

The Federal Government and the Local Government establish this Agreement that allows the United States Marshals Service (USMS) to house federal detainees with the Local Government at the **Martinez Detention Facility** (hereinafter referred to as "the facility").

The population (hereinafter referred to as "federal detainees") will include individuals charged with federal offenses and detained while awaiting trial, individuals who have been sentenced and are awaiting designation and transport to a Bureau of Prisons (BOP) facility, and individuals who are awaiting a hearing on their immigration status or deportation.

The Local Government shall accept and provide for the secure custody, safekeeping, housing, subsistence and care of federal detainees in accordance with all state and local laws, standards, regulations, policies and court orders applicable to the operation of the facility. Detainees shall also be housed in a manner that is consistent with federal law and the Federal Performance-Based Detention Standards.

The USMS ensures the secure custody, care, and safekeeping of USMS detainees. Accordingly, all housing or work assignments, and recreation or other activities for USMS detainees are permitted only within secure areas of the building or within the secure external recreational/exercise areas.

At all times, the Federal Government shall have access to the facility and to the federal detainees housed there, and to all records pertaining to this Agreement, including financial records, for a period going back three (3) years from the date of request by the Federal Government.

Period of Performance

This Agreement is effective upon the date of signature of both parties, and remains in effect unless terminated by either party with written notice. The Local Government shall provide no less than one-hundred twenty (120) calendar days notice of their Intent to terminate. Where the Local Government has received a Cooperative Agreement Program (CAP) award, the termination provisions of the CAP prevail.

Assignment and Outsourcing of Jail Operations

Overall management and operation of the facility housing federal detainees may not be contracted out without the prior express written consent of the Federal Government.

Medical Services

The Local Government shall provide federal detainees with the full range of medical care **inside** the detention facility. The level of care inside the facility should be the same as that provided to state and local detainees. The Local Government is financially responsible for all medical care provided **inside** the facility to federal detainees. This includes the cost of all medical, dental, and mental health care as well as the cost of medical supplies, over the counter prescriptions and, any prescription medications routinely stocked by the facility which are provided to federal detainees. The cost of all of the above-referenced medical care is covered by the federal per diem rate. However, if dialysis is provided within the facility, the Federal Government will pay for the cost of that service.

The Federal Government is financially responsible for all medical care provided **outside** the facility to federal detainees. The Federal Government must be billed directly by the medical care provider **not** the Local Government. In order to ensure that Medicare rates are properly applied, medical claims for federal detainees must be on Centers for Medicare and Medicaid (CMS) Forms in order to be re-priced at Medicare rates in accordance with Title 18, USC Section 4006. The Local Government is required to immediately forward all medical claims for federal detainees to the Federal Government for processing.

All **outside** medical care provided to federal detainees must be pre-approved by the Federal Government. In the event of an emergency, the Local Government shall proceed immediately with necessary medical treatment. In such an event, the Local Government shall notify the Federal Government immediately regarding the nature of the federal detainee's illness or injury as well as the types of treatment provided.

Medical care for federal detainees shall be provided by the Local Government in accordance with the provisions of USMS, Publication 100-Prisoner Health Care Standards (www.usmarshals.gov/prisoner/standards.htm) and in compliance with USMS Inspection Guidelines, Form USM-218 Detention Facility Investigative Report. The Local Government is responsible for all associated medical recordkeeping.

The facility shall have in place an adequate infectious disease control program which includes testing of all federal detainees for Tuberculosis (TB) as soon as possible after intake (not to exceed 14 days). When Purified Protein Derivative (PPD) skin tests are used, they shall be read between 48 and 72 hours after placement.

TB testing shall be accomplished in accordance with the latest Centers for Disease Control (CDC) Guidelines and the result promptly documented in the federal detainee's

medical record. Special requests for expedited TB testing and clearance (to include time-sensitive moves) will be accomplished through advance coordination by the Federal Government and Local Government.

The Local Government shall immediately notify the Federal Government of any cases of suspected or active TB or any other highly communicable disease such as Severe Acute Respiratory Syndrome (SARS), Avian Flu, Methicillin-Resistant Staphylococcus Aureus (MRSA), Chicken Pox, etc., which might affect scheduled transports or productions so that protective measures can be taken by the Federal Government.

When a federal detainee is being transferred and/or released from the facility, they will be provided with seven (7) days of prescription medication which will be dispensed from the facility. When possible, generic medications should be prescribed. Medical records must travel with the federal detainee. If the records are maintained at a medical contractor's facility, it is the Local Government's responsibility to obtain them before a federal detainee is moved.

Federal detainees may be charged a medical co-payment by the Local Government in accordance with the provisions of Title 18, USC Section 4013(d). The Federal Government is not responsible for medical co-payments and cannot be billed for these costs even for indigent federal prisoners.

Receiving and Discharge of Federal Detainees

The Local Government agrees to accept federal detainees only upon presentation by a law enforcement officer of the Federal Government with proper agency credentials.

The Local Government shall not relocate a federal detainee from one facility under its control to another facility not described in this Agreement without permission of the Federal Government.

The Local Government agrees to release federal detainees only to law enforcement officers of the Federal Government agency initially committing the federal detainee (i.e., Drug Enforcement Administration, Immigration and Customs Enforcement, etc.) or to a Deputy United States Marshal (DUSM). Those federal detainees who are remanded to custody by a DUSM may only be released to a DUSM or an agent specified by the DUSM of the Judicial District.

USMS federal detainees sought for a state or local court proceeding must be acquired through a Writ of Habeas Corpus or the Interstate Agreement on Detainers and then only with the concurrence of the district United States Marshal (USM).

Optional Guard/Transportation Services to Medical Facility

If Medical Facility in block 13 on page one (1) of this Agreement is checked, the Local Government agrees, subject to the availability of its personnel, to provide transportation and escort guard services for federal detainees housed at their facility to and from a medical facility for outpatient care, and transportation and stationary guard services for federal detainees admitted to a medical facility.

These services should be performed by at least two (2) armed qualified law enforcement or correctional officer personnel. If the Local Government is unable to meet this requirement, the Local Government may seek a waiver of this requirement from the local USM.

The Local Government agrees to augment this security escort if requested by the USM to enhance specific requirement for security, prisoner monitoring, visitation, and contraband control.

If an hourly rate for these services has been agreed upon to reimburse the Local Government, it will be stipulated on page one (1) of this Agreement. Mileage shall be reimbursed in accordance with the current GSA mileage rate.

Optional Guard/Transportation Services to U.S. Courthouse

If U.S. Courthouse in block 13 on page one (1) of this Agreement is checked, the Local Government agrees, subject to the availability of its personnel, to provide transportation and escort guard services for federal detainees housed at its facility to and from the U.S. Courthouse.

These services should be performed by at least two (2) armed qualified law enforcement or correctional officer personnel. If the Local Government is unable to meet this requirement, the Local Government may seek a walver of this requirement from the local U.S. Marshal.

The Local Government agrees to augment this security escort if requested by the USM to enhance specific requirements for security, detained monitoring, and contraband control.

Upon arrival at the courthouse, the Local Government's transportation and escort guards will turn federal detainees over to a DUSM only upon presentation by the deputy of proper law enforcement credentials.

The Local Government will not transport federal detainees to any U.S. Courthouse without a specific request from the USM who will provide the detainee's name, the U.S. Courthouse, and the date the detainee is to be transported.

Each detainee will be restrained in handcuffs, waist chains, and leg irons during transportation.

If an hourly rate for these services has been agreed upon to reimburse the Local Government, it will be stipulated on page one (1) of this Agreement. Mileage shall be reimbursed in accordance with the current GSA mileage rate.

Special Notifications

The Local Government shall notify the Federal Government of any activity by a federal detainee which would likely result in litigation or alleged criminal activity.

The Local Government shall immediately notify the Federal Government of an escape of a federal detainee. The Local Government shall use all reasonable means to apprehend the escaped federal detainee and all reasonable costs in connection therewith shall be borne by the Local Government. The Federal Government shall have primary responsibility and authority to direct the pursuit and capture of such escaped federal detainees. Additionally, the Local Government shall notify the Federal Government as soon as possible when a federal detainee is involved in an attempted escape or conspiracy to escape from the facility.

In the event of the death or assault of a federal detainee, the Local Government shall immediately notify the Federal Government.

Prisoner Rape Elimination Act (PREA)

The facility is requested to post the Prisoner Rape Elimination Act brochure/bulletin in each housing unit of the facility. All detainees have a right to be safe and free from sexual harassment and sexual assaults. (See Attached)

Service Contract Act

This Agreement incorporates the following clause by reference, with the same force and effect as if it was given in full text. Upon request, the full text will be made available. The full text of this provision may be accessed electronically at this address: www.arnet.gov.

Federal Acquisition Regulation Clause(s):

52.222-41 Service Contract Act of 1965, as Amended (July 2005)

52.222-42 Statement of Equivalent Rates for Federal Hires (May 1989)

52.222-43 Fair Labor Standards Act and the Service Contract Act – Price Adjustment (Multiyear and Option Contracts) (May 1989)

The current Local Government wage rates shall be the prevailing wages unless notified by the Federal Government.

Per-Diem Rate

The Federal Government will use various price analysis techniques and procedures to ensure the per-diem rate established by this Agreement is considered a fair and reasonable price. Examples of such techniques include, but are not limited to, the following:

- 1. Comparison of the requested per-diem rate with the independent government estimate for detention services, otherwise known as the Core Rate;
- 2. Comparison with per-diem rates at other state or local facilities of similar size and economic conditions;
- 3. Comparison of previously proposed prices and previous Federal Government and commercial contract prices with current proposed prices for the same or similar items;
- 4. Evaluation of the provided jail operating expense information;

The firm-fixed per-dlem rate for services is \$85.00, and shall not be subject to adjustment on the basis of Contra Costa COUNTY actual cost experience in providing the service. The per-dlem rate shall be fixed for a period from the effective date of the Agreement forward for thirty-six (36) months. The per-dlem rate covers the support of one (1) federal detainee per "federal detainee day", which shall include the day of arrival, but not the day of departure.

After thirty-six (36) months, if a rate adjustment is desired, the Local Government shall submit a request through the Electronic Intergovernmental Agreements area of the Detention Services Network (DSNetwork). All information pertaining to the jail on the DSNetwork will be required before a new per-diem rate can be considered.

Billing and Financial Provisions

The Local Government shall prepare and submit for certification and payment, original and separate invoices each month to each Federal Government component responsible for federal detainees housed at the facility.

Addresses for the components are:

United States Marshals Service Northern District of California U.S. Courthouse/Philip Burton Bldg. 450 Golden Gate Avenue San Francisco, CA 94102 (415) 436-7677

Bureau of Prisons Community Corrections Office 501 I Street, Suite 9-400 Sacramento, CA 95814 (916) 930-2010

To constitute a proper monthly invoice, the name and address of the facility, the name of each federal detainee, their specific dates of confinement, the total days to be paid, the appropriate per-diem rate as approved in the Agreement, and the total amount billed (total days multiplied by the per-diem rate per day) shall be listed, along with the name, title, complete address and telephone number of the Local Government official responsible for invoice preparation.

Nothing contained herein shall be construed to obligate the Federal Government to any expenditure or obligation of funds in excess of, or in advance of, appropriations in accordance with the Anti-Deficiency Act, 31 U.S.C. 1341.

Payment Procedures

The Federal Government will make payments to the Local Government on a monthly basis, promptly after receipt of an appropriate invoice. The Local Government shall provide a remittance address below:

Contra Costa County 1000 Ward Street Martinez, CA 94553

Modifications and Disputes

Either party may initiate a request for modification to this Agreement in writing. All modifications negotiated will be effective only upon written approval of both parties.

Disputes, questions, or concerns pertaining to this Agreement will be resolved between appropriate officials of each party. Both parties agree they will use their best efforts to resolve the dispute in an informal fashion through consultation and communication, or other forms of non-binding alternative dispute resolution mutually acceptable to the parties.

Inspection of Services

The Local Government agrees to allow periodic inspections of the facility by Federal Government inspectors. Findings of the inspection will be shared with the facility administrator to promote improvements to facility operations, conditions of confinement, and levels of services.

Litigation

The Federal Government shall be notified, in writing, of all litigation pertaining to this Agreement and be provided copies of any pleadings filed or said litigation within five (5) working days of the filing.

The Local Government shall cooperate with the Federal Government legal staff and/or the United States Attorney regarding any requests pertaining to Federal Government or Local Government litigation.

U. S. Department of Justice United States Marshals Service

Detention Services Intergovernmental Agreement

1. Agreement Number 11-09-0034	2. Effective Date See Block 19	3. Facility C	Code(s)	4. DUNS Number 00-766-9216	
	· · · · · · · · · · · · · · · · · · ·				
5. Issuing Federal Agency United States Marshals Service		6. Local Government Contra Costa County			
Prisoner Operations		West County Detention Facility			
Office of Interagency Agreements		5555 Giant Highway			
Washington, DC 20530-1000		Richmond, CA 94806			
3,		Tax ID#: 94-6000509			
7. Appropriation Data		8. Local Contact Person			
		Elizabeth Arbuckle, Supervising Accountant			
15X1020		9. Tel: (925) 335-1601			
		Email: earbu@so.cccounty.us			
Sen	rices		ted Number of	Per-Diem Rate	
	<u> </u>		ferai Beds		
10. This agreement is fo	11.		12.		
safekeeping, and su		Adult Male:	50		
prisoners, in accordance with content set		A 4.44 F	l	\$82.00	
forth herein.	sportation Consists to:	14.	Adult Female: 25		
13. Optional Guard/Transportation Services to:		14.			
☑ Medical Facility		Guard/Transportation Hourly Rate: \$N/A			
					
☐ U.S. Courthouse		Mileage shall be reimbursed by the Federal Government at the GSA Federal Travel Regulation Mileage Rate.			
15. Local Government Certification		16. Signature of Person Authorized to Sign (Local)			
To the best of my knowl	edge and belief.				
information submitted in support of this					
agreement is true and c	orrect, this document	Signature			
	d by the body governing				
the Department or Agency and the Department		Joseph Caruso			
or Agency will comply with all provisions set		Print Name			
forth herein.		Commonder			
		Commander Vest 1 LOO9			
		Title		'Date	
17.Prisoner and	18. Other Authorized	19. Signatu	ire of Person Aut	horized to Sign (Federal)	
Detainee Type	Agency User	11	11		
Authorized		Maria	Herry		
			garser)		
☑ Adult Male	□ BOP	Signature '			
☑ Adult Female	☐ ICE	Mary Hors	sey		
☐ Juvenile Male		Print Name			
	Constant C		SEP 2 1 2009		
☐ Juvenile Female		Grants Specialist			
Title				Date	

Authority	. 3
Purpose of Agreement and Security Provided	
Period of Performance	. 3
Assignment and Outsourcing of Jail Operations	. 4
Medical Services	
Receiving and Discharge of Federal Detainees	. 5
Optional Guard/Transportation Services to Medical Facility	
Optional Guard/Transportation Services to U.S. Courthouse	. 6
Special Notifications	. 7
Prisoner Rape Elimination Act (PREA)	. 7
Service Contract Act	. 7
Per-Diem Rate	. 8
Billing and Financial Provisions	. 8
Payment Procedures	. 9
Modifications and Disputes	
Inspection of Services	
Litigation	
Prisoner Rape Elimination Act Reporting Information	11

Authority

Pursuant to the authority of Section 119 of the Department of Justice Appropriations Acts of 2001 (Public Law 106-553), this Agreement is entered into between the United States Marshals Service (hereinafter referred to as the "Federal Government") and Contra Costa County (hereinafter referred to as the "Local Government"), who hereby agree as follows:

Purpose of Agreement and Security Provided

The Federal Government and the Local Government establish this Agreement that allows the United States Marshals Service (USMS) to house federal detainees with the Local Government at the **West County Detention Center** (hereinafter referred to as "the facility").

The population (hereinafter referred to as "federal detainees") will include individuals charged with federal offenses and detained while awaiting trial, individuals who have been sentenced and are awaiting designation and transport to a Bureau of Prisons (BOP) facility, and individuals who are awaiting a hearing on their immigration status or deportation.

The Local Government shall accept and provide for the secure custody, safekeeping, housing, subsistence and care of federal detainees in accordance with all state and local laws, standards, regulations, policies and court orders applicable to the operation of the facility. Detainees shall also be housed in a manner that is consistent with federal law and the Federal Performance-Based Detention Standards.

The USMS ensures the secure custody, care, and safekeeping of USMS detainees. Accordingly, all housing or work assignments, and recreation or other activities for USMS detainees are permitted only within secure areas of the building or within the secure external recreational/exercise areas.

At all times, the Federal Government shall have access to the facility and to the federal detainees housed there, and to all records pertaining to this Agreement, including financial records, for a period going back three (3) years from the date of request by the Federal Government.

Period of Performance

This Agreement is effective upon the date of signature of both parties, and remains in effect unless terminated by either party with written notice. The Local Government shall provide no less than one-hundred twenty (120) calendar days notice of their intent to terminate. Where the Local Government has received a Cooperative Agreement Program (CAP) award, the termination provisions of the CAP prevail.

Assignment and Outsourcing of Jail Operations

Overall management and operation of the facility housing federal detainees may not be contracted out without the prior express written consent of the Federal Government.

Medical Services

The Local Government shall provide federal detainees with the full range of medical care **inside** the detention facility. The level of care inside the facility should be the same as that provided to state and local detainees. The Local Government is financially responsible for all medical care provided **inside** the facility to federal detainees. This includes the cost of all medical, dental, and mental health care as well as the cost of medical supplies, over the counter prescriptions and, any prescription medications routinely stocked by the facility which are provided to federal detainees. The cost of all of the above-referenced medical care is covered by the federal per diem rate. However, if dialysis is provided within the facility, the Federal Government will pay for the cost of that service.

The Federal Government is financially responsible for all medical care provided **outside** the facility to federal detainees. The Federal Government must be billed directly by the medical care provider **not** the Local Government. In order to ensure that Medicare rates are properly applied, medical claims for federal detainees must be on Centers for Medicare and Medicaid (CMS) Forms in order to be re-priced at Medicare rates in accordance with Title 18, USC Section 4006. The Local Government is required to immediately forward all medical claims for federal detainees to the Federal Government for processing.

All **outside** medical care provided to federal detainees must be pre-approved by the Federal Government. In the event of an emergency, the Local Government shall proceed immediately with necessary medical treatment. In such an event, the Local Government shall notify the Federal Government immediately regarding the nature of the federal detainee's illness or injury as well as the types of treatment provided.

Medical care for federal detainees shall be provided by the Local Government in accordance with the provisions of USMS, Publication 100-Prisoner Health Care Standards (www.usmarshals.gov/prisoner/standards.htm) and in compliance with USMS Inspection Guidelines, Form USM-218 Detention Facility Investigative Report. The Local Government is responsible for all associated medical recordkeeping.

The facility shall have in place an adequate infectious disease control program which includes testing of all federal detainees for Tuberculosis (TB) as soon as possible after intake (not to exceed 14 days). When Purified Protein Derivative (PPD) skin tests are used, they shall be read between 48 and 72 hours after placement.

TB testing shall be accomplished in accordance with the latest Centers for Disease Control (CDC) Guidelines and the result promptly documented in the federal detainee's

medical record. Special requests for expedited TB testing and clearance (to include time-sensitive moves) will be accomplished through advance coordination by the Federal Government and Local Government.

The Local Government shall immediately notify the Federal Government of any cases of suspected or active TB or any other highly communicable disease such as Severe Acute Respiratory Syndrome (SARS), Avian Flu, Methicillin-Resistant Staphylococcus Aureus (MRSA), Chicken Pox, etc., which might affect scheduled transports or productions so that protective measures can be taken by the Federal Government.

When a federal detainee is being transferred and/or released from the facility, they will be provided with seven (7) days of prescription medication which will be dispensed from the facility. When possible, generic medications should be prescribed. Medical records must travel with the federal detainee. If the records are maintained at a medical contractor's facility, it is the Local Government's responsibility to obtain them before a federal detainee is moved.

Federal detainees may be charged a medical co-payment by the Local Government in accordance with the provisions of Title 18, USC Section 4013(d). The Federal Government is not responsible for medical co-payments and cannot be billed for these costs even for indigent federal prisoners.

Receiving and Discharge of Federal Detainees

The Local Government agrees to accept federal detainees only upon presentation by a law enforcement officer of the Federal Government with proper agency credentials.

The Local Government shall not relocate a federal detainee from one facility under its control to another facility not described in this Agreement without permission of the Federal Government.

The Local Government agrees to release federal detainees only to law enforcement officers of the Federal Government agency initially committing the federal detainee (i.e., Drug Enforcement Administration, Immigration and Customs Enforcement, etc.) or to a Deputy United States Marshal (DUSM). Those federal detainees who are remanded to custody by a DUSM may only be released to a DUSM or an agent specified by the DUSM of the Judicial District.

USMS federal detainees sought for a state or local court proceeding must be acquired through a Writ of Habeas Corpus or the Interstate Agreement on Detainers and then only with the concurrence of the district United States Marshal (USM).

Optional Guard/Transportation Services to Medical Facility

If Medical Facility in block 13 on page one (1) of this Agreement is checked, the Local Government agrees, subject to the availability of its personnel, to provide transportation and escort guard services for federal detainees housed at their facility to and from a medical facility for outpatient care, and transportation and stationary guard services for federal detainees admitted to a medical facility.

These services should be performed by at least two (2) armed qualified law enforcement or correctional officer personnel. If the Local Government is unable to meet this requirement, the Local Government may seek a waiver of this requirement from the local USM.

The Local Government agrees to augment this security escort if requested by the USM to enhance specific requirement for security, prisoner monitoring, visitation, and contraband control.

If an hourly rate for these services has been agreed upon to reimburse the Local Government, it will be stipulated on page one (1) of this Agreement. Mileage shall be reimbursed in accordance with the current GSA mileage rate.

Optional Guard/Transportation Services to U.S. Courthouse

If U.S. Courthouse in block 13 on page one (1) of this Agreement is checked, the Local Government agrees, subject to the availability of its personnel, to provide transportation and escort guard services for federal detainees housed at its facility to and from the U.S. Courthouse.

These services should be performed by at least two (2) armed qualified law enforcement or correctional officer personnel. If the Local Government is unable to meet this requirement, the Local Government may seek a waiver of this requirement from the local U.S. Marshal.

The Local Government agrees to augment this security escort if requested by the USM to enhance specific requirements for security, detained monitoring, and contraband control.

Upon arrival at the courthouse, the Local Government's transportation and escort guards will turn federal detainees over to a DUSM only upon presentation by the deputy of proper law enforcement credentials.

The Local Government will not transport federal detainees to any U.S. Courthouse without a specific request from the USM who will provide the detainee's name, the U.S. Courthouse, and the date the detainee is to be transported.

Each detainee will be restrained in handcuffs, waist chains, and leg irons during transportation.

If an hourly rate for these services has been agreed upon to reimburse the Local Government, it will be stipulated on page one (1) of this Agreement. Mileage shall be reimbursed in accordance with the current GSA mileage rate.

Special Notifications

The Local Government shall notify the Federal Government of any activity by a federal detainee which would likely result in litigation or alleged criminal activity.

The Local Government shall immediately notify the Federal Government of an escape of a federal detainee. The Local Government shall use all reasonable means to apprehend the escaped federal detainee and all reasonable costs in connection therewith shall be borne by the Local Government. The Federal Government shall have primary responsibility and authority to direct the pursuit and capture of such escaped federal detainees. Additionally, the Local Government shall notify the Federal Government as soon as possible when a federal detainee is involved in an attempted escape or conspiracy to escape from the facility.

In the event of the death or assault of a federal detainee, the Local Government shall immediately notify the Federal Government.

Prisoner Rape Elimination Act (PREA)

The facility is requested to post the Prisoner Rape Elimination Act brochure/bulletin in each housing unit of the facility. All detainees have a right to be safe and free from sexual harassment and sexual assaults. (See Attached)

Service Contract Act

This Agreement incorporates the following clause by reference, with the same force and effect as if it was given in full text. Upon request, the full text will be made available. The full text of this provision may be accessed electronically at this address: www.arnet.gov.

Federal Acquisition Regulation Clause(s):

- 52.222-41 Service Contract Act of 1965, as Amended (July 2005)
- 52.222-42 Statement of Equivalent Rates for Federal Hires (May 1989)
- 52.222-43 Fair Labor Standards Act and the Service Contract Act Price Adjustment (Multiyear and Option Contracts) (May 1989)

The current Local Government wage rates shall be the prevailing wages unless notified by the Federal Government.

Per-Diem Rate

The Federal Government will use various price analysis techniques and procedures to ensure the per-diem rate established by this Agreement is considered a fair and reasonable price. Examples of such techniques include, but are not limited to, the following:

- 1. Comparison of the requested per-diem rate with the independent government estimate for detention services, otherwise known as the Core Rate;
- 2. Comparison with per-diem rates at other state or local facilities of similar size and economic conditions;
- Comparison of previously proposed prices and previous Federal Government and commercial contract prices with current proposed prices for the same or similar items;
- 4. Evaluation of the provided jail operating expense information;

The firm-fixed per-diem rate for services is \$82.00, and shall not be subject to adjustment on the basis of Contra Costa County actual cost experience in providing the service. The per-diem rate shall be fixed for a period from the effective date of the Agreement forward for thirty-six (36) months. The per-diem rate covers the support of one (1) federal detainee per "federal detainee day", which shall include the day of arrival, but not the day of departure.

After thirty-six (36) months, if a rate adjustment is desired, the Local Government shall submit a request through the Electronic Intergovernmental Agreements area of the Detention Services Network (DSNetwork). All information pertaining to the jail on the DSNetwork will be required before a new per-diem rate can be considered.

Billing and Financial Provisions

The Local Government shall prepare and submit for certification and payment, original and separate invoices each month to each Federal Government component responsible for federal detainees housed at the facility.

Addresses for the components are:

United States Marshals Service Northern District of California U.S. Courthouse/Philip Burton Bldg. 450 Golden Gate Avenue, Room 20-6888 San Francisco, CA 94102 (415) 436-7677

To constitute a proper monthly invoice, the name and address of the facility, the name of each federal detainee, their specific dates of confinement, the total days to be paid, the appropriate per-diem rate as approved in the Agreement, and the total amount billed (total days multiplied by the per-diem rate per day) shall be listed, along with the name, title, complete address and telephone number of the Local Government official responsible for invoice preparation.

Nothing contained herein shall be construed to obligate the Federal Government to any expenditure or obligation of funds in excess of, or in advance of, appropriations in accordance with the Anti-Deficiency Act, 31 U.S.C. 1341.

Payment Procedures

The Federal Government will make payments to the Local Government on a monthly basis, promptly after receipt of an appropriate invoice. The Local Government shall provide a remittance address below:

Contra Costa County 5555 Giant Highway Richmond, CA 94806

Modifications and Disputes

Either party may initiate a request for modification to this Agreement in writing. All modifications negotiated will be effective only upon written approval of both parties.

Disputes, questions, or concerns pertaining to this Agreement will be resolved between appropriate officials of each party. Both parties agree they will use their best efforts to resolve the dispute in an informal fashion through consultation and communication, or other forms of non-binding alternative dispute resolution mutually acceptable to the parties.

Inspection of Services

The Local Government agrees to allow periodic inspections of the facility by Federal Government inspectors. Findings of the inspection will be shared with the facility administrator to promote improvements to facility operations, conditions of confinement, and levels of services.

Litigation

The Federal Government shall be notified, in writing, of all litigation pertaining to this Agreement and be provided copies of any pleadings filed or said litigation within five (5) working days of the filing.

The Local Government shall cooperate with the Federal Government legal staff and/or the United States Attorney regarding any requests pertaining to Federal Government or Local Government litigation.

Prisoner Rape Elimination Act Reporting Information

SEXUAL ASSAULT AWARENESS

This document is requested to be posted in each Housing Unit Bulletin Board at all Contract Detention Facilities. This document may be used and adapted by Intergovernmental Service Agreement Providers.

While detained by the Department of Justice, United States Marshals Service, you have a right to be safe and free from sexual harassment and sexual assaults.

Definitions

A. Detainee-on-Detainee Sexual Abuse/Assault

One or more detainees engaging in or attempting to engage in a sexual act with another detainee or the use of threats, intimidation, inappropriate touching or other actions and/or communications by one or more detainees aimed at coercing and/or pressuring another detainee to engage in a sexual act.

B. Staff-on-Detainee Sexual Abuse/Assault

Staff member engaging in, or attempting to engage in a sexual act with any detainee or the intentional touching of a detainee's genitalia, anus, groin, breast, inner thigh, or buttocks with the intent to abuse, humiliate, harass, degrade, arouse, or gratify the sexual desires of any person. Sexual abuse/assault of detainees by staff or other detainees is an inappropriate use of power and is prohibited by DOJ policy and the law.

C. Staff Sexual Misconduct is:

Sexual behavior between a staff member and detainee which can include, but is not limited to indecent, profane or abusive language or gestures and inappropriate visual surveillance of detainees.

Prohibited Acts

A detainee, who engages in inappropriate sexual behavior with or directs it at others, can be charged with the following Prohibited Acts under the Detainee Disciplinary Policy.

- Using Abusive or Obscene Language
- Sexual Assault
- Making a Sexual Proposal
- Indecent Exposure
- Engaging in Sex Act

Detention as a Safe Environment

While you are detained, no one has the right to pressure you to engage in sexual acts or engage in unwanted sexual behavior regardless of your age, size, race, or ethnicity. Regardless of your sexual orientation, you have the right to be safe from unwanted sexual advances and acts.

Confidentiality

Information concerning the identity of a detained victim reporting a sexual assault, and the facts of the report itself, shall be limited to those who have the need to know in order to make decisions concerning the detainee-victim's welfare and for law enforcement investigative purposes.

Report All Assaults!

If you become a victim of a sexual assault, you should report it immediately to any staff person you trust, to include housing officers, chaplains,

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medical staff, supervisors or Deputy U.S. Marshals. Staff members keep the reported information confidential and only discuss it with the appropriate officials on a need to know basis. If you are not comfortable reporting the assault to staff, you have other options:

- Write a letter reporting the sexual misconduct to the person in charge or the United States Marshal. To ensure confidentiality, use special (Legal) mail procedures.
- File an Emergency Detainee Grievance If you decide your complaint is too sensitive to file with the Officer in Charge, you can file your Grievance directly with the Field Office Director. You can get the forms from your housing unit officer, or a facility supervisor.
- Write to the Office of Inspector General (OIG), which investigates allegations of staff misconduct. The address is: Office of Inspector General, U.S. Department of Justice, 950 Pennsylvania Ave. Room 4706, Washington, DC. 20530
- Call, at no expense to you, the Office of Inspector General (OIG). The phone number is 1-800-869-4499.

Individuals who sexually abuse or assault detainees can only be disciplined or prosecuted if the abuse is reported.

A publication of the Office of the Federal Detention Trustee Washington, DC

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