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OPTIONAL FOR'S 347 (A.V. C.C.) Preso and by S SATAR 48 CFR 53 213(1)

PAGE NO

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IMPORTAN	T: Mark all packages and papers with contract and/or order numbers.						
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04/12/2	016 ACD-3-H-1002			H	SCEDM-16	5-F-IG141	
ITEM NO.	SUPPLIES/SERVICES	QUANTITY		UNIT PRICE		AMOUNT	
(a)	(b)	(c)	(d)	(a)		(1)	(g)
	Contract Specialist: (b)(6):(b)(7)(C)	.]					
	202-732 (b)(6): (b)(7)( or (b)(6):(b)(7)(C)						
	Contracting Officer: (b)(6):(b)(7)(C)						
	313-446 <sup>(b)(6):</sup> (b)(7)(C) or (b)(6):(b)(7)(C)						
	This is a new Task Order for detention	1					
	services for ICE detainees with the	i					
	Caldwell County. It is a continuation of						
	services from HSCEDM-15-F-IGi55 under Award						
	ACD-3-H-1002.	-					
	The authorized period of performance is						
	07/01/2015 - 06/30/2017. The funded period						
	of performance ends on 07/31/2016.	1					
		1				İ	
	Obligated funding increased as follows:	ţ					
	From: (b)(4) By: \$54,557.19 To: \$54,557.19.						
	The funding provided in this Task Order is						
	the amount presently available for payment						
	and allotted to the award. The service						•
	provider agrees to perform to the point						
	that service does not exceed the total	1					
	amount currently allotted to the items						
	funded under the Task Order. The service	1					
	provider is not authorized to continue to		1				
	work on those item(s) beyond that point.						
	The Government will not be obligated to	1					
	reimburse the service provider in excess of the amount allotted to those item(s) for						
	performance beyond the funding allotted.						
	Exempt Action: Y	ł					
	Accounting Info:	ļ					
	Accounting into.	4					
	(b)(4)						
	Period of Performance: 07/01/2016 to	ť				ļ	
	06/30/2017						
						l	
0001	Detention Services			(b)(4)		54,557.19	
	Obligated funding increased as follows:						
	From (b)(4)						
	By: \$54,557.19						
	To: \$54,557.19	1					
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\$54,557.19 OPTIONAL FORM 348 (Sec. 2) Prescribed by GSA FAR (48 CFR) 53.213(f)

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

CONTRACTING

DATE OF ORDER

PAGE NO

3

ORDER NO. 04/12/2016 ACD-3-H-1002 HSCEDM-16-F-IG141 ITEM NO. SUPPLIES/SERVICES QUANTITY UNIT UNIT AMOUNT QUANTITY ORDERED PRICE (e) ACCEPTED ٢b١ {C} (d) **(e)** £D. (g) Quantity increased as follows: From: 0 By: 827 To: 827 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 [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 (GPOC) 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 1620 Williston, VT 05495-1620 ATTN: ICE-ERO/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 Continued ... TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17(H)) \$0.00 AUTHORIZED FOR LOCAL REPODUCTION

#### IMPORTANT: Mark all packages and papers with contract and/or order numbers. DATE OF ORDER CONTRACT NO. 04/12/2016 ACD-3-H-1002

PAGE NO

ORDER NO. HSCEDM-16-F-IG141

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NO.	SUPPLIES/SERVICES	DUANTITY,	UNIT	UNIT	AMOUNT	
)	(b)	ORDERED		PRICE	AMOONI	QUANTE ACCEPT
	(b) submitted to ensure prompt payment	(C)	(d)	(e)	(f)	(g)
	Drowisions are mate The ION much					
[	provisions are met. The ICE program office					
	identified in the task order/contract shall	1	[			
	also be notated on every invoice.					
]		1				
	c) Facsimile:					
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ľ	Alternative Invoices shall be submitted to:					[
	(802)-288-7658					
1						1
1	Submissions by facsimile shall include a					l
· · · · · ·	cover sheet, point of contact and the					
	number of total pages.					
ի	Note: the Service Providers or Contractors					ļ
1	Dunn and Bradstreet (D&B) DUNS Number must					
i	be registered in the System for Award					
h	Management (SAM) at https://www.sam.gov					
L L	prior to award and shall be notated on					
i e	every invoice submitted to ensure prompt		1			
	payment provisions are met. The ICE program	1				
F	office identified in the task					
			[			
	order/contract shall also be notated on					
E I	every invoice.					
_ [ <sup>2</sup>	. Content of Invoices: Each invoice shall					
C IC	contain the following information in	!				
	ccordance with 52.212-4 (g), as		[			
a	pplicable:	1				
	i). Name and address of the Service					
P	rovider/Contractor. Note: the name,		1	1		
a	ddress and DUNS number on the invoice MUST					
	atch the information in both the					
- [C	ontract/Agreement and the information in			1		
t	he SAM. If payment is remitted to another					
e	ntity, the name, address and DUNS			[		
i	nformation of that entity must also be				ļ	
q	rovided which will require Government					
v	erification before payment can be	[			l l	
	rocessed;				ļ	
ľ	·					
	ii). Dunn and Bradstreet (D&B) DUNS Number;	[		1		
ļ					ł	
()	iii). Invoice date and invoice number;					
				[		
10	iv). Agreement/Contract number, contract	1			ĺ	
Co	ontinued					
1	ļ			i i		
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1				r		

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MPORTANT: M	rk all packages and papers with contract and/or order numbers
DATE DF DROER	CONTRACT ND.
04/12/2016	CONTRACT ND. ACD-3-H-1002

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DATE DF DR	DER CONTRACT ND.					DER NO.	<u> </u>
04/12/2	016 ACD-3-H-1002					CEDM-16-F-IG141	
ITEM ND	SUPPLIES/SERVICES	QUANTITY		-	JNIT	AMOUNT	QUANTITY
(a)	(b)	DRDERED (C)	(d)		RIČE (8)	ტ	ACCEPTED
	<pre>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;</pre>				(0)		(g)
	<pre>(vii). Terms of any discount for prompt payment offered;</pre>						
	(viii). Remit to Address;			ľ			
	(ix). Name, title, and phone number of person to resolve invoicing issues;						
	(x). ICE program office designated on order/contract/agreement and						
	<pre>(xi). Mark involce as "Interim" (Dngoing performance and additional billing expected) and "Final" (performance complete and no additional billing)</pre>						
5	(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 - Dther than System for Award Management.						
2 2 2	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 Continued			I			

PAGE NO

#### 6 IMPORTANT: Mark all packages and papers with contract and/or order numbers. DATE OF ORDER CONTRACT NO. ORDER NO. ACD-3-H-1002 D4/12/2016 HSCEDM-16-F-IG141 ITEM NO SUPPLIES/SERVICES QUANTITY UNIT UNIT AMOUNT QUANTITY OROERED PRICE ACCEPTED (a) (b) (d) (C) (0) (f) (g) minimums are exceeded and when allowable costs are incurred. Details are as follows: (i). Suaranteed 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 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

Continued ...

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### IMPORTANT: Mark all packages and papers with contract and/or order numbers. DATE OF ORDER CONTRACT ND. 04/12/2016 ACD-3-H-1002

PAGE NO

	ORDER HSCE	NO. DM-16-F-IG141	
UNIT		AMOUNT	OUAN

M NO.	SUPPLIES/SERVICES	QUANTITY		UNIT	AMOUNT	OUANTIT
a)	(b)	DRDEREO (c)	(d)	PRICE (9)		ACCEPTE
	b. Transportation Services: For		/		(f)	(g)
	transportation CLINs without a GM, the				1	1
	supporting documentation must include:					
	<ul> <li>Mileage rate being applied for that</li> </ul>		1			
	invoice;					
	<ul> <li>Number of miles;</li> </ul>					
	• Transportation routes provided;					
	• Locations serviced;					
	• Names of detainees transported;					
	<ul> <li>Itemized listing of all other charges;</li> </ul>					
	and,	1				
	• for reimbursable expenses (e.g. travel					
	expenses, special meals, etc.} copies of all receipts.	!				
	air receipts.					
	c. Stationary Guard Services: The itemized	ί Ι				
	monthly invoice shall state:					
		1				
	<ul> <li>The location where the guard services</li> </ul>	1				
	were provided,				1	
	<ul> <li>The employee guard names and number of</li> </ul>				-	
	hours being billed,				1	
	<ul> <li>The employee guard names and duration of</li> </ul>	[ ]				
	the billing (times and dates), and	] [				
	<ul> <li>for individual or detainee group escort</li> </ul>				i í	
	services only, the name of the detainee(s)	F I				
	that was/were escorted.					
	d. Other Direct Charges (e.g. VTC support,					
ł	transportation meals/sack lunches,					
	volunteer detainee wages, etc.):					
	decaince wages, etc.,.					
1	1) The invoice shall include appropriate	1 I	1			
	supporting documentation for any direct					
1	charge billed for reimbursement. For		[			
-	charges for detainee support items (e.g.			i	í í	
	meals, wages, etc.), the supporting					
	documentation should include the name of					
	the detaince(s) supported and the date(s)					
ľ	and amount(s) of support.				l l	
	(111) Firm Fixed-Price CLINs. Supporting documentation is not required for charges					
	for FFP CLINS.					
ľ	LOL CIT OMINO,					
	Continued					
					Í	
		- I				
- 1						

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# SCHEDULE - CONTINUATION 8 IMPORTANT: Mark all packages and papers with contract and/or order numbers. 8

-	D16 ACD-3-H-1002			HSCE	2DM-16-F-IG141	
M NO.	SUPPLIES/SERVICES	QUANTITY		UNIT	AMDUNT	
(a)	(b)	(C)	(d)	(e)	(f)	(9)
	4. Safeguarding Information: As a					
	contractor or vender conducting business					
	with Immigration and Customs Enforcement	ŀ	1 1			
	(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		4			
	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					
	other unique identifier and full date of					
	birth, citizenship, or immigration status.					
1						
	As part of your obligation to safeguard					
	information, the follow precautions are required:					
	redutted.					
	(i) Email supporting documents containing					
	Sensitive PII in an encrypted attachment					
	with password sent separately to the					
	Contracting Officer Representative assigned					
	to the contract.				:	
	(ii) 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.		i			
				i		
	(iii) Use shredders when discarding paper		1			
6	documents containing Sensitive PII.					
	(iv) Refer to the DHS Handbook for		ſ			
	Safeguarding Sensitive Personally					
	Identifiable Information (March 2012) found					
	at					
	nttp://www.dhs.gov/xlibrary/assets/privacy/d	[				
	ns-privacy-safeguardingsensitivepiihandbook-					
J,	march2012.pdf for more information on	1	ļ		1	
į	and/or examples of Sensitive PII.					
	Continued					
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	SCHEDULE - CONTINUATIO	DN			9	
IMPORTANT	T: Mark all packages and papars with contract and/or order numbers					
DATE OF ORD	DER CONTRACT NO				ORDER NO.	
04/12/20	016 ACD-3-H-1002				HSCEDM-16 F-IG141	
TEM NO.	SUPPLIES/SERVICES	QUANTITY	1 1	UNIT	AMOUNT	QUANTITY
(a)	(b)	ORDERED (C)	(d)	PRICE (0)	Ø	ACCEPTED (g)
	5. Invoice Inquiries. If you have question regarding payment, please contact ICE Financial Operations at 1-877-491-6521 or by e-mail at OCFG.CustomerService@ice.dhs.gov. The total amount of award: \$54,557.19. The obligation for this award is shown in box 17(i).					

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In the Colone of the Contract Section of the Contract				(X)			
CODE 28 / 2021  ENGSTON MC 64 65 09 171  ENGSTON MC 64 65 09 171  ACCO-37-0 COLTARY CODE  (24 / 22 / 2016		- +		h			<u></u>
BC 14 MACIN ENGSTON MC 64 65 091/1 MC MG FRANCUS AND		JUNI OF			B. DATED (SEE TIEM TI)		
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UNS Number:       053367207         OR:       (b)(6)(b)(7)(C)         (b)(6)(b)(7)(C)       312-347         (b)(6)(b)(7)(C)       312-347         (b)(6)(b)(7)(C)       312-347         (b)(6)(b)(7)(C)       312-347         (b)(6)(b)(7)(C)       312-347         (b)(6)(b)(7)(C)       312-347         (b)(6)(b)(7)(C)       202-732         (b)(6)(b)(7)(C)       16C. DATE SIGNED         (b)(6)(b)(7)(C)       16							
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(b)(6):(b)(7)(C) ASST Admin 15C. DATE SIGNED (b)(6):(b)(7)(C) (Signature of persor, authorized to sign) SN 7540-01-152-8370 STANDARD FORM 3C (REV. 1C-83)		ti		16A	NAME AND TITLE OF CONTRACTING OFFIC	ULI TOPOE and effe	a.
(b)(6):(b)(7)(C) (Signature of person authorized to sign) ISN 7540-01-152-8370 STANDARD FORM 3C (REV. 10-83)	(b)(6):(b)(7)(C	⊷ آ د	ct Al ·			ייביג אינעיין ארבי 	14
(b)(6):(b)(7)(C)	· · · · · · · · · · · · · · · · · · ·	115	» Hanun	)			, j
(Signature of person authorized to sign) SN 7540-01-152-8370 STANDARD FORM 3C (REV! 10-83)			15C, DATE SIGNED		(b)(6):(b)(7)(C)	T	6C. DATE SIGNED
SN 7540-01-152-8070 STANDARD FORM 3C (REV. 10-83)							salada.
	· · · · · · · · · · · · · · · · · · ·	authorized to sign)	<u>I</u>				- alla la de
Prescribed by GSA							
FAR (48 OFR) 53,243						•	

	REFERENCE NO. OF DOCUMENT BEING CONTINUED
CONTINUATION SHEET	ACD-3-H-1CC2/HSCEDM-16-F-IG141/PCCC07
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2

NAME OF OFFERDR OR CONTRACTOR CALDWELL COUNTY OF

1 NO 1)	SUPPLIES/SERVICES (B)	QUANTEY (C)	UNIT (D)	UNIT PRICE ( (E)	AMOUNT (E)
•1				(E)	( <i>z</i> )
		<u>ic</u>			
	(b)(6):(b)(7)(C)	1			
	The purpose of this modification is to:				
		Ì			
	1) Incorporate the following non-disclosure	i i			
	provision regarding detention services for ICE	İ			
	detainees into ISSA number ACD-3-H-1002:				
	"There shall be no public disclosures regarding				
	this agreement made by the Provider (or any				
	subcontractors) without review and approval of				
	such disclosure by ICE", and;				
	2) Provide additional funding in the amount of				
	\$67,487.31 for Detention Services for ICE				
	detainees at Caldwell County Sheriff's Office				
	under the provisions of Intergovernmental SErvice Agreement (IGSA) ACD-3-H-1002.				
	ingreement (room, nob o in rooz.				
	All other terms and conditions remain unchanged.				
	The total obligated amount of this task order has				
	increased as follows:				
	From: (b)(4)				
	By: \$ 67,487.31				
	To: \$456,220.76				
	The funding provided in this Task Order is the				
	amount presently evailable for peyment and				
	allotted to the award. The service provider				
	agrees to perform to the point that service does				
	not exceed the total amount currently allotted to				
	the items funded under the Task Order. The				
	service provider is not authorized to continue to				
	work on those item(s) beyond that point. The			ł	
	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 cilettad				
	funding allotted.				
				1	
	Exempt Action: Y Sensitive Award: SPII				
	Delivery Location Code: ICE/ERC				
	ICE ENFORCEMENT REMOVAL				
	IMMIGRATION AND CUSTOMS ENFORCEMENT				
	801 C STREET NW				
	(b)(6):(b)(7)(C) WASHINGTON DC 20536				
	Continued				

CONTINUATION SHEET ACD-3-H-1002/HSCEDM-16-F-IG141/F00007	4

NAME OF OFFEROR OR CONTRACTOR CALDWELL COUNTY OF

ITEM NO.	SUPPLIES/SERVICES	QUANTITY			AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	FOB: Destination	ſ			
	Period of Performance: 07/01/2016 to 06/30/2017				
	Charge Item 2021 to year as faileur (trough shows				
	Change Item 0001 to read as follows(amount shown is the obligated amount):		{		
					Ĺ
0001	Detention Services		<u> </u>	(b)(4)	67,487.31
	The total funding on this CLIN is increased as				
	follows: From: (b)(4)				
	From: (b)(4) Ey: \$67,487.31				
	To: \$455,720.76				
	The total quantity on this CLIN is increased as				
	follows:				
	From: 5,885				
	By: 1,023 To: 6,908				
	Accounting Info:	[ ]			
	(b)(4)				
	Funded: \$0.00	ł			
	Accounting Info:	l			
	(b)(4)				
	Funded: \$0.00	ſ			
	Accounting Info:				
	(b)(4)				
	Funded: SC.00	ļ			
	Accounting Info:	1			
	(b)(4)				
	Funded: \$0.00				
	Accounting Info:				
	(b)(4)			:	
		i			
	Funded: \$0.00 Accounting Info:				
ſ					
	(b)(4)				
L	Continued				

CONTIN	UATION SHEET REFERENCE NO OF DOCUMENT BEING CONTINUED ACD-3-X-1002/HSCEDM-16-F-3G141/P00007				PAGE OF
NAME OF OFF	FEROR OR CONTRACTOR				<b>III</b>
TEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	YUNIT (D)	UNIT PRICE	AMOUNT ( 2)
	Funded: \$0.00			(2,	(2)
	Accounting Info:	ן ר			
	(b)(4)			1	
	Funded: \$0.00 Accounting Info:				
	(b)(4)				
	Funded: (b)(4)	Ť			
	All other terms and conditions remain the same.				
				E Contraction of the second se	
				(	