ORDER FOR SUPPLIES OR SERVICES

1. DATE OF ORDER: 04/12/2016
2. CONTRACT NO (if any): HS0614-16-F-G148
3. ORDER NO: 192116FCDUTLER131
4. REQUISITION/REFERENCE NO: 04/12/2016
5. ISSUING OFFICE (or address or equivalent info): ICE ENFORCEMENT REMOVAL
   IMMIGRATION AND CUSTOMS ENFORCEMENT
   OFFICE OF ACQUISITION MANAGEMENT
   801 I STREET NW
   Washington, DC 20536
6. SHIP TO: MEDFCONSIGNEE
  樓ICE ENFORCEMENT REMOVAL
   3 ORDER NO: HSCEDX-11-E-IG148
   4. REQUISITION/REFERENCE NO: 192116FC8B0TLER131
   5. GOVERNMENT EQ. NO: 016
   6. TYPE OF ORDER: PURCHASE
   7. CITY: WASHINGTON
   8. STATE: DC
   9. ZIP CODE: 20536
   10. REQUISITIONING OFFICE: ICE ENFORCEMENT REMOVAL
   12. F.O.B. POINT: Destination
   13. PLACE OF DESTINATION: Destination
   15. DELIVER TO F.O.B. POINT ON OR BEFORE: 30 Days After Award
   16. DISCOUNT TERMS: Net 30

11. BUSINESS CLASSIFICATION (Check appropriate boxes):
   [ ] SMALL
   [ ] OTHER THAN SMALL
   [ ] DISADVANTAGED
   [ ] WOMEN-OWNED
   [ ] HUBZone
   [ ] VETERAN-OWNED
   [ ] ELIGIBLE UNDER THE VOSB PROGRAM
   [ ] WOMEN-OWNED DISABILITY SMALL BUSINESS (WOSB)
   [ ] SMALL DISABILITY
   [ ] HUBZone

17. SCHEDULE (See reverse for Rejections):

<table>
<thead>
<tr>
<th>ITEM NO</th>
<th>SUPPLIES OR SERVICES</th>
<th>QUANTITY ORDERED</th>
<th>UNIT</th>
<th>UNIT PRICE</th>
<th>AMOUNT</th>
<th>QUANTITY ACCEPTED</th>
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<tbody>
<tr>
<td></td>
<td>DCMS No: 097701204</td>
<td>(b)</td>
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<td></td>
<td>COR: 312-347</td>
<td>(b)(6)(6)(7)(7)</td>
<td>313-446</td>
<td>(6)(6)(6)(7)</td>
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</table>

This is a new task order with Butler County, FS for detention and transportation. Continued...

18. SHIPPING POINT: DHS ICE
19. GROSS SHIPPING WEIGHT: 4,200.00
20. INVOICE NO: 1495-1620
21. MAIL INVOICE TO: ATTN ICE-CFODD-FCH

22. UNITED STATES OF AMERICA (if more)

AUTHORIZED FOR LOCAL REPRODUCTION
PREVIOUS EDITION INSTEAD
<table>
<thead>
<tr>
<th>ITEM NO</th>
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<tbody>
<tr>
<td>0001</td>
<td>DETENTION BEDSPACE</td>
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<td>0002</td>
<td>TRANSPORTATION</td>
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The funding provided in this task order is the amount presently available for payment and allotted to this task order. The service provider agrees to perform to the point that does not exceed the total amount currently allotted to the items funded under this task order. The service provider is not authorized to continue to work on those item(s) beyond that point. The government will not be obligated to reimburse the service provider in excess of the amount allotted to those item(s) for performance beyond the funding allotted.

Exempt Action: Y

Period of Performance: 07/01/2016 to 07/31/2016

DETENTION BEDSPACE

Accounting Info: Funded:

TRANSPORTATION

Accounting Info: Funded:

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

<table>
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with the contract terms and conditions
[Contract Specialist and Contracting Officer to disclose if on a monthly basis or other agreed to terms] 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 (GPC)
- Contract Specialist/Contracting Officer:

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 1520  
Williston, VT 05495-1620  
ATTN: ICE-EEO/FOD-FCH

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)-289-7658

Submissions by facsimile shall include a cover sheet, point of contact and the number of total pages.  
Note: the Service Providers or Contractors Continued ...
# ORDER FOR SUPPLIES OR SERVICES

## SCHEDULE - CONTINUATION

**DATE OF ORDER:** 04/12/2016  
**CONTRACT NO.:** HSCREDM-16-F-IG148  
**ORDER NO.:** 40-03-0021

<table>
<thead>
<tr>
<th>ITEM NO.</th>
<th>SUPPLIES/SERVICES</th>
<th>QUANTITY ORDERED</th>
<th>UNIT</th>
<th>UNIT PRICE</th>
<th>AMOUNT</th>
<th>QUANTITY ACCEPTED</th>
</tr>
</thead>
</table>

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

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

   (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.

Continued...
ORDER FOR SUPPLIES OR SERVICES
SCHEDULE - CONTINUATION

<table>
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<tr>
<th>ITEM NO</th>
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- IMPORTANT: Mark all packages and papers with contract and/or order numbers.
- DATE OF ORDER: 04/12/2016
- CONTRACT NO.: 31-03-0021
- ORDER NO.: HSCEMD-16-F-IG148

(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)

(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:

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

**DATE OF ORDER:** 04/12/2016  
**CONTRACT NO.:** 31-03-T021  
**ORDER NO.:** HSCBDM-16-F-16148

**ITEM NO.** | **SUPPLIES/SERVICES** | **QUANTITY ORDERED** | **UNIT** | **UNIT PRICE** | **AMOUNT** | **QUANTITY ACCEPTED**
---|---|---|---|---|---|---
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

### (iii). 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 charges such as sack lunches and detainee wages): shall be fully supported with documentation substantiating the costs and/or reflecting the established price in the contract and shall be submitted in .pdf format.

#### a. Detention Bed Space Services

For detention bed space CLINs without a GM, the supporting documentation must include:

- 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

#### b. Transportation Services

For transportation CLINs without a GM, the supporting documentation must include:

- Mileage rate being applied for that invoice;  
- Number of miles;  
- Transportation routes provided;  
- Locations serviced;  
- Names of detainees transported;  
- Itemized listing of all other charges;  
- for reimbursable expenses (e.g. travel expenses, special meals, etc.) copies of all receipts.

Continued ...
c. Stationary Guard Services: The itemized monthly invoice shall state:

- The location where the guard services were provided,
- The employee guard names and number of hours being billed,
- The employee guard names and duration of the billing (times and dates), and
- For individual or detainee group escort services only, the name of the detainee(s) that was/were escorted.

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. meals, wages, etc.), the supporting documentation should include the name of the detainee(s) supported and the date(s) and amount(s) of support.

(iii) Firm Fixed-Price CLINs. Supporting documentation is not required for charges for FFP CLINs.

4. Safeguarding Information: As a contractor or vendor conducting business 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 include information such as: Social Security Numbers, Alien Registration Numbers (A-Numbers), or combinations of information such as the individuals name or...
### ORDER FOR SUPPLIES OR SERVICES

#### SCHEDULE - CONTINUATION

**DATE OF ORDER**: 04/12/2016  
**CONTRACT NO**: 31-03-0021  
**ORDER NO**: HSCEDM-16-F-IG248

<table>
<thead>
<tr>
<th>ITEM NO</th>
<th>SUPPLIES/SERVICES</th>
<th>QUANTITY ORDERED</th>
<th>UNIT</th>
<th>UNIT PRICE</th>
<th>AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>(d)</td>
<td>other unique identifier and full date of birth, citizenship, or immigration status.</td>
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<tr>
<td>(e)</td>
<td>As part of your obligation to safeguard information, the following precautions are required:</td>
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</table>

1. Email supporting documents containing Sensitive PII in an encrypted attachment with password sent separately to the Contracting Officer Representative assigned to the contract.

2. Never leave paper documents containing 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.

3. Use shredders when discarding paper documents containing 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: $8,200.00. The obligation for this award is shown in box 17(1).
The purpose of this modification to Task Order HSCEDE-16-F-IQ148 is to provide additional funding in the amount of $4,980.00 for detention services for ICE detainees at the Butler County Jail under the provisions of the United States Marshals Service Agreement 31-03-0021.

All other terms and conditions remain unchanged.

Continued...

Except as provided herein, all terms and conditions of the document referenced in Item 8 A or 10A, as heretofore changed, remains unchanged and in full force and effect.

15A. NAME AND TITLE OF SIGNER (Type or print)

15B. CONTRACTOR/OFFEROR

15C. DATE SIGNED

16B. UNITED STATES OF AMERICA

16C. DATE SIGNED
The total obligated amount of this task order has increased:

From: $4,980.00
To: $136,380.00

The funding provided in this task order is the amount presently available for payment and allotted to this task order. The service provider agrees to perform to the point that does not exceed the total amount currently allotted to the items funded under this task order. The service provider is not authorized to continue to work on those item(s) beyond that point. The Government will not be obligated to reimburse the service provider in excess of the amount allotted to those item(s) for performance beyond the funding allotted.

Exempt Action: Y Sensitive Award: SPT
Delivery Location Code: TCP/FRC
ICE ENFORCEMENT REMOVAL IMIGRATION AND CUSTOMS ENFORCEMENT 801 T STREET NW
WASHINGTON DC 20536

FOB: Destination
Period of Performance: 07/01/2016 to 06/30/2017

Change Item 0001 to read as follows (amount shown is the obligated amount):

<table>
<thead>
<tr>
<th>ITEM NO.</th>
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<tbody>
<tr>
<td>0001</td>
<td>DETENTION BEDSPACE</td>
<td></td>
<td></td>
<td></td>
<td>$6,980.00</td>
</tr>
</tbody>
</table>

The total funding for this CLIN is increased as follows:

From: $4,980.00
To: $136,380.00

The total quantity for this CLIN is increased as follows:

From: 2,175
To: 2,258

Accounting Info:

Continued...
<table>
<thead>
<tr>
<th>ITEM NO</th>
<th>SUPPLIES/SERVICES</th>
<th>QUANTITY (C)</th>
<th>UNIT (D)</th>
<th>UNIT PRICE (E)</th>
<th>AMOUNT (F)</th>
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<tbody>
<tr>
<td>(A)(7)(E)</td>
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<td>Accounting Info:</td>
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</tr>
<tr>
<td>(A)(7)(E)</td>
<td>funded: $0.00</td>
<td>Accounting Info:</td>
<td>(B)</td>
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<td>(A)(7)(E)</td>
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