10/05/00 THU 09:06 FAX tited States Department of Justice Intergovernmental? Agreement 1 of Page \_ Housing of Federal Prisoners nited States Marshals Service AGREEMENT NUMBER 2. EFFECTIVE DATE 3. REQUISITION/PURCHASER/REQUEST NO. 4. CONTROL NO. 8/1/84 J-C89-M-077 0150-C89-84 . ISSUING OFFICE 6. GOVERNMENT ENTITY FACILITY CODE(S) 5AJ UNITED STATES MARSHALS SERVICE NAME AND Waukesha County Sheriff's Operations Support Division ADDRESS Program Administration Branch Department (Street, city, county, State | 515 West Moreland Boulevard 1-TYSONS CORNER CENTER and ZIP code Waukesha, Wisconsin 53186 MCLEAN, VIRGINIA 22102 Jail APPROPRIATION DATA Contact Person William Conine, Administrator Area Code & Telephone No. > 1541020 10. 11. 12. 13. AMOUNT SUPPLIES/SERVICES UNIT PRICE ITEM NO. QUANTITY UNIT (1) This Agreement is for the housing safekeeping and subsistence of adult male and female federal prisoners in accordance with the contents set forth herein. ESTIMATED USMS ESTIMATED (2) This Agreement consists of the PRISONER FIXED ANNUAL following: DAYS/YR. RATE PAYMENT I-G-A Cover Page, Form #241 (A) 5,000 PDs \$24.50 \$ 122,500.00 (B) Agreement Schedule, pages 2-5 15. NAME AND TITLE OF PERSON(S) AUTHORIZED TO SIGN/OFFER To the best of my knowledge and belief, data Date 11-27-84 submitted in support of this agreement is true (Signature) and correct, the document has been duly au-Sheriff Raymond I Klink AGENCY thorized by the governing body of the Depart-Name (Type or Print) Title ERTIFYING ment or Agency and the Department or Agency Date 11.27.84 will comply with ALL'PROVISIONS SET (Signature) FORTH HEREIN. William H. Conine Administrator Name (Type or Print) 6. TYPE OF USE 17. PRISONER TYPE TO BE INCLUDED 19. This Negotiated Agreement is Hereby Approved and Accepted for ] Hold Over UNSENTENCED SENTENCED Regular Support Adult Male Adult Male J Seasonal Support Adult Female Adult Female THE UNITED STATES OF AMERICA ☐ Other ☐ Juvenile Male ☐ Juvenile Male BY DIRECTION OF THE DIRECTOR OF THE UNITED ☐ Juvenile Female ☐ Juvenile Female 8. LEVEL OF USE STATES MARSHALS SERVICE Aliens Work Release J Minimum O YCA Male ☐ Medium ☐ YCA Female Major Major ISIGNATURE OF CONTRACTING OFFICER) 10 ANTICIPATED ANNUAL USAGE 21. NAME OF AUTHORIZING OFFICIAL DATE SIGNED (Type or Print) UNSENTENCED SENTENCED -- ALIENS TOTAL Vo. of Prisoners Joseph B. Enders, Chief 5,000 1,000 8/1/84 'risoner Days 100 6,100 Operations Support Div. Juard Hours FORM USM-241 PRIOR EDITIONS ARE OBSOLETE AND ARE NOT TO BE USED T- 6/70/83)

### UNITED STATES MARSHALS SERVICE AGREEMENT SCHEDULE (SUPPORT OF U.S. PRISONERS)

Page No.

J-C89-M-077

MENT NO.

. of 5

#### ARTICLE I - PURPOSE

The purpose of this Intergovernmental Service Agreement (IGA) is to establish a formal binding relationship between the U.S. Marshals Service and other federal user agencies (the government) and Waukesha County, Wisconsin (the County) for the detention of persons charged with or convicted of violations of federal law or held as material witnesses (federal prisoners) at the Waukesha County Jail (the facility).

#### ARTICLE II - SUPPORT AND MEDICAL SERVICES

- 1. The County 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.
- The County 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 \*emoval/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 government.
- 3. The County agrees to notify the U.S. Marshal as soon as possible of all emergency medical cases requiring removal of a prisoner from the facilities and to obtain prior authorization for removal for all other medical services required.

#### ARTICLE III - RECEIVING AND DISCHARGE

- 1. The County 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 County 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 may only be released to a U.S. Marshal or an agency specified by the U.S. Marshal of the Judicial District.
- 3. Government user agencies agree to maintain federal prisoner population levels at or below the level established by the facility administrator. The facility administrator may establish levels for each user agency.
- 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 or 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 County may suspend or restrict the use of the facility by giving written hotice to the U.S. Marshal. Such notice will be

## AGREEMENT SCHEDULE (SUPPORT OF U.S. PRISONERS)

J-C89-M-077

EMENT NO.

3 of 5

Page No.

provided 30 days in advance of the effective date of formal termination and at least two weeks in advance of a suspension of restriction of use unless an emergency situation requires the immediate relocation of prisoners.

#### ARTICLE V - ECONOMIC PRICE ADJUSTMENT

- Payment rates shall be established on the basis of actual costs associated with the
  operation of the facility during a recent annual accounting period or upon an approved
  annual operating budget.
- 2. The rate may be renegotiated not more than once per year, after the Agreement has been effective for twelve months.
- 3. The County may initiate a request for a rate increase or decrease by notifying the U.S. Marshal in writing at least 60 days prior to the desired effective date of the adjustment. Each rate adjustment submitted must include a completed Basic Data Sheet and Certification Form available from the U.S. Marshal. The County agrees to provide additional cost information to support a rate increase and to permit an audit of accounting records upon request of the Marshals Service.
- 4. Criteria used to evaluate the increase or decrease in the per-capita 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.
- 5. The effective date of the rate modification will be negotiated and specified on the IGA Modification form approved and signed by a Marshals Service Contracting Officer. The effective date will be established on the first day of a 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 U.S. Marshal.
- 6. Unless other justifiable reasons can be documented by the County, per diem rate increases shall not exceed the National Inflation rate as established by the U.S., Department of Commerce.

#### ARTICLE VI - FINANCIAL PROVISIONS

The billing addresses of the agencies using this facility are as follows:

United States Marshals Service 517 East Wisconsin Avenue Milwaukee, Wisconsin 53202 \*Bureau of Prisons Community Programs Manager 212 East Washington Avenue Madison, Wisconsin 53703

Phone: (414) 291-3707

Phone: (608) 264-5333

Immigration & Naturalization Service Assistant Regional Comm., PMP Twin Cities, Minnesota 55111

Phone: (612) 725-4466

# AGREEMENT SCHEDULE (SUPPORT OF U.S. PRISONERS)

J-C89-M-077

MENT NO.

4 . 5

Page No.

Work Releasees assigned by the Bureau of Prisons will be charged a rate when employed depending upon their individual economic situation. Any amount individual work releasees are charged shall be deducted from the daily rate charged the Bureau of Prisons.

- 2. The government shall reimburse the County at the fixed rate identified on page one of the agreement. The rate covers one person per prisoner day. The government may not be billed for two days when a prisoner is admitted one evening and removed the following morning. The County may bill for the day of arrival but not for the day of departure.
- 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 County 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-25.
- 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. The date of the check issued in payment shall be considered to be the date payment is made.
- 5. The original invoice shall be submitted to the government office that has been designated to receive invoices, as stated in paragraph 1. To constitute a proper invoice, the invoice must include the name, title, phone number and complete mailing address of the official of the designated payment office. In addition, it shall list each federal prisoner, the specific dates of confinement for each, the total days to be reimbursed, the agreed upon rate per day and the total amount billed (total days multiplied by the rate per day).

#### ARTICLE VII - GOVERNMENT FURNISHED PROPERTY

- 1. It is the intention of the Marshals Service 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 Marshals Service and shall be returned to the custody of the Marshals Service upon termination of the agreement.
- 2. The County agrees to inventory, maintain, repair, assume liability for and manage all federally provided accountable property and to immediately report the loss or destruction of accountable property to the U.S. Marshal. Annual inventory reports will be provided by the County to the U.S. Marshal.

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 Marshals Service for prisoner support.

#### 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 U.S. Marshals Service contracting officer and submitted to the County on form USM 241a for approval.

# AGREEMENT SCHEDULE (SUPPORT OF U.S. PRISONERS)

AURSCMENT NO.

Page No.

J-C89-M-077

5 of \_\_ 5

2. Disputes, questions or concerns pertaining to this agreement will be resolved between the U.S. Marshal and the appropriate County official. Unresolved issues are to be directed to the Chief, Operations Support Division, U.S. Marshals Service Headquarters.

#### ARTICLE IX - INSPECTION AND TECHNICAL ASSISTANCE

- 1. The County agrees to allow periodic inspections of the facility by U.S. Marshals Service 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 Marshals Service 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.

Form USM-246 (Rev. 6/20/83) GPO 900-473

### Modification of Cooperative Agreement

I. MODIFICATION NO.	2 EFFECTIVE DATE OF MODIFICATION			
One (1)	September 25, 1991			
	September 25, 1991			
3. ISSUING OFFICE 4. LOCAL GOVERNMENT	I.S. CAP NO.			
United States Marshals Service	13-89-90			
Prisoner Operations Div. Waukesha County	6. FACILITY CODE(S)			
515 W Moreland	Blvd.			
Arlington, VA 22202-4210 Waukesha, WI 531				
The second secon				
7. ACCOUNTING CITATION	8. FUNDING AMOUNT			
9. EXCEPT AS PROVIDED SPECIFICALLY HEREIN, ALL TERMS A				
REFERRED TO IN BLOCK 5, REMAIN UNCHANGED. TERMS OF	OF THIS MODIFICATION:			
The purpose of this modification is				
date of CAP No. 13-89-90, between the				
Service and Waukesha County from Oct	tober 31, 1992 to June 30, 1993.			
· ·				
	and the second second			
	0.			
TO DISTRICTIONS TO LOCAL CONTRIBUTION OF FOR EVEN CHIEF	WATER MODIFIES TO THE PARTY OF			
10. INSTRUCTIONS TO LOCAL GOVERNMENT FOR EXECUTION	ON OF THIS MODIFICATION:	-		
A.   LOCAL GOVERNMENT IS NOT REQUIRED   B	B. X LOCAL GOVERNMENT IS REQUIRED	1		
TO SIGN THIS DOCUMENT	TO SIGN THIS DOCUMENT AND RETURN			
10 Sidi This Document	COPIES TO U.S. MARSHAL	1		
		1		
11. APPROVALS:				
		i		
A. LOCAL GOVERNMENT A B	B. FEDERAL GOVERNMENT			
How O he others	X /# // /// #			
_ walley >	Sulula W. Scholymer	-		
Signature	Signature	'		
County Executive 6-9-91	CONTRACT SPECIALIST 9/35/91			
		- !		
/ TITLE DATE	TITLE DATE			

Form USM-247 Rev. 9/86

1. MODIFICATION NO.		2. EFFECTIVE DATE O	F MODIFICATION
		June 18, 19	52 SEACH SEACH (SEACH AND
3. ISSUING OFFICE	4. LOCAL GOVERNMENT		5. IGA NO.
U.S. MARSHALS SERVICE	WALKESHA COUNTY SHERI	FF'S DEPARIMENT	J-C89-M-077
PRISONER OPERATIONS DIVI 600 ARMY NAVY DRIVE,	515 West Moreland Bou		6. FACILITY CODE(S)
SÜTTE 1090 ARLINGTON, VA 22202-4210	Waukesha, Wisconsin		5AJ
7. ACCOUNTING CITATION	15X1020		ANNUAL PAYMENT
The purpose Cocperative provision in A. On page  B. On page  B. On page entire  C. On page inserting ARTICLE IV -  1. This agreement of the party. After party. Such	CIFICALLY HEREIN, ALL TERMS, REMAIN UNCHANGED. TERMS of this Modification Agreement Program (Canto the Agreement as a lof 5, Block 10, delaye 2 of 5, Article II sety. Paragraph 4 is the following:  - PERIOD OF PERFORMANCE THE TOTAL CAN BE COMPANIED.  MENT IS NOT REQUIRED	AND CONDITIONS OF THE OF THIS MODIFICATION:  n is to incorporate AP) language and of set forth below:  lete "5,000" and it is a set forth below:  If, paragraph 3, or renumbered paragr	te the specific Guarantee Payment insert "21,900". delete in its raph 3. entirety and  DARANTEE eriod of ten (10) 13-89-90 are vernment agrees to n USMS custody, each r in the above nt shall remain in in writing by either ecomplished by giving
TO SIGN THIS DO		TO SIGN THIS D	OCUMENT AND RETURN TO U.S. MARSHAL
11. APPROVALS:			
A ESCAL COVERNMENT  Signa  Chairman  TITLE	Atally Fure 7 7-5-90 DATE	7,450	andre ons Division JUN 18 1990 DATE
Ni Ni			Form USM-241s

Form USM-241a Rev. 11/89)

Page 1 of 2 Pages

### UNITED STATES MARSHALS SERVICE INTERGOVERNMENTAL AGREEMENT (SUPPORT OF U.S. PRISONERS)

IGA NO. Page No.

written notice to the U.S. Marshal and the affected user agency. 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 Federal prisoners.

- D. On page 4 of 5, ARTICLE VIII, paragraph 2, delete in its entirety and insert the following:
  - 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, U.S. Marshal Service Headquarters.
- E. The following Article is hereby incorporated under this Agreement:

#### ARTICLE X - GUARANTEED PAYMENT

- 1. Beginning with the first month following the completion of all projects under CAP Agreement No. 13-89-90, the United States Marshals Service shall guarantee payment to the County for forty eight (48) bedspaces per day based upon a monthly average (which includes utilization levels of all authorized Federal user agencies such as USMS, BOP, INS, etc.), at the per diem rate established under this agreement, for a period of ten (10) years subject to annual review and adjustments accordingly upon approval of both parties.
- 2. Failure of Waukesha County Sheriff's Department to provide at least the agreed upon guaranteed bedspaces for any reason during any day of any month during the guarantee payment period will void the guaranteed payment for that month and payment will be made based upon the actual number of detention days provided.
- 3. Guaranteed payments are subject to the provision of sufficient levels of funding provided in each annual Support of Prisoners' Appropriation enacted by the Congress.

``````				
HODIFICATION NO.		2. EFFECTIVE	DATE OF MODIFICA	TION
Four (4)		August 1	, 1993	
ISSUING OFFICE 14.	LOCAL GOVERNMENT		5. IGA NO.	
U. S. MARSHALS SERVICE PROCUREMENT DIVISION IGA SECTION 600 ARMY NAVY DRIVE ARLINGTON, VA 22202-4210	Waukesha County Sheriff's Office 515 W. Moreland : Waukesha, Wiscon	Blvd.	J-C89- 6. FACILIT	Y CODE(S)
ACCOUNTING CITATION 15	X1020	A COLUMN TOWN OF THE PERSON	MATED ANNUAL P	AYMENT
EXCEPT AS PROVIDED SPECIFICAL REFERRED TO IN BLOCK 5, REMA	LLY HEREIN. ALL TERMS A	ND CONDITIONS O		ENT
Escape Clause and	d.00, effective Aug d Medical Provisi vailability of Fur	gust 1, 1993, ons under A nds Clause, a	to incorpor Article II, as set forth	ate the and to below:
airlift, he/ prescription detention factoribe "5. Medical the records a it is the de	dederal prisoner is she will be proved medication which cility. When possid."  records must traved are maintained at a tention facility's ederal prisoner is	ided with the will be of ible, generical with the famedical construction responsibility.	hree/seven dispensed from the medication ederal priso tractor's factor for the medication tractor's factor's fa	days of com the shall oner. If cility,
INSTRUCTIONS TO LOCAL GOVE	RNMENT FOR EXECUTION	OF THIS MODIFICA	TION:	
A. LOCAL GOVERNMENT I TO SIGN THIS DOCUMES  APPROVALS:	S NOT REQUIRED	B. A LOCAL G	OVERNMENT IS RE THIS DOCUMENT A COPIES TO U.S. MAR	ND RETURN
A. LOCAL GOVERNMENT	11-16-93 DATE	~	m dil	11/6/93 DATE
	USMS HQ USE O	INLY	gcq	Form USM-241a (Rev. 9/91) ge 1 of 2 Pages

Intergovernmental Service Agreement Schedule

IGA No. J-C89-M-077 Page No.

- "6. Federal prisoners will not be charged and are not required to pay their own medical expenses. These expenses will be paid by the Federal Government."
- "7. The Local Government agrees to notify the U.S. Marshal as soon as possible when a federal prisoner is involved in an escape, an attempted escape, or conspiracy to escape from the facility."
- B. Incorporate the Availability of Funds Clause into the existing IGA as follows:

#### 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 may arise until such funds are available.