INTER-GOVERNMENTAL SERVICE AGREMENT

CITY OF ELOY, ARIZONA

This Inter-Governmental Service Agreement (IGSA) is for Detention Services to be provided to United States Immigration and Customs Enforcement, hereinafter referred to as "ICE", for the detention and care of aliens (thereafter referred to as "DETAINEES").

FACILITY LOCATION:

The PROVIDER shall provide detention services for detainces at the following institution:

Eloy Detention Center 1705 East Hanna Road Eloy, Arizona 85231

PERFORMANCE:

The PROVIDER is required to house ICE detainees, to perform in accordance with the most current editions of ICE Detention Requirements. American Correctional Association (ACA) Standards for Adult Local Detention Facilities (ALDF), and Standards Supplement, Standards for Health Services in Jails, latest edition, National Commission on Correctional Health Care (NCCIIC). Some ACA standards are augmented by ICE policy and/or procedure. In cases where other standards conflict with DHS/ICE Policy or Standards, DHS/ICE Policy and Standards prevail. ICE Inspectors will conduct periodic inspections of the facility to assure compliance of the aforementioned standards.

The PROVIDER shall maintain continual compliance with ACA accreditation standards during performance of this agreement.

The PROVIDER shall be responsible for all costs associated with obtaining and maintaining full accreditation by ACA.

PERIOD OF PERFORMANCE:

This Agreement shall become effective upon the date of final signature by ICE and the PROVIDER and shall remain in effect indefinitely unless terminated in writing, by either party. Either party must provide written intentions to terminate the agreement, 120 days in advance of the effective date of formal termination.

PAYMENT RATE

|--|--|

In consideration for the PROVIDER'S performance under the Terms and Conditions of this Agreement, ICE shall make payment to the PROVIDER for each detained accepted and housed by the PROVIDER. The rate is the per diem rate for the support of one Detained per day and shall include the day of arrival but not the day of departure.

The PROVIDER shall not charge for costs, which are not directly related to the housing and detention of detainees. Such costs include, but are not limited to:

- A) Salaries of elected officials.
- [3] Salaries of employees not directly engaged in the housing and detention of detainees.
- C) Indirect costs in which a percentage of all local government costs are pro-rated and applied to individual departments.
- D) Detained services which are not provided to, or cannot be used by detaineds.
- (E) Operating costs of facilities not utilized by detainees.
- F) Interest on borrowing (however represented), bond discounts, cost(s) of financing/refinancing, and legal or professional fees.

This agreement in no way obligates Immigration and Customs Enforcement to any minimum population guarantee.

MODIFICATION:

This Agreement, or any of its specific provisions, may be revised or modified by signatory concurrence of the undersigned parties, or their respective official successors.

TRANSPORTATION SERVICES:

- 1. The PROVIDER shall provide all ground transportation services as may be required to transport detainees securely, in a timely manner, to off-site medical providers.

 Transportation mileage reimbursable rates will be commensurate with current applicable federal travel allowance rates. When officers are not providing transportation services the PROVIDER shall assign the employees to supplement security duties within the facility or on-call duties to assist ICE as directed by the COTR or designated ICE official. However, the primary function of these officers is transportation. On-call duties as directed by the COTR utilizing these officers shall not incur any additional expense to the government.
- The PROVIDER personnel provided for the above services shall be of the same qualifications, receive the same training, complete the same security clearences, and wear the same uniforms as those PROVIDER personnel are provided for in

the other areas of this agreement.

- During all transportation activities, at least one officer shall be the same sex as the
 detainee(s). Questions concerning guard assignments shall be directed to the
 COTR for final determination.
- 4. The PROVIDER shall, upon order of the COTR, or upon his own decision in an argent medical situation, transport a detained to a hospital location. An officer, or officers, shall keep the detained under constant supervision 24 hours per day until the detained is ordered released from the hospital, or at the order of the COTR. The PROVIDER shall then transport the detained to the detention site.
- 5. When the COTR provides documents to the PROVIDER concerning the detainee(s) to be transported and/or escented, the PROVIDER shall deliver these documents only to the named authorized recipients. The PROVIDER shall ensure the material is kept confidential and not viewed by any person other than the authorized recipient.
- 6. The PROVIDER shall establish a communications system that has direct and immediate contact with all transportation vehicles and post assignments. Upon demand, the COTR shall be provided with current status of all vehicles and post assignment employees.

GUARD SERVICES:

The PROVIDER agrees to provide stationary guard services as requested or required for detainees who are committed to, or require, medical services beyond the secure perimeter of the facility. Qualified law enforcement or correctional officer personnel employed by the PROVIDER under their policies, procedure and practices will perform such services. The PROVIDER agrees to augment such practices as may be requested by ICE to enhance specific requirements for security, detained monitoring, visitation, and contraband control. Reimbursement for these stationary guard services is not separately priced and is included in the per diem rate.

MEDICAL SERVICES:

In the event of an emergency, the PROVIDER shall proceed immediately with necessary medical treatment. In such event, the PROVIDER shall notify ICE immediately regarding the nature of the transferred detainee's illness or injury and type of treatment provided.

The PROVIDER agrees to accept and provide for the secure custody, care, and safekeeping of detainees in accordance with the State, and local laws, standards, policies, procedures, or court orders applicable to the operations of the facility.

The PROVIDER agrees to provide ICE detainees with the level of medical care and services as appropriate as part of the per diem rate. This rate includes but is not limited to:

- On-site sick call, inedical appointments/services;
- Medication (over the counter/non-legend and routine drugs and medical supplies);
- Excert/security services for transport to/from emergency or non-emergency health care services as either an in-patient or outpatient.

When specifically requested by ICE, the PROVIDER agrees to strange for and/or provide non-emergency ambulance transportation service to transport detainees from one off-site medical care facility to another. ICE agrees to provide reimbursement, over and above the per diem rate, to the PROVIDER for such ambulance transportation services when the costs are included with the regular monthly billing for detention services.

The PROVIDER agrees to cover all outside medical costs up to \$3,000.00 per event associated with hospital or health care services specifically provided to any detainer.

The PROVIDER shall also notify the designated contact person at the local ICE office, when any reimbursable medical care is provided to a detainer, in accordance with procedures to be established and mutually agreed upon. Notification must be made in advance of treatment other than in emergency situations,

RECEIPT AND DISCHARGE OF FEDERAL DETAINEES:

The PROVIDER agrees to receive and discharge Federal detaineds only from and to properly identified law enforcement officers and with prior authorization. Admission and discharge of Federal detaineds shall be fully consistent with PROVIDER policies and procedures.

ICE detainees shall not be released from the facility into the custody of other Federal, state, or local officials for any reason, except for medical or emergency situations, without express authorization of ICE.

INSPECTION:

The FROVIDER agrees to allow periodic inspections of the facility by ICE inspectors. Findings will be shared with facility administrators in order to promote improvements to facility operations or conditions of detainment,

PER DIEM RATE AND ECONOMIC PRICE ADJUSTMENT

The per diem rate shall be <u>\$68.45</u> and may not be adjusted prior to September 30, 200?. Thereafter, the per diem rate shall be subject to adjustment based on the actual and allowable costs associated with the operation of the facility. When a rate increase is desired, the Local Government shall submit a written request to Immigration and Customs Enforcement at least sixty (60) days prior to the desired effective date of the rate adjustment. All such requests must contain a detailed cost proposal to substantiate the desired rate increase. 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 by Immigration and Customs

Enforcement. The rate may be renegotiated not more than once per year.

Criteria used to evaluate the increase or decrease in the per diem rate shall be those specified in the Office of Management and Budget (OMB) Circular A-87, Cost Principles for State, Local, and Indian Tribal Governments.

The effective date of the rate modification will be negotiated and specified in a modification to this IGSA, which is approved by the ICE 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 Government official to ICE.

BILLING PROCEDURE:

- (A) <u>Invoices</u> Invoices shall itemize each detained by name, register number, dates of stay, and appropriate detained day rate. Billing shall be based upon the actual number of detained days used.
- (B) Invoices Submission

U.S. Immigration and Customs Enforcement Phoenix Field District Office 2035 North Central Ave Phoenix, Arizona 85004 (602) 379-3426

(C) Payment - Payments will be made to the PROVIDER after receipt of a complete invoice, which shall contain a remittance address. All transfer(s) will be accomplished through Electronic Funds Transfer (EFT) on a monthly basis. The Prompt Payment Act shall apply.

IN WITNESS WHEREOF, the undersigned, duly authorized officers, have subscribed their names on behalf of the City of Eloy, Arizona and U.S. Immigration and Customs Enforcement.

ACCEPTED:

U.S. Immigration and Customs Enforcement

Page 5 of 6 Pages

CITY OF ELOY, ARIZONA

DROIGSA-06-0002

City of Eloy, Artizona

Date:_

02/13/00

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ORDER F SUPPLIES OR SERVICES SCHLDULE - CONTINUATION



PAGE OF PAGES

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IMPORTANT: Mark all packages and papers with contract and/or order numbers ORDER NO. CONTRACT NO. DATE OF ORDER HSCEOP06FIG00002 02/28/2006 DROIGSA-06-0002 QUANTITY AMOUNT UNIT QUANTITY UNIT SUPPLIES/SERVICES ACCEPTED ITEM NO. ORDERED PRICE (E) (D) (F) (A) following services: 1. Provide detention services in accordance with the attached IGSA, incluing housing, guards, transportation, and medical support services for the period March 1, 2006 through September 30, 2006 at the Eloy Detention Center located at 1705 Hanna Road, Eloy, Arizona, 85231. 2. Funding is provided for these services in the amount of \$14,648,300.00. 3. The total amount of funding obligated under this task order is \$14,648,300.00. 4. The ICE/DRO POC is John Crowther (520) 466-2000. 5. The ICE Office of Acquisition Management POC is Anthony Gomez (202) 307-6108. ALL OTHER TERMS OF IGSA #DROIGSA-06-0002 REMAIN UNCHANGED. 214000 EA 68.45 DETENTION SERVICES 0001 14,648,300.00 1,000 MONDAYS PER DAY FOR 214 DAYS. Total amount of award: \$14,648,300.00. The obligation for this award is shown in box 17(i).

Form G-514

REQUISITION - MATERIALS-SUPPLIES-EQUIPMENT Activity Symbols ATTACHMENT A

REQUISITION NUMBER:

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\$68.				

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PER DIEM RATE AND ECONOMIC PRICE ADJUSTMENT

The per diem rate shall be \$68.45 and may not be adjusted prior to September 30, 2007. Thereafter, the per diem rate shall be subject to adjustment based on the actual and allowable costs associated with the operation of the facility. When a rate increase is desired, the Local Government shall submit a written request to Immigration and Customs Enforcement at least sixty (60) days prior to the desired effective date of the rate adjustment. All such requests must contain a detailed cost proposal to substantiate the desired rate increase. 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 by Immigration and Customs

Enforcement. The rate may be renegotiated not more than once per year.

Criteria used to evaluate the increase or decrease in the per diem rate shall be those specified in the Office of Management and Budget (OMB) Circular A-87, Cost Principles for State, Local, and Indian Tribal Governments.

The effective date of the rate modification will be negotiated and specified in a modification to this IGSA, which is approved by the ICE 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 Government official to ICE.

BILLING PROCEDURE:

- (A) <u>Invoices</u> Invoices shall itemize each detainee by name, register number, dates of stay, and appropriate detainee-day rate. Billing shall be based upon the actual number of detainee days used.
- (B) <u>Invoices Submission</u>

U.S. Immigration and Customs Enforcement Phoenix Field District Office 2035 North Central Ave Phoenix, Arizona 85004 (602) 379-3426

(C) Payment - Payments will be made to the **PROVIDER** after receipt of a complete invoice, which shall contain a remittance address. All transfer(s) will be accomplished through Electronic Funds Transfer (EFT) on a monthly basis. The Prompt Payment Act shall apply.

<u>IN WITNESS WHEREOF</u>, the undersigned, duly authorized officers, have subscribed their names on behalf of the City of Eloy, Arizona and U.S. Immigration and Customs Enforcement.

ACCEPTED:
U.S. Immigration and Customs Enforcement
By:
Date:

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ACCEPTED:

U.S. Immigration and Customs Enforcement

By: V. Ww. Date: 2/17/06

Page 5 of 6 Pages

City of Eloy, Arizona

By:___

Date: 02 (14 66



Damon T. Hininger Vice President, Federal Customer Relations

January 23, 2007

Via Electronic and Regular Mail

Mr. Timothy Perry
Deputy Assistant Director
Detention Operations
Detention and Removal Operations
Immigration and Customs Enforcement
801 "I" Street, N.W.
Washington, DC 20536

RE: INTERGOVERNMENTAL SERVICE AGREEMENT NO. DROIGSA-06-0002 ELOY DETENTION CENTER

Dear Mr. Perry:

Due to the impending transfer of medical services from Corrections Corporation of America (CCA) to the United States Public Health Service (PHS) at our Eloy Detention Center in Eloy, Arizona, we are proposing a reduced per diem amount.

The current per diem of \$68.45 will be reduced by \$3.98. Therefore, subject to ICE's approval, the new per diem amount at Eloy will be \$64.47 effective February 1, 2007, contingent, of course, upon all medical operations having been transferred to PHS by that date.

Please call me at your convenience a below to discuss this matter further. In the meantime, CCA is looking forward to a smooth transition of medical services at Eloy.

Sincerely.

Damon T. Hininger, Vice President Federal Local Customer Relations

DTH:s

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FINANCE

PAGE 03/07

05/03/2007 06:12

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ICE PROCUREMENT

PAGE 02/06

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16A NAME AND TITLE OF CONTRACTING OFFICER (Type of print) 16C. DATE SIGNED (Signatural) NSM 7540-08-182-8070 Previous adition unusable

STANDARD FORM 30 (REV. 10-83) Prescribed by GSA FAR (48 CFR) 53.243

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	referenced IGSA is changed as follows:		- 1	1	
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	MEDICAL SERVICES:	1	- [
	In the even of an emergency, the PROVIDER shall	ļ	- 1		
	proceed immediately with necessary medical	1			
	treatment. In such event, the PROVIDER shall	1			
	notify ICE immediately regarding the nature of				
	the transferred detainee; illness or injury and		- 1		
	type of treatment provided.		•		
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	The PROVIDER agrees to accept and provide for th	a	- 1		,
	secure custody, care and safekeeping of detained	s	ĺ		
	in accordance with the State and local laws,	1.	- 1	i	
	standards, policies, procedure, or court orders		-	· [
	applicable to the operations of the facility.	- 1			
•	The FROVIDER agrees to provide ICE detainees wit	h			
	the level of medical care and services as	1	Ì		
	appropriate as part of the per diem rate. This	1].		
	rate includes but is not limited to:				
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ICE PROCUREMENT

REFERENCE NO. OF DOCUMENT BEING CONTINUED 5 3 DROIGSA-06-0002/HSCEOP06FIG00002/P00004 CONTINUATION SHEET NAME OF OFFEROR OR CONTRACTOR ELOY CITY OF MUQUNT UNIT PRICE QUANTITY UNIT SUPPLIES/SERVICES (F) ITEM NO. (正) (D) (C) (B) (A) routine drugs and medical supplies); Escort/Security services for transport to/from emergency or non-emergency health care services as either an in-patient or out patient. When specifically requested by ICE the FROVIDER agrees to arrange for and /or provide non-emergency ambulance transportation services to transport from one off-site medical care facility to another. ICE agrees to provide reimbursement, over and above the per diem rate, to the PROVIDER for such ambulance transportation services when the costs are included with the regular monthly billing for detention services. The PROVIDER agrees to cover all outside medical costs up to \$3,000.00 per event associated with hospital care services specifically provided to any detainee. The PROVIDER shall also notify the designated contact person at the local ICE offices, when any reimbursable medical care is provided to a detainee, in accordance with procedures to be established and mutually agreed upon. Notification must be made in advance of treatment other than in emergency situation. Replace with: MEDICAL SERVICES: The U. S. Public Health Services (USPHS) will be responsible for providing all health care services provided under contract for detained aliens in the custody of ICE. The USPHS shall provide medical coverage at the facility no less than twenty-four (24) hours per day, seven (7) days per week. The contractor shall provide security with a minimum of a staff of one at all times. When patients are housed in the infirmary, a security guard shall be posted to the unit 24 hours a day, seven days a week. The contractor shall coordinate and escort detainees to the medical clinic for sick call, appointments and pill line. Note: Optimum functioning of health services depends on a continuous flow of patients to and Continued ...

PAGE DEFFRENCE NO. OF DOCUMENT BEING CONTINUED 5 DROIGSA-06-0002/#SCEOP06F1600002/200004 CONTINUATION SHEET NAME OF OFFEROR OR CONTRACTOR AMOUNT ELOY CITY OF UNIT PRICE DUANTITY UNIT SUPPLIES/SERVICES (F) (E) (D) ITEM NO. (C) mi (A) from the clinic with an average of one patient per provider every 10 minutes. Throughput for a clinic of this size could be as high as 200+ patients per day. Escort personnel will have to be assigned accordingly. The contractor shall provide the detainess written instructions for gaining access to health care services. Procedures shall be explained to all detainees in the detainees' native language, and orally to detainees' who are unable to read. The detainse shall similarly be provided instructions and assistance in personal hygiena, dental hygiene, grooming and health care. It shall be made routinely available. The USPHS shall provide for medical screening upon arrival at the facility performed by health care personnel or health trained personnel. When communicable or debilitating physical problems are suspected, the detainee shall be separated from the detained population, and immediately notify USPHS staff. Behavioral problems (detainee who is not diagnosed as psychotic) and suicide observation will be the responsibility of the contractor. Written policy and defined procedure shall require that detainee's written health complaints are solicited and delivered to the medical facility for appropriate follow-up. Written policy and defined procedure shall require that health care complaints are responded to and that sick call, conducted by USPHS personnel is available to detainees daily. If a detainee's custody status precludes attendance at sick call, arrangements are made to provide sick call services in the place of the detainee's detention. A minimum of one sick call shall be conducted daily. USPHS reserves the right to conduct triage and sick call in the place of the detaince's detention. The USPHS shall provide to the contractor and maintain basic first aid kits. First aid kits shall be available at all times and shall be located throughout the facility, as necessary, to allow quick access.

Continued ...

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15204663760 2026162414 FINANCE ICE PROCUREMENT PAGE 07/07 PAGE 06/06

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ecference NO. OF DOCUMENT BEING CONTINUED 5 5 DROIGSA-06-0002/HSCEOPDEF1GD0002/F00004 CONTINUATION SHEET NAME OF OFFEROR OR CONTRACTOR AMOUNT ETOA CLAA OL UNIT PRICE QUANTITY UNIT SUPPLIES/SERVICES (F) (E) (D) ITEM NO. (C) (B) (A) Accounting Info: DECREASE \$281,036.00 Funded: \$0.00 64.47 Provide additional 1,500 beds for detention \$61518 LO 0006 3,307,065,46 services at Eloy Detention Facility, Eloy, Arizona The daily rate is \$64.47 for the period of February 1, 2007 through September 30, 2007. Not To Exceed of \$23, 307,065.46 All other terms and conditions remain the same Accounting Info: Funded: \$23,307,065.46 OPTIONAL FORM 338 (4-89) Spansored by GSA FAR (46 OFR) 53.110 NSN 7640-01-152-8067

AMENDM	IENT OF SOLICITATION/MODIFIC	ATION OF CONTRACT		1. CONTRACT ID CODE	PAGE OF PAGES
2. AMENDM	ENT/MODIFICATION NO.	3. EFFECTIVE DATE		QUISITION/PURCHASE REQ. NO.	5. PROJECT NO. (If applicable)
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6. ISSUED E	CODE	ICE/DM/DI	7. AD	MINISTERED BY (if other than Item 6)	CODE ICE/DM/DI
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	D. OTHER (Specify type of modification	and authority)			
E. IMPORTAN	IT: Contractor X is not.	is required to sign this document a	nd return	0 copies to the issuing	i office
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		document referenced in Item 9A or 1F	A, as her	etofore changed, remains unchanged and in	full force and effect
15A. NAME A	ND TITLE OF SIGNER (Type or print)	To street at Roll of U. T.		IAME AND TITLE OF CONTRACTING OFF	
1 2 5 7			Sus	an D. Erickson	
: ::::::::::::::::::::::::::::::::::::	ACTOR/OFFEROR	15C, DATE SIGNED	16B, L	INITED STATES OF AMERICA () NUC	(ACM) 16C DATE SIGNED
NSN 7540-01-	(Signature of person authorized to sign). 152-8070			(Signature of Contracting Officer)	STANDARD FORM 30 (REV. 10.42)

Prescribed by GSA FAR (48 CFR) 53.243

	REFERENCE NO. OF Du			
CONTINUATION SHEET				
	DROIGSA-06-0002			

NAME OF OFFEROR OR CONTRACTOR
CITY OF ELOY

ITEM NO.	SUPPLIES/SERVICES	QUANTITY	1160	UNIT PRICE	AMOUNT
(A)	· · · · · · · · · · · · · · · · · · ·		(D)	ONIT PRICE	AMOUNT (F)
	Discount Terms:		agal y y		
	b2Low				
	Delivery Location Code: AZ6463				
1.3	Department of Homeland Security		und haar Andreas		
	Immigration & Customs Enforcement 2035 N. CENTRAL AVENUE				
	Attn: Letitia Claridge or				
	Alt. POC: Laura Quezada		-1 -471		
	PHOENIX AZ 85004				
	Accounting Info:				
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in a	FOB: Destination				
	Period of Performance: 10/01/2007 to 09/30/2008				
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	Add Item 0001A as follows:				
0001A	Alien Adult Detention for housing and care of	70500	UΛ	64.47	4,545,135.00
	person detained	10300	L#	04.4/	4,343,135.00
	1,500 beds authorized				
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C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF	
C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF	office;
D OTHER 10 10 III III III	
D. OTHER (Specify type of modification and authority):	
E. IMPORTANT: Contractor Is is not. If is required to sign this document and return0_copies to the issuing office.	
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)	<u> 회약하면 : 발표학하면 최 (1, 1, 1, 1)</u> 역 (2, 14) (1, 1, 1)
OUNS Number: 002513422	•
he purpose of this modification is as follows:	en e
Provide funding to continue detention services for 1500 beds in the amount	tof
2,707,740.00 for the period October 1, 2007 through September 30, 2008.	
elivery: 09/30/2008	
그는 그는 사람들이 하는 그는 그는 그는 그는 그는 그는 사람들이 되었다면 하는 사람들이 생각하는 사람들이 살아 사람들이 살아 가는 것을 받는 것이다. 그는 사람들이 살아 나를 살아 먹는 것이다.	
iscount Terms:	
b2Low b2Low	pergript to the
elivery Location Code: ICE/DRO	r
CE Detention & Removal	
ontinued	
except as provided herein, all terms and conditions of the document referenced in Item 9A or 10A, as heretofore changed, remains unchanged and in full force an	
5A: NAME AND TITLE OF SIGNER (Type or print) 16A: NAME AND TITLE OF CONTRACTING OFFICER (Type	
Susan D. Erickson	
5B. CONTRACTOR/OFFEROR 15C. DATE SIGNED 16B. UNITED STATES OF AMERICA.	
	orpinit)
(Signiffue of person sufficienced to social)	
(Signature of person authorized to sign) (Signature of Contracting Officer)	orpinit)

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 DROIGSA-06-0002/HSCEDM-08-F-IG008/P00002 PAGE 0F 2 2

NAME OF OFFEROR OR CONTRACTOR

CITY OF ELOY

CITY OF	ELOY				and the second
ITEM NO.	SÜPPLIES/SERVICES (B)	QUANTITY (C)	υиіт (D)	THE CONTRACTOR AND A SECOND SE	AMOUNT (F)
	Immigration and Customs Enforcement 801 I Street, NW Suite 900 Washington DC 20536				
	Accounting Info				,
	b2Low				
	FOB: Destination Period of Performance: 10/01/2007 to 09/30/2008				
	Change Item 0001 to read as follows(amount shown is the obligated amount):				
0001	Alien adult Detention Service: For the detention, housing and care for persons detained.	42000	EΑ	64.47	2,707,740.00
	BED COST ESTIMATE: 1,500 BEDS authorized				
	B. The total amount of this task order is increased by \$2,707,740.00 from \$4,545,135.00 to \$7,252,875.00.				
	C. All other terms and conditions remain unchanged.				
NSN 7540-01-152-8	197			Control of the Contro	

		ATION OF CONTRACT	1. CONTRACT ID CODE	PAGE OF PAGES
_ •	ENT/MODIFICATION NO.	3. EFFECTIVE DATE	4. REQUISITION/PURCHASE REQ. NO.	5. PROJECT NO. (If applicable)
P00003		01/28/2008	FPH080001.3	o. PROJECT NO. (If applicable)
6. ISSUED B	Y CODE	ICE/DM/DI	7. ADMINISTERED BY (If other than Item 6)	CODE ICE/DM/DI
Immigra Office 425 I S	tention Mngt/Detention ation and Customs Enfo of Acquisition Manage Street NW, Suite 2208 gton DC 20536	rcement	ICE/Detention Mngt/Detent Immigration and Customs En Office of Acquisition Man 425 I Street NW, Suite 22 Washington DC 20536	ion IGSAs nforcement agement
8. NAME ANI	D ADDRESS OF CONTRACTOR (No., street	county, State and ZIP Code)	9A. AMENDMENT OF SOLICITATION NO.	
CITY OF CITY OF 528 N M	ETOA		9B. DATED (SEE ITEM 11) x 10A. MODIFICATION OF CONTRACT/ORDER DROIGSA-06-0002 HSCEDM-08-F~IG008	NO.
CODE OC			10B. DATED (SEE ITEM 11)	
002	025134220000	FACILITY CODE	09/28/2007	
The above	numbered solicitation is amended as set for	11. THIS ITEM ONLY APPLIES TO A		ended, is not extended.
virtue of this reference to	E DESIGNATED FOR THE RECEIPT OF O	FFERS PRIOR TO THE HOUR AND D already submitted, such change may b received prior to the opening hour and ired!		OUR OFFER. If by or letter makes
<u>ee Sch</u>	edule	net		1,448,705.37
	13. THIS ITEM ONLY APPLIES TO MOD	IFICATION OF CONTRACTS/ORDERS	. IT MODIFIES THE CONTRACT/ORDER NO. AS DES	CRIBED IN ITEM 14.
CHECK ONE			CHANGES SET FORTH IN ITEM 14 ARE MADE IN	
Х			THE ADMINISTRATIVE CHANGES (such as changes HORITY OF FAR 43.103(b).	in paying office,
	C. THIS SUPPLEMENTAL AGREEMENT	IS ENTERED INTO PURSUANT TO A	UTHORITY OF:	í ·
- 1				
	D. OTHER (Specify type of modification a	nd authority)		, , , , , , , , , , , , , , , , , , ,
		nd authority)		
	T: Contractor 🗵 is not.	is required to sign this document and		office.
4. DESCRIPT	T: Contractor 🗵 is not.	is required to sign this document and	I return <u>0</u> copies to the issuing cluding solicitation/contract subject matter where feasi	office.
4. DESCRIPT JNS Num	T: Contractor Xis not. FION OF AMENDMENT/MODIFICATION (Contract) Ther: 002513422	is required to sign this document and ingressive in the section headings, inc	cluding solicitation/contract subject matter where feasi	office.
4. DESCRIPT UNS Num	T: Contractor 🗵 is not.	is required to sign this document and ingressive in the section headings, inc	cluding solicitation/contract subject matter where feasi	office. ble.)
A DESCRIPT UNS Num ne purp Prov	T: Contractor	is required to sign this document and regardized by UCF section headings, industrion is as follows the detention serving the serving serving is serving the serving se	cluding solicitation/contract subject matter where feasi	amount of
4. DESCRIPT UNS Num ne purp Prov	T: Contractor	is required to sign this document and progenized by UCF section headings, including the section is as follows: nue detention service october 1, 2007 the	cluding solicitation/contract subject matter where feasily. ices for 1500 beds in the arough September 30, 2008.	amount of
4. DESCRIPT UNS Num ne purp Prov 1,448,7	T: Contractor Is not. FION OF AMENDMENT/MODIFICATION (Conber: 002513422 pose of this modification and the continuous formula for the period f	is required to sign this document and progenized by UCF section headings, including the section is as follows: nue detention service october 1, 2007 the	cluding solicitation/contract subject matter where feasily. ices for 1500 beds in the arough September 30, 2008.	amount of
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UNS Num he purp . Prov 1,448,7 his fun elivery iscount b2Low ontinue xcept as provi	T: Contractor	is required to sign this document and progenized by UCF section headings, including the section is as follows: nue detention service october 1, 2007 the national resolution	cluding solicitation/contract subject matter where feasily in the ices for 1500 beds in the arough September 30, 2008.	amount of
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DESCRIPT JNS Num ne purp Prov 1,448,7 nis fun elivery scount b2Low ontinue cept as provi A. NAME ANI B. CONTRAC	T: Contractor Sisnot. FION OF AMENDMENT/MODIFICATION (Comber: 002513422) pose of this modification and for the period of the p	is required to sign this document and preparated by UCF section headings, including the section is as follows: nue detention service of the section of the	ices for 1500 beds in the arough September 30, 2008. I thru 12/31/07. as heretofore changed, remains unchanged and in ful 16A NAME AND TITLE OF CONTRACTING OFFICE Susan D. Erickson	amount of Ill force and effect. EER (Type or print)

STANDARD FORM 30 (REV. 10-83) Prescribed by GSA FAR (48 CFR) 53.243

CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED
DROIGSA-06-0002/HSCEDM-08-F-IG008/P00003

PAGE 2

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NAME OF OFFEROR OR CONTRACTOR

CITY OF ELOY

ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	Delivery Location Code: ICE/DRO				
	ICE Detention & Removal				
-	Immigration and Customs Enforcement				
	801 I Street, NW				}
	Suite 900				
	Washington DC 20536				
	FOD. Deal.				
	FOB: Destination				
	Period of Performance: 10/01/2007 to 09/30/2008				
	Change Item 0001 to read as follows(amount shown				
	is the obligated amount):				
	is the obligated amount):				
0001	Alien adult Detention Service: For the detention,	1 1	τ .	1 440 705 27	1 440 705 00
	housing and care for persons detained.	-	тO	1,448,705.37	1,448,705.37
	5 Famouro decarried.				
	BED COST ESTIMATE: 1,500 BEDS authorized				
	Fully Funded Obligation Amount \$1,448,705.37		ı		
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	Accounting Info:				
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_	b2Low		ı	•	
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	Funded: \$0.00		i		
	Accounting Info:]	ı		
	b2Low				
		l i	- 1	•	
	Funded: \$1,448,705.37				
	B. The total amount of this task order is				
ľ	increased by \$1,448,705.37 from \$7,252,875.00 to				
	\$8,701,580.37.]		
	C. All other terms and conditions remain		1		
	unchanged.		ı		
1	anonangea.				
	POC: Arnold Casterline: Contract Specialist;		- [
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Į.	POC: Susan Erickson: Contracting Officer; b2Low				
	b2Low				
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AMENDMENT OF SOLICITATION/MODIFIC	ATION OF CONTRACT		1. CONTRACT ID CODE	PAG	E OF	PAGES			
2. AMENDMENT/MODIFICATION NO.	3. EFFECTIVE DATE	4. REO	UISITION/PURCHASE REQ. NO.	5 PPO (E)	L L	(If applicable)			
P00004	02/21/2008	1	80001.4	J. FROJEC) I NO.	(и аррясавіе)			
6. ISSUED BY CODE	ICE/DM/DI		MINISTERED BY (If other than Item 6)	CODE T	OD /F	NA /DY			
ICE/Detention Mngt/Detention IGSAs Immigration and Customs Enforcement Office of Acquisition Management 425 I Street NW, Suite 2208 Washington DC 20536			ICE/DM/DI ICE/Detention Mngt/Detention IGSAs Immigration and Customs Enforcement Office of Acquisition Management 425 I Street NW, Suite 2208 Washington DC 20536						
8. NAME AND ADDRESS OF CONTRACTOR (No., street,	county, State and ZIP Code)	(x) ^{9A.}	AMENDMENT OF SOLICITATION NO.						
CITY OF ELOY CITY OF ELOY 628 N MAIN ST ELOY AZ 852310628		9B. x 10A DR HS	DATED (SEE ITEM 11) MODIFICATION OF CONTRACT/ORDER NOT SEEDM-08-F-IG008 DATED (SEE ITEM 11)	NO.					
CODE 0025134220000	FACILITY CODE		/28/2007						
	11. THIS ITEM ONLY APPLIES TO	1 1							
separate letter or telegram which includes a reference to THE PLACE DESIGNATED FOR THE RECEIPT OF OIl virtue of this amendment you desire to change an offer reference to the solicitation and this amendment, and is 12. ACCOUNTING AND APPROPRIATION DATA (If requ	o the solicitation and amendment nu- FERS PRIOR TO THE HOUR ANE already submitted, such change ma received prior to the opening hour a free!	umbers. FAIL D DATE SPEC by be made by and date spec	IFIED MAY RESULT IN REJECTION OF YO telegram or letter, provided each telegram o ified.	BE RECEIVE OUR OFFER. or letter makes	D AT If by				
See Page 2		et Incr		3,800,15		0			
13. THIS ITEM ONLY APPLIES TO MODI	FICATION OF CONTRACTS/ORDE	RS. IT MODIF	IES THE CONTRACT/ORDER NO. AS DESC	CRIBED IN ITE	EM 14.				
			S SET FORTH IN ITEM 14 ARE MADE IN T						
			NISTRATIVE CHANGES (such as changes F FAR 43.103(b).	in paying offic	ю,				
C. THIS SUPPLEMENTAL AGREEMENT	S ENTERED INTO PURSUANT TO	AUTHORITY	OF:						
D. OTHER (Specify type of modification and	d authority)								
E. IMPORTANT: Contractor 🗵 is not,	is required to sign this document a	and return	0 copies to the issuing o		-	 ,			
14. DESCRIPTION OF AMENDMENT/MODIFICATION (O			espica to the issuing o	iffice.					
OUNS Number: 002513422	,	g com	manomiosinast subject maker where leasible	le.)					
The purpose of this modificat	ion is as follow	s:							
A. Provide funding to contine 88,800,155.00 for the period	nue detention ser i October 1, 2007	vices f throug	for 1500 beds in the and the formula of the september 30, 2008.	amount (of				
The Phoenix Field Office DRO Delivery: 10/01/2007 Delivery Location Code: ICE/I		laridge	b2Low						
Continued									
except as provided herein, all terms and conditions of the do 5A. NAME AND TITLE OF SIGNER (Type or print)	ocument referenced in Item 9A or 10	0A, as heretof 16A. NAM	ore changed, remains unchanged and in full IE AND TITLE OF CONTRACTING OFFICE	force and effe ER (Type or pi	ect. rint)				
		Susan	D. Erickson						
5B. CONTRACTOR/OFFEROR	15C. DATE SIGNED		ELSANA). (MAKSO	2	16C. D/	ATE SIGNED			
(Signature of person authorized to sign)		1	(Signature of Contracting Officer)			408			

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 PAGE **CONTINUATION SHEET** DROIGSA-06-0002/HSCEDM-08-F-IG008/P00004 2 2

NAME OF OFFEROR OR CONTRACTOR

CITY OF	ELOY				
ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	Immigration and Customs Enforcement 801 I Street, NW Suite 900 Washington DC 20536 Period of Performance: 10/01/2007 to 09/30/2008				
	Change Item 0001 to read as follows(amount shown is the obligated amount):				
0001	Alien adult Detention Service: For the detention, housing and care for persons detained.	1	LO	1	8,800,155.00
	136,500 X \$64.47 Per Diem = Not to exceed \$8,800,156.00			. *	
	1,500 Beds Authorized				
	The total amount of this task order is increased by \$8,800.155.00 from \$8,701,580.37 to \$17,501,735.37.				
	Accounting and Appropriation Data is listed as followed:				
	Requisition Number FPH080001.4				
	b2Low \$3,100,863.50.				
ľ	b2Low \$5,699,291.50				
:				:	
!	POC: Arnold Casterline: Contract Specialist; b2Low POC: Susan Erickson: Contracting Officer;				
	b2Low b2Low				
SN 7540-01-152-90					·

AMENDMENT OF SOLICITATION/MODIFIC	ATION OF CONTRACT		1. CONTRACT ID CODE		PAGE OF	PAGES	
2. AMENDMENT/MODIFICATION NO.	3. EFFECTIVE DATE	A PEO	UISITION/PURCHASE REQ. NO.	le ppr	1 I	2 (It applicable)	
	•	ŧ	80001.10	D. PRL	MECT NO.	(н аррисаон)	
P00009 6. ISSUED BY CODE	See Block 16C		IINISTERED BY (if other than item 6)	CODE	TCE /F	W/DT	
ICE/Detention Mngt/Detention Immigration and Customs Enfo Office of Acquisition Manage 425 I Street NW, Suite 2208 Washington DC 20536	ICE/DM/DI ICE/Detention Mngt/Detention IGSAs Immigration and Customs Enforcement Office of Acquisition Management 425 I Street NW, Suite 2208 Washington DC 20536						
8. NAME AND ADDRESS OF CONTRACTOR (No., street,		10.	ANTIQUEIT OF SOCIOITIES AND				
CITY OF ELOY CITY OF ELOY 628 N MAIN ST	COUNTY, State and 214 Code)	(~)	AMENDMENT OF SOLICITATION NO. DATED (SEE ITEM 11)		······································	· · · · · · · · · · · · · · · · · · ·	
ELOY AZ 852310628		10A	MODIFICATION OF CONTRACT/ORDER NO	<u> </u>			
	:	X DR HS	DIGSA-06-0002 CEDM-08-F-IG008 Dated (see item 11)	·			
GODE 0025134220000	FACILITY CODE	0.9	/28/2007				
	11. THIS ITEM ONLY APPLIES TO AM	ENDME	ITS OF SOLICITATIONS				
separate letter or telegram which includes a reference to the solicitation and amendment numbers. FAILURE OF YOUR ACKNOWLEDGEMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If by virtue of this amendment you design to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter mekes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified. 12. ACCOUNTING AND APPROPRIATION DATA (if required) Net Increase: \$378,624.00 See Schedule 13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14. CHECKONE A THIS CHANGE ORDER IS ISSUED BURSHANT TO: (Specific surface) THE CHANGES SET FORTH IN ITEM 44 APPLIES IN ITEM CONTRACT.							
B. THE ABOVE NUMBERED CONTRACT/ORDER IS MODIFIED TO REFLECT THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation date, etc.) SET FORTH IN TIEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b). C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:							
X Mutual Agreement of the D. OTHER (Specify type of modification and							
E, IMPORTANT: Contractor (2) is not. [is required to sign this document and t	ot m	O copies to the lessing offi				
14. DESCRIPTION OF AMENDMENT/MODIFICATION (O/							
DUNS Number: 002513422 Field Office DRO POC is Letit Program POC: M.J. Bates, Wendie Wyatt-Powell, DAQ POC:Jerald Neveleff, Cont Gusan Erickson, Contract Spec	tia Claridge, b2 b2Low cracting Officer,	Low	2Low	,			
Requisition #FPH080001.10							
A. The purpose of this modification of the definition of the defin	ficers and three (3	3) S∈ s heretor	nior Correctional offi	icer	S i effect		
5B CONTRACTOR/OFFEROR Frank C Acuña III (Signature of person suthorized to sign)			ED STATES OF AMERICA (Signature of Contracting Office)	· ·		ATE 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
DROIGSA-06-0002/HSCEDM-08-F-IG008/P00009

PAGE OF

NAME OF OFFEROR OR CONTRACTOR

עידיי	OΕ	ELOY-
~~~	Or.	DIO.

CITY OF	ELOY				
ITEM NO.	SUPPLIES/SERVICES	QUANTIT	YUNIT	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	respectively. Additional funding under HSCEDM-08-F-IG008 amounts to \$378,624. This will provide funding for 51 days from 10 Aug 2008 through 30 September 2008. Delivery: 30 Days After Award Period of Performance: 10/01/2007 to 09/30/2008				
•	Add Item 0003 as follows:				
0003	Provide fifty-six (56) additional Corrections Officers (COs) to the Eloy housing facility from 10 Aug 2008 through 30 Sep 2008 at \$4.82 per detainee bed day.	73950	EA	4.82	356,439.00
	Accounting Info:				
	b2Low				
	Funded: \$356,439.00			6	
	Add Item 0004 as follows:				
0004	Provide three (3) additional Senior Corrections Officers (SCOs) to the Eloy housing facility from 10 Aug 2008 through 30 Sep 2008 at \$0.30 per detainee bed day.	73950	EΑ	0,30	22,185.00
	Accounting Info:				<u> </u>
	Funded: \$22,185.00  Line Items 0003 and 0004 rates are based on all staffing being on-site commencing 10 Aug 2008. Should staffing not be available, the Provider may NOT invoice for any amounts of any day a full complement of personnel is not available to perform assigned duties at the facility.				
	B. All other terms and condition remain the same.				
		İ			
NSN 7540-01-152-80	67				OPTIONAL COOLS 228 // Day