

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR19D00000003/70CDCR20FR0000014/P00001	PAGE	OF
		3	3

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
8003	<p>Transportation Services Using Contractor Owned Vehicles</p> <p>Mileage Rate = (b) (4) per mile</p> <p>(b) (4) (NOT TO EXCEED)</p> <p>Option Period 1 - 4/1/2020-5/31/2020</p> <p>Product/Service Code: S206</p> <p>Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Notwithstanding the period of performance indicated above, 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 currently 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.</p>				(b) (4)

## ORDER FOR SUPPLIES OR SERVICES

PAGE OF PAGES

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

1. DATE OF ORDER 03/18/2020		2. CONTRACT NO. (If any) 70CDCR19D00000005		6. SHIP TO: a. NAME OF CONSIGNEE IMMIGRATION CUSTOMS ENFORCEMENT	
3. ORDER NO. 70CDCR20FR0000019		4. REQUISITION/REFERENCE NO. 192120FH00CCA0001.4		b. STREET ADDRESS 126 NORTHPOINT DRIVE	
5. ISSUING OFFICE (Address correspondence to) ICE/DETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW (b) (6), (b) (7)(C) WASHINGTON DC 20536				c. CITY HOUSTON	
				d. STATE TX	
				e. ZIP CODE 77060	
7. TO: CORECIVIC INC				f. SHIP VIA	
a. NAME OF CONTRACTOR CORECIVIC INC				8. TYPE OF ORDER	
b. COMPANY NAME				<input type="checkbox"/> a. PURCHASE REFERENCE YOUR:  Please furnish the following on the terms and conditions specified on both sides of this order and on the attached sheet, if any, including delivery as indicated.	
c. STREET ADDRESS 10 BURTON HILLS BLVD				<input checked="" type="checkbox"/> b. DELIVERY Except for billing instructions on the reverse, this delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.	
d. CITY NASHVILLE		e. STATE TN		f. ZIP CODE 372156105	
9. ACCOUNTING AND APPROPRIATION DATA See Schedule				10. REQUISITIONING OFFICE ICE ENFORCEMENT REMOVAL	
11. BUSINESS CLASSIFICATION (Check appropriate box(es)) <input type="checkbox"/> a. SMALL <input type="checkbox"/> b. OTHER THAN SMALL <input type="checkbox"/> c. DISADVANTAGED <input type="checkbox"/> d. WOMEN-OWNED <input type="checkbox"/> e. HUBZone <input type="checkbox"/> f. SERVICE-DISABLED VETERAN-OWNED <input type="checkbox"/> g. WOMEN-OWNED SMALL BUSINESS (WOSB) ELIGIBLE UNDER THE WOSB PROGRAM <input type="checkbox"/> h. EDWOSB					
13. PLACE OF a. INSPECTION Destination		b. ACCEPTANCE Destination		15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date) 03/18/2020	
				16. DISCOUNT TERMS Net (b) (4)	

## 17. SCHEDULE (See reverse for Rejections)

ITEM NO. (a)	SUPPLIES OR SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	DUNS Number: 159734151 COR: (b) (6), (b) (7)(C) Phone: 832-571-(b) (6), (b) (7)(C) @ice.dhs.gov ACOR: (b) (6), (b) (7)(C) Phone: 281-985-(b) (6), (b) (7)(C) @ice.dhs.gov Contract Specialist: (b) (6), (b) (7)(C) Continued ...					

SEE BILLING INSTRUCTIONS ON REVERSE	18. SHIPPING POINT		19. GROSS SHIPPING WEIGHT		20. INVOICE NO.		17(h) TOTAL (Cont. pages)
	21. MAIL INVOICE TO:						
	a. NAME DHS ICE		(b) (4)				17(i) GRAND TOTAL
	b. STREET ADDRESS (or P.O. Box) BURLINGTON FINANCE CENTER PO BOX 1620 ATTN (b) (7)(E)		(b) (4)				
c. CITY WILLISTON		d. STATE VT	e. ZIP CODE 05495-1620				
22. UNITED STATES OF AMERICA BY (Signature)					23. NAME (Typed) (b) (6), (b) (7)(C) TITLE: CONTRACTING/ORDERING OFFICER		

## ORDER FOR SUPPLIES OR SERVICES

PAGE NO

## SCHEDULE - CONTINUATION

2

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

DATE OF ORDER		CONTRACT NO.		ORDER NO.		
03/18/2020		70CDCR19D00000005		70CDCR20FR00000019		
ITEM NO.	SUPPLIES/SERVICES	QUANTITY ORDERED	UNIT	UNIT PRICE	AMOUNT	QUANTITY ACCEPTED
(a)	(b)	(c)	(d)	(e)	(f)	(g)
	<p>Phone: 202-732-(b) (6), (b) (7)(C) (b) (6), (b) (7)(C)@ice.dhs.gov) Contracting Officer: (b) (6), (b) (7)(C) Phone: 202-732-(b) (6), (b) (7)(C) (b) (6), (b) (7)(C)@ice.dhs.gov) Vendor POC: (b) (6), (b) (7)(C), Phone: 615-263-(b) (6), (b) (7)(C)@corecivic.com)</p> <p>There is one requisition associated with this task order: 192120FH00CCA0001.4</p> <p>This task order is being issued against Indefinite-Delivery Indefinite-Quantity (IDIQ) contract 70CDCR19D00000005 P00013 for Detention and Detention Related Services at the Houston Contract Detention Facility located in Houston, Texas. Funding is in the total amount of (b) (4) The total amount of the task order is increased:</p> <p>From (b) (4) By: To:</p> <p>See detail within the CLIN(s) for additional information. The Period of Performance for this task order is currently from 3/18/2020 to 06/17/2020 which matches the base period listed on IDIQ 70CDCR19D00000005 P00013. The Period of Performance may be updated in this task order to match the IDIQ Period of Performance (3/18/2020-8/17/2020) by exercising the option, as needed. Period of Performance: 03/18/2019 to 06/17/2020</p> <p>Detention Services Guaranteed Minimum - (b) (4) Beds Bed Day Rate: (b) (4) Not to exceed: Base period 3/18/2020 - 6/17/2020 Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD Continued ...</p>				(b) (4)	

9101

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

(b) (4)

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Prescribed by GSA FAR (48 CFR) 53.213(f)

2023-ICLI-00006 3035

2023-ICLI-00006 3711

## PAGE NO

DATE OF ORDER	CONTRACT NO.	ORDER NO.
03/18/2020	70CDCR19D00000005	70CDCR20FR0000019

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

(b) (4)

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

PAGE NO  
4

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

DATE OF ORDER 03/18/2020	CONTRACT NO. 70CDCR19D00000005	ORDER NO. 70CDCR20FR0000019
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ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
9103	<p>Detention Services</p> <p>Above Guaranteed Minimum (b) (4) Beds</p> <p>Bed Day Rate (b) (4)</p> <p>Not to exceed: (b) (4)</p> <p>Base period 3/18/2020 - 6/17/2020</p> <p>Product/Service Code: S206</p> <p>Product/Service Description:</p> <p>HOUSEKEEPING- GUARD</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p>				(b) (4)	
9104	<p>Transportation - Fixed monthly rate of (b) (4) miles per month</p> <p>Not to exceed: (b) (4)</p> <p>This amount is inclusive of all associated transportation costs and in accordance with the Performance Work Statement.</p> <p>Base period 3/18/2020 - 6/17/2020</p> <p>Product/Service Code: S206</p> <p>Product/Service Description:</p> <p>HOUSEKEEPING- GUARD</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p>	(b) (4)	EA	(b) (4)		
9105	<p>Transportation - (b) (4) per mile above the Guaranteed Mileage of (b) (4) monthly. This amount is inclusive of all associated transportation costs and in accordance with the Performance Work Statement.</p> <p>Not to exceed: (b) (4)</p> <p>Base period 3/18/2020 - 6/17/2020</p> <p>Product/Service Code: S206</p> <p>Continued ...</p>				(b) (4)	

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

(b) (4)

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2023-ICLI-00006 3037

2023-ICLI-00006 3713

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

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5

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

DATE OF ORDER 03/18/2020	CONTRACT NO. 70CDCR19D00000005	ORDER NO. 70CDCR20FR0000019
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ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	Product/Service Description: HOUSEKEEPING- GUARD  Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4)					
9106	Detainee Volunteer Wages: At a Rate of (b) (4) per shift Not to exceed: (b) (4) Base period 3/18/2020 - 6/17/2020 Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD  Accounting Info: (b) (7)(E) Funded: (b) (4)				(b) (4)	
9107	On Call Post/Guard Services: Guard Services Rate: (b) (4) Not to exceed: (b) (4) Base period 3/18/2020 - 6/17/2020 Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD  Accounting Info: (b) (7)(E) Funded: (b) (4)				(b) (4)	
9108	Postage Not to exceed: (b) (4) Base period 3/18/2020 - 6/17/2020 Product/Service Code: S206 Continued ...				(b) (4)	

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(b) (4)

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2023-ICLI-00006 3038

2023-ICLI-00006 3714

## ORDER FOR SUPPLIES OR SERVICES

PAGE NO

## SCHEDULE - CONTINUATION

6

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

DATE OF ORDER	CONTRACT NO.	ORDER NO.
03/18/2020	70CDCR19D00000005	70CDCR20FR0000019

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
9109	<p>Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Detainee Clothing for Transfers: At a rate of \$(b) (4) per set Not to exceed: (b) (4)</p> <p>Base period 3/18/2020 - 6/17/2020 Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>The total amount of award: (b) (4) The obligation for this award is shown in box 17(i).</p>				(b) (4)	

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

(b) (4)

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Prescribed by GSA FPMR (48 CFR) 53.213(f)

2023-ICLI-00006 3039

2023-ICLI-00006 3715

<b>AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT</b>		1. CONTRACT ID CODE		PAGE OF PAGES	
				1 4	
2. AMENDMENT/MODIFICATION NO.		3. EFFECTIVE DATE		4. REQUISITION/PURCHASE REQ. NO.	
P00001		See Block 16C		192120FHO0CCA0001.6	
6. ISSUED BY		CODE		5. PROJECT NO. (If applicable)	
ICE/DCR		ICE/DCR			
ICEDETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW (b) (6), (b) (7)(C) WASHINGTON DC 20536			ICEDETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW (b) (6), (b) (7)(C) WASHINGTON DC 20536		
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)			9A. AMENDMENT OF SOLICITATION NO.		
CORECIVIC INC ATTN CORECIVIC INC 10 BURTON HILLS BLVD NASHVILLE TN 372156105			(x)		
			9B. DATED (SEE ITEM 11)		
			X 10A. MODIFICATION OF CONTRACT/ORDER NO.		
			70CDCR19D00000005		
			70CDCR20FR0000019		
			10B. DATED (SEE ITEM 13)		
			03/18/2020		
CODE 1597341510000		FACILITY CODE			

**11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS**

☐ The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers ☐ is extended. ☐ is not extended.  
Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning \_\_\_\_\_ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By 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 desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes 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)

See Schedule

Net Increase:

(b) (4)

**13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.**

CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.
	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 ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:
X	D. OTHER (Specify type of modification and authority) Funding Only Action

**E. IMPORTANT:** Contractor ☒ is not. ☐ is required to sign this document and return \_\_\_\_\_ copies to the issuing office.

14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)

DUNS Number: 159734151

COR: (b) (6), (b) (7)(C) @ice.dhs.gov

ACOR: (b) (6), (b) (7)(C) @ice.dhs.gov

Vendor POC: (b) (6), (b) (7)(C) @corecivic.com

Contract Specialist: (b) (6), (b) (7)(C) @ice.dhs.gov

Contracting Officer: (b) (6), (b) (7)(C) @ice.dhs.gov

There is one requisition associated with this task order: 192120FHO0CCA0001.6

The purpose of this modification is to provide funding for detention services in the amount of (b) (4)

Continued ...

Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.

15A. NAME AND TITLE OF SIGNER (Type or print)		16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)	
		(b) (6), (b) (7)(C)	
15B. CONTRACTOR/OFFEROR	15C. DATE SIGNED	16B. UNITED STATES OF AMERICA	16C. DATE SIGNED
(Signature of person authorized to sign)		(Signature of Contracting Officer)	

NSN 7540-01-152-8070

Previous edition unusable

2023-ICLI-00006 3040

2023-ICLI-00006 3716

STANDARD FORM 30 (REV. 10-83)

Prescribed by GSA

FAR (48 CFR) 53.243

<b>CONTINUATION SHEET</b>	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR19D00000005/70CDCR20FR0000019/P00001	PAGE 2 OF 4
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NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>The total value on the task order has increased: From (b) (4) By: (b) (4) To: (b) (4) Period of Performance: 03/18/2019 to 08/17/2020</p> <p>Add Item 9201 as follows:</p> <p>9201 Detention Services (b) (4) EA (b) (4)</p> <p>Guaranteed Minimum - (b) (4) Beds Bed Day Rate: (b) (4) Not to exceed: (b) (4) Option Period 1: 6/18/2020-8/17/2020 Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info: (b) (7)(E) Funded: (b) (4)</p> <p>Add Item 9202 as follows:</p> <p>9202 Detention Services (b) (4) EA (b) (4)</p> <p>Above Guaranteed Minimum (b) (4) beds Bed Day Rate (b) (4) Not to Exceed: (b) (4) Monthly Rate of: (b) (4) Option Period 1: 6/18/2020-8/17/2020 Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info: (b) (7)(E) Funded: (b) (4)</p> <p>Add Item 9203 as follows:</p> <p>9203 Detention Services (b) (4) Beds (b) (4)</p> <p>Above Guaranteed Minimum (b) (4) Beds Bed Day Rate (b) (4) Not to exceed: (b) (4)</p> <p>Option Period 1: 6/18/2020-8/17/2020 Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD Continued ...</p>				

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR19D00000005/70CDCR20FR0000019/P00001	PAGE	OF
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NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	Accounting Info: (b) (7)(E) Funded: (b) (4) Add Item 9204 as follows:				
9204	Transportation - Guaranteed Fixed monthly rate of (b) (4) miles per month. This amount is inclusive of all associated transportation costs and in accordance with the Performance Work Statement. Not to exceed: (b) (4) Option Period 1: 6/18/2020-8/17/2020 Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD Accounting Info: (b) (7)(E) Funded: (b) (4) Add Item 9206 as follows:	(b) (4)	EA	(b) (4)	
9206	Detainee Volunteer Wages: At a Rate of (b) (4) per shift Not to exceed: (b) (4) Option Period 1: 6/18/2020-8/17/2020 Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD Accounting Info: (b) (7)(E) Funded: (b) (4) Add Item 9207 as follows:				(b) (4)
9207	On Call Post/Guard Services: Rate: (b) (4) Not to exceed: (b) (4) Option Period 1: 6/18/2020-8/17/2020 Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD Accounting Info: Continued ...				(b) (4)

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR19D00000005/70CDCR20FR0000019/P00001	PAGE	OF
		4	4

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
9209	<p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Add Item 9209 as follows:</p> <p>Detainee Clothing for Transfers: At a rate of (b) (4) per set</p> <p>Not to exceed: (b) (4)</p> <p>Option Period 1: 6/18/2020-8/17/2020</p> <p>Product/Service Code: S206</p> <p>Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Notwithstanding the period of performance indicated above, the funding provided in this modification 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 currently 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.</p>				(b) (4)

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT		1. CONTRACT ID CODE		PAGE OF PAGES	
				1 9	
2. AMENDMENT/MODIFICATION NO.		3. EFFECTIVE DATE		4. REQUISITION/PURCHASE REQ. NO.	
P00002		See Block 16C		192121FHO0CCA0011	
6. ISSUED BY		CODE		7. ADMINISTERED BY (If other than Item 6)	
		70CDCR		CODE ICE/DCR	
DETENTION COMPLIANCE AND REMOVALS US IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I ST NW (b) (6), (b) (7)(C) WASHINGTON DC 20536		ICEDETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW (b) (6), (b) (7)(C) WASHINGTON DC 20536			
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)		(x) 9A. AMENDMENT OF SOLICITATION NO.			
CORECIVIC INC ATTN CORECIVIC INC 10 BURTON HILLS BLVD NASHVILLE TN 372156105					
		9B. DATED (SEE ITEM 11)			
		X 10A. MODIFICATION OF CONTRACT/ORDER NO.			
		70CDCR19D00000005			
		70CDCR20FR0000019			
		10B. DATED (SEE ITEM 13)			
CODE 1597341510000		FACILITY CODE 03/18/2020			
11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS					
<input type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers <input type="checkbox"/> is extended. <input type="checkbox"/> is not extended. Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By 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 desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes 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) See Schedule Net Decrease: (b) (4)					
13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.					
CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.				
	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 ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).				
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:				
X	D. OTHER (Specify type of modification and authority) FAR 4.804 Contract Closeout				
E. IMPORTANT: Contractor <input checked="" type="checkbox"/> is not. <input type="checkbox"/> is required to sign this document and return _____ copies to the issuing office.					
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.) DUNS Number: 159734151 COR: (b) (6), (b) (7)(C) @ice.dhs.gov ACOR: (b) (6), (b) (7)(C) @ice.dhs.gov Vendor POC: (b) (6), (b) (7)(C) @corecivic.com Contracting Officer: (b) (6), (b) (7)(C) @ice.dhs.gov  There is one requisition associated with this task order: 192121FHO0CCA0011  The parties agree as follows:  1) All services/supplies have been received, inspected and accepted by the Government. Continued ...  Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.					
15A. NAME AND TITLE OF SIGNER (Type or print)		16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)			
		(b) (6), (b) (7)(C)			
		TEL:		EMAIL: (b) (6), (b) (7)(C) @ice.dhs.gov	
15B. CONTRACTOR/OFFEROR		15C. DATE SIGNED		16B. UNITED STATES OF AMERICA	
(Signature of person authorized to sign)				(Signature of Contracting Officer)	
NSN 7540-01-152-8070 Previous edition unusable		STANDARD FORM 30 (REV. 10-83) Prescribed by GSA FAR (48 CFR) 53.243			
2023-ICLI-00006 3044					
2023-ICLI-00006 3720					

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
9101	<p>2) The Contactor releases the Government from any and all liability under this task order for further equitable and/or price adjustments including, but not limited to, claims and causes of action for the recovery of direct costs, indirect costs, delay costs, disruption costs, profit, interest, attorney's fees, damages, etc.</p> <p>3) The Government agrees that all obligations under this order are concluded. The total obligated amount is decreased from (b) (4) by (b) (4) The details of the deobligation are contained below in the CLIN details.</p> <p>4) This order is closed. Discount Terms: Net (b) (4) Period of Performance: 03/18/2019 to 08/17/2020</p> <p>Change Item 9101 to read as follows (amount shown is the obligated amount):</p> <p>Detention Services Guaranteed Minimum - (b) (4) Beds Bed Day Rate: (b) (4) Not to exceed: (b) (4) Base period 3/18/2020 - 6/17/2020 Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Continued ...</p>				(b) (4)

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR19D00000005/70CDCR20FR0000019/P00002	PAGE	OF
		3	9

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
9103	<p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Change Item 9103 to read as follows (amount shown is the obligated amount):</p> <p>Detention Services</p> <p>Above Guaranteed Minimum (b) (4) Beds</p> <p>Bed Day Rate (b) (4)</p> <p>Not to exceed: (b) (4)</p> <p>Base period 3/18/2020 - 6/17/2020</p> <p>Product/Service Code: S206</p> <p>Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Continued ...</p>				(b) (4)

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR19D00000005/70CDCR20FR0000019/P00002	PAGE	OF
		4	9

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
9105	<p>Change Item 9105 to read as follows (amount shown is the obligated amount):</p> <p>Transportation (b) (4) per mile above the Guaranteed Mileage of (b) (4) monthly. This amount is inclusive of all associated transportation costs and in accordance with the Performance Work Statement.</p> <p>Not to exceed: (b) (4)</p> <p>Base period 3/18/2020 - 6/17/2020</p> <p>Product/Service Code: S206</p> <p>Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p>				(b) (4)
9106	<p>Change Item 9106 to read as follows (amount shown is the obligated amount):</p> <p>Detainee Volunteer Wages: At a Rate of (b) (4) per shift</p> <p>Not to exceed: (b) (4)</p> <p>Base period 3/18/2020 - 6/17/2020</p> <p>Product/Service Code: S206</p> <p>Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>Continued ...</p>				(b) (4)

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<div>(b) (7)(E)</div> <p>Funded: (b) (4)</p> <p>Change Item 9107 to read as follows (amount shown is the obligated amount):</p> <p>9107 On Call Post/Guard Services: Guard Services Rate: (b) (4) Not to exceed: (b) (4) Base period 3/18/2020 - 6/17/2020 Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info:  <div>(b) (7)(E)</div> Funded: (b) (4)  Accounting Info:  <div>(b) (7)(E)</div> Funded: (b) (4)</p> <p>Change Item 9108 to read as follows (amount shown is the obligated amount):</p> <p>9108 Postage Not to exceed: (b) (4) Base period 3/18/2020 - 6/17/2020 Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info:  <div>(b) (7)(E)</div> Funded: (b) (4)  Accounting Info:  <div>(b) (7)(E)</div> Funded: (b) (4)</p> <p>Change Item 9109 to read as follows (amount shown is the obligated amount):</p> <p>9109 Detainee Clothing for Transfers: At a rate of Continued ...</p>				<div>(b) (4)</div> <div>(b) (4)</div> <div>(b) (4)</div> <div>(b) (4)</div>

<b>CONTINUATION SHEET</b>	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR19D00000005/70CDCR20FR0000019/P00002	PAGE 6 OF 9
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NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>(b) (4) per set Not to exceed: (b) (4) Base period 3/18/2020 - 6/17/2020 Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4) Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Change Item 9201 to read as follows (amount shown is the obligated amount):</p> <p>9201 Detention Services (b) (4) Guaranteed Minimum - (b) (4) Beds Bed Day Rate: (b) (4) Not to exceed: (b) (4) Option Period 1: 6/18/2020-8/17/2020 Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4) Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Change Item 9202 to read as follows (amount shown is the obligated amount):</p> <p>9202 Detention Services (b) (4) Above Guaranteed Minimum (b) (4) beds Bed Day Rate (b) (4) Not to Exceed: (b) (4) Monthly Rate of: (b) (4) Option Period 1: 6/18/2020-8/17/2020 Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD Continued ...</p>				(b) (4)
					(b) (4)

<b>CONTINUATION SHEET</b>	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR19D00000005/70CDCR20FR0000019/P00002	PAGE 7 OF 9
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NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Change Item 9203 to read as follows (amount shown is the obligated amount):</p>				
9203	<p>Detention Services</p> <p>Above Guaranteed Minimum (b) (4) Beds</p> <p>Bed Day Rate (b) (4)</p> <p>Not to exceed: (b) (4)</p> <p>Option Period 1: 6/18/2020-8/17/2020</p> <p>Product/Service Code: S206</p> <p>Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Change Item 9204 to read as follows (amount shown is the obligated amount):</p>				(b) (4)
9204	<p>Transportation - Guaranteed Fixed monthly rate of (b) (4) miles per month.</p> <p>This amount is inclusive of all associated transportation costs and in accordance with the Performance Work Statement.</p> <p>Not to exceed: (b) (4)</p> <p>Option Period 1: 6/18/2020-8/17/2020</p> <p>Product/Service Code: S206</p> <p>Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info:</p> <p>Continued ...</p>				(b) (4)



NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
9209	<p>Change Item 9209 to read as follows (amount shown is the obligated amount):</p> <p>Detainee Clothing for Transfers: At a rate of (b) (4) per set Not to exceed: (b) (4) Option Period 1: 6/18/2020-8/17/2020 Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4) Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4) All other terms and conditions remain unchanged.</p>				(b) (4)

<b>AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT</b>		1. CONTRACT ID CODE		PAGE OF PAGES 1 1	
2. AMENDMENT/MODIFICATION NO. P00003		3. EFFECTIVE DATE See Block 16C		4. REQUISITION/PURCHASE REQ. NO.	
6. ISSUED BY DETENTION COMPLIANCE AND REMOVALS US IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I ST NW (b) (6), (b) (7)(C) WASHINGTON DC 20536		CODE 70CDCR		5. PROJECT NO. (If applicable)	
		7. ADMINISTERED BY (If other than Item 6) ICE ACQUISITION POLICY IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT DEPARTMENT OF HOMELAND SECURITY 801 I STREET NW WASHINGTON DC 20536		CODE ICE/ACQ POLICY	
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code) CORECIVIC INC ATTN CORECIVIC INC 10 BURTON HILLS BLVD NASHVILLE TN 372156105		(x)		9A. AMENDMENT OF SOLICITATION NO.	
				9B. DATED (SEE ITEM 11)	
		X		10A. MODIFICATION OF CONTRACT/ORDER NO. 70CDCR19D00000005 70CDCR20FR0000019	
CODE 1597341510000		FACILITY CODE		10B. DATED (SEE ITEM 13) 03/18/2020	
<b>11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS</b>					
<input type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers <input type="checkbox"/> is extended. <input type="checkbox"/> is not extended. Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By 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 desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes 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) See Schedule					
<b>13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.</b>					
CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.				
	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 ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).				
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:				
X	D. OTHER (Specify type of modification and authority) FAR 4.804, Contract Closeout				
<b>E. IMPORTANT:</b> Contractor <input checked="" type="checkbox"/> is not, <input type="checkbox"/> is required to sign this document and return _____ copies to the issuing office.					
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.) DUNS Number: 159734151 The purpose of this modification is to closeout this contract. All services/supplies have been received, inspected and accepted, and all funds have been expended. Period of Performance: 03/18/2019 to 08/17/2020					
15A. NAME AND TITLE OF SIGNER (Type or print)		16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print) (b) (6), (b) (7)(C) TEL: 202-732-(b) (6), (b) (7)(C) EMAIL: (b) (6), (b) (7)(C)@ice.dhs.gov			
15B. CONTRACTOR/OFFEROR  (Signature of person authorized to sign)		15C. DATE SIGNED		16B. UNITED STATES OF AMERICA  (Signature of Contracting Officer)	
				16C. DATE SIGNED	

NSN 7540-01-152-8070  
Previous edition unusable

2023-ICLI-00006 3053  
  
2023-ICLI-00006 3729

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

<b>AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT</b>		1. CONTRACT ID CODE		PAGE OF PAGES 1 3	
2. AMENDMENT/MODIFICATION NO. P00005		3. EFFECTIVE DATE See Block 16C		4. REQUISITION/PURCHASE REQ. NO. 192121FPHCAFCC003.3	
6. ISSUED BY CODE 70CDCR		7. ADMINISTERED BY (If other than Item 6) CODE ICE/DCR		5. PROJECT NO. (If applicable)	
DETENTION COMPLIANCE AND REMOVALS US IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I ST NW (b) (6), (b) (7)(C) WASHINGTON DC 20536		ICEDETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW (b) (6), (b) (7)(C) WASHINGTON DC 20536			
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)  CORECIVIC INC ATTN CORECIVIC INC 5501 VIRGINIA WAY (b) (6), (b) (7)(C) BRENTWOOD TN 370277684		(x)		9A. AMENDMENT OF SOLICITATION NO.	
				9B. DATED (SEE ITEM 11)	
		X		10A. MODIFICATION OF CONTRACT/ORDER NO. ODT-9-C-0001 70CDCR20FR0000033	
CODE 1597341510000 FACILITY CODE				10B. DATED (SEE ITEM 13) 06/10/2020	
<b>11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS</b>					
<input type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers <input type="checkbox"/> is extended. <input type="checkbox"/> is not extended. Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By 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 desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes 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) See Schedule Net Increase: (b) (4)					
<b>13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.</b>					
CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.				
	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 ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).				
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:				
X	D. OTHER (Specify type of modification and authority) Funding Only Action				
E. IMPORTANT: Contractor <input checked="" type="checkbox"/> is not, <input type="checkbox"/> is required to sign this document and return _____ copies to the issuing office.					
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)					
DUNS Number: 159734151					
Field Office COR: (b) (6), (b) (7)(C) @ice.dhs.gov					
ACOR: (b) (6), (b) (7)(C) @ice.dhs.gov					
Contract Specialist: (b) (6), (b) (7)(C) @ice.dhs.gov					
Contracting Officer: (b) (6), (b) (7)(C) @ice.dhs.gov					
The purpose of this modification is to provide funding for Detention Services concerning in the amount of (b) (4) Additionally this modification changes the COR from (b) (6), (b) (7)(C)					
Continued ...					
Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.					
15A. NAME AND TITLE OF SIGNER (Type or print)		16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print) (b) (6), (b) (7)(C)			
		TEL:		EMAIL: (b) (6), (b) (7)(C) @ice.dhs.gov	
15B. CONTRACTOR/OFFEROR		15C. DATE SIGNED		16B. UNITED STATES OF AMERICA	
(Signature of person authorized to sign)		(Signature of Contracting Officer)		16C. DATE SIGNED	

NSN 7540-01-152-8070  
 Previous edition unusable

2023-ICLI-00006 3054  
  
 2023-ICLI-00006 3730

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

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0001	<p>to (b) (6), (b) (7)(C) remains as the ACOR.</p> <p>The obligated amount of this Task Order has increased:</p> <p>From (b) (4)</p> <p>By: (b) (4)</p> <p>To: (b) (4)</p> <p>Discount Terms: Net (b) (4)</p> <p>Period of Performance: 07/01/2020 to 06/30/2021</p> <p>Change Item 0001 to read as follows (amount shown is the obligated amount):</p> <p>DETENTION SERVICE</p> <p>The amount for this CLIN has increased:</p> <p>From (b) (4)</p> <p>By: (b) (4)</p> <p>To: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Notwithstanding the period of performance indicated above, the funding provided in this Continued ...</p>				(b) (4)

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>modification 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 currently 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.</p> <p>All other terms and conditions remain unchanged.</p>				

<b>AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT</b>		1. CONTRACT ID CODE		PAGE OF PAGES 1 3	
2. AMENDMENT/MODIFICATION NO. P00006		3. EFFECTIVE DATE See Block 16C		4. REQUISITION/PURCHASE REQ. NO. 192121FPHCAFCC003.4	
6. ISSUED BY CODE 70CDCR		7. ADMINISTERED BY (If other than Item 6) CODE ICE/DCR		5. PROJECT NO. (If applicable)	
DETENTION COMPLIANCE AND REMOVALS US IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I ST NW (b) (6), (b) (7)(C) WASHINGTON DC 20536		ICEDETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW (b) (6), (b) (7)(C) WASHINGTON DC 20536			
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)  CORECIVIC INC ATTN CORECIVIC INC 5501 VIRGINIA WAY (b) (6), (b) (7)(C) BRENTWOOD TN 370277684		9A. AMENDMENT OF SOLICITATION NO.  9B. DATED (SEE ITEM 11)  10A. MODIFICATION OF CONTRACT/ORDER NO. ODT-9-C-0001 70CDCR20FR0000033 10B. DATED (SEE ITEM 13) 06/10/2020			
CODE 1597341510000 FACILITY CODE					
<b>11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS</b>					
<input type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers <input type="checkbox"/> is extended. <input type="checkbox"/> is not extended. Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By 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 desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes 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) See Schedule Net Increase: (b) (4)					
<b>13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.</b>					
CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.				
	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 ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).				
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:				
X	D. OTHER (Specify type of modification and authority) Funding Only Action				
<b>E. IMPORTANT:</b> Contractor <input checked="" type="checkbox"/> is not. <input type="checkbox"/> is required to sign this document and return _____ copies to the issuing office.					
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.) DUNS Number: 159734151 Field Office COR: (b) (6), (b) (7)(C) @ice.dhs.gov ACOR: (b) (6), (b) (7)(C) @ice.dhs.gov Contract Specialist: (b) (6), (b) (7)(C) @ice.dhs.gov Contracting Officer: (b) (6), (b) (7)(C) @ice.dhs.gov					
The purpose of this modification is to provide funding for Detention Services in the amount of (b) (4)					
Continued ...					
Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.					
15A. NAME AND TITLE OF SIGNER (Type or print)		16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)			
		(b) (6), (b) (7)(C)			
		TEL:		EMAIL: (b) (6), (b) (7)(C) @ice.dhs.gov	
15B. CONTRACTOR/OFFEROR		15C. DATE SIGNED		16B. UNITED STATES OF AMERICA	
(Signature of person authorized to sign)		(Signature of Contracting Officer)		16C. DATE SIGNED	

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED ODT-9-C-0001/70CDCR20FR0000033/P00006	PAGE	OF
		2	3

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0001	<p>The obligated amount of this Task Order has increased:</p> <p>From (b) (4)</p> <p>By: (b) (4)</p> <p>To: (b) (4)</p> <p>Discount Terms: (b) (4)</p> <p>Net (b) (4)</p> <p>Period of Performance: 07/01/2020 to 06/30/2021</p> <p>Change Item 0001 to read as follows (amount shown is the obligated amount):</p> <p>DETENTION SERVICE</p> <p>The amount for this CLIN has increased:</p> <p>From (b) (4)</p> <p>By: (b) (4)</p> <p>To: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Continued ...</p>				(b) (4)

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>Funded: (b) (4)</p> <p>Notwithstanding the period of performance indicated above, the funding provided in this modification 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 currently 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.</p> <p>All other terms and conditions remain unchanged.</p>				

<b>AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT</b>		1. CONTRACT ID CODE		PAGE OF PAGES 1 3	
2. AMENDMENT/MODIFICATION NO. P00007		3. EFFECTIVE DATE See Block 16C		4. REQUISITION/PURCHASE REQ. NO.	
6. ISSUED BY CODE 70CDCR		7. ADMINISTERED BY (If other than Item 6) CODE ICE/DCR		5. PROJECT NO. (If applicable)	
DETENTION COMPLIANCE AND REMOVALS US IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I ST NW (b) (6), (b) (7)(C) WASHINGTON DC 20536		ICEDETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW : (b) (6), (b) (7)(C) WASHINGTON DC 20536			
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code) CORECIVIC INC ATTN CORECIVIC INC 5501 VIRGINIA WAY (b) (6), (b) (7)(C) BRENTWOOD TN 370277684		(x)		9A. AMENDMENT OF SOLICITATION NO.	
				9B. DATED (SEE ITEM 11)	
		X		10A. MODIFICATION OF CONTRACT/ORDER NO. ODT-9-C-0001 70CDCR20FR0000033	
CODE 1597341510000		FACILITY CODE		10B. DATED (SEE ITEM 13) 06/10/2020	

**11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS**

☐ The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers ☐ is extended. ☐ is not extended.  
Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning \_\_\_\_\_ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By 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 desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes 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)

See Schedule

Net Decrease:

(b) (4)

**13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.**

CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.
	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 ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:
X	D. OTHER (Specify type of modification and authority) De-obligation

**E. IMPORTANT:** Contractor ☒ is not, ☐ is required to sign this document and return \_\_\_\_\_ copies to the issuing office.

14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)

DUNS Number: 159734151

Field Office COR: (b) (6), (b) (7)(C) @ice.dhs.gov

ACOR: (b) (6), (b) (7)(C) @ice.dhs.gov

Contract Specialist: (b) (6), (b) (7)(C) @ice.dhs.gov

Contracting Officer: (b) (6), (b) (7)(C) @ice.dhs.gov

The purpose of this modification is to De-obligate funds from CLIN 0001 in the amount of (b) (4)

Continued ...

Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.

15A. NAME AND TITLE OF SIGNER (Type or print)		16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print) (b) (6), (b) (7)(C)	
		TEL:	EMAIL: (b) (6), (b) (7)(C) @ice.dhs.gov
15B. CONTRACTOR/OFFEROR  (Signature of person authorized to sign)	15C. DATE SIGNED	16B. UNITED STATES OF AMERICA  (Signature of Contracting Officer)	16C. DATE SIGNED

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED ODT-9-C-0001/70CDCR20FR0000033/P00007	PAGE	OF
		2	3

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0001	<p>The obligated amount of this Task Order has decreased:</p> <p>From: (b) (4)</p> <p>By: (b) (4)</p> <p>To: (b) (4)</p> <p>Discount Terms: Net (b) (4)</p> <p>Period of Performance: 07/01/2020 to 06/30/2021</p> <p>Change Item 0001 to read as follows (amount shown is the obligated amount):</p> <p>DETENTION SERVICE</p> <p>The amount for this CLIN has decreased:</p> <p>From: (b) (4)</p> <p>By: (b) (4)</p> <p>To: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Continued ...</p>				(b) (4)

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>Funded: (b) (4)</p> <p>Notwithstanding the period of performance indicated above, the funding provided in this modification 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 currently 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.</p> <p>All other terms and conditions remain unchanged.</p>				

<b>AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT</b>		1. CONTRACT ID CODE		PAGE OF PAGES	
				1      3	
2. AMENDMENT/MODIFICATION NO. P00008		3. EFFECTIVE DATE See Block 16C		4. REQUISITION/PURCHASE REQ. NO. 192122FPHCAFCC003	
6. ISSUED BY		CODE 70CDCR		5. PROJECT NO. (If applicable)	
				7. ADMINISTERED BY (If other than Item 6)	
				CODE ICE/DCR	
DETENTION COMPLIANCE AND REMOVALS US IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I ST NW (b) (6), (b) (7)(C) WASHINGTON DC 20536			ICEDETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW (b) (6), (b) (7)(C) WASHINGTON DC 20536		
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)			(x) 9A. AMENDMENT OF SOLICITATION NO.		
CORECIVIC INC ATTN CORECIVIC INC 5501 VIRGINIA WAY (b) (6), (b) (7)(C) BRENTWOOD TN 370277684					
			9B. DATED (SEE ITEM 11)		
			X 10A. MODIFICATION OF CONTRACT/ORDER NO. ODT-9-C-0001		
			70CDCR20FR0000033		
			10B. DATED (SEE ITEM 13)		
CODE 1597341510000			FACILITY CODE		
			06/10/2020		
<b>11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS</b>					
<input type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers <span style="float: right;"><input type="checkbox"/> is extended. <input type="checkbox"/> is not extended.</span> Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By 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 desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes 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)					
See Schedule      Net Increase: (b) (4)					
<b>13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.</b>					
CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.				
	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 ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).				
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:				
X	D. OTHER (Specify type of modification and authority) Funding Only Action				
<b>E. IMPORTANT:</b> Contractor <input checked="" type="checkbox"/> is not. <input type="checkbox"/> is required to sign this document and return _____ copies to the issuing office.					
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)					
DUNS Number: 159734151					
Field Office COR: (b) (6), (b) (7)(C) Email: (b) (6), (b) (7)(C)@ice.dhs.gov					
ACOR: (b) (6), (b) (7)(C)@ice.dhs.gov					
ACOR: (b) (6), (b) (7)(C)@ice.dhs.gov					
Contract Specialist: (b) (6), (b) (7)(C)@ice.dhs.gov					
Contracting Officer: (b) (6), (b) (7)(C)@ice.dhs.gov					
Continued ...					
Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.					
15A. NAME AND TITLE OF SIGNER (Type or print)			16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)		
			(b) (6), (b) (7)(C)		
			TEL:      EMAIL: (b) (6), (b) (7)(C)@ice.dhs.gov		
15B. CONTRACTOR/OFFEROR		15C. DATE SIGNED		16B. UNITED STATES OF AMERICA	
(Signature of person authorized to sign)				(Signature of Contracting Officer)	
NSN 7540-01-152-8070				STANDARD FORM 30 (REV. 10-83)	
Previous edition unusable				Prescribed by GSA	
				FAR (48 CFR) 53.243	

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0001	<p>The purpose of this modification is to obligate funds for CLIN 0001 in the amount of \$5,185.00 for the reimbursement of COVID Costs in January 2021 billing period. Funding was previously available but was de-obligated in February 2022.</p> <p>The obligated amount of this Task Order has increased:</p> <p>From: (b) (4)</p> <p>By: (b) (4)</p> <p>To: (b) (4)</p> <p>Discount Terms: Net (b) (4)</p> <p>Period of Performance: 07/01/2020 to 06/30/2021</p> <p>Change Item 0001 to read as follows (amount shown is the obligated amount):</p> <p>DETENTION SERVICE</p> <p>The amount for this CLIN has increased:</p> <p>From: (b) (4)</p> <p>By: (b) (4)</p> <p>To: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Continued ...</p>				(b) (4)

## CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED  
ODT-9-C-0001/70CDCR20FR0000033/P00008PAGE OF  
3 3NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Notwithstanding the period of performance indicated above, the funding provided in this modification 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 currently 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.</p> <p>All other terms and conditions remain unchanged.</p>				

## ORDER FOR SUPPLIES OR SERVICES

PAGE OF PAGES

1

9

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

1. DATE OF ORDER 06/10/2020		2. CONTRACT NO. (If any) ODT-9-C-0001		6. SHIP TO: a. NAME OF CONSIGNEE ICE ENFORCEMENT REMOVAL		
3. ORDER NO. 70CDRCR20FR0000033		4. REQUISITION/REFERENCE NO. 192120FPHCAFCC036		b. STREET ADDRESS IMMIGRATION AND CUSTOMS ENFORCEMENT 801 I STREET NW (b) (6), (b) (7)(C)		
5. ISSUING OFFICE (Address correspondence to) ICE/DETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW (b) (6), (b) (7)(C) WASHINGTON DC 20536		c. CITY WASHINGTON		d. STATE DC	e. ZIP CODE 20536	
7. TO: CORECIVIC INC		f. SHIP VIA				
a. NAME OF CONTRACTOR CORECIVIC INC		8. TYPE OF ORDER				
b. COMPANY NAME		<input type="checkbox"/> a. PURCHASE REFERENCE YOUR:		<input checked="" type="checkbox"/> b. DELIVERY Except for billing instructions on the reverse, this delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.		
c. STREET ADDRESS 5501 VIRGINIA WAY (b) (6), (b) (7)(C)		Please furnish the following on the terms and conditions specified on both sides of this order and on the attached sheet, if any, including delivery as indicated.				
d. CITY BRENTWOOD	e. STATE TN	f. ZIP CODE 370277684				
9. ACCOUNTING AND APPROPRIATION DATA See Schedule		10. REQUISITIONING OFFICE ICE ENFORCEMENT REMOVAL				
11. BUSINESS CLASSIFICATION (Check appropriate box(es)) <input type="checkbox"/> a. SMALL <input checked="" type="checkbox"/> b. OTHER THAN SMALL <input type="checkbox"/> c. DISADVANTAGED <input type="checkbox"/> d. WOMEN-OWNED <input type="checkbox"/> e. HUBZone <input type="checkbox"/> f. SERVICE-DISABLED VETERAN-OWNED <input type="checkbox"/> g. WOMEN-OWNED SMALL BUSINESS (WOSB) ELIGIBLE UNDER THE WOSB PROGRAM <input type="checkbox"/> h. EDWOSB						
13. PLACE OF a. INSPECTION Destination		14. GOVERNMENT B/L NO.		15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date) 30 Days After Award		
b. ACCEPTANCE Destination				16. DISCOUNT TERMS		
17. SCHEDULE (See reverse for Rejections)						
ITEM NO. (a)	SUPPLIES OR SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	DUNS Number: 159734151 Field Office COR: (b) (6), (b) (7)(C) Phone: 602-766-(b) (6), (b) (7)(C) Email: (b) (6), (b) (7)(C)@ice.dhs.gov ACOR: (b) (6), (b) (7)(C) Continued ...					
18. SHIPPING POINT		19. GROSS SHIPPING WEIGHT		20. INVOICE NO.		17(h) TOTAL (Cont. pages)
21. MAIL INVOICE TO:						
a. NAME DHS ICE				(b) (4)		17(i) GRAND TOTAL
b. STREET ADDRESS (or P.O. Box) BURLINGTON FINANCE CENTER PO BOX 1620 ATTN (b) (7)(E)				(b) (4)		
c. CITY WILLISTON		d. STATE VT	e. ZIP CODE 05495-1620			
22. UNITED STATES OF AMERICA BY (Signature)				23. NAME (Typed) (b) (6), (b) (7)(C) TITLE: CONTRACTING/ORDERING OFFICER		

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

PAGE NO  
2

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

DATE OF ORDER 06/10/2020	CONTRACT NO. ODT-9-C-0001	ORDER NO. 70CDCR20FR0000033
-----------------------------	------------------------------	--------------------------------

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
0001	<p>Phone: (b) (6), (b) (7)(C) Email: [REDACTED]@ice.dhs.gov</p> <p>ACOR: (b) (6), (b) (7)(C) Phone: [REDACTED] Email: [REDACTED]@ice.dhs.gov</p> <p>Contract Specialist: (b) (6), (b) (7)(C) Phone: (b) (6), (b) (7)(C) Email: [REDACTED]@ice.dhs.gov</p> <p>Contracting Officer: (b) (6), (b) (7)(C) Phone: (b) (6), (b) (7)(C) Email: [REDACTED]@ice.dhs.gov</p> <p>The purpose of Task Order 70CDCR20FR0000033 between the Department of Homeland Security, Immigration and Customs Enforcement and CoreCivic is to provide detention services. This Task Order is placed in accordance with ODT-9-C-0001. Funding to the task order is provided in the amount of (b) (4)</p> <p>The obligated amount of this Task Order has increased</p> <p>From: (b) (4) By: (b) (4) To: (b) (4) Period of Performance: 07/01/2020 to 06/30/2021</p> <p>DETENTION SERVICE</p> <p>The quantity for this CLIN has increased: From: (b) (4) By: [REDACTED] To: [REDACTED]</p> <p>The amount for this CLIN has increased: From: (b) (4) By: (b) (4) To: [REDACTED] Continued ...</p>	(b) (4)	EA	(b) (4)	(b) (4)	

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

(b) (4)

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PREVIOUS EDITION NOT USABLE

OPTIONAL FORM 348 (Rev. 4/2006)

Prescribed by GSA FPMR (41 CFR) 101-11.6

2023-ICLI-00006 3067

2023-ICLI-00006 3743

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

PAGE NO  
3

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

DATE OF ORDER 06/10/2020	CONTRACT NO. ODT-9-C-0001	ORDER NO. 70CDCR20FR0000033
-----------------------------	------------------------------	--------------------------------

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
0002	<p>Funding for 7/1/2020 through 9/30/2020</p> <p>Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>DETENTION SERVICE</p> <p>The quantity for this CLIN has increased: From (b) (4) By: To:</p> <p>The amount for this CLIN has increased: From (b) (4) By: To:</p> <p>Funding for 10/1/2020 through 10/31/2020</p> <p>Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Invoice Instructions:</p> <p>ICE - ERO Contracts</p> <p>Service Providers/Contractors shall use these procedures when submitting an invoice.</p> <p>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:</p> <p>Continued ...</p>	(b) (4)	EA	(b) (4)		

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

(b) (4)

AUTHORIZED FOR LOCAL REPRODUCTION  
PREVIOUS EDITION NOT USABLE

OPTIONAL FORM 348 (Rev. 4/2006)  
Prescribed by GSA FPMR (48 CFR) 53.213(f)

2023-ICLI-00006 3068

2023-ICLI-00006 3744

## SCHEDULE - CONTINUATION

4

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

DATE OF ORDER	CONTRACT NO.	ORDER NO.
06/10/2020	ODT-9-C-0001	70CDCR20FR0000033

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>a) Email:</p> <ul style="list-style-type: none"> <li>• (b) (7)(E)@ice.dhs.gov</li> <li>• Contracting Officer Representative (COR) or Government Point of Contact (GPOC)</li> <li>• Contract Specialist/Contracting Officer</li> </ul> <p>Each email shall contain only (1) invoice and the invoice number shall be indicated on the subject line of the email.</p> <p>b) USPS:</p> <p>DHS, ICE ATTN: (b) (7)(E) Financial Operations - Burlington P.O. Box 1620 Williston, VT 05495-1620</p> <p>The Contractors Data Universal Numbering System (DUNS) Number must be registered and active in the System for Award Management (SAM) at <a href="https://www.sam.gov">https://www.sam.gov</a> 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.</p> <p>c) Facsimile:</p> <p>Alternative Invoices shall be submitted to: (802)-288-7658</p> <p>Submissions by facsimile shall include a cover sheet, point of contact and the number of total pages.</p> <p>Note: the Service Providers or Contractors Dunn and Bradstreet (D&amp;B) DUNS Number must be registered in the System for Award Management (SAM) at <a href="https://www.sam.gov">https://www.sam.gov</a> 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</p> <p>Continued ...</p>					

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

(b) (4)

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OPTIONAL FORM 348 (Rev. 4/2006)

Prescribed by GSA FAR (48 CFR) 53.213(f)

2023-ICLI-00006 3069

2023-ICLI-00006 3745

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

PAGE NO  
5

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

DATE OF ORDER 06/10/2020	CONTRACT NO. ODT-9-C-0001	ORDER NO. 70CDCR20FR0000033
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ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>every invoice.</p> <p>2. Content of Invoices: Each invoice shall contain the following information in accordance with 52.212-4 (g), as applicable:</p> <p>(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;</p> <p>(ii). Dunn and Bradstreet (D&amp;B) DUNS Number;</p> <p>(iii). Invoice date and invoice number;</p> <p>(iv). Agreement/Contract number, contract line item number and, if applicable, the order number;</p> <p>(v). Description, quantity, unit of measure, unit price, extended price and period of performance of the items or services delivered;</p> <p>(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;</p> <p>(vii). Terms of any discount for prompt payment offered;</p> <p>(viii). Remit to Address;</p> <p>(ix). Name, title, and phone number of person to resolve invoicing issues;</p> <p>(x). ICE program office designated on order/contract/agreement and</p> <p>Continued ...</p>					

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

**(b) (4)**

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**OPTIONAL FORM 348** (Rev. 4/2006)  
Prescribed by GSA FPMR (48 CFR) 53.213(f)

2023-ICLI-00006 3070

2023-ICLI-00006 3746

## ORDER FOR SUPPLIES OR SERVICES

PAGE NO

## SCHEDULE - CONTINUATION

6

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

DATE OF ORDER	CONTRACT NO.	ORDER NO.
06/10/2020	ODT-9-C-0001	70CDCR20FR0000033

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>(xi). Mark invoice as "Interim" (Ongoing performance and additional billing expected) and "Final" (performance complete and no additional billing)</p> <p>(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.</p> <p>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:</p> <p>(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:</p> <p>a. Detention Bed Space Services</p> <ul style="list-style-type: none"><li>• Bed day rate;</li><li>• Detainees check-in and check-out dates;</li><li>• Number of bed days multiplied by the bed day rate;</li><li>• Name of each detainee;</li><li>• Detainees identification information</li></ul> <p>(ii). Allowable Incurred Cost. Fixed Unit Continued ...</p>					

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

(b) (4)

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OPTIONAL FORM 348 (Rev. 4/2006)

Prescribed by GSA FPMR (48 CFR) 53.213(f)

2023-ICLI-00006 3071

2023-ICLI-00006 3747

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

PAGE NO  
7

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

DATE OF ORDER 06/10/2020	CONTRACT NO. ODT-9-C-0001	ORDER NO. 70CDCR20FR0000033
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ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>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:</p> <p>a. Detention Bed Space Services. For detention bed space CLINs without a GM, the supporting documentation must include:</p> <ul style="list-style-type: none"> <li>• Bed day rate;</li> <li>• Detainees check-in and check-out dates;</li> <li>• Number of bed days multiplied by the bed day rate;</li> <li>• Name of each detainee;</li> <li>• Detainees identification information</li> </ul> <p>b. Transportation Services: For transportation CLINs without a GM, the supporting documentation must include:</p> <ul style="list-style-type: none"> <li>• Mileage rate being applied for that invoice;</li> <li>• Number of miles;</li> <li>• Transportation routes provided;</li> <li>• Locations serviced;</li> <li>• Names of detainees transported;</li> <li>• Itemized listing of all other charges; and,</li> <li>• for reimbursable expenses (e.g. travel expenses, special meals, etc.) copies of all receipts.</li> </ul> <p>c. Stationary Guard Services: The itemized monthly invoice shall state:</p> <ul style="list-style-type: none"> <li>• The location where the guard services were provided,</li> <li>• The employee guard names and number of hours being billed,</li> <li>• The employee guard names and duration of</li> </ul> <p>Continued ...</p>					

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

(b) (4)

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**OPTIONAL FORM 348** (Rev. 4/2006)  
Prescribed by GSA FPMR (48 CFR) 53.213(f)

2023-ICLI-00006 3072

2023-ICLI-00006 3748

## ORDER FOR SUPPLIES OR SERVICES

PAGE NO

## SCHEDULE - CONTINUATION

8

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

DATE OF ORDER	CONTRACT NO.	ORDER NO.
06/10/2020	ODT-9-C-0001	70CDCR20FR0000033

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>the billing (times and dates), and</p> <ul style="list-style-type: none"><li>• (4) for individual or detainee group escort services only, the name of the detainee(s) that was/were escorted.</li></ul> <p>d. Other Direct Charges (e.g. VTC support, transportation meals/sack lunches, volunteer detainee wages, etc.):</p> <p>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.</p> <p>(iii) Firm Fixed-Price CLINs. Supporting documentation is not required for charges for FFP CLINs.</p> <p>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 other unique identifier and full date of birth, citizenship, or immigration status.</p> <p>As part of your obligation to safeguard information, the follow precautions are required:</p> <p>(i) Email supporting documents containing Sensitive PII in an encrypted attachment</p> <p>Continued ...</p>					

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

(b) (4)

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PREVIOUS EDITION NOT USABLE

OPTIONAL FORM 348 (Rev. 4/2006)

Prescribed by GSA FPMR (48 CFR) 53.213(f)

2023-ICLI-00006 3073

2023-ICLI-00006 3749

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

PAGE NO  
9

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

DATE OF ORDER 06/10/2020	CONTRACT NO. ODT-9-C-0001	ORDER NO. 70CDCR20FR0000033
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ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>with password sent separately to the Contracting Officer Representative assigned to the contract.</p> <p>(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.</p> <p>(iii) Use shredders when discarding paper documents containing Sensitive PII.</p> <p>(iv) Refer to the DHS Handbook for Safeguarding Sensitive Personally Identifiable Information (March 2012) found at <a href="http://www.dhs.gov/xlibrary/assets/privacy/dhs-privacy-safeguardingsensitivepiihandbook-march2012.pdf">http://www.dhs.gov/xlibrary/assets/privacy/dhs-privacy-safeguardingsensitivepiihandbook-march2012.pdf</a> for more information on and/or examples of Sensitive PII.</p> <p>5. Invoice Inquiries. If you have questions regarding payment, please contact ICE Financial Operations at 1-877-491-(b) (7)(E) or by e-mail at (b) (7)(E)@ice.dhs.gov.</p>					

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

(b) (4)

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OPTIONAL FORM 348 (Rev. 4/2006)

Prescribed by GSA FPMR (41 CFR) 101-11.6

2023-ICLI-00006 3074

2023-ICLI-00006 3750

<b>AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT</b>		1. CONTRACT ID CODE		PAGE OF PAGES 1 3	
2. AMENDMENT/MODIFICATION NO. P00001		3. EFFECTIVE DATE See Block 16C		4. REQUISITION/PURCHASE REQ. NO. 192120FPHCAFCC003.2	
5. PROJECT NO. (If applicable)		6. ISSUED BY ICE/DCR		7. ADMINISTERED BY (If other than Item 6) ICE/DCR	
ICEDETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW (b) (6), (b) (7)(C) WASHINGTON DC 20536		ICEDETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW (b) (6), (b) (7)(C) WASHINGTON DC 20536			
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code) CORECIVIC INC ATTN CORECIVIC INC 5501 VIRGINIA WAY (b) (6), (b) (7)(C) BRENTWOOD TN 370277684		(x)		9A. AMENDMENT OF SOLICITATION NO.	
				9B. DATED (SEE ITEM 11)	
		X		10A. MODIFICATION OF CONTRACT/ORDER NO. ODT-9-C-0001 70CDCR20FR0000033	
				10B. DATED (SEE ITEM 13) 06/10/2020	
CODE 1597341510000		FACILITY CODE			
<b>11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS</b>					
<input type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers <input type="checkbox"/> is extended. <input type="checkbox"/> is not extended. Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By 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 desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes 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) See Schedule		Net Increase: (b) (4)			
<b>13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.</b>					
CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.				
	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 ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).				
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:				
X	D. OTHER (Specify type of modification and authority) Funding Only Action				
<b>E. IMPORTANT:</b> Contractor <input checked="" type="checkbox"/> is not. <input type="checkbox"/> is required to sign this document and return _____ copies to the issuing office.					
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)					
DUNS Number: 159734151					
Field Office COR: (b) (6), (b) (7)(C)					
Phone: (b) (6), (b) (7)(C)					
Email: (b) (6), (b) (7)(C)@ice.dhs.gov					
ACOR: (b) (6), (b) (7)(C)					
Phone: (b) (6), (b) (7)(C)					
Email: (b) (6), (b) (7)(C)@ice.dhs.gov					
ACOR: (b) (6), (b) (7)(C)					
Phone: (b) (6), (b) (7)(C)					
Continued ...					
Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.					
15A. NAME AND TITLE OF SIGNER (Type or print)		16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print) (b) (6), (b) (7)(C)			
		TEL: (b) (6), (b) (7)(C)		EMAIL: (b) (6), (b) (7)(C)@ice.dhs.gov	
15B. CONTRACTOR/OFFEROR		15C. DATE SIGNED		16B. UNITED STATES OF AMERICA	
(Signature of person authorized to sign)				(Signature of Contracting Officer)	
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  
ODT-9-C-0001/70CDCR20FR0000033/P00001

PAGE 2 OF 3

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0001	<p>Email: (b) (6), (b) (7)(C) ice.dhs.gov</p> <p>Contract Specialist: (b) (6), (b) (7)(C)</p> <p>Phone: (b) (6), (b) (7)(C)</p> <p>Email: ice.dhs.gov</p> <p>Contracting Officer: (b) (6), (b) (7)(C)</p> <p>Phone: (b) (6), (b) (7)(C)</p> <p>Email: ice.dhs.gov</p> <p>The purpose of this modification is to provide funding for Detention Services concerning in the amount of (b) (4)</p> <p>The obligated amount of this Task Order has increased</p> <p>From (b) (4)</p> <p>By: (b) (4)</p> <p>To: (b) (4)</p> <p>Discount Terms: (b) (4)</p> <p>Net (b) (4)</p> <p>Period of Performance: 07/01/2020 to 06/30/2021</p> <p>Change Item 0001 to read as follows (amount shown is the obligated amount):</p> <p>DETENTION SERVICE</p> <p>The quantity for this CLIN has increased:</p> <p>From (b) (4)</p> <p>By: (b) (4)</p> <p>To: (b) (4)</p> <p>The amount for this CLIN has increased:</p> <p>From (b) (4)</p> <p>By: (b) (4)</p> <p>To: (b) (4)</p> <p>Funding for 7/1/2020 through 9/30/2020</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Continued ...</p>	(b) (4)	EA	(b) (4)	

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	(b) (7)(E) Funded: (b) (4) Notwithstanding the period of performance indicated above, the funding provided in this modification 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 currently 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.				

<b>AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT</b>		1. CONTRACT ID CODE		PAGE OF PAGES	
				1      3	
2. AMENDMENT/MODIFICATION NO. P00002		3. EFFECTIVE DATE See Block 16C		4. REQUISITION/PURCHASE REQ. NO. 192121FPHCAFCC003	
6. ISSUED BY		CODE		5. PROJECT NO. (If applicable)	
		ICE/DCR		7. ADMINISTERED BY (If other than Item 6)	
				CODE ICE/DCR	
ICEDETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW (b) (6), (b) (7)(C) WASHINGTON DC 20536			ICEDETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW (b) (6), (b) (7)(C) WASHINGTON DC 20536		
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)			(x) 9A. AMENDMENT OF SOLICITATION NO.		
CORECIVIC INC ATTN CORECIVIC INC 5501 VIRGINIA WAY (b) (6), (b) (7)(C) BRENTWOOD TN 370277684					
			9B. DATED (SEE ITEM 11)		
			X 10A. MODIFICATION OF CONTRACT/ORDER NO. ODT-9-C-0001		
			70CDCR20FR0000033		
			10B. DATED (SEE ITEM 13)		
CODE 1597341510000			FACILITY CODE		
			06/10/2020		
<b>11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS</b>					
<input type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers <span style="float: right;"><input type="checkbox"/> is extended. <input type="checkbox"/> is not extended.</span> Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By 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 desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes 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)					
See Schedule <span style="float: right;">Net Increase: (b) (4)</span>					
<b>13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.</b>					
CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.				
	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 ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).				
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:				
X	D. OTHER (Specify type of modification and authority) Funding Only Action				
<b>E. IMPORTANT:</b> Contractor <input checked="" type="checkbox"/> is not, <input type="checkbox"/> is required to sign this document and return _____ copies to the issuing office.					
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)					
DUNS Number: 159734151					
Field Office COR: (b) (6), (b) (7)(C)					
Phone: (b) (6), (b) (7)(C)					
Email: @ice.dhs.gov					
ACOR: (b) (6), (b) (7)(C)					
Phone:					
Email: @ice.dhs.gov					
ACOR: (b) (6), (b) (7)(C)					
Phone:					
Continued ...					
Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.					
15A. NAME AND TITLE OF SIGNER (Type or print)			16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)		
			(b) (6), (b) (7)(C)		
			TEL:		
			EMAIL: (b) (6), (b) (7)(C)@ice.dhs.gov		
15B. CONTRACTOR/OFFEROR		15C. DATE SIGNED		16B. UNITED STATES OF AMERICA	
(Signature of person authorized to sign)				(Signature of Contracting Officer)	
				16C. DATE SIGNED	

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED ODT-9-C-0001/70CDCR20FR0000033/P00002	PAGE	OF
		2	3

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0002	<p>Email: (b) (6), (b) (7)(C)@ice.dhs.gov</p> <p>Contract Specialist: (b) (6), (b) (7)(C)</p> <p>Phone: (b) (6), (b) (7)(C)</p> <p>Email: (b) (6), (b) (7)(C)@ice.dhs.gov</p> <p>Contracting Officer: (b) (6), (b) (7)(C)</p> <p>Phone: (b) (6), (b) (7)(C)</p> <p>Email: (b) (6), (b) (7)(C)@ice.dhs.gov</p> <p>The purpose of this modification is to provide funding for Detention Services concerning in the amount of (b) (4)</p> <p>The obligated amount of this Task Order has increased</p> <p>From (b) (4)</p> <p>By: (b) (4)</p> <p>To: (b) (4)</p> <p>Discount Terms:</p> <p>Net (b) (4)</p> <p>Period of Performance: 07/01/2020 to 06/30/2021</p> <p>Change Item 0002 to read as follows (amount shown is the obligated amount):</p> <p>DETENTION SERVICE</p> <p>The quantity for this CLIN has increased:</p> <p>From (b) (4)</p> <p>By: (b) (4)</p> <p>To: (b) (4)</p> <p>The amount for this CLIN has increased:</p> <p>From (b) (4)</p> <p>By: (b) (4)</p> <p>To: (b) (4)</p> <p>Funding for 11/1/2020 through 12/31/2020</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Continued ...</p>	(b) (4)	EA	(b) (4)	(b) (4)

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>Funded: (b) (4)</p> <p>Notwithstanding the period of performance indicated above, the funding provided in this modification 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 currently 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.</p>				

<b>AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT</b>		1. CONTRACT ID CODE		PAGE OF PAGES	
				1      2	
2. AMENDMENT/MODIFICATION NO. P00003		3. EFFECTIVE DATE See Block 16C		4. REQUISITION/PURCHASE REQ. NO. 192121FPHCAFCC003.1	
6. ISSUED BY		CODE 70CDCR		5. PROJECT NO. (If applicable)	
				7. ADMINISTERED BY (If other than Item 6)	
				CODE ICE/DCR	
DETENTION COMPLIANCE AND REMOVALS US IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I ST NW (b) (6), (b) (7)(C) WASHINGTON DC 20536			ICEDETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW (b) (6), (b) (7)(C) WASHINGTON DC 20536		
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)			(x) 9A. AMENDMENT OF SOLICITATION NO.		
CORECIVIC INC ATTN CORECIVIC INC 5501 VIRGINIA WAY (b) (6), (b) (7)(C) BRENTWOOD TN 370277684					
			9B. DATED (SEE ITEM 11)		
			X 10A. MODIFICATION OF CONTRACT/ORDER NO. ODT-9-C-0001		
			70CDCR20FR0000033		
			10B. DATED (SEE ITEM 13)		
CODE 1597341510000			FACILITY CODE		
			06/10/2020		
<b>11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS</b>					
<input type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers <span style="float: right;"><input type="checkbox"/> is extended. <input type="checkbox"/> is not extended.</span> Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By 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 desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes 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)					
See Schedule <span style="float: right;">Net Increase: (b) (4)</span>					
<b>13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.</b>					
CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.				
	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 ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).				
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:				
X	D. OTHER (Specify type of modification and authority) Funding Only Action				
<b>E. IMPORTANT:</b> Contractor <input checked="" type="checkbox"/> is not, <input type="checkbox"/> is required to sign this document and return _____ copies to the issuing office.					
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)					
DUNS Number: 159734151					
Field Office COR: (b) (6), (b) (7)(C) ice.dhs.gov					
ACOR: (b) (6), (b) (7)(C) ice.dhs.gov					
ACOR: (b) (6), (b) (7)(C) ice.dhs.gov					
Contract Specialist: (b) (6), (b) (7)(C) ice.dhs.gov					
Contracting Officer: (b) (6), (b) (7)(C) ice.dhs.gov					
The purpose of this modification is to provide funding for Detention Services concerning in the amount of (b) (4)					
The obligated amount of this Task Order has increased					
Continued ...					
Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.					
15A. NAME AND TITLE OF SIGNER (Type or print)			16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)		
			(b) (6), (b) (7)(C)		
			TEL: EMAIL: (b) (6), (b) (7)(C) ice.dhs.gov		
15B. CONTRACTOR/OFFEROR		15C. DATE SIGNED		16B. UNITED STATES OF AMERICA	
				16C. DATE SIGNED	
(Signature of person authorized to sign)				(Signature of Contracting Officer)	

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED ODT-9-C-0001/70CDCR20FR0000033/P00003	PAGE	OF
		2	2

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0001	<p>From (b) (4)</p> <p>By: (b) (4)</p> <p>To: (b) (4)</p> <p>Discount Terms: (b) (4)</p> <p>Net (b) (4)</p> <p>Period of Performance: 07/01/2020 to 06/30/2021</p> <p>Change Item 0001 to read as follows (amount shown is the obligated amount):</p> <p>DETENTION SERVICE</p> <p>The amount for this CLIN has increased:</p> <p>From (b) (4)</p> <p>By: (b) (4)</p> <p>To: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Notwithstanding the period of performance indicated above, the funding provided in this modification 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 currently 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.</p>				(b) (4)

<b>AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT</b>		1. CONTRACT ID CODE		PAGE OF PAGES	
				1 3	
2. AMENDMENT/MODIFICATION NO.		3. EFFECTIVE DATE		4. REQUISITION/PURCHASE REQ. NO.	
P00004		See Block 16C		192121FPHCAFCC003.2	
6. ISSUED BY		CODE		5. PROJECT NO. (If applicable)	
		70CDCR		7. ADMINISTERED BY (If other than Item 6)	
				CODE ICE/DCR	
DETENTION COMPLIANCE AND REMOVALS US IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I ST NW (b) (6), (b) (7)(C) WASHINGTON DC 20536			ICEDETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW (b) (6), (b) (7)(C) WASHINGTON DC 20536		
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)			9A. AMENDMENT OF SOLICITATION NO.		
CORECIVIC INC ATTN CORECIVIC INC 5501 VIRGINIA WAY (b) (6), (b) (7)(C) BRENTWOOD TN 370277684			(x)		
			9B. DATED (SEE ITEM 11)		
CODE 1597341510000 FACILITY CODE			X 10A. MODIFICATION OF CONTRACT/ORDER NO.		
			ODT-9-C-0001 70CDCR20FR0000033		
			10B. DATED (SEE ITEM 13)		
			06/10/2020		
<b>11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS</b>					
<input type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers <input type="checkbox"/> is extended. <input type="checkbox"/> is not extended. Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By 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 desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes 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)					
See Schedule Net Increase: (b) (4)					
<b>13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.</b>					
CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.				
	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 ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).				
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:				
X	D. OTHER (Specify type of modification and authority) Funding Only Action				
E. IMPORTANT: Contractor <input checked="" type="checkbox"/> is not. <input type="checkbox"/> is required to sign this document and return _____ copies to the issuing office.					
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)					
DUNS Number: 159734151					
Field Office COR: (b) (6), (b) (7)(C) ice.dhs.gov					
ACOR: (b) (6), (b) (7)(C) ice.dhs.gov					
ACOR: (b) (6), (b) (7)(C) ice.dhs.gov					
Contract Specialist: (b) (6), (b) (7)(C) ice.dhs.gov					
Contracting Officer: (b) (6), (b) (7)(C) ice.dhs.gov					
The purpose of this modification is to provide funding for Detention Services concerning in the amount of (b) (4)					
The obligated amount of this Task Order has increased					
Continued ...					
Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.					
15A. NAME AND TITLE OF SIGNER (Type or print)			16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)		
			(b) (6), (b) (7)(C)		
			TEL: EMAIL: (b) (6), (b) (7)(C) ice.dhs.gov		
15B. CONTRACTOR/OFFEROR		15C. DATE SIGNED		16B. UNITED STATES OF AMERICA	
(Signature of person authorized to sign)		(Signature of Contracting Officer)		16C. DATE SIGNED	

NSN 7540-01-152-8070  
 Previous edition unusable

2023-ICLI-00006 3083  
  
 2023-ICLI-00006 3759

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

## CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED  
ODT-9-C-0001/70CDCR20FR0000033/P00004

PAGE 2 OF 3

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0001	<p>From (b) (4) By: (b) (4) To: (b) (4) Discount Terms: (b) (4) Net (b) (4) Period of Performance: 07/01/2020 to 06/30/2021</p> <p>Change Item 0001 to read as follows (amount shown is the obligated amount):</p> <p>DETENTION SERVICE</p> <p>The amount for this CLIN has increased: From (b) (4) By: (b) (4) To: (b) (4)</p> <p>Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4) Notwithstanding the period of performance indicated above, the funding provided in this modification 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 currently 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) Continued ...</p>				(b) (4)

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	for performance beyond the funding allotted.				

<b>AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT</b>		1. CONTRACT ID CODE		PAGE OF PAGES 1 2	
2. AMENDMENT/MODIFICATION NO. P00005		3. EFFECTIVE DATE See Block 16C		4. REQUISITION/PURCHASE REQ. NO.	
6. ISSUED BY DETENTION COMPLIANCE AND REMOVALS US IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I ST NW (b) (6), (b) (7)(C) WASHINGTON DC 20536		CODE 70CDCR		5. PROJECT NO. (If applicable) ICE/DCR	
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code) CORECIVIC INC ATTN (b) (6), (b) (7)(C) 5501 VIRGINIA WAY (b) (6), (b) (7)(C) BRENTWOOD TN 37027		(x)		9A. AMENDMENT OF SOLICITATION NO.	
CODE 1597341510000		FACILITY CODE		9B. DATED (SEE ITEM 11)	
		X		10A. MODIFICATION OF CONTRACT/ORDER NO. 70CDCR20D00000013 70CDCR20FR0000051	
				10B. DATED (SEE ITEM 13) 07/31/2020	

**11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS**

☐ The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers ☐ is extended. ☐ is not extended.  
Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning \_\_\_\_\_ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By 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 desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes 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)

See Schedule

**13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.**

CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.
	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 ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:
X	D. OTHER (Specify type of modification and authority) Administrative Modification

**E. IMPORTANT:** Contractor ☒ is not, ☐ is required to sign this document and return \_\_\_\_\_ copies to the issuing office.

14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)

DUNS Number: 159734151

Contracting Officer's Representative: (b) (6), (b) (7)(C) @ice.dhs.gov, (210) 283- (b) (6), (b) (7)(C)

Alternate Contracting Officer's Representative: (b) (6), (b) (7)(C)

(b) (6), (b) (7)(C) @ice.dhs.gov, (210) 283- (b) (6), (b) (7)(C)

Contract Specialist: (b) (6), (b) (7)(C) @ice.dhs.gov, (202) 731- (b) (6), (b) (7)(C)

Contracting Officer: (b) (6), (b) (7)(C) @ice.dhs.gov, (202) 732- (b) (6), (b) (7)(C)

The purpose of this modification is to update the COR to (b) (6), (b) (7)(C) and ACOR to (b) (6), (b) (7)(C) (b) (6), (b) (7)(C)

The total obligated dollars on this task order has not increased:

Continued ...

Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.

15A. NAME AND TITLE OF SIGNER (Type or print) (b) (6), (b) (7)(C)		16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print) (b) (6), (b) (7)(C)	
TEL: 202-732- (b) (6), (b) (7)(C)		EMAIL: (b) (6), (b) (7)(C) @ICE.DHS.GOV	
15B. CONTRACTOR/OFFEROR  (Signature of person authorized to sign)	15C. DATE SIGNED	16B. UNITED STATES OF AMERICA  (Signature of Contracting Officer)	16C. DATE SIGNED

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000013/70CDCR20FR00000051/P00005	PAGE	OF
		2	2

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>At: (b) (4)</p> <p>All other terms and conditions remain unchanged.  Period of Performance: 08/01/2020 to 07/31/2021  Notwithstanding the period of performance indicated above, the funding provided in this modification 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 currently 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.</p>				

<b>AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT</b>		1. CONTRACT ID CODE		PAGE OF PAGES	
				1 4	
2. AMENDMENT/MODIFICATION NO.		3. EFFECTIVE DATE		4. REQUISITION/PURCHASE REQ. NO.	
P00006		See Block 16C		192121FA000000012.3	
6. ISSUED BY		CODE		5. PROJECT NO. (If applicable)	
		70CDCR		7. ADMINISTERED BY (If other than Item 6)	
				CODE ICE/DCR	
DETENTION COMPLIANCE AND REMOVALS US IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I ST NW (b) (6), (b) (7)(C) WASHINGTON DC 20536			ICEDETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW (b) (6), (b) (7)(C) WASHINGTON DC 20536		
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)			9A. AMENDMENT OF SOLICITATION NO.		
CORECIVIC INC ATTN (b) (6), (b) (7)(C) 5501 VIRGINIA WAY (b) (6), (b) (7)(C) BRENTWOOD TN 37027			(x)		
			9B. DATED (SEE ITEM 11)		
			X 10A. MODIFICATION OF CONTRACT/ORDER NO.		
			70CDCR20D000000013		
			70CDCR20FR00000051		
			10B. DATED (SEE ITEM 13)		
CODE 1597341510000			FACILITY CODE		
			07/31/2020		

**11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS**

☐ The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers ☐ is extended. ☐ is not extended.  
Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning \_\_\_\_\_ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By 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 desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes 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)

See Schedule

Net Increase:

(b) (4)

**13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.**

CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.
	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 ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:
X	D. OTHER (Specify type of modification and authority) Additional Funding

**E. IMPORTANT:** Contractor ☒ is not. ☐ is required to sign this document and return \_\_\_\_\_ copies to the issuing office.

14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)

DUNS Number: 159734151

Contracting Officer's Representative: (b) (6), (b) (7)(C) @ice.dhs.gov, (210) 283- (b) (6), (b) (7)(C)

Alternate Contracting Officer's Representative: (b) (6), (b) (7)(C)

(b) (6), (b) (7)(C) @ice.dhs.gov, (210) 283- (b) (6), (b) (7)(C)

Contract Specialist: (b) (6), (b) (7)(C) @ice.dhs.gov, (202) 731- (b) (6), (b) (7)(C)

Contracting Officer: (b) (6), (b) (7)(C) @ice.dhs.gov, (202) 732- (b) (6), (b) (7)(C)

The purpose of this modification is to add additional funding to CLIN 0001 Detention and Continued ...

Except as provided herein, all terms and conditions of the document referenced in Item 9 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		15D. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)		15E. DATE SIGNED	
(b) (6), (b) (7)(C)						(b) (6), (b) (7)(C)			
TEL: 202-732- (b) (6), (b) (7)(C)						EMAIL: (b) (6), (b) (7)(C) ICE.DHS.GOV			
15B. CONTRACTOR/OFFEROR		15C. DATE SIGNED		15D. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)		15E. DATE SIGNED			
(Signature of person authorized to sign)				(Signature of Contracting Officer)					

NSN 7540-01-152-8070  
Previous edition unusable

2023-ICLI-00006 3088

2023-ICLI-00006 3764

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

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0001	<p>0003A Transportation.</p> <p>The total obligated dollars on this task order has increased: From (b) (4) By: (b) (4) To: (b) (4)</p> <p>All other terms and conditions remain unchanged. Discount Terms: Net (b) (4) Period of Performance: 08/01/2020 to 07/31/2021</p> <p>Change Item 0001 to read as follows (amount shown is the obligated amount):</p> <p>BASE PERIOD - DETENTION SERVICES PoP Dates: 08/01/2020 - 07/31/2021</p> <p>Bed Day Rate (BDR) Effective 08/01/2020 - 02/28/2021 Tier 1 (b) (4) Guaranteed Minimum: (b) (4) Tier 2 (b) (4)</p> <p>BDR Effective 03/01/2021 - 07/31/2021 Tier 1 (b) (4) Guaranteed Minimum: (b) (4) Tier 2 (b) (4)</p> <p>As a result, CLIN 0001 has increased: From (b) (4) By: (b) (4) To: (b) (4) Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Continued ...</p>				(b) (4)

## CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED

70CDCR20D00000013/70CDCR20FR0000051/P00006

PAGE

OF

3

4

NAME OF OFFEROR OR CONTRACTOR

CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0003A	<p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Change Item 0003A to read as follows (amount shown is the obligated amount):</p> <p>BASE PERIOD - TRANSPORTATION LABOR</p> <p>PoP Dates: 08/01/2020 to 07/31/2021</p> <p>Monthly FFP: (b) (4)</p> <p>NTE: (b) (4) miles/year</p> <p>As a result, CLIN 0003A has increased:</p> <p>From (b) (4)</p> <p>By: (b) (4)</p> <p>To: (b) (4)</p> <p>Product/Service Code: S206</p> <p>Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Continued ...</p>				(b) (4)

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<div>(b) (7)(E)</div> <div>Funded: (b) (4)</div> <div>Accounting Info:</div> <div>(b) (7)(E)</div> <div>Funded: (b) (4)</div> <div>Accounting Info:</div> <div>(b) (7)(E)</div> <div>Funded: (b) (4)</div> <div>Notwithstanding the period of performance indicated above, the funding provided in this modification 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 currently 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.</div>				

<b>AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT</b>		1. CONTRACT ID CODE		PAGE OF PAGES	
				1      4	
2. AMENDMENT/MODIFICATION NO. P00007		3. EFFECTIVE DATE See Block 16C		4. REQUISITION/PURCHASE REQ. NO. 192121FA000000012.4	
6. ISSUED BY		CODE 70CDCR		5. PROJECT NO. (If applicable)	
				7. ADMINISTERED BY (If other than Item 6) CODE ICE/DCR	
DETENTION COMPLIANCE AND REMOVALS US IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I ST NW (b) (6), (b) (7)(C) WASHINGTON DC 20536			ICEDETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW (b) (6), (b) (7)(C) WASHINGTON DC 20536		
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)			9A. AMENDMENT OF SOLICITATION NO.		
CORECIVIC INC ATTN (b) (6), (b) (7)(C) 5501 VIRGINIA WAY (b) (6), (b) (7)(C) BRENTWOOD TN 37027			(x)		
			9B. DATED (SEE ITEM 11)		
			10A. MODIFICATION OF CONTRACT/ORDER NO. 70CDCR20D000000013 70CDCR20FR0000051		
CODE 1597341510000 FACILITY CODE			10B. DATED (SEE ITEM 13) 07/31/2020		
<b>11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS</b>					
<input type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers <input type="checkbox"/> is extended. <input type="checkbox"/> is not extended. Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By 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 desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes 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) See Schedule Net Increase: (b) (4)					
<b>13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.</b>					
CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.				
	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 ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).				
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:				
X	D. OTHER (Specify type of modification and authority) Additional Funding				
<b>E. IMPORTANT:</b> Contractor <input checked="" type="checkbox"/> is not. <input type="checkbox"/> is required to sign this document and return _____ copies to the issuing office.					
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)					
DUNS Number: 159734151					
Contracting Officer's Representative: (b) (6), (b) (7)(C) @ice.dhs.gov, (210) 283- (b) (6), (b) (7)(C)					
Alternate Contracting Officer's Representative: (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) @ice.dhs.gov, (210) 283- (b) (6), (b) (7)(C)					
Contract Specialist: (b) (6), (b) (7)(C) @ice.dhs.gov, (202) 731- (b) (6), (b) (7)(C)					
Contracting Officer: (b) (6), (b) (7)(C) @ice.dhs.gov, (202) 732- (b) (6), (b) (7)(C)					
The purpose of this modification is to add additional funding to CLIN 0001 Detention and Continued ...					
Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.					
15A. NAME AND TITLE OF SIGNER (Type or print)			16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)		
			(b) (6), (b) (7)(C) TEL: 202-732- (b) (6), (b) (7)(C) EMAIL: (b) (6), (b) (7)(C) ICE.DHS.GOV		
15B. CONTRACTOR/OFFEROR		15C. DATE SIGNED		16B. UNITED STATES OF AMERICA	
(Signature of person authorized to sign)				(Signature of Contracting Officer)	
NSN 7540-01-152-8070 Previous edition unusable		2023-ICLI-00006 3092		STANDARD FORM 30 (REV. 10-83) Prescribed by GSA FAR (48 CFR) 53.243	

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000013/70CDCR20FR0000051/P00007	PAGE	OF
		2	4

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0001	<p>0003A Transportation.</p> <p>The total obligated dollars on this task order has increased: From (b) (4) By: (b) (4) To: (b) (4)</p> <p>All other terms and conditions remain unchanged. Discount Terms: (b) (4) Net (b) (4) Period of Performance: 08/01/2020 to 07/31/2021</p> <p>Change Item 0001 to read as follows (amount shown is the obligated amount):</p> <p>BASE PERIOD - DETENTION SERVICES PoP Dates: 08/01/2020 - 07/31/2021</p> <p>Bed Day Rate (BDR) Effective 08/01/2020 - 02/28/2021 Tier 1 (b) (4) Guaranteed Minimum: (b) (4) Tier 2 (b) (4)</p> <p>BDR Effective 03/01/2021 - 07/31/2021 Tier 1 (b) (4) Guaranteed Minimum: (b) (4) Tier 2 (b) (4)</p> <p>As a result, CLIN 0001 has increased:</p> <p>From (b) (4) By: (b) (4) To: (b) (4) Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Continued ...</p>				(b) (4)

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000013/70CDCR20FR0000051/P00007	PAGE	OF
		3	4

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0003A	Funded: (b) (4) Accounting Info: (b) (7)(E)				
	Funded: (b) (4) Accounting Info: (b) (7)(E)				
	Funded: (b) (4) Accounting Info: (b) (7)(E)				
	Funded: (b) (4) Accounting Info: (b) (7)(E)				
	Change Item 0003A to read as follows (amount shown is the obligated amount):				
	BASE PERIOD - TRANSPORTATION LABOR PoP Dates: 08/01/2020 to 07/31/2021				(b) (4)
	Monthly FFP: (b) (4)				
	NTE: (b) (4) miles/year				
	As a result, CLIN 0003A has increased:				
	From (b) (4) By: To:				
	Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD  Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Continued ...				

<b>CONTINUATION SHEET</b>	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000013/70CDCR20FR0000051/P00007	PAGE 4	OF 4
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NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Notwithstanding the period of performance indicated above, the funding provided in this modification 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 currently 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.</p>				

<b>AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT</b>		1. CONTRACT ID CODE		PAGE OF PAGES	
				1      3	
2. AMENDMENT/MODIFICATION NO. P00008		3. EFFECTIVE DATE See Block 16C		4. REQUISITION/PURCHASE REQ. NO. 192121FA000000012.6	
6. ISSUED BY		CODE 70CDCR		5. PROJECT NO. (If applicable)	
				7. ADMINISTERED BY (If other than Item 6) CODE ICE/DCR	
DETENTION COMPLIANCE AND REMOVALS US IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I ST NW (b) (6), (b) (7)(C) WASHINGTON DC 20536		ICEDETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW (b) (6), (b) (7)(C) WASHINGTON DC 20536			
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)		(x) 9A. AMENDMENT OF SOLICITATION NO.			
CORECIVIC INC ATTN (b) (6), (b) (7)(C) 5501 VIRGINIA WAY (b) (6), (b) (7)(C) BRENTWOOD TN 37027		9B. DATED (SEE ITEM 11)			
		X 10A. MODIFICATION OF CONTRACT/ORDER NO. 70CDCR20D000000013 70CDCR20FR00000051			
		10B. DATED (SEE ITEM 13) 07/31/2020			
CODE 1597341510000		FACILITY CODE			
<b>11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS</b>					
<input type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers <input type="checkbox"/> is extended. <input type="checkbox"/> is not extended. Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By 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 desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes 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: (b) (4)					
See Schedule					
<b>13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.</b>					
CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.				
	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 ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).				
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:				
X	D. OTHER (Specify type of modification and authority) Additional Funding Modification				
E. IMPORTANT: Contractor <input checked="" type="checkbox"/> is not. <input type="checkbox"/> is required to sign this document and return _____ copies to the issuing office.					
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)					
DUNS Number: 159734151					
Contracting Officer's Representative: (b) (6), (b) (7)(C)@ice.dhs.gov, (210) 283-(b) (6), (b) (7)(C)					
Alternate Contracting Officer's Representative: (b) (6), (b) (7)(C) (b) (6), (b) (7)(C)@ice.dhs.gov, (210) 283-(b) (6), (b) (7)(C)					
Contract Specialist: (b) (6), (b) (7)(C)@ice.dhs.gov, (202) 731-(b) (6), (b) (7)(C)					
Contracting Officer: (b) (6), (b) (7)(C)@ice.dhs.gov, (202) 878-(b) (6), (b) (7)(C)					
The purpose of this modification is to add additional funding to CLIN 0003A for Continued ...					
Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.					
15A. NAME AND TITLE OF SIGNER (Type or print)		16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print) (b) (6), (b) (7)(C) TEL: 202-732-(b) (6), (b) (7)(C) EMAIL: (b) (6), (b) (7)(C)@ICE.DHS.GOV			
15B. CONTRACTOR/OFFEROR		15C. DATE SIGNED		16B. UNITED STATES OF AMERICA	
(Signature of person authorized to sign)				(Signature of Contracting Officer)	
NSN 7540-01-152-8070 Previous edition unusable		2023-ICLI-00006 3096		STANDARD FORM 30 (REV. 10-83) Prescribed by GSA FAR (48 CFR) 53.243	

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000013/70CDCR20FR0000051/P00008	PAGE	OF
		2	3

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0003A	<p>Transportation Costs that occurred during the Period of Performance.</p> <p>The total obligated dollars on this task order has increased: From (b) (4) By: (b) (4) To: (b) (4)</p> <p>All other terms and conditions remain unchanged. Discount Terms: Net (b) (4) Period of Performance: 08/01/2020 to 07/31/2021</p> <p>Change Item 0003A to read as follows (amount shown is the obligated amount):</p> <p>BASE PERIOD - TRANSPORTATION LABOR PoP Dates: 08/01/2020 to 07/31/2021</p> <p>Monthly FFP: (b) (4)</p> <p>NTE: (b) (4) miles/year</p> <p>As a result, CLIN 0003A has increased:</p> <p>From (b) (4) By: (b) (4) To: (b) (4)</p> <p>Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4) Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4) Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4) Accounting Info: Continued ...</p>				(b) (4)

<b>CONTINUATION SHEET</b>	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000013/70CDCR20FR0000051/P00008	PAGE OF 3 3
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NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Notwithstanding the period of performance indicated above, the funding provided in this modification 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 currently 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.</p>				

<b>AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT</b>		1. CONTRACT ID CODE		PAGE OF PAGES	
				1 6	
2. AMENDMENT/MODIFICATION NO.		3. EFFECTIVE DATE		4. REQUISITION/PURCHASE REQ. NO.	
P00009		See Block 16C		192121FA000000012.7	
6. ISSUED BY		CODE		5. PROJECT NO. (If applicable)	
		70CDCR		7. ADMINISTERED BY (If other than Item 6)	
				CODE ICE/DCR	
DETENTION COMPLIANCE AND REMOVALS US IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I ST NW (b) (6), (b) (7)(C) WASHINGTON DC 20536			ICEDETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW (b) (6), (b) (7)(C) WASHINGTON DC 20536		
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)			9A. AMENDMENT OF SOLICITATION NO.		
CORECIVIC INC ATTN (b) (6), (b) (7)(C) 5501 VIRGINIA WAY (b) (6), (b) (7)(C) BRENTWOOD TN 37027			(x)		
			9B. DATED (SEE ITEM 11)		
CODE 1597341510000 FACILITY CODE			X 10A. MODIFICATION OF CONTRACT/ORDER NO.		
			70CDCR20D000000013 70CDCR20FR00000051		
			10B. DATED (SEE ITEM 13)		
			07/31/2020		
<b>11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS</b>					
<input type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers <input type="checkbox"/> is extended. <input type="checkbox"/> is not extended. Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By 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 desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes 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)					
See Schedule Net Decrease: (b) (4)					
<b>13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.</b>					
CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.				
	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 ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).				
X	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF: FAR 4.804 Contract Closeout				
	D. OTHER (Specify type of modification and authority)				
<b>E. IMPORTANT:</b> Contractor <input checked="" type="checkbox"/> is not. <input type="checkbox"/> is required to sign this document and return _____ copies to the issuing office.					
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)					
DUNS Number: 159734151					
Contracting Officer's Representative: (b) (6), (b) (7)(C) @ice.dhs.gov, (210) 283-(b) (6), (b) (7)(C)					
Alternate Contracting Officer's Representative: (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) @ice.dhs.gov, (210) 283-(b) (6), (b) (7)(C)					
Contracting Officer: (b) (6), (b) (7)(C) @ice.dhs.gov, (202) 878-(b) (6), (b) (7)(C)					
There is one (1) requisition associated with this modification: 192121FA000000012.7.					
The purpose of this modification is the to deobligate excess funds and closeout this task					
Continued ...					
Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.					
15A. NAME AND TITLE OF SIGNER (Type or print)			16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)		
			(b) (6), (b) (7)(C) TEL: 202-732-(b) (6), (b) (7)(C) EMAIL: (b) (6), (b) (7)(C)@ICE.DHS.GOV		
15B. CONTRACTOR/OFFEROR		15C. DATE SIGNED		16B. UNITED STATES OF AMERICA	
(Signature of person authorized to sign)				(Signature of Contracting Officer)	
NSN 7540-01-152-8070 Previous edition unusable		2023-ICLI-00006 3099		STANDARD FORM 30 (REV. 10-83) Prescribed by GSA FAR (48 CFR) 53.243	

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000013/70CDCR20FR0000051/P00009	PAGE	OF
		2	6

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>order. The parties agree as follows:</p> <p>1. All services/supplies have been received, inspected, and accepted by the Government.</p> <p>2. The Contractor releases the Government from all and any liability under this contract for further equitable and/or price adjustments including, but not limited to, claims and causes of action for the recovery of direct costs, indirect costs, delay costs, disruption costs, profit, interest, attorney's fees, damages, etc.</p> <p>3. The Government agrees that all obligations under this contract are concluded.</p> <p>4. Deobligate FY20 prior year funds and FY21 current year excess funds in the total of \$1,430,777.75. Please see below CLINS for details.</p> <p>5. The total obligated dollars on this task order has decreased:</p> <p>From (b) (4)</p> <p>By: (b) (4)</p> <p>To: (b) (4)</p> <p>6. This task order is closed.</p> <p>Discount Terms: Net (b) (4)</p> <p>Period of Performance: 08/01/2020 to 07/31/2021</p> <p>Change Item 0001 to read as follows (amount shown is the obligated amount):</p> <p>0001 BASE PERIOD - DETENTION SERVICES (b) (4)</p> <p>PoP Dates: 08/01/2020 - 07/31/2021</p> <p>Bed Day Rate (BDR) Effective 08/01/2020 - 02/28/2021</p> <p>Tier 1 (b) (4) Guaranteed Minimum: (b) (4)</p> <p>Tier 2 (b) (4)</p> <p>BDR Effective 03/01/2021 - 07/31/2021</p> <p>Tier 1 (b) (4) Guaranteed Minimum: (b) (4)</p> <p>Tier 2 (b) (4)</p> <p>Deobligate a total of (b) (4) FY20 funds</p> <p>Continued ...</p>				



CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000013/70CDCR20FR0000051/P00009	PAGE	OF
		4	6

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0002	<p>Change Item 0002 to read as follows (amount shown is the obligated amount):</p> <p>BASE PERIOD - ON CALL STATIONARY GUARD SERVICES PoP Dates: 08/01/2020 to 07/31/2021</p> <p>REGULAR RATE: (b) (4) HR OT RATE: (b) (4) /HR NOT-TO-EXCEED: (b) (4) Hours</p> <p>Deobligate a total of (b) (4) from CLIN 0002 from Item 2, MDL 1 (FY20); Item 8, MDL 1 (FY20); Item 12, MDL 1 (FY21); and Item 17, MDL 1 (FY21). As a result, CLIN 0002 has decreased:</p> <p>From (b) (4) By: (b) (4) To: (b) (4) Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Continued ...</p>				(b) (4)

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0003B	<p>(b) (7)(E) Funded: (b) (4)</p> <p>Change Item 0003B to read as follows (amount shown is the obligated amount):</p> <p>BASE PERIOD - TRANSPORTATION MILEAGE PoP Dates: 08/01/2020 to 07/31/2021</p> <p>Mileage Rate: (b) (4) mile</p> <p>NTE: (b) (4) miles</p> <p>Deobligate a total of (b) (4) FY20 funds from CLIN 0003B, Item 10, MDL 1. As a result, CLIN 0003B has decreased:</p> <p>From (b) (4) By: (b) (4) To: (b) (4) Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4) Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4) Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4) Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4) Accounting Info: (b) (7)(E)</p>				(b) (4)
0004	<p>Change Item 0004 to read as follows (amount shown is the obligated amount):</p> <p>BASE PERIOD - DETAINEE WORK PROGRAM PoP Dates: 08/01/2020 to 07/31/2021</p> <p>Continued ...</p>				(b) (4)

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	(b) (4) Day  NTE (b) (4)  Deobligate a total of (b) (4) FY21 funds from CLIN 0004, Item 15, MDL 1. As a result, CLIN 0004 has decreased:  From (b) (4) By: (b) (4) To: Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD  Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4)				

## ORDER FOR SUPPLIES OR SERVICES

PAGE OF PAGES

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

1. DATE OF ORDER 07/31/2020		2. CONTRACT NO. (If any) 70CDCR20D00000013		6. SHIP TO:				
3. ORDER NO. 70CDCR20FR0000051		4. REQUISITION/REFERENCE NO. 192120FA000000012.5		a. NAME OF CONSIGNEE				
5. ISSUING OFFICE (Address correspondence to) ICE/DETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW (b) (6), (b) (7)(C) WASHINGTON DC 20536				b. STREET ADDRESS				
7. TO: (b) (6), (b) (7)(C)				c. CITY		e. ZIP CODE		
a. NAME OF CONTRACTOR CORECIVIC INC				f. SHIP VIA				
b. COMPANY NAME				8. TYPE OF ORDER				
c. STREET ADDRESS 5501 VIRGINIA WAY (b) (6), (b) (7)(C)				a. PURCHASE REFERENCE YOUR:  Please furnish the following on the terms and conditions specified on both sides of this order and on the attached sheet, if any, including delivery as indicated.				
d. CITY BRENTWOOD				b. DELIVERY Except for billing instructions on the reverse, this delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.				
e. STATE TN				f. ZIP CODE 37027				
9. ACCOUNTING AND APPROPRIATION DATA See Schedule				10. REQUISITIONING OFFICE ICE ENFORCEMENT REMOVAL				
11. BUSINESS CLASSIFICATION (Check appropriate box(es)) <input type="checkbox"/> a. SMALL <input checked="" type="checkbox"/> b. OTHER THAN SMALL <input type="checkbox"/> c. DISADVANTAGED <input type="checkbox"/> d. WOMEN-OWNED <input type="checkbox"/> e. HUBZone <input type="checkbox"/> f. SERVICE-DISABLED VETERAN-OWNED <input type="checkbox"/> g. WOMEN-OWNED SMALL BUSINESS (WOSB) ELIGIBLE UNDER THE WOSB PROGRAM <input type="checkbox"/> h. EDWOSB				12. F.O.B. POINT				
13. PLACE OF a. INSPECTION Destination		b. ACCEPTANCE Destination		14. GOVERNMENT B/L NO.		15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date)		
16. DISCOUNT TERMS Net (b) (4)								
17. SCHEDULE (See reverse for Rejections)								
ITEM NO. (a)	SUPPLIES OR SERVICES (b)			QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	DUNS Number: 159734151 Contracting Officer: (b) (6), (b) (7)(C) (b) (6), (b) (7)(C)@ice.dhs.gov Contract Specialist: (b) (6), (b) (7)(C) (b) (6), (b) (7)(C)@ice.dhs.gov Contracting Officer's Representative: Continued ...							
18. SHIPPING POINT		19. GROSS SHIPPING WEIGHT		20. INVOICE NO.		17(h) TOTAL (Cont. pages)		
21. MAIL INVOICE TO:								
a. NAME DHS ICE						(b) (4)		
b. STREET ADDRESS (or P.O. Box) BURLINGTON FINANCE CENTER PO BOX 1620 ATTN (b) (7)(E)						17(i) GRAND TOTAL		
c. CITY WILLISTON		d. STATE VT		e. ZIP CODE 05495-1620		(b) (4)		
22. UNITED STATES OF AMERICA BY (Signature)				23. NAME (Typed) (b) (6), (b) (7)(C) TITLE: CONTRACTING/ORDERING OFFICER				

## ORDER FOR SUPPLIES OR SERVICES

PAGE NO

## SCHEDULE - CONTINUATION

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

DATE OF ORDER	CONTRACT NO.	ORDER NO.				
07/31/2020	70CDCR20D00000013	70CDCR20FR0000051				
ITEM NO.	SUPPLIES/SERVICES	QUANTITY ORDERED	UNIT	UNIT PRICE	AMOUNT	QUANTITY ACCEPTED
(a)	(b)	(c)	(d)	(e)	(f)	(g)
0001	<p>(b) (6), (b) (7)(C)</p> <p>ice.dhs.gov</p> <p>There is one requisition associated with this task order: 192120FA000000012.5</p> <p>This Task Order is being issued against Indefinite-Delivery Indefinite-Quantity (IDIQ) contract 70CDCR20D00000013 for Detention and Detention Related Services at the T. Don Hutto Residential Center located in Taylor, TX. Funding is provided in the amount of \$1,984,635.16. The total amount of the task order is increased:</p> <p>From: (b) (4)</p> <p>By: (b) (4)</p> <p>To: (b) (4)</p> <p>See detail within the CLIN(s) for additional information.</p> <p>The Period of Performance for this task order is 8/1/2020 to 7/31/21 which matches the base period on IDIQ 70CDCR20D00000013.</p> <p>Period of Performance: 08/01/2020 to 07/31/2021</p> <p>BASE PERIOD - DETENTION SERVICES</p> <p>PoP Dates: 08/01/2020 - 07/31/2021</p> <p>Ramp Up Rates Bed Day Rate (BDR) Effective 08/01/2020 - 02/28/2021</p> <p>Tier 1 (b) (4) Guaranteed Minimum): (b) (4)</p> <p>Tier 2 (b) (4)</p> <p>BDR Effective 03/01/2021 - 07/31/2021</p> <p>Tier 1 (b) (4) Guaranteed Minimum): (b) (4)</p> <p>Tier 2 (b) (4)</p> <p>Product/Service Code: S206</p> <p>Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info: (b) (7)(E)</p> <p>Continued ...</p>				(b) (4)	

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(b) (4)

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2023-ICLI-00006 3106

2023-ICLI-00006 3782

## ORDER FOR SUPPLIES OR SERVICES

PAGE NO

## SCHEDULE - CONTINUATION

3

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

DATE OF ORDER	CONTRACT NO.	ORDER NO.
07/31/2020	70CDCR20D00000013	70CDCR20FR0000051

ITEM NO.	SUPPLIES/SERVICES	QUANTITY ORDERED	UNIT	UNIT PRICE	AMOUNT	QUANTITY ACCEPTED
(a)	(b)	(c)	(d)	(e)	(f)	(g)
0002	(b) (7)(E) Funded: (b) (4)  BASE PERIOD - ON CALL STATIONARY GUARD SERVICES PoP Dates: 08/01/2020 to 07/31/2021  REGULAR RATE: (b) (4) HR OT RATE: (b) (4) HR  NOT-TO-EXCEED: (b) (4) Hours Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD  Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4)				(b) (4)	
0003A	BASE PERIOD - TRANSPORTATION LABOR PoP Dates: 08/01/2020 to 07/31/2021  Monthly FFP: (b) (4)  NTE: (b) (4) miles/year Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD  Accounting Info: (b) (7)(E) Funded: (b) (4)	(b) (4)	MO	(b) (4)		
0003B	BASE PERIOD - TRANSPORTATION MILEAGE PoP Dates: 08/01/2020 to 07/31/2021  Continued ...				(b) (4)	
TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))					(b) (4)	

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2023-ICLI-00006 3107

2023-ICLI-00006 3783

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

PAGE NO  
4

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

DATE OF ORDER 07/31/2020	CONTRACT NO. 70CDCR20D00000013	ORDER NO. 70CDCR20FR00000051
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ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
0004	<p>Mileage Rate: (b) (4) /mile</p> <p>NTE: (b) (4) miles</p> <p>Product/Service Code: S206</p> <p>Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>BASE PERIOD - DETAINEE WORK PROGRAM</p> <p>PoP Dates: 08/01/2020 to 07/31/2021</p> <p>(b) (4) Day</p> <p>NTE (b) (4)</p> <p>Product/Service Code: S206</p> <p>Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Invoice Instructions: ICE - ERO Contracts</p> <p>Service Providers/Contractors shall use these procedures when submitting an invoice.</p> <p>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:</p> <p>a) Email:</p> <p>Continued ...</p>	(b) (4)	EA	(b) (4)	(b) (4)	

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(b) (4)

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2023-ICLI-00006 3108

2023-ICLI-00006 3784

## SCHEDULE - CONTINUATION

5

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

DATE OF ORDER 07/31/2020	CONTRACT NO. 70CDCR20D00000013	ORDER NO. 70CDCR20FR0000051
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ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<ul style="list-style-type: none"> <li>• (b) (7)(E) @ice.dhs.gov</li> <li>• Contracting Officer Representative (COR) or Government Point of Contact (GPOC)</li> <li>• Contract Specialist/Contracting Officer</li> </ul> <p>Each email shall contain only (1) invoice and the invoice number shall be indicated on the subject line of the email.</p> <p>b) USPS:</p> <p>DHS, ICE Financial Operations - Burlington P.O. Box 1620 Williston, VT 05495-1620</p> <p>ATTN: (b) (7)(E)</p> <p>The Contractors Data Universal Numbering System (DUNS) Number must be registered and active in the System for Award Management (SAM) at <a href="https://www.sam.gov">https://www.sam.gov</a> 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.</p> <p>c) Facsimile:</p> <p>Alternative Invoices shall be submitted to: (802)-288-7658</p> <p>Submissions by facsimile shall include a cover sheet, point of contact and the number of total pages.</p> <p>Note: the Service Providers or Contractors Dunn and Bradstreet (D&amp;B) DUNS Number must be registered in the System for Award Management (SAM) at <a href="https://www.sam.gov">https://www.sam.gov</a> 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.</p> <p>Continued ...</p>					

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(b) (4)

## ORDER FOR SUPPLIES OR SERVICES

PAGE NO

## SCHEDULE - CONTINUATION

6

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

DATE OF ORDER	CONTRACT NO.	ORDER NO.
07/31/2020	70CDCR20D00000013	70CDCR20FR0000051

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>2. Content of Invoices: Each invoice shall contain the following information in accordance with 52.212-4 (g), as applicable:</p> <p>(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;</p> <p>(ii). Dunn and Bradstreet (D&amp;B) DUNS Number;</p> <p>(iii). Invoice date and invoice number;</p> <p>(iv). Agreement/Contract number, contract line item number and, if applicable, the order number;</p> <p>(v). Description, quantity, unit of measure, unit price, extended price and period of performance of the items or services delivered;</p> <p>(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;</p> <p>(vii). Terms of any discount for prompt payment offered;</p> <p>(viii). Remit to Address;</p> <p>(ix). Name, title, and phone number of person to resolve invoicing issues;</p> <p>(x). ICE program office designated on order/contract/agreement and</p> <p>Continued ...</p>					

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(b) (4)

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2023-ICLI-00006 3786

## ORDER FOR SUPPLIES OR SERVICES

PAGE NO

## SCHEDULE - CONTINUATION

7

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

DATE OF ORDER	CONTRACT NO.	ORDER NO.
07/31/2020	70CDCR20D00000013	70CDCR20FR0000051

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>(xi). Mark invoice as "Interim" (Ongoing performance and additional billing expected) and "Final" (performance complete and no additional billing)</p> <p>(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.</p> <p>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:</p> <p>(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:</p> <p>a. Detention Bed Space Services</p> <ul style="list-style-type: none"><li>• Bed day rate;</li><li>• Detainees check-in and check-out dates;</li><li>• Number of bed days multiplied by the bed day rate;</li><li>• Name of each detainee;</li><li>• Detainees identification information</li></ul> <p>(ii). Allowable Incurred Cost. Fixed Unit Continued ...</p>					

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(b) (4)

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2023-ICLI-00006 3787

## ORDER FOR SUPPLIES OR SERVICES

PAGE NO

## SCHEDULE - CONTINUATION

8

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

DATE OF ORDER	CONTRACT NO.	ORDER NO.
07/31/2020	70CDCR20D00000013	70CDCR20FR0000051

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>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:</p> <p>a. Detention Bed Space Services. For detention bed space CLINs without a GM, the supporting documentation must include:</p> <ul style="list-style-type: none"><li>• Bed day rate;</li><li>• Detainees check-in and check-out dates;</li><li>• Number of bed days multiplied by the bed day rate;</li><li>• Name of each detainee;</li><li>• Detainees identification information</li></ul> <p>b. Transportation Services: For transportation CLINs without a GM, the supporting documentation must include:</p> <ul style="list-style-type: none"><li>• Mileage rate being applied for that invoice;</li><li>• Number of miles;</li><li>• Transportation routes provided;</li><li>• Locations serviced;</li><li>• Names of detainees transported;</li><li>• Itemized listing of all other charges;</li></ul> <p>and,</p> <ul style="list-style-type: none"><li>• for reimbursable expenses (e.g. travel expenses, special meals, etc.) copies of all receipts.</li></ul> <p>c. Stationary Guard Services: The itemized monthly invoice shall state:</p> <ul style="list-style-type: none"><li>• The location where the guard services were provided,</li><li>• The employee guard names and number of hours being billed,</li><li>• The employee guard names and duration of</li></ul> <p>Continued ...</p>					

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

(b) (4)

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2023-ICLI-00006 3112

2023-ICLI-00006 3788

## ORDER FOR SUPPLIES OR SERVICES

PAGE NO

## SCHEDULE - CONTINUATION

9

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

DATE OF ORDER	CONTRACT NO.	ORDER NO.
07/31/2020	70CDCR20D00000013	70CDCR20FR00000051

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>the billing (times and dates), and</p> <ul style="list-style-type: none"><li>(4) for individual or detainee group escort services only, the name of the detainee(s) that was/were escorted.</li></ul> <p>d. Other Direct Charges (e.g. VTC support, transportation meals/sack lunches, volunteer detainee wages, etc.):</p> <p>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.</p> <p>(iii) Firm Fixed-Price CLINs. Supporting documentation is not required for charges for FFP CLINs.</p> <p>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 other unique identifier and full date of birth, citizenship, or immigration status.</p> <p>As part of your obligation to safeguard information, the follow precautions are required:</p> <p>(i) Email supporting documents containing Sensitive PII in an encrypted attachment</p> <p>Continued ...</p>					

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

(b) (4)

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2023-ICLI-00006 3113

2023-ICLI-00006 3789

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

PAGE NO  
10

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

DATE OF ORDER 07/31/2020	CONTRACT NO. 70CDCR20D00000013	ORDER NO. 70CDCR20FR00000051
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ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>with password sent separately to the Contracting Officer Representative assigned to the contract.</p> <p>(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.</p> <p>(iii) Use shredders when discarding paper documents containing Sensitive PII.</p> <p>(iv) Refer to the DHS Handbook for Safeguarding Sensitive Personally Identifiable Information (March 2012) found at <a href="http://www.dhs.gov/xlibrary/assets/privacy/dhs-privacy-safeguardingsensitivepiihandbook-march2012.pdf">http://www.dhs.gov/xlibrary/assets/privacy/dhs-privacy-safeguardingsensitivepiihandbook-march2012.pdf</a> for more information on and/or examples of Sensitive PII.</p> <p>5. Invoice Inquiries. If you have questions regarding payment, please contact ICE Financial Operations at 1-877-491-(b)(7)(E) or by e-mail at (b)(7)(E)@ice.dhs.gov.</p>					

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

(b) (4)

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PREVIOUS EDITION NOT USABLE

OPTIONAL FORM 348 (Rev. 4/2006)  
Prescribed by GSA FPMR (41 CFR) 101-11.6

2023-ICLI-00006 3114

2023-ICLI-00006 3790

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT		1. CONTRACT ID CODE	PAGE OF PAGES	
			1	2
2. AMENDMENT/MODIFICATION NO.	3. EFFECTIVE DATE	4. REQUISITION/PURCHASE REQ. NO.	5. PROJECT NO. (If applicable)	
P00001	See Block 16C	192120FA000000012.7		
6. ISSUED BY	CODE	7. ADMINISTERED BY (If other than Item 6)	CODE	
ICE/DCR				
ICE/DETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW (b) (6), (b) (7)(C) WASHINGTON DC 20536				
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)		(x)	9A. AMENDMENT OF SOLICITATION NO.	
CORECIVIC INC ATTN (b) (6), (b) (7)(C) 5501 VIRGINIA WAY (b) (6), (b) (7)(C) BRENTWOOD TN 37027			9B. DATED (SEE ITEM 11)	
		X	10A. MODIFICATION OF CONTRACT/ORDER NO. 70CDCR20D00000013 70CDCR20FR0000051	
			10B. DATED (SEE ITEM 13) 07/31/2020	
CODE	1597341510000	FACILITY CODE		
11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS				
<input type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers <input type="checkbox"/> is extended. <input type="checkbox"/> is not extended. Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By 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 desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes 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: (b) (4)		
See Schedule				
13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.				
CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.			
	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 ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).			
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:			
X	D. OTHER (Specify type of modification and authority) Funding Only Action			
E. IMPORTANT: Contractor <input checked="" type="checkbox"/> is not. <input type="checkbox"/> is required to sign this document and return _____ copies to the issuing office.				
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)				
DUNS Number: 159734151				
Contracting Officer: (b) (6), (b) (7)(C)@ice.dhs.gov				
Contracting Officer's Representative: (b) (6), (b) (7)(C)@ice.dhs.gov				
There is one requisition associated with this task order: 192120FA000000012.7.				
The purpose of this modification is to provide funding for Detention Services in the amount of (b) (4)				
As a result, CLIN 0001 has increased:				
Continued ...				
Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.				
15A. NAME AND TITLE OF SIGNER (Type or print)		16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)		
		(b) (6), (b) (7)(C) TEL: 202-732- (b) (6), (b) (7)(C) EMAIL: (b) (6), (b) (7)(C)@ICE.DHS.GOV		
15B. CONTRACTOR/OFFEROR	15C. DATE SIGNED	16B. UNITED STATES OF AMERICA	16C. DATE SIGNED	
(Signature of person authorized to sign)		(Signature of Contracting Officer)		
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

70CDCR20D00000013/70CDCR20FR00000051/P00001

PAGE

OF

2

2

NAME OF OFFEROR OR CONTRACTOR

CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0001	<p>From (b) (4) By: (b) (4) To: (b) (4)</p> <p>The total obligated dollars on this task order has increased:</p> <p>From (b) (4) By: (b) (4) To: (b) (4)</p> <p>Discount Terms: Net (b) (4)</p> <p>Accounting Info: (b) (7)(E)</p> <p>Period of Performance: 08/01/2020 to 07/31/2021</p> <p>Change Item 0001 to read as follows (amount shown is the obligated amount):</p> <p>BASE PERIOD - DETENTION SERVICES PoP Dates: 08/01/2020 - 07/31/2021</p> <p>Ramp Up Rates Bed Day Rate (BDR) Effective 08/01/2020 - 02/28/2021 Tier 1 (b) (4) Guaranteed Minimum: (b) (4) Tier 2 (b) (4)</p> <p>BDR Effective 03/01/2021 - 07/31/2021 Tier 1 (b) (4) Guaranteed Minimum: (b) (4) Tier 2 (b) (4)</p> <p>Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Notwithstanding the period of performance indicated above, the funding provided in this modification 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 currently 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.</p>				(b) (4)

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT		1. CONTRACT ID CODE		PAGE OF PAGES	
				1 5	
2. AMENDMENT/MODIFICATION NO.		3. EFFECTIVE DATE		4. REQUISITION/PURCHASE REQ. NO.	
P00002		See Block 16C		192120FA000000012.9	
6. ISSUED BY		CODE		7. ADMINISTERED BY (If other than Item 6)	
ICE/DCR				CODE	
ICE/DETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW (b) (6), (b) (7)(C) WASHINGTON DC 20536					
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)		(x)		9A. AMENDMENT OF SOLICITATION NO.	
CORECIVIC INC ATTN (b) (6), (b) (7)(C) 5501 VIRGINIA WAY (b) (6), (b) (7)(C) BRENTWOOD TN 37027				9B. DATED (SEE ITEM 11)	
		X		10A. MODIFICATION OF CONTRACT/ORDER NO.	
				70CDCR20D000000013	
				70CDCR20FR00000051	
				10B. DATED (SEE ITEM 13)	
				07/31/2020	
CODE 1597341510000		FACILITY CODE			

## 11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS

☐ The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers ☐ is extended. ☐ is not extended.  
Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning \_\_\_\_\_ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By 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 desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes 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)

See Schedule

Net Increase:

(b) (4)

## 13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.

CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.
	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 ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:
X	D. OTHER (Specify type of modification and authority) Funding Only Action

E. IMPORTANT: Contractor ☒ is not. ☐ is required to sign this document and return \_\_\_\_\_ copies to the issuing office.

14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)

DUNS Number: 159734151

Contracting Officer's Representative: (b) (6), (b) (7)(C) @ice.dhs.gov,  
210-283-(b) (6), (b) (7)(C)

Contract Specialist: (b) (6), (b) (7)(C) @ice.dhs.gov, 202-731-(b) (6), (b) (7)(C)

Contracting Officer: (b) (6), (b) (7)(C) @ice.dhs.gov, 202-732-(b) (6), (b) (7)(C)

There is one requisition associated with this task order: 192120FA000000012.9.

The purpose of this modification is to provide funding for Detention Services in the amount of (b) (4)

Continued ...

Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.

15A. NAME AND TITLE OF SIGNER (Type or print)		16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)	
		(b) (6), (b) (7)(C) TEL: 202-732-(b) (6), (b) (7)(C) EMAIL: (b) (6), (b) (7)(C)@ICE.DHS.GOV	
15B. CONTRACTOR/OFFEROR		16B. UNITED STATES OF AMERICA	
(Signature of person authorized to sign)		(Signature of Contracting Officer)	

NSN 7540-01-152-8070

Previous edition unusable

STANDARD FORM 30 (REV. 10-83)

Prescribed by GSA

FAR (48 CFR) 53.243

2023-ICLI-00006 3117

2023-ICLI-00006 3793

<b>CONTINUATION SHEET</b>	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000013/70CDCR20FR0000051/P00002	PAGE 2 OF 5
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NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0001	<p>The total obligated dollars on this task order has increased:</p> <p>From (b) (4)</p> <p>By: (b) (4)</p> <p>To: (b) (4)</p> <p>Discount Terms:</p> <p>Net (b) (4)</p> <p>Period of Performance: 08/01/2020 to 07/31/2021</p> <p>Change Item 0001 to read as follows (amount shown is the obligated amount):</p> <p>BASE PERIOD - DETENTION SERVICES</p> <p>PoP Dates: 08/01/2020 - 07/31/2021</p> <p>Ramp Up Rates Bed Day Rate (BDR) Effective 08/01/2020 - 02/28/2021</p> <p>Tier 1 (b) (4) Guaranteed Minimum: (b) (4)</p> <p>Tier 2 (b) (4)</p> <p>BDR Effective 03/01/2021 - 07/31/2021</p> <p>Tier 1 (b) (4) Guaranteed Minimum: (b) (4)</p> <p>Tier 2 (b) (4)</p> <p>As a result, CLIN 0001 has increased:</p> <p>From (b) (4)</p> <p>By: (b) (4)</p> <p>To: (b) (4)</p> <p>Product/Service Code: S206</p> <p>Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Continued ...</p>				(b) (4)

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000013/70CDCR20FR00000051/P00002	PAGE	OF
		3	5

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0002	<p>Change Item 0002 to read as follows (amount shown is the obligated amount):</p> <p>BASE PERIOD - ON CALL STATIONARY GUARD SERVICES PoP Dates: 08/01/2020 to 07/31/2021</p> <p>REGULAR RATE: (b) (4) HR OT RATE: (b) (4) HR</p> <p>NOT-TO-EXCEED: 10,000 Hours</p> <p>As a result, CLIN 0002 has increased:</p> <p>From (b) (4) By: (b) (4) To: (b) (4)</p> <p>Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4)</p>				(b) (4)
0003A	<p>Change Item 0003A to read as follows (amount shown is the obligated amount):</p> <p>BASE PERIOD - TRANSPORTATION LABOR PoP Dates: 08/01/2020 to 07/31/2021</p> <p>Monthly FFP: (b) (4)</p> <p>NTE: (b) (4) miles/year</p> <p>As a result, CLIN 0003A has increased:</p> <p>From (b) (4) By: (b) (4) Continued ...</p>		(b) (4) MO	(b) (4)	

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000013/70CDCR20FR0000051/P00002	PAGE	OF
		4	5

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0003B	<p>To: (b) (4)</p> <p>Product/Service Code: S206</p> <p>Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Change Item 0003B to read as follows (amount shown is the obligated amount):</p> <p>BASE PERIOD - TRANSPORTATION MILEAGE</p> <p>PoP Dates: 08/01/2020 to 07/31/2021</p> <p>Mileage Rate: (b) (4) mile</p> <p>NTE: (b) (4) miles</p> <p>As a result, CLIN 0003B has increased:</p> <p>From (b) (4)</p> <p>By: (b) (4)</p> <p>To: (b) (4)</p> <p>Product/Service Code: S206</p> <p>Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Notwithstanding the period of performance indicated above, the funding provided in this modification 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 currently funded under this Continued ...</p>				(b) (4)

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	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.				

<b>AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT</b>		1. CONTRACT ID CODE		PAGE OF PAGES	
				1 6	
2. AMENDMENT/MODIFICATION NO.		3. EFFECTIVE DATE		4. REQUISITION/PURCHASE REQ. NO.	
P00003		See Block 16C		192121FA000000012.1	
6. ISSUED BY		CODE		7. ADMINISTERED BY (If other than Item 6)	
ICE/DCR				CODE	
ICE/DETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW (b) (6), (b) (7)(C) WASHINGTON DC 20536					
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)		(x)		9A. AMENDMENT OF SOLICITATION NO.	
CORECIVIC INC ATTN (b) (6), (b) (7)(C) 5501 VIRGINIA WAY (b) (6), (b) (7)(C) BRENTWOOD TN 37027					
CODE 1597341510000		FACILITY CODE		9B. DATED (SEE ITEM 11)	
		X		10A. MODIFICATION OF CONTRACT/ORDER NO.	
				70CDCR20D00000013	
				70CDCR20FR0000051	
				10B. DATED (SEE ITEM 13)	
				07/31/2020	

**11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS**

☐ The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers ☐ is extended. ☐ is not extended.  
Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning \_\_\_\_\_ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By 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 desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes 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)

See Schedule

Net Increase:

(b) (4)

**13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.**

CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.
	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 ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:
X	D. OTHER (Specify type of modification and authority) Funding Only Action

**E. IMPORTANT:** Contractor ☒ is not. ☐ is required to sign this document and return \_\_\_\_\_ copies to the issuing office.

14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)

DUNS Number: 159734151

Contracting Officer's Representative: (b) (6), (b) (7)(C) @ice.dhs.gov,  
210-283-(b) (6), (b) (7)(C)Contract Specialist: (b) (6), (b) (7)(C)  
Contracting Officer: (b) (6), (b) (7)(C)

There is one requisition associated with this task order: 192121FA000000012.1.

The purpose of this modification is to provide funding for Detention Services in the amount of (b) (4)

Continued ...

Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.

15A. NAME AND TITLE OF SIGNER (Type or print)		15B. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)	
		(b) (6), (b) (7)(C)	
		TEL: 202-732-(b) (6), (b) (7)(C) EMAIL: (b) (6), (b) (7)(C)@ICE.DHS.GOV	
15B. CONTRACTOR/OFFEROR		15C. DATE SIGNED	
(Signature of person authorized to sign)		(Signature of Contracting Officer)	

NSN 7540-01-152-8070

Previous edition unusable

2023-ICLI-00006 3122

2023-ICLI-00006 3798

STANDARD FORM 30 (REV. 10-83)

Prescribed by GSA

FAR (48 CFR) 53.243

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000013/70CDCR20FR0000051/P00003	PAGE	OF
		2	6

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0001	<p>The total obligated dollars on this task order has increased:</p> <p>From (b) (4)</p> <p>By: (b) (4)</p> <p>To: (b) (4)</p> <p>Discount Terms: (b) (4)</p> <p>Net (b) (4)</p> <p>Period of Performance: 08/01/2020 to 07/31/2021</p> <p>Change Item 0001 to read as follows (amount shown is the obligated amount):</p> <p>BASE PERIOD - DETENTION SERVICES</p> <p>PoP Dates: 08/01/2020 - 07/31/2021</p> <p>Ramp Up Rates Bed Day Rate (BDR) Effective 08/01/2020 - 02/28/2021</p> <p>Tier 1 (b) (4) Guaranteed Minimum: (b) (4)</p> <p>Tier 2 (b) (4)</p> <p>BDR Effective 03/01/2021 - 07/31/2021</p> <p>Tier 1 (b) (4) Guaranteed Minimum: (b) (4)</p> <p>Tier 2 (b) (4)</p> <p>As a result, CLIN 0001 has increased:</p> <p>From (b) (4)</p> <p>By: (b) (4)</p> <p>To: (b) (4)</p> <p>Product/Service Code: S206</p> <p>Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>Continued ...</p>				(b) (4)

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000013/70CDCR20FR0000051/P00003	PAGE	OF
		3	6

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0002	<p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Change Item 0002 to read as follows (amount shown is the obligated amount):</p> <p>BASE PERIOD - ON CALL STATIONARY GUARD SERVICES PoP Dates: 08/01/2020 to 07/31/2021</p> <p>REGULAR RATE: (b) (4) HR OT RATE: (b) (4) HR</p> <p>NOT-TO-EXCEED: (b) (4) Hours</p> <p>As a result, CLIN 0002 has increased:</p> <p>From (b) (4) By: (b) (4) To: (b) (4)</p> <p>Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4)</p> <p>Change Item 0003A to read as follows (amount shown is the obligated amount):</p> <p>BASE PERIOD - TRANSPORTATION LABOR PoP Dates: 08/01/2020 to 07/31/2021 Continued ...</p>				(b) (4)
0003A	<p>BASE PERIOD - TRANSPORTATION LABOR PoP Dates: 08/01/2020 to 07/31/2021 Continued ...</p>				(b) (4)

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000013/70CDCR20FR00000051/P00003	PAGE	OF
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NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>Monthly FFP: (b) (4)</p> <p>NTE: (b) (4) miles/year</p> <p>As a result, CLIN 0003A has increased:</p> <p>From (b) (4)</p> <p>By: (b) (4)</p> <p>To: (b) (4)</p> <p>Product/Service Code: S206</p> <p>Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Change Item 0003B to read as follows (amount shown is the obligated amount):</p> <p>0003B BASE PERIOD - TRANSPORTATION MILEAGE</p> <p>PoP Dates: 08/01/2020 to 07/31/2021</p> <p>Mileage Rate: (b) (4) mile</p> <p>NTE: (b) (4) miles</p> <p>As a result, CLIN 0003B has increased:</p> <p>From (b) (4)</p> <p>By: (b) (4)</p> <p>To: (b) (4)</p> <p>Product/Service Code: S206</p> <p>Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Continued ...</p>				(b) (4)

## CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED

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6

NAME OF OFFEROR OR CONTRACTOR

CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0004	<p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Change Item 0004 to read as follows (amount shown is the obligated amount):</p> <p>BASE PERIOD - DETAINEE WORK PROGRAM</p> <p>PoP Dates: 08/01/2020 to 07/31/2021</p> <p>(b) (4) Day</p> <p>NTE (b) (4)</p> <p>As a result, CLIN 0004 has increased:</p> <p>From (b) (4)</p> <p>By: (b) (4)</p> <p>To:</p> <p>Product/Service Code: S206</p> <p>Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Notwithstanding the period of performance indicated above, the funding provided in this modification 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 currently funded under this task order. The service provider is not</p> <p>Continued ...</p>				(b) (4)

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	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.				

<b>AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT</b>		1. CONTRACT ID CODE		PAGE OF PAGES	
				1      5	
2. AMENDMENT/MODIFICATION NO. P00004		3. EFFECTIVE DATE See Block 16C		4. REQUISITION/PURCHASE REQ. NO. 192121FAO00000012.2	
6. ISSUED BY		CODE 70CDCR		5. PROJECT NO. (If applicable)	
				7. ADMINISTERED BY (If other than Item 6) CODE ICE/DCR	
DETENTION COMPLIANCE AND REMOVALS US IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I ST NW (b) (6), (b) (7)(C) WASHINGTON DC 20536		ICEDETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW (b) (6), (b) (7)(C) WASHINGTON DC 20536			
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)		(x) 9A. AMENDMENT OF SOLICITATION NO.			
CORECIVIC INC ATTN (b) (6), (b) (7)(C) 5501 VIRGINIA WAY (b) (6), (b) (7)(C) BRENTWOOD TN 37027		9B. DATED (SEE ITEM 11)			
		X 10A. MODIFICATION OF CONTRACT/ORDER NO. 70CDCR20D00000013 70CDCR20FR0000051			
		10B. DATED (SEE ITEM 13) 07/31/2020			
CODE 1597341510000		FACILITY CODE			
<b>11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS</b>					
<input type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers <input type="checkbox"/> is extended. <input type="checkbox"/> is not extended. Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By 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 desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes 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) See Schedule Net Increase: (b) (4)					
<b>13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.</b>					
CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.				
	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 ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).				
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:				
X	D. OTHER (Specify type of modification and authority) Funding Only Action				
E. IMPORTANT: Contractor <input checked="" type="checkbox"/> is not. <input type="checkbox"/> is required to sign this document and return _____ copies to the issuing office.					
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)					
DUNS Number: 159734151					
Contracting Officer's Representative: (b) (6), (b) (7)(C) @ice.dhs.gov, (602) 766-(b) (6), (b) (7)(C)					
Contract Specialist: (b) (6), (b) (7)(C) @ice.dhs.gov, (202) 731-(b) (6), (b) (7)(C)					
Contracting Officer: (b) (6), (b) (7)(C) @ice.dhs.gov, (202) 732-(b) (6), (b) (7)(C)					
The purpose of this modification is to provide additional funding for Detention Services in the amount of (b) (4)					
The total obligated dollars on this task order has increased: From: (b) (4) Continued ...					
Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.					
15A. NAME AND TITLE OF SIGNER (Type or print)		16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)			
		(b) (6), (b) (7)(C)			
		TEL: 202-732-(b) (6), (b) (7)		EMAIL: (b) (6), (b) (7)(C) ICE.DHS.GOV	
15B. CONTRACTOR/OFFEROR		15C. DATE SIGNED		16B. UNITED STATES OF AMERICA	
(Signature of person authorized to sign)				(Signature of Contracting Officer)	
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 70CDCR20D00000013/70CDCR20FR00000051/P00004	PAGE	OF
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NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0001	<p>By: (b) (4)</p> <p>To: (b) (4)</p> <p>All other terms and conditions remain unchanged.</p> <p>Discount Terms:</p> <p>Net (b) (4)</p> <p>Period of Performance: 08/01/2020 to 07/31/2021</p> <p>Change Item 0001 to read as follows (amount shown is the obligated amount):</p> <p>BASE PERIOD - DETENTION SERVICES</p> <p>PoP Dates: 08/01/2020 - 07/31/2021</p> <p>Bed Day Rate (BDR) Effective 08/01/2020 - 02/28/2021</p> <p>Tier 1 (b) (4) Guaranteed Minimum: (b) (4)</p> <p>Tier 2 (b) (4)</p> <p>BDR Effective 03/01/2021 - 07/31/2021</p> <p>Tier 1 (b) (4) Guaranteed Minimum: (b) (4)</p> <p>Tier 2 (b) (4)</p> <p>As a result, CLIN 0001 has increased:</p> <p>From (b) (4)</p> <p>By: (b) (4)</p> <p>To: (b) (4)</p> <p>Product/Service Code: S206</p> <p>Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Continued ...</p>				(b) (4)

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000013/70CDCR20FR0000051/P00004	PAGE	OF
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NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0002	<p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Change Item 0002 to read as follows (amount shown is the obligated amount):</p> <p>BASE PERIOD - ON CALL STATIONARY GUARD SERVICES PoP Dates: 08/01/2020 to 07/31/2021</p> <p>REGULAR RATE: (b) (4) HR OT RATE: (b) (4)/HR</p> <p>NOT-TO-EXCEED: (b) (4) Hours</p> <p>As a result, CLIN 0002 has increased:</p> <p>From (b) (4)</p> <p>By: (b) (4)</p> <p>To: (b) (4)</p> <p>Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Continued ...</p>				(b) (4)

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000013/70CDCR20FR00000051/P00004	PAGE	OF
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NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0003A	<p>Funded: (b) (4)</p> <p>Change Item 0003A to read as follows (amount shown is the obligated amount):</p> <p>BASE PERIOD - TRANSPORTATION LABOR PoP Dates: 08/01/2020 to 07/31/2021</p> <p>Monthly FFP: (b) (4)</p> <p>NTE: (b) (4) miles/year</p> <p>As a result, CLIN 0003A has increased:</p> <p>From (b) (4) By: (b) (4) To: (b) (4)</p> <p>Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4) Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4) Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4) Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4) Accounting Info: (b) (7)(E)</p> <p>Notwithstanding the period of performance indicated above, the funding provided in this modification 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 currently funded under this task order. The service provider is not authorized to continue to work on those item(s)</p> <p>Continued ...</p>				(b) (4)

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	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.				

<b>AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT</b>		1. CONTRACT ID CODE		PAGE OF PAGES	
				1   7	
2. AMENDMENT/MODIFICATION NO. P00005		3. EFFECTIVE DATE See Block 16C		4. REQUISITION/PURCHASE REQ. NO. 192121FHO0CCA0006.3	
6. ISSUED BY		CODE 70CDCR		5. PROJECT NO. (If applicable)	
				7. ADMINISTERED BY (If other than Item 6)	
				CODE ICE/DCR	
DETENTION COMPLIANCE AND REMOVALS US IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I ST NW (b) (6), (b) (7)(C) WASHINGTON DC 20536			ICE DETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW (b) (6), (b) (7)(C) WASHINGTON DC 20536		
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)			(x) 9A. AMENDMENT OF SOLICITATION NO.		
CORECIVIC INC ATTN CORECIVIC INC 5501 VIRGINIA WAY (b) (6), (b) (7)(C) BRENTWOOD TN 370277684			9B. DATED (SEE ITEM 11)		
			X 10A. MODIFICATION OF CONTRACT/ORDER NO. 70CDCR20D00000014 70CDCR20FR0000059		
			10B. DATED (SEE ITEM 13) 08/14/2020		
CODE 1597341510000		FACILITY CODE			
<b>11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS</b>					
<input type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers <span style="float: right;"><input type="checkbox"/> is extended. <input type="checkbox"/> is not extended.</span> Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By 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 desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes 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)					
See Schedule <span style="float: right;">Net Increase: (b) (4)</span>					
<b>13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.</b>					
CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.				
	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 ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).				
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:				
X	D. OTHER (Specify type of modification and authority) Funding Only Action IAW FAR 52.243-1 "Changes - Fixed Price, Alt. I"				
<b>E. IMPORTANT:</b> Contractor <input checked="" type="checkbox"/> is not, <input type="checkbox"/> is required to sign this document and return _____ copies to the issuing office.					
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)					
DUNS Number: 159734151					
COR: (b) (6), (b) (7)(C)					
Phone: (b) (6), (b) (7)(C)					
Email: (b) (6), (b) (7)(C) @ice.dhs.gov					
ACOR: (b) (6), (b) (7)(C)					
Phone: (b) (6), (b) (7)(C)					
Email: (b) (6), (b) (7)(C) @ice.dhs.gov					
ACOR: (b) (6), (b) (7)(C)					
Phone: (b) (6), (b) (7)(C)					
Continued ...					
Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.					
15A. NAME AND TITLE OF SIGNER (Type or print)			15B. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)		
(b) (6), (b) (7)(C)			(b) (6), (b) (7)(C)		
TEL:			EMAIL: (b) (6), (b) (7)(C) @ice.dhs.gov		
15B. CONTRACTOR/OFFEROR		15C. DATE SIGNED		16B. UNITED STATES OF AMERICA	
(Signature of person authorized to sign)				(Signature of Contracting Officer)	
NSN 7540-01-152-8070				STANDARD FORM 30 (REV. 10-83)	
Previous edition unusable				Prescribed by GSA	
				FAR (48 CFR) 53.243	

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000014/70CDCR20FR0000059/P00005	PAGE	OF
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NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0001	<p>Email: (b) (6), (b) (7)(C)@ice.dhs.gov</p> <p>Contractor POC: (b) (6), (b) (7)(C)</p> <p>Phone: (b) (6), (b) (7)(C)</p> <p>Email: (b) (6), (b) (7)(C)@corecivic.com</p> <p>Contracting Officer/Specialist: (b) (6), (b) (7)(C)</p> <p>Phone: (b) (6), (b) (7)(C)</p> <p>Email: (b) (6), (b) (7)(C)@ice.dhs.gov</p> <p>There is one requisition associated with this modification; 192121FHO0CCA0006.3</p> <p>IAW FAR 52.243-1 Alt. I, the purpose of modification P00005 is to provide additional funding in the amount of (b) (4) to this task order at the Houston Contract Detention Facility (CDF) in Houston, Texas.</p> <p>As a result, the total amount of the task order is increased:</p> <p>From: (b) (4)</p> <p>By: (b) (4)</p> <p>To: (b) (4)</p> <p>Notwithstanding the period of performance indicated above, the funding provided in this modification 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 currently 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.</p> <p>Discount Terms: Net (b) (4)</p> <p>Period of Performance: 08/18/2020 to 08/17/2021</p> <p>Change Item 0001 to read as follows (amount shown is the obligated amount):</p> <p>Base Period: Detention Services</p> <p>Tier 1 (b) (4)</p> <p>Tier 2 (b) (4)</p> <p>Continued ...</p>				(b) (4)



NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>NTE: (b) (4)</p> <p>Change Item 0002 to read as follows (amount shown is the obligated amount):</p> <p>0002 Base Period: On-Call Stationary Guard Services</p> <p>Regular Rate: (b) (4)</p> <p>Overtime Rate:</p> <p>This is a Labor Hour CLIN. NOT-TO-EXCEED (NTE): (b) (4) hours</p> <p>As a result, funding for this CLIN has increased</p> <p>From (b) (4)</p> <p>By:</p> <p>TO:</p> <p>Product/Service Code: S206</p> <p>Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Change Item 0003a to read as follows (amount shown is the obligated amount):</p> <p>0003a Base Period: Transportation Services - Labor Continued ...</p>				(b) (4)
		(b) (4)	MO	(b) (4)	

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>Fixed Price: (b) (4) month</p> <p>FFP monthly price up to (b) (4) miles/year</p> <p>As a result, funding for this CLIN has increased</p> <p>From: (b) (4)</p> <p>By: (b) (4)</p> <p>To: (b) (4)</p> <p>As a result, the quantity for this CLIN has increased</p> <p>From: (b) (4)</p> <p>By: (b) (4)</p> <p>To: (b) (4)</p> <p>Product/Service Code: S206</p> <p>Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Change Item 0003b to read as follows (amount shown is the obligated amount):</p> <p>0003b Base Period: Transportation Services - Mileage Continued ...</p>				(b) (4)

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000014/70CDCR20FR00000059/P00005	PAGE	OF
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NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>Rate</p> <p>Mileage Rate: (b) (4)</p> <p>Guaranteed Minimum is (b) (4) miles/year. CoreCivic may bill for (b) (4) miles monthly. All miles in excess during this period of performance will be billed at the 0003c rate.</p> <p>As a result, funding for this CLIN has increased</p> <p>From: (b) (4) By: (b) (4) To: (b) (4) Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4) Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4) Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4) Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4) Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4) Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4) Accounting Info: (b) (7)(E)</p> <p>Change Item 0004 to read as follows (amount shown is the obligated amount): Continued ...</p>				

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0004	Base Period: Detainee Work Program  (b) (4) Day  As a result, funding for this CLIN has increased  From (b) (4) By: (b) (4) To: (b) (4) Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD  Accounting Info: (b) (7)(E)  Funded: (b) (4) Accounting Info: (b) (7)(E)  Funded: (b) (4) Accounting Info: (b) (7)(E)  Funded: (b) (4) Accounting Info: (b) (7)(E)  Funded: (b) (4) All terms and conditions of Task Order 70CDCR20FR00000059 shall remain unchanged.	(b) (4)	EA	(b) (4)	

<b>AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT</b>		1. CONTRACT ID CODE		PAGE OF PAGES	
				1      8	
2. AMENDMENT/MODIFICATION NO. P00006		3. EFFECTIVE DATE See Block 16C		4. REQUISITION/PURCHASE REQ. NO. 192121FHO0CCA0006.5	
6. ISSUED BY		CODE 70CDCR		5. PROJECT NO. (If applicable)	
				7. ADMINISTERED BY (If other than Item 6)	
				CODE ICE/DCR	
DETENTION COMPLIANCE AND REMOVALS US IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I ST NW (b) (6), (b) (7)(C) WASHINGTON DC 20536			ICE DETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW (b) (6), (b) (7)(C) WASHINGTON DC 20536		
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)			(x) 9A. AMENDMENT OF SOLICITATION NO.		
CORECIVIC INC ATTN CORECIVIC INC 5501 VIRGINIA WAY (b) (6), (b) (7)(C) BRENTWOOD TN 370277684					
			9B. DATED (SEE ITEM 11)		
			X 10A. MODIFICATION OF CONTRACT/ORDER NO. 70CDCR20D00000014 70CDCR20FR0000059		
			10B. DATED (SEE ITEM 13) 08/14/2020		
CODE 1597341510000		FACILITY CODE			
<b>11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS</b>					
<input type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers <span style="float: right;"><input type="checkbox"/> is extended. <input type="checkbox"/> is not extended.</span> Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By 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 desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes 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) See Schedule <span style="float: right;">Net Increase: (b) (4)</span>					
<b>13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.</b>					
CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.				
	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 ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).				
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:				
X	D. OTHER (Specify type of modification and authority) Funding Only Action IAW FAR 52.243-1 "Changes - Fixed Price, Alt. I"				
E. IMPORTANT: Contractor <input checked="" type="checkbox"/> is not, <input type="checkbox"/> is required to sign this document and return _____ copies to the issuing office.					
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)					
DUNS Number: 159734151					
COR: (b) (6), (b) (7)(C)					
Phone: (b) (6), (b) (7)(C)					
Email: (b) (6), (b) (7)(C)@ice.dhs.gov					
ACOR: (b) (6), (b) (7)(C)					
Phone: (b) (6), (b) (7)(C)					
Email: (b) (6), (b) (7)(C)@ice.dhs.gov					
ACOR: (b) (6), (b) (7)(C)					
Phone: (b) (6), (b) (7)(C)					
Continued ...					
Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.					
15A. NAME AND TITLE OF SIGNER (Type or print)			16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)		
			(b) (6), (b) (7)(C)		
			TEL: EMAIL: (b) (6), (b) (7)(C)@ice.dhs.gov		
15B. CONTRACTOR/OFFEROR		15C. DATE SIGNED		16B. UNITED STATES OF AMERICA	
(Signature of person authorized to sign)				(Signature of Contracting Officer)	

## CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED

70CDCR20D00000014/70CDCR20FR0000059/P00006

PAGE

OF

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8

NAME OF OFFEROR OR CONTRACTOR

CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0001	<p>Email: (b) (6), (b) (7)(C)@ice.dhs.gov</p> <p>Contractor POC: (b) (6), (b) (7)(C)</p> <p>Phone: (b) (6), (b) (7)(C)</p> <p>Email: @corecivic.com</p> <p>Contracting Officer/Specialist: (b) (6), (b) (7)(C)</p> <p>Phone: (b) (6), (b) (7)(C)</p> <p>Email: @ice.dhs.gov</p> <p>There is one requisition associated with this modification; 192121FHO0CCA0006.5</p> <p>IAW FAR 52.243-1 Alt. I, the purpose of modification P00006 is to provide additional funding in the amount of (b) (4) to this task order at the Houston Contract Detention Facility (CDF) in Houston, Texas.</p> <p>As a result, the total amount of the task order is increased:</p> <p>By: (b) (4)</p> <p>From: (b) (4)</p> <p>To: (b) (4)</p> <p>Notwithstanding the period of performance indicated above, the funding provided in this modification 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 currently 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.</p> <p>Discount Terms:</p> <p>Net (b) (4)</p> <p>Period of Performance: 08/18/2020 to 08/17/2021</p> <p>Change Item 0001 to read as follows (amount shown is the obligated amount):</p> <p>Base Period: Detention Services</p> <p>Tier 1 (b) (4)</p> <p>Tier 2 (b) (4)</p> <p>Continued ...</p>				(b) (4)

NSN 7540-01-152-8067

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0002	(b) (7)(E) Funded: (b) (4) Accounting Info:				
	(b) (7)(E) Funded: (b) (4) Accounting Info:				
	(b) (7)(E) Funded: (b) (4)				
	NTE: (b) (4)				
	Change Item 0002 to read as follows (amount shown is the obligated amount):				
	Base Period: On-Call Stationary Guard Services				(b) (4)
	Regular Rate: (b) (4) Overtime Rate:				
	This is a Labor Hour CLIN. NOT-TO-EXCEED (NTE): (b) (4) hours				
	As a result, funding for this CLIN has increased				
	By: (b) (4) From: (b) (4) To: Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD				
	Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info:				
	(b) (7)(E) Funded: (b) (4) Accounting Info:				
	(b) (7)(E) Funded: (b) (4) Continued ...				

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0003a	<p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Change Item 0003a to read as follows (amount shown is the obligated amount):</p> <p>Base Period: Transportation Services - Labor</p> <p>Fixed Price: (b) (4) /month</p> <p>FFP monthly price up to (b) (4) miles/year</p> <p>As a result, funding for this CLIN has increased</p> <p>By: (b) (4)</p> <p>From: (b) (4)</p> <p>To: (b) (4)</p> <p>Product/Service Code: S206</p> <p>Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>Continued ...</p>				(b) (4)

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0003b	<p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Change Item 0003b to read as follows (amount shown is the obligated amount):</p> <p>Base Period: Transportation Services - Mileage Rate</p> <p>Mileage Rate: (b) (4)</p> <p>Guaranteed Minimum is (b) (4) miles/year. CoreCivic may bill for (b) (4) miles monthly. All miles in excess during this period of performance will be billed at the 0003c rate.</p> <p>As a result, funding for this CLIN has increased</p> <p>By: (b) (4)</p> <p>From: (b) (4)</p> <p>To: (b) (4)</p> <p>Product/Service Code: S206</p> <p>Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Continued ...</p>				(b) (4)

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0004	<p>Funded: (b) (4) Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4) Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Change Item 0004 to read as follows (amount shown is the obligated amount):</p> <p>Base Period: Detainee Work Program</p> <p>(b) (4) Day</p> <p>As a result, funding for this CLIN has increased</p> <p>By: (b) (4) From: (b) (4) To: (b) (4) Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4) Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4) Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4) Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4) Accounting Info: (b) (7)(E)</p> <p>Continued ...</p>	(b) (4)	EA	(b) (4)	

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	WAGES0 Funded: (b) (4) All terms and conditions of Task Order 70CDCR20FR00000059 shall remain unchanged.				

<b>AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT</b>		1. CONTRACT ID CODE		PAGE OF PAGES	
				1      5	
2. AMENDMENT/MODIFICATION NO. P00007		3. EFFECTIVE DATE See Block 16C		4. REQUISITION/PURCHASE REQ. NO. 192121FHO0CCA0006.6	
6. ISSUED BY		CODE 70CDCR		5. PROJECT NO. (If applicable)	
				7. ADMINISTERED BY (If other than Item 6)	
				CODE ICE/DCR	
DETENTION COMPLIANCE AND REMOVALS US IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I ST NW (b) (6), (b) (7)(C) WASHINGTON DC 20536			ICE DETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW (b) (6), (b) (7)(C) WASHINGTON DC 20536		
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)			9A. AMENDMENT OF SOLICITATION NO.		
CORECIVIC INC ATTN CORECIVIC INC 5501 VIRGINIA WAY (b) (6), (b) (7)(C) BRENTWOOD TN 370277684			(x)		
			9B. DATED (SEE ITEM 11)		
			10A. MODIFICATION OF CONTRACT/ORDER NO. 70CDCR20D00000014 70CDCR20FR0000059		
CODE 1597341510000      FACILITY CODE			10B. DATED (SEE ITEM 13) 08/14/2020		
<b>11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS</b>					
<input type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers <span style="float: right;"><input type="checkbox"/> is extended.    <input type="checkbox"/> is not extended.</span> Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By 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 desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes 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) See Schedule      Net Increase:      (b) (4)					
<b>13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.</b>					
CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.				
	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 ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).				
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:				
X	D. OTHER (Specify type of modification and authority) Funding Only Action IAW FAR 52.243-1 "Changes - Fixed Price, Alt. I"				
E. IMPORTANT: Contractor <input checked="" type="checkbox"/> is not, <input type="checkbox"/> is required to sign this document and return _____ copies to the issuing office.					
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)					
DUNS Number: 159734151					
COR: (b) (6), (b) (7)(C)					
Phone: (b) (6), (b) (7)(C)					
Email: _____@ice.dhs.gov					
ACOR: (b) (6), (b) (7)(C)					
Phone: _____					
Email: _____@ice.dhs.gov					
ACOR: (b) (6), (b) (7)(C)					
Phone: _____					
Continued ...					
Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.					
15A. NAME AND TITLE OF SIGNER (Type or print)			16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)		
			(b) (6), (b) (7)(C)		
			TEL: _____      EMAIL: (b) (6), (b) (7)(C)@ice.dhs.gov		
15B. CONTRACTOR/OFFEROR		15C. DATE SIGNED		16B. UNITED STATES OF AMERICA	
(Signature of person authorized to sign)				(Signature of Contracting Officer)	

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000014/70CDCR20FR0000059/P00007	PAGE	OF
		2	5

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0001	<p>Email: (b) (6), (b) (7)(C)@ice.dhs.gov</p> <p>Contractor POC: (b) (6), (b) (7)(C)</p> <p>Phone: (b) (6), (b) (7)(C)</p> <p>Email: (b) (6), (b) (7)(C)@corecivic.com</p> <p>Contracting Officer/Specialist: (b) (6), (b) (7)(C)</p> <p>Phone: (b) (6), (b) (7)(C)</p> <p>Email: (b) (6), (b) (7)(C)@ice.dhs.gov</p> <p>There is one requisition associated with this modification; 192121FHO0CCA0006.6</p> <p>IAW FAR 52.243-1 Alt. I, the purpose of modification P00007 is to provide additional funding in the amount of (b) (4) to this task order at the Houston Contract Detention Facility (CDF) in Houston, Texas.</p> <p>As a result, the total amount of the task order is increased:</p> <p>By: (b) (4)</p> <p>From: (b) (4)</p> <p>To: (b) (4)</p> <p>Notwithstanding the period of performance indicated above, the funding provided in this modification 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 currently 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.</p> <p>Discount Terms: Net (b) (4)</p> <p>Period of Performance: 08/18/2020 to 08/17/2021</p> <p>Change Item 0001 to read as follows (amount shown is the obligated amount):</p> <p>Base Period: Detention Services</p> <p>Tier 1 (b) (4)</p> <p>Tier 2 (b) (4)</p> <p>Continued ...</p>				(b) (4)



CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000014/70CDCR20FR00000059/P00007	PAGE	OF
		4	5

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>NTE: (b) (4)</p> <p>Change Item 0003a to read as follows (amount shown is the obligated amount):</p> <p>0003a Base Period: Transportation Services - Labor</p> <p>Fixed Price: (b) (4) /month</p> <p>FFP monthly price up to (b) (4) miles/year</p> <p>As a result, funding for this CLIN has increased</p> <p>By: (b) (4)</p> <p>From: (b) (4)</p> <p>To: (b) (4)</p> <p>Product/Service Code: S206</p> <p>Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>Continued ...</p>				(b) (4)

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	(b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4) All terms and conditions of Task Order 70CDCR20FR0000059 shall remain unchanged.				

<b>AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT</b>		1. CONTRACT ID CODE		PAGE OF PAGES	
				1      4	
2. AMENDMENT/MODIFICATION NO. P00008		3. EFFECTIVE DATE See Block 16C		4. REQUISITION/PURCHASE REQ. NO. 192121FHO0CCA0006.10	
6. ISSUED BY		CODE 70CDCR		5. PROJECT NO. (If applicable)	
				7. ADMINISTERED BY (If other than Item 6)	
				CODE ICE/DCR	
DETENTION COMPLIANCE AND REMOVALS US IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I ST NW (b) (6), (b) (7)(C) WASHINGTON DC 20536			ICE DETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW (b) (6), (b) (7)(C) WASHINGTON DC 20536		
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)			(x) 9A. AMENDMENT OF SOLICITATION NO.		
CORECIVIC INC ATTN CORECIVIC INC 5501 VIRGINIA WAY (b) (6), (b) (7)(C) BRENTWOOD TN 370277684					
			9B. DATED (SEE ITEM 11)		
			X 10A. MODIFICATION OF CONTRACT/ORDER NO. 70CDCR20D00000014 70CDCR20FR0000059		
			10B. DATED (SEE ITEM 13) 08/14/2020		
CODE 1597341510000		FACILITY CODE			
<b>11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS</b>					
<input type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers <input type="checkbox"/> is extended. <input type="checkbox"/> is not extended. Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By 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 desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes 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) See Schedule      Net Increase:      (b) (4)					
<b>13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.</b>					
CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.				
	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 ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).				
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:				
X	D. OTHER (Specify type of modification and authority) Funding Only Action				
E. IMPORTANT: Contractor <input checked="" type="checkbox"/> is not, <input type="checkbox"/> is required to sign this document and return _____ copies to the issuing office.					
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)					
DUNS Number: 159734151					
COR: (b) (6), (b) (7)(C)					
Phone: (b) (6), (b) (7)(C)					
Email: @ice.dhs.gov					
ACOR: (b) (6), (b) (7)(C)					
Phone:					
Email: @ice.dhs.gov					
ACOR: (b) (6), (b) (7)(C)					
Phone:					
Continued ...					
Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.					
15A. NAME AND TITLE OF SIGNER (Type or print)			16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)		
			(b) (6), (b) (7)(C)		
			TEL:      EMAIL: (b) (6), (b) (7)(C) @ice.dhs.gov		
15B. CONTRACTOR/OFFEROR		15C. DATE SIGNED		16B. UNITED STATES OF AMERICA	
(Signature of person authorized to sign)				(Signature of Contracting Officer)	
NSN 7540-01-152-8070				STANDARD FORM 30 (REV. 10-83)	
Previous edition unusable				Prescribed by GSA	
				FAR (48 CFR) 53.243	

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000014/70CDCR20FR0000059/P00008	PAGE	OF
		2	4

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0003a	<p>Email: (b) (6), (b) (7)(C)@ice.dhs.gov</p> <p>Contractor POC: (b) (6), (b) (7)(C)</p> <p>Phone: (b) (6), (b) (7)(C)</p> <p>Email: @corecivic.com</p> <p>Contracting Officer/Specialist: (b) (6), (b) (7)(C)</p> <p>Phone: (b) (6), (b) (7)(C)</p> <p>Email: @ice.dhs.gov</p> <p>There is one requisition associated with this modification; 192121FH00CCA0006.10</p> <p>The purpose of modification P00008 is to provide additional funding in the amount of (b) (4) to this task order at the Houston Contract Detention Facility (CDF) in Houston, Texas.</p> <p>As a result, the total amount of the task order is increased:</p> <p>By: (b) (4)</p> <p>From: (b) (4)</p> <p>To: (b) (4)</p> <p>Notwithstanding the period of performance indicated above, the funding provided in this modification 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 currently 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.</p> <p>Discount Terms:</p> <p>Net (b) (4)</p> <p>Period of Performance: 08/18/2020 to 08/17/2021</p> <p>Change Item 0003a to read as follows (amount shown is the obligated amount):</p> <p>Base Period: Transportation Services - Labor</p> <p>Fixed Price: (b) (4) /month</p> <p>FFP monthly price up to (b) (4) miles/year</p> <p>Continued ...</p>				(b) (4)

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000014/70CDCR20FR0000059/P00008	PAGE	OF
		3	4

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>As a result, funding for this CLIN has increased</p> <p>By: (b) (4)</p> <p>From: (b) (4)</p> <p>To: (b) (4)</p> <p>Product/Service Code: S206</p> <p>Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Continued ...</p>				

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	All terms and conditions of Task Order 70CDCR20FR00000059 shall remain unchanged.				

## ORDER FOR SUPPLIES OR SERVICES

PAGE OF PAGES

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

1. DATE OF ORDER 08/14/2020		2. CONTRACT NO. (If any) 70CDCR20D00000014		6. SHIP TO:				
3. ORDER NO. 70CDCR20FR0000059		4. REQUISITION/REFERENCE NO. 192120FH00CCA0001.7		a. NAME OF CONSIGNEE				
5. ISSUING OFFICE (Address correspondence to) ICE/DETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW (b) (6), (b) (7)(C) WASHINGTON DC 20536				b. STREET ADDRESS				
				c. CITY		d. STATE	e. ZIP CODE	
7. TO: CORECIVIC INC				f. SHIP VIA				
a. NAME OF CONTRACTOR CORECIVIC INC				8. TYPE OF ORDER				
b. COMPANY NAME				<input type="checkbox"/> a. PURCHASE REFERENCE YOUR: 70CDCR20R0000001		<input checked="" type="checkbox"/> b. DELIVERY		
c. STREET ADDRESS 5501 VIRGINIA WAY (b) (6), (b) (7)(C)				Please furnish the following on the terms and conditions specified on both sides of this order and on the attached sheet, if any, including delivery as indicated.		Except for billing instructions on the reverse, this delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.		
d. CITY BRENTWOOD		e. STATE TN	f. ZIP CODE 370277684					
9. ACCOUNTING AND APPROPRIATION DATA See Schedule				10. REQUISITIONING OFFICE ICE ENFORCEMENT REMOVAL				
11. BUSINESS CLASSIFICATION (Check appropriate box(es)) <input type="checkbox"/> a. SMALL <input checked="" type="checkbox"/> b. OTHER THAN SMALL <input type="checkbox"/> c. DISADVANTAGED <input type="checkbox"/> d. WOMEN-OWNED <input type="checkbox"/> e. HUBZone <input type="checkbox"/> f. SERVICE-DISABLED VETERAN-OWNED <input type="checkbox"/> g. WOMEN-OWNED SMALL BUSINESS (WOSB) ELIGIBLE UNDER THE WOSB PROGRAM <input type="checkbox"/> h. EDWOSB				12. F.O.B. POINT				
13. PLACE OF a. INSPECTION Destination		b. ACCEPTANCE Destination		14. GOVERNMENT B/L NO.		15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date)		
						16. DISCOUNT TERMS Net (b) (4)		
17. SCHEDULE (See reverse for Rejections)								
ITEM NO. (a)	SUPPLIES OR SERVICES (b)			QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	DUNS Number: 159734151 COR: (b) (6), (b) (7)(C) Phone: (b) (6), (b) (7)(C) Email: (b) (6), (b) (7)(C) @ice.dhs.gov COR: (b) (6), (b) (7)(C) Continued ...							
18. SHIPPING POINT		19. GROSS SHIPPING WEIGHT		20. INVOICE NO.		17(h) TOTAL (Cont. pages)		
21. MAIL INVOICE TO:								
a. NAME DHS ICE						(b) (4)		
b. STREET ADDRESS (or P.O. Box) BURLINGTON FINANCE CENTER PO BOX 1620 ATTN (b) (7)(E)								
c. CITY WILLISTON		d. STATE VT	e. ZIP CODE 05495-1620			(b) (4)		
22. UNITED STATES OF AMERICA BY (Signature)				23. NAME (Typed) (b) (6), (b) (7)(C) TITLE: CONTRACTING/ORDERING OFFICER				

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

PAGE NO  
2

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

DATE OF ORDER 08/14/2020	CONTRACT NO. 70CDCR20D00000014	ORDER NO. 70CDCR20FR0000059
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ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>Phone: (b) (6), (b) (7)(C) Email: (b) (6), (b) (7)(C)@ice.dhs.gov</p> <p>Contracting Officer: (b) (6), (b) (7)(C) Phone: (b) (6), (b) (7)(C) Email: (b) (6), (b) (7)(C)@ice.dhs.gov</p> <p>There is one (1) requisition associated with this task order: 192120FH00CCA0001.7.</p> <p>This task order is being issued against Indefinite-Delivery Indefinite-Quantity (IDIQ) contract 70CDCR20D00000014 for Detention and Transportation Services at the Houston Contract Detention Facility (CDF) in Houston, Texas.</p> <p>Funding is in the total amount of (b) (4). The total amount of the task order is increased:</p> <p>From (b) (4) By: (b) (4) To: (b) (4)</p> <p>The details for funding of each CLIN is as follows:</p> <p>1. Provide funding to CLIN 0001 in the total amount of (b) (4). As a result, funding for CLIN 0001 has increased:</p> <p>From (b) (4) By: (b) (4) To: (b) (4)</p> <p>2. Provide funding to CLIN 0002 in the total amount of (b) (4). As a result, funding for CLIN 0002 has increased:</p> <p>From (b) (4) By: (b) (4) To: (b) (4)</p> <p>3. Provide funding to CLIN 0003a in the total amount of (b) (4). As a result, Continued ...</p>					

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(b) (4)

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2023-ICLI-00006 3834

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

PAGE NO  
3

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

DATE OF ORDER 08/14/2020	CONTRACT NO. 70CDCR20D00000014	ORDER NO. 70CDCR20FR00000059
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ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>funding for CLIN 0003a has increased:</p> <p>From (b) (4) By: To:</p> <p>4. Provide funding to CLIN 0003b in the total amount of (b) (4). As a result, funding for CLIN 0003b has increased:</p> <p>From (b) (4) By: To:</p> <p>5. Provide funding to CLIN 0004 in the total amount of (b) (4). As a result, funding for CLIN 0004 has increased:</p> <p>From (b) (4) By: To:</p> <p>The Period of Performance for this task order is currently from 08/18/2020 to 08/17/2021 which matches the base period of IDIQ 70CDCR20D00000014.</p> <p>Notwithstanding the period of performance indicated above, the funding provided in this modification 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 currently 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.</p> <p>Period of Performance: 08/18/2020 to 08/17/2021</p>					
0001	<p>Base Period: Detention Services</p> <p>Continued ...</p>				(b) (4)	

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(b) (4)

## ORDER FOR SUPPLIES OR SERVICES

PAGE NO

## SCHEDULE - CONTINUATION

4

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

DATE OF ORDER	CONTRACT NO.	ORDER NO.
08/14/2020	70CDCR20D00000014	70CDCR20FR0000059

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	PoP: 08/18/2020 - 08/17/2021  Tier 1 (b) (4) Tier 2 (b) (4) Tier 3 (b) (4)  Guaranteed Minimum is (b) (4) Beds  Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD  Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4)  0002 Base Period: On-Call Stationary Guard Services PoP: 08/18/2020 - 08/17/2021  Regular Rate: (b) (4) Overtime Rate:  This is a Labor Hour CLIN. NOT-TO-EXCEED (NTE): (b) (4) hours Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD  Continued ...				(b) (4)	

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(b) (4)

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2023-ICLI-00006 3836

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

PAGE NO  
5

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

DATE OF ORDER 08/14/2020	CONTRACT NO. 70CDCR20D00000014	ORDER NO. 70CDCR20FR0000059
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ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	Accounting Info: (b) (7)(E) Funded: (b) (4)					
0003a	Base Period: Transportation Services - Labor PoP: 08/18/2020 - 08/17/2021  Fixed Price: (b) (4) /month  FFP monthly price up to (b) (4) miles/year Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD  Accounting Info: (b) (7)(E) Funded: (b) (4)	(b) (4)	MO	(b) (4)		
0003b	Base Period: Transportation Services - Mileage Rate PoP: 08/18/2020 - 08/17/2021  Mileage Rate: (b) (4)  Guaranteed Minimum is (b) (4) miles/year. CoreCivic may bill for (b) (4) miles monthly. All miles in excess during this period of performance will be billed at the 0003c rate. Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD  Accounting Info: (b) (7)(E) Funded: (b) (4)				(b) (4)	
0004	Base Period: Detainee Work Program PoP: 08/18/2020 - 08/17/2021  Continued ...	(b) (4)	EA	(b) (4)		

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(b) (4)

## ORDER FOR SUPPLIES OR SERVICES

PAGE NO

## SCHEDULE - CONTINUATION

6

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

DATE OF ORDER	CONTRACT NO.	ORDER NO.
08/14/2020	70CDCR20D00000014	70CDCR20FR00000059

ITEM NO.	SUPPLIES/SERVICES	QUANTITY ORDERED	UNIT	UNIT PRICE	AMOUNT	QUANTITY ACCEPTED
(a)	(b)	(c)	(d)	(e)	(f)	(g)
(b) (4)	Day  NTE: (b) (4) Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD  Accounting Info: (b) (7)(E) Funded: (b) (4) 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 or United States Postal Service (USPS) as follows:  a) Email: <ul style="list-style-type: none"><li>• (b) (7)(E) @ice.dhs.gov</li><li>• Contracting Officer Representative (COR) or Government Point of Contact (GPOC)</li><li>• Contract Specialist/Contracting Officer</li></ul> 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: (b) (7)(E) Continued ...					

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(b) (4)

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## ORDER FOR SUPPLIES OR SERVICES

PAGE NO

## SCHEDULE - CONTINUATION

7

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

DATE OF ORDER	CONTRACT NO.	ORDER NO.
08/14/2020	70CDCR20D00000014	70CDCR20FR00000059

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>The Contractors Data Universal Numbering System (DUNS) Number must be registered and active in the System for Award Management (SAM) at <a href="https://www.sam.gov">https://www.sam.gov</a> 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.</p> <p>Note: the Service Providers or Contractors Dunn and Bradstreet (D&amp;B) DUNS Number must be registered in the System for Award Management (SAM) at <a href="https://www.sam.gov">https://www.sam.gov</a> 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.</p> <p>2. Content of Invoices: Each invoice shall contain the following information in accordance with 52.212-4 (g), as applicable:</p> <p>(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;</p> <p>(ii). Dunn and Bradstreet (D&amp;B) DUNS Number;</p> <p>(iii). Invoice date and invoice number;</p> <p>(iv). Agreement/Contract number, contract line item number and, if applicable, the order number;</p> <p>Continued ...</p>					

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(b) (4)

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## ORDER FOR SUPPLIES OR SERVICES

PAGE NO

## SCHEDULE - CONTINUATION

8

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

DATE OF ORDER	CONTRACT NO.	ORDER NO.
08/14/2020	70CDCR20D00000014	70CDCR20FR00000059

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>(v). Description, quantity, unit of measure, unit price, extended price and period of performance of the items or services delivered;</p> <p>(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;</p> <p>(vii). Terms of any discount for prompt payment offered;</p> <p>(viii). Remit to Address;</p> <p>(ix). Name, title, and phone number of person to resolve invoicing issues;</p> <p>(x). ICE program office designated on order/contract/agreement and</p> <p>(xi). Mark invoice as "Interim" (Ongoing performance and additional billing expected) and "Final" (performance complete and no additional billing)</p> <p>(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.</p> <p>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: Continued ...</p>					

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(b) (4)

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2023-ICLI-00006 3840

## ORDER FOR SUPPLIES OR SERVICES

PAGE NO

## SCHEDULE - CONTINUATION

9

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

DATE OF ORDER		CONTRACT NO.		ORDER NO.		
08/14/2020		70CDCR20D00000014		70CDCR20FR00000059		
ITEM NO.	SUPPLIES/SERVICES	QUANTITY ORDERED	UNIT	UNIT PRICE	AMOUNT	QUANTITY ACCEPTED
(a)	(b)	(c)	(d)	(e)	(f)	(g)
	<p>(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:</p> <p>a. Detention Bed Space Services</p> <ul style="list-style-type: none"><li>• Bed day rate;</li><li>• Detainees check-in and check-out dates;</li><li>• Number of bed days multiplied by the bed day rate;</li><li>• Name of each detainee;</li><li>• Detainees identification information</li></ul> <p>(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:</p> <p>a. Detention Bed Space Services. For detention bed space CLINs without a GM, the supporting documentation must include:</p> <ul style="list-style-type: none"><li>• Bed day rate;</li><li>• Detainees check-in and check-out dates;</li><li>• Number of bed days multiplied by the bed day rate;</li><li>• Name of each detainee;</li><li>• Detainees identification information</li></ul> <p>b. Transportation Services: For transportation CLINs without a GM, the supporting documentation must include: Continued ...</p>					

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

(b) (4)

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PREVIOUS EDITION NOT USABLE

OPTIONAL FORM 348 (Rev. 4/2006)

Prescribed by GSA FPMR (48 CFR) 53.213(f)

2023-ICLI-00006 3165

2023-ICLI-00006 3841

## ORDER FOR SUPPLIES OR SERVICES

PAGE NO

## SCHEDULE - CONTINUATION

10

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

DATE OF ORDER	CONTRACT NO.	ORDER NO.
08/14/2020	70CDCR20D00000014	70CDCR20FR00000059

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<ul style="list-style-type: none"><li>• Mileage rate being applied for that invoice;</li><li>• Number of miles;</li><li>• Transportation routes provided;</li><li>• Locations serviced;</li><li>• Names of detainees transported;</li><li>• Itemized listing of all other charges;</li></ul> and, <ul style="list-style-type: none"><li>• for reimbursable expenses (e.g. travel expenses, special meals, etc.) copies of all receipts.</li></ul> <p>c. Stationary Guard Services: The itemized monthly invoice shall state:</p> <ul style="list-style-type: none"><li>• The location where the guard services were provided,</li><li>• The employee guard names and number of hours being billed,</li><li>• The employee guard names and duration of the billing (times and dates), and</li><li>• (4) for individual or detainee group escort services only, the name of the detainee(s) that was/were escorted.</li></ul> <p>d. Other Direct Charges (e.g. VTC support, transportation meals/sack lunches, volunteer detainee wages, etc.):</p> <p>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.</p> <p>(iii) Firm Fixed-Price CLINs. Supporting documentation is not required for charges for FFP CLINs.</p> <p>4. Safeguarding Information: As a contractor or vendor conducting business with Immigration and Customs Enforcement Continued ...</p>					

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

(b) (4)

AUTHORIZED FOR LOCAL REPRODUCTION  
PREVIOUS EDITION NOT USABLE

OPTIONAL FORM 348 (Rev. 4/2006)

Prescribed by GSA FPMR (41 CFR) 101-11.6

2023-ICLI-00006 3166

2023-ICLI-00006 3842

## SCHEDULE - CONTINUATION

11

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

DATE OF ORDER	CONTRACT NO.	ORDER NO.
08/14/2020	70CDCR20D00000014	70CDCR20FR00000059

ITEM NO.	SUPPLIES/SERVICES	QUANTITY ORDERED	UNIT	UNIT PRICE	AMOUNT	QUANTITY ACCEPTED
(a)	(b)	(c)	(d)	(e)	(f)	(g)
	<p>(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 other unique identifier and full date of birth, citizenship, or immigration status.</p> <p>As part of your obligation to safeguard information, the follow precautions are required:</p> <p>(i) Email supporting documents containing Sensitive PII in an encrypted attachment with password sent separately to the Contracting Officer Representative assigned to the contract.</p> <p>(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.</p> <p>(iii) Use shredders when discarding paper documents containing Sensitive PII.</p> <p>(iv) Refer to the DHS Handbook for Safeguarding Sensitive Personally Identifiable Information (March 2012) found at <a href="http://www.dhs.gov/xlibrary/assets/privacy/dhs-privacy-safeguardingsensitivepiihandbook-march2012.pdf">http://www.dhs.gov/xlibrary/assets/privacy/dhs-privacy-safeguardingsensitivepiihandbook-march2012.pdf</a> for more information on and/or examples of Sensitive PII.</p> <p>5. Invoice Inquiries. If you have questions regarding payment, please contact ICE</p> <p>Continued ...</p>					

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

(b) (4)

ORDER FOR SUPPLIES OR SERVICES  
SCHEDULE - CONTINUATION

PAGE NO  
12

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

DATE OF ORDER	CONTRACT NO.	ORDER NO.
08/14/2020	70CDCR20D00000014	70CDCR20FR00000059

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	Financial Operations at 1-877-491-(b) (7)(E) or by e-mail at (b) (7)(E) @ice.dhs.gov.					

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

(b) (4)

AUTHORIZED FOR LOCAL REPRODUCTION  
PREVIOUS EDITION NOT USABLE

OPTIONAL FORM 348 (Rev. 4/2006)  
Prescribed by GSA FPMR (41 CFR) 101-11.6

2023-ICLI-00006 3168

2023-ICLI-00006 3844

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT		1. CONTRACT ID CODE	PAGE OF PAGES	
			1	5
2. AMENDMENT/MODIFICATION NO.	3. EFFECTIVE DATE	4. REQUISITION/PURCHASE REQ. NO.	5. PROJECT NO. (If applicable)	
P00001	See Block 16C	192120FHO0CCA0001.9		
6. ISSUED BY	CODE	7. ADMINISTERED BY (If other than Item 6)	CODE	
ICEDETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW (b) (6), (b) (7)(C) WASHINGTON DC 20536	ICE/DCR			
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)		(x)	9A. AMENDMENT OF SOLICITATION NO.	
CORECIVIC INC ATTN CORECIVIC INC 5501 VIRGINIA WAY (b) (6), (b) (7)(C) BRENTWOOD TN 370277684			9B. DATED (SEE ITEM 11)	
		X	10A. MODIFICATION OF CONTRACT/ORDER NO. 70CDCR20D00000014 70CDCR20FR0000059	
			10B. DATED (SEE ITEM 13) 08/14/2020	
CODE 1597341510000	FACILITY CODE			
11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS				
<input type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers <input type="checkbox"/> is extended. <input type="checkbox"/> is not extended. Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By 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 desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes 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: (b) (4)		
See Schedule				
13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.				
CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.			
	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 ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).			
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:			
X	D. OTHER (Specify type of modification and authority) Funding Only Action IAW FAR 52.243-1 "Changes - Fixed Price, Alt. I"			
E. IMPORTANT: Contractor <input checked="" type="checkbox"/> is not. <input type="checkbox"/> is required to sign this document and return _____ copies to the issuing office.				
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)				
DUNS Number: 159734151				
COR: (b) (6), (b) (7)(C)				
Phone: (b) (6), (b) (7)(C)				
Email: @ice.dhs.gov				
COR: (b) (6), (b) (7)(C)				
Phone: (b) (6), (b) (7)(C)				
Email: @ice.dhs.gov				
Contractor POC: (b) (6), (b) (7)(C)				
Phone: (b) (6), (b) (7)(C)				
Continued ...				
Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.				
15A. NAME AND TITLE OF SIGNER (Type or print)		16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)		
		(b) (6), (b) (7)(C)		
		TEL: 202-732- (b) (6), (b) (7)(C) EMAIL: (b) (6), (b) (7)(C)@ice.dhs.gov		
15B. CONTRACTOR/OFFEROR	15C. DATE SIGNED	16B. UNITED STATES OF AMERICA		16C. DATE SIGNED
(Signature of person authorized to sign)		(Signature of Contracting Officer)		
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 70CDCR20D00000014/70CDCR20FR0000059/P00001	PAGE	OF
		2	5

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0001	<p>Email: (b) (6), (b) (7)(C)@corecivic.com</p> <p>Contracting Officer/Specialist: (b) (6), (b) (7)(C)</p> <p>Phone: (b) (6), (b) (7)(C)</p> <p>Email: @ice.dhs.gov</p> <p>There is one (1) requisition associated with this modification; 192120FH00CCA0001.9.</p> <p>The purpose of modification P00001 is to provide additional funding in the amount of (b) (4) to this task order regarding Detention and Transportation Services at the Houston Contract Detention Facility (CDF) in Houston, Texas.</p> <p>As a result, the total amount of the task order is increased:</p> <p>From (b) (4)</p> <p>By:</p> <p>To:</p> <p>Notwithstanding the period of performance indicated above, the funding provided in this modification 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 currently 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.</p> <p>Discount Terms:</p> <p>Net (b) (4)</p> <p>Period of Performance: 08/18/2020 to 08/17/2021</p> <p>Change Item 0001 to read as follows (amount shown is the obligated amount):</p> <p>Base Period: Detention Services</p> <p>PoP: 08/18/2020 - 08/17/2021</p> <p>Tier 1 (b) (4)</p> <p>Tier 2 (b) (4)</p> <p>Tier 3 (b) (4)</p> <p>Guaranteed Minimum is (b) (4) Beds</p> <p>Continued ...</p>				(b) (4)



## CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED

70CDCR20D00000014/70CDCR20FR0000059/P00001

PAGE

OF

4

5

NAME OF OFFEROR OR CONTRACTOR

CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>Rate PoP: 08/18/2020 - 08/17/2021</p> <p>Mileage Rate: (b) (4)</p> <p>Guaranteed Minimum is (b) (4) miles/year. CoreCivic may bill for (b) (4) miles monthly. All miles in excess during this period of performance will be billed at the 0003c rate.</p> <p>As a result, funding for this CLIN has increased</p> <p>From (b) (4) By: (b) (4) To: (b) (4)</p> <p>Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4) Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Change Item 0004 to read as follows (amount shown is the obligated amount):</p> <p>0004 Base Period: Detainee Work Program PoP: 08/18/2020 - 08/17/2021</p> <p>(b) (4) Day</p> <p>NTE: (b) (4)</p> <p>As a result, funding for this CLIN has increased</p> <p>From (b) (4) By: (b) (4) To: (b) (4)</p> <p>Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info: (b) (7)(E)</p> <p>Continued ...</p>				

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<div>(b) (7)(E)</div> <div>Funded: (b) (4)</div> <div>Accounting Info:</div> <div>(b) (7)(E)</div> <div>Funded: (b) (4)</div> <div>All terms and conditions of Task Order</div> <div>70CDCR20FR00000059 shall remain unchanged.</div>				

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT		1. CONTRACT ID CODE		PAGE OF PAGES	
				1 6	
2. AMENDMENT/MODIFICATION NO.		3. EFFECTIVE DATE		4. REQUISITION/PURCHASE REQ. NO.	
P00002		See Block 16C		192121FHO0CCA0006	
6. ISSUED BY		CODE		7. ADMINISTERED BY (If other than Item 6)	
ICE/DCR				CODE	
ICEDETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW (b) (6), (b) (7)(C) WASHINGTON DC 20536					
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)		(x)		9A. AMENDMENT OF SOLICITATION NO.	
CORECIVIC INC ATTN CORECIVIC INC 5501 VIRGINIA WAY (b) (6), (b) (7)(C) BRENTWOOD TN 370277684				9B. DATED (SEE ITEM 11)	
		X		10A. MODIFICATION OF CONTRACT/ORDER NO.	
				70CDCR20D00000014	
				70CDCR20FR0000059	
				10B. DATED (SEE ITEM 13)	
				08/14/2020	
CODE 1597341510000		FACILITY CODE			
11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS					
<input type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers <input type="checkbox"/> is extended. <input type="checkbox"/> is not extended. Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By 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 desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes 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)					
See Schedule Net Increase: (b) (4)					
13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.					
CHECK ONE					
A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.					
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 ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).					
C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:					
D. OTHER (Specify type of modification and authority)					
X Funding Only Action IAW FAR 52.243-1 "Changes - Fixed Price, Alt. I"					
E. IMPORTANT: Contractor <input checked="" type="checkbox"/> is not. <input type="checkbox"/> is required to sign this document and return _____ copies to the issuing office.					
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)					
DUNS Number: 159734151					
COR: (b) (6), (b) (7)(C)					
Phone: (b) (6), (b) (7)(C)					
Email: @ice.dhs.gov					
COR: (b) (6), (b) (7)(C)					
Phone: (b) (6), (b) (7)(C)					
Email: @ice.dhs.gov					
Contractor POC: (b) (6), (b) (7)(C)					
Phone: (b) (6), (b) (7)(C)					
Continued ...					
Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.					
15A. NAME AND TITLE OF SIGNER (Type or print)					
16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)					
(b) (6), (b) (7)(C)					
TEL: 202-732- (b) (6), (b) (7)(C) EMAIL: (b) (6), (b) (7)(C)@ice.dhs.gov					
15B. CONTRACTOR/OFFEROR		15C. DATE SIGNED		16B. UNITED STATES OF AMERICA	
(Signature of person authorized to sign)				(Signature of Contracting Officer)	
NSN 7540-01-152-8070				STANDARD FORM 30 (REV. 10-83)	
Previous edition unusable				Prescribed by GSA	
				FAR (48 CFR) 53.243	

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000014/70CDCR20FR0000059/P00002	PAGE	OF
		2	6

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0001	<p>Email: (b) (6), (b) (7)(C)@corecivic.com</p> <p>Contracting Officer/Specialist: (b) (6), (b) (7)(C)</p> <p>Phone: (b) (6), (b) (7)(C)</p> <p>Email: @ice.dhs.gov</p> <p>There is one requisition associated with this modification; 192121FHO0CCA0006.</p> <p>IAW FAR 52.243-1 Alt. I, the purpose of modification P00002 is to provide additional funding in the amount of (b) (4) to this task order regarding Detention and Transportation Services at the Houston Contract Detention Facility (CDF) in Houston, Texas.</p> <p>As a result, the total amount of the task order is increased:</p> <p>From (b) (4)</p> <p>By:</p> <p>To:</p> <p>Notwithstanding the period of performance indicated above, the funding provided in this modification 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 currently 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.</p> <p>Discount Terms:</p> <p>Net (b) (4)</p> <p>Period of Performance: 08/18/2020 to 08/17/2021</p> <p>Change Item 0001 to read as follows (amount shown is the obligated amount):</p> <p>Base Period: Detention Services</p> <p>Tier 1 (b) (4)</p> <p>Tier 2 (b) (4)</p> <p>Tier 3 (b) (4)</p> <p>Guaranteed Minimum is 750 Beds</p> <p>Continued ...</p>				(b) (4)



CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000014/70CDCR20FR00000059/P00002	PAGE	OF
		4	6

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0002	<p>NTE: (b) (4)</p> <p>Change Item 0002 to read as follows (amount shown is the obligated amount):</p> <p>Base Period: On-Call Stationary Guard Services</p> <p>Regular Rate: (b) (4)</p> <p>Overtime Rate: (b) (4)</p> <p>This is a Labor Hour CLIN. NOT-TO-EXCEED (NTE): (b) (4) hours</p> <p>As a result, funding for this CLIN has increased</p> <p>From (b) (4)</p> <p>By: (b) (4)</p> <p>To: (b) (4)</p> <p>Product/Service Code: S206</p> <p>Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p>				(b) (4)
0003a	<p>Change Item 0003a to read as follows (amount shown is the obligated amount):</p> <p>Base Period: Transportation Services - Labor</p> <p>Fixed Price: (b) (4) month</p> <p>FFP monthly price up to (b) (4) miles/year</p> <p>As a result, funding for this CLIN has increased</p> <p>From (b) (4)</p> <p>By: (b) (4)</p> <p>To: (b) (4)</p> <p>As a result, the quantity for this CLIN has increased</p> <p>Continued ...</p>	(b) (4)	MO	(b) (4)	

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000014/70CDCR20FR00000059/P00002	PAGE	OF
		5	6

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0003b	<p>From: (b) (4) By: (b) (4) To: (b) (4) Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4)</p> <p>Change Item 0003b to read as follows (amount shown is the obligated amount):</p> <p>Base Period: Transportation Services - Mileage Rate</p> <p>Mileage Rate: (b) (4)</p> <p>Guaranteed Minimum is (b) (4) miles/year. CoreCivic may bill for (b) (4) miles monthly. All miles in excess during this period of performance will be billed at the 0003c rate.</p> <p>As a result, funding for this CLIN has increased</p> <p>From (b) (4) By: (b) (4) To: (b) (4) Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: Continued ...</p>				(b) (4)

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000014/70CDCR20FR0000059/P00002	PAGE	OF
		6	6

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0004	<p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Change Item 0004 to read as follows (amount shown is the obligated amount):</p> <p>Base Period: Detainee Work Program</p> <p>(b) (4) /Day</p> <p>NTE: (b) (4)</p> <p>As a result, funding for this CLIN has increased</p> <p>From (b) (4)</p> <p>By: (b) (4)</p> <p>To: (b) (4)</p> <p>Product/Service Code: S206</p> <p>Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>All terms and conditions of Task Order 70CDCR20FR0000059 shall remain unchanged.</p>	(b) (4)	EA	(b) (4)	

<b>AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT</b>			1. CONTRACT ID CODE		PAGE OF PAGES 1 4									
2. AMENDMENT/MODIFICATION NO. P00003		3. EFFECTIVE DATE See Block 16C		4. REQUISITION/PURCHASE REQ. NO. 192121FHO0CCA0006.1		5. PROJECT NO. (If applicable)								
6. ISSUED BY ICEDETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW (b) (6), (b) (7)(C) WASHINGTON DC 20536		CODE ICE/DCR		7. ADMINISTERED BY (If other than Item 6)		CODE								
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code) CORECIVIC INC ATTN CORECIVIC INC 5501 VIRGINIA WAY (b) (6), (b) (7)(C) BRENTWOOD TN 370277684				(x) 9A. AMENDMENT OF SOLICITATION NO.  9B. DATED (SEE ITEM 11)										
CODE 1597341510000 FACILITY CODE														
				X 10A. MODIFICATION OF CONTRACT/ORDER NO. 70CDCR20D00000014 70CDCR20FR0000059 10B. DATED (SEE ITEM 13) 08/14/2020										
<b>11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS</b>														
<input type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers <input type="checkbox"/> is extended. <input type="checkbox"/> is not extended. Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By 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 desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes 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) See Schedule Net Increase: (b) (4)														
<b>13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.</b>														
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">CHECK ONE</td> <td>A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.</td> </tr> <tr> <td></td> <td>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 ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).</td> </tr> <tr> <td></td> <td>C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:</td> </tr> <tr> <td>X</td> <td>D. OTHER (Specify type of modification and authority) Funding Only Action IAW FAR 52.243-1 "Changes - Fixed Price, Alt. I"</td> </tr> </table>							CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.		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 ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).		C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:	X	D. OTHER (Specify type of modification and authority) Funding Only Action IAW FAR 52.243-1 "Changes - Fixed Price, Alt. I"
CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.													
	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 ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).													
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:													
X	D. OTHER (Specify type of modification and authority) Funding Only Action IAW FAR 52.243-1 "Changes - Fixed Price, Alt. I"													
<b>E. IMPORTANT:</b> Contractor <input checked="" type="checkbox"/> is not. <input type="checkbox"/> is required to sign this document and return _____ copies to the issuing office.														
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.) DUNS Number: 159734151 COR: (b) (6), (b) (7)(C) Phone: (b) (6), (b) (7)(C) Email: @ice.dhs.gov  ACOR: (b) (6), (b) (7)(C) Phone: Email: @ice.dhs.gov  ACOR: (b) (6), (b) (7)(C) Phone: Continued ...														
Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.														
15A. NAME AND TITLE OF SIGNER (Type or print)				16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)										
				(b) (6), (b) (7)(C) TEL: 202-732- (b) (6), (b) (7)(C) EMAIL: (b) (6), (b) (7)(C)@ice.dhs.gov										
15B. CONTRACTOR/OFFEROR		15C. DATE SIGNED		16B. UNITED STATES OF AMERICA		16C. DATE SIGNED								
(Signature of person authorized to sign)				(Signature of Contracting Officer)										

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000014/70CDCR20FR00000059/P00003	PAGE	OF
		2	4

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>Email: (b) (6), (b) (7)(C)@ice.dhs.gov</p> <p>Contractor POC: (b) (6), (b) (7)(C)</p> <p>Phone: (b) (6), (b) (7)(C)</p> <p>Email: @corecivic.com</p> <p>Contracting Officer/Specialist: (b) (6), (b) (7)(C)</p> <p>Phone: (b) (6), (b) (7)(C)</p> <p>Email: @ice.dhs.gov</p> <p>There is one requisition associated with this modification; 192121FHO0CCA0006.1</p> <p>IAW FAR 52.243-1 Alt. I, the purpose of modification P00003 is to provide additional funding in the amount of (b) (4) to this task order regarding Transportation Services at the Houston Contract Detention Facility (CDF) in Houston, Texas.</p> <p>As a result, the total amount of the task order is increased:</p> <p>From (b) (4)</p> <p>By:</p> <p>To:</p> <p>Notwithstanding the period of performance indicated above, the funding provided in this modification 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 currently 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.</p> <p>Discount Terms:</p> <p>Net (b) (4)</p> <p>Period of Performance: 08/18/2020 to 08/17/2021</p> <p>Change Item 0003a to read as follows (amount shown is the obligated amount):</p> <p>0003a Base Period: Transportation Services - Labor (b) (4) MO (b) (4)</p> <p>Fixed Price: (b) (4) /month</p> <p>Continued ...</p>				

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000014/70CDCR20FR00000059/P00003	PAGE	OF
		3	4

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>FFP monthly price up to (b) (4) miles/year</p> <p>As a result, funding for this CLIN has increased</p> <p>From: (b) (4)</p> <p>By: (b) (4)</p> <p>To: (b) (4)</p> <p>As a result, the quantity for this CLIN has increased</p> <p>From: (b) (4)</p> <p>By: (b) (4)</p> <p>To: (b) (4)</p> <p>Product/Service Code: S206</p> <p>Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Change Item 0003b to read as follows (amount shown is the obligated amount):</p> <p>0003b Base Period: Transportation Services - Mileage Rate</p> <p>Mileage Rate: (b) (4)</p> <p>Guaranteed Minimum is (b) (4) miles/year.</p> <p>CoreCivic may bill for (b) (4) miles monthly. All miles in excess during this period of performance will be billed at the 0003c rate.</p> <p>As a result, funding for this CLIN has increased</p> <p>From: (b) (4)</p> <p>Continued ...</p>				(b) (4)

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	By: (b) (4) To: (b) (4) Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD  Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4) All terms and conditions of Task Order 70CDCR20FR00000059 shall remain unchanged.				

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT		1. CONTRACT ID CODE		PAGE OF PAGES	
				14	
2. AMENDMENT/MODIFICATION NO.		3. EFFECTIVE DATE		4. REQUISITION/PURCHASE REQ. NO.	
P00004		See Block 16C		192121FHO0CCA0006.2	
6. ISSUED BY		CODE		7. ADMINISTERED BY (If other than Item 6)	
		70CDCR		CODE ICE/DCR	
DETENTION COMPLIANCE AND REMOVALS US IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I ST NW (b) (6), (b) (7)(C) WASHINGTON DC 20536		ICE DETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW (b) (6), (b) (7)(C) WASHINGTON DC 20536			
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)		(x) 9A. AMENDMENT OF SOLICITATION NO.			
CORECIVIC INC ATTN CORECIVIC INC 5501 VIRGINIA WAY (b) (6), (b) (7)(C) BRENTWOOD TN 370277684					
		9B. DATED (SEE ITEM 11)			
		X 10A. MODIFICATION OF CONTRACT/ORDER NO. 70CDCR20D00000014 70CDCR20FR0000059			
		10B. DATED (SEE ITEM 13) 08/14/2020			
CODE 1597341510000		FACILITY CODE			
11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS					
<input type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers <input type="checkbox"/> is extended. <input type="checkbox"/> is not extended. Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By 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 desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes 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) See Schedule Net Increase: (b) (4)					
13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.					
CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.				
	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 ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).				
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:				
X	D. OTHER (Specify type of modification and authority) Funding Only Action IAW FAR 52.243-1 "Changes - Fixed Price, Alt. I"				
E. IMPORTANT: Contractor <input checked="" type="checkbox"/> is not. <input type="checkbox"/> is required to sign this document and return _____ copies to the issuing office.					
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)					
DUNS Number: 159734151					
COR: (b) (6), (b) (7)(C)					
Phone: (b) (6), (b) (7)(C)					
Email: (b) (6), (b) (7)(C)@ice.dhs.gov					
ACOR: (b) (6), (b) (7)(C)					
Phone: (b) (6), (b) (7)(C)					
Email: (b) (6), (b) (7)(C)@ice.dhs.gov					
ACOR: (b) (6), (b) (7)(C)					
Phone: (b) (6), (b) (7)(C)					
Continued ...					
Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.					
15A. NAME AND TITLE OF SIGNER (Type or print)		16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)			
		(b) (6), (b) (7)(C)			
		TEL: 202-732- (b) (6), (b) (7)(C)		EMAIL: (b) (6), (b) (7)(C)@ICE.DHS.GOV	
15B. CONTRACTOR/OFFEROR		15C. DATE SIGNED		16B. UNITED STATES OF AMERICA	
(Signature of person authorized to sign)		(Signature of Contracting Officer)			
NSN 7540-01-152-8070				STANDARD FORM 30 (REV. 10-83)	
Previous edition unusable				Prescribed by GSA	
				FAR (48 CFR) 53.243	

<b>CONTINUATION SHEET</b>	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000014/70CDCR20FR0000059/P00004	PAGE 2 OF 4
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NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0003a	<p>Email: John.Abraham@ice.dhs.gov</p> <p>Contractor POC: Stacey Cason Phone: 615-263-3027 Email: Stacey.Cason@corecivic.com</p> <p>Contracting Officer/Specialist: Ian Somppi Phone: 202-732-1066 Email: ian.somppi@ice.dhs.gov</p> <p>There is one requisition associated with this modification; 192121FHO0CCA0006.2</p> <p>IAW FAR 52.243-1 Alt. I, the purpose of modification P00003 is to provide additional funding in the amount of (b) (4) to this task order regarding Transportation Services at the Houston Contract Detention Facility (CDF) in Houston, Texas.</p> <p>As a result, the total amount of the task order is increased:</p> <p>From: (b) (4) By: (b) (4) To: (b) (4)</p> <p>Notwithstanding the period of performance indicated above, the funding provided in this modification 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 currently 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.</p> <p>Discount Terms: Net (b) (4)</p> <p>Period of Performance: 08/18/2020 to 08/17/2021</p> <p>Change Item 0003a to read as follows (amount shown is the obligated amount):</p> <p>Base Period: Transportation Services - Labor</p> <p>Fixed Price: (b) (4) /month</p> <p>Continued ...</p>	(b) (4)	MO	(b) (4)	(b) (4)

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000014/70CDCR20FR0000059/P00004	PAGE	OF
		3	4

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>FFP monthly price up to (b) (4) miles/year</p> <p>As a result, funding for this CLIN has increased</p> <p>From: (b) (4)</p> <p>By: (b) (4)</p> <p>To: (b) (4)</p> <p>As a result, the quantity for this CLIN has increased</p> <p>From: (b) (4)</p> <p>By: (b) (4)</p> <p>To: (b) (4)</p> <p>Product/Service Code: S206</p> <p>Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Change Item 0003b to read as follows (amount shown is the obligated amount):</p> <p>0003b Base Period: Transportation Services - Mileage Rate</p> <p>Mileage Rate: (b) (4)</p> <p>Guaranteed Minimum is (b) (4) miles/year.</p> <p>CoreCivic may bill for (b) (4) miles monthly. All miles in excess during this period of performance Continued ...</p>				(b) (4)

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>will be billed at the 0003c rate.</p> <p>As a result, funding for this CLIN has increased</p> <p>From: (b) (4)</p> <p>By: (b) (4)</p> <p>To: (b) (4)</p> <p>Product/Service Code: S206</p> <p>Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>All terms and conditions of Task Order 70CDCR20FR00000059 shall remain unchanged.</p>				

## ORDER FOR SUPPLIES OR SERVICES

PAGE OF PAGES

1

6

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

1. DATE OF ORDER 05/12/2021		2. CONTRACT NO. (If any) ODT-10-C-0001		6. SHIP TO:		
3. ORDER NO. 70CDCR21FIGR00137		4. REQUISITION/REFERENCE NO. 192121FNLOAK15062		a. NAME OF CONSIGNEE  ICE ENFORCEMENT REMOVAL		
5. ISSUING OFFICE (Address correspondence to) DETENTION COMPLIANCE AND REMOVALS US IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I ST NW (b) (6), (b) (7)(C) WASHINGTON DC 20536				b. STREET ADDRESS IMMIGRATION AND CUSTOMS ENFORCEMENT 801 I STREET NW (b) (6), (b) (7)(C)		
				c. CITY WASHINGTON		e. ZIP CODE 20536
7. TO: CORECIVIC INC				f. SHIP VIA		
a. NAME OF CONTRACTOR CORECIVIC INC				8. TYPE OF ORDER		
b. COMPANY NAME				<input type="checkbox"/> a. PURCHASE REFERENCE YOUR:  Please furnish the following on the terms and conditions specified on both sides of this order and on the attached sheet, if any, including delivery as indicated.		
c. STREET ADDRESS 5501 VIRGINIA WAY (b) (6), (b) (7)(C)				<input checked="" type="checkbox"/> b. DELIVERY Except for billing instructions on the reverse, this delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.		
d. CITY BRENTWOOD		e. STATE TN		f. ZIP CODE 370277684		
9. ACCOUNTING AND APPROPRIATION DATA See Schedule				10. REQUISITIONING OFFICE ICE ENFORCEMENT REMOVAL		
11. BUSINESS CLASSIFICATION (Check appropriate box(es)) <input type="checkbox"/> a. SMALL <input type="checkbox"/> b. OTHER THAN SMALL <input type="checkbox"/> c. DISADVANTAGED <input type="checkbox"/> d. WOMEN-OWNED <input type="checkbox"/> e. HUBZone <input type="checkbox"/> f. SERVICE-DISABLED VETERAN-OWNED <input type="checkbox"/> g. WOMEN-OWNED SMALL BUSINESS (WOSB) ELIGIBLE UNDER THE WOSB PROGRAM <input type="checkbox"/> h. EDWOSB				12. F.O.B. POINT		
13. PLACE OF a. INSPECTION Destination		b. ACCEPTANCE Destination		14. GOVERNMENT B/L NO.		15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date) 30 Days After Award
						16. DISCOUNT TERMS Net (b) (4)
17. SCHEDULE (See reverse for Rejections)						
ITEM NO. (a)	SUPPLIES OR SERVICES (b)			QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)
	DUNS Number: 159734151 CONTACT INFORMATION Contracting Officer Representative (COR): (b) (6), (b) (7)(C) ice.dhs.gov Alternate Contracting Officer representative (ACOR) (b) (6), (b) (7)(C) Continued ...					
18. SHIPPING POINT						
19. GROSS SHIPPING WEIGHT						
20. INVOICE NO.						
21. MAIL INVOICE TO:						
a. NAME DHS ICE						
b. STREET ADDRESS (or P.O. Box) BURLINGTON FINANCE CENTER PO BOX 1620 ATTN (b) (7)(E)						
c. CITY WILLISTON						
d. STATE VT						
e. ZIP CODE 05495-1620						
22. UNITED STATES OF AMERICA BY (Signature)						
23. NAME (Typed) (b) (6), (b) (7)(C) TITLE: CONTRACTING/ORDERING OFFICER						

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

PAGE NO  
2

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

DATE OF ORDER 05/12/2021	CONTRACT NO. ODT-10-C-0001	ORDER NO. 70CDCR21FIGR00137
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ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
0001	<p>(b) (6), (b) (7)(C)@ice.dhs.gov Contracting Officer: (b) (6), (b) (7)(C) (b) (6), (b) (7)(C)@ice.dhs.gov Contract Specialist: (b) (6), (b) (7)(C) (b) (6), (b) (7)(C)@ice.dhs.gov</p> <p>The purpose of this FY21 Task Order is to provide funding for detention services for ICE detainees at AT WEST TENN. (CCA) for the period of performance of June 01, 2021 through May 31, 2022 under the provisions of Agreement ODT-10-C-0001.</p> <p>The total amount obligated is as follows: From (b) (4) By: To:</p> <p>Accounting Info: (b) (7)(E)</p> <p>Period of Performance: 06/01/2021 to 05/31/2022</p> <p>BEDSPACE AT A DAILY RATE OF (b) (4)</p> <p>CLIN 0001 is increased as follows: FROM (b) (4) BY: TO:</p> <p>Bed quantity has increased as follows: FROM (b) (4) BY: TO:</p> <p>INVOICE INSTRUCTIONS</p> <p>1. The contractor shall be active in the System for Award Management (www.SAM.gov) for invoice processing. Besides the information identified below, a proper invoice shall also include; contractor's Dunn and Bradstreet (D&amp;B) DUNS number; the Continued ...</p>	(b) (4)	EA	(b) (4)		

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

(b) (4)

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

PAGE NO  
3

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

DATE OF ORDER 05/12/2021	CONTRACT NO. ODT-10-C-0001	ORDER NO. 70CDCR21FIGR00137
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ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>ICE Program Office; and state whether the invoice is "INTERIM" or "FINAL".</p> <p>2. In accordance with Contract Clauses, FAR 52.212-4 (g) (1), Contract Terms and Conditions - Commercial Items, or FAR 52.232-25 (a) (3), Prompt Payment, as applicable, the information required with each invoice submission is as follows: "...An invoice must include-</p> <p>(i) Name and address of the Contractor. The name, address and DUNS number on the invoice MUST match the information in both the Contract/Agreement and the information in SAM;</p> <p>(ii) Dunn and Bradstreet (D&amp;B) DUNS number;</p> <p>(iii) Invoice date and number;</p> <p>(iv) Contract number, line items and, if applicable, the order number;</p> <p>(v) Description, quantity, unit of measure, unit price and extended price of the items delivered;</p> <p>(vi) Shipping number and date of shipment, including the bill of lading number and weight of shipment if shipped on Government bill of lading;</p> <p>(vii) Terms of any discount for prompt payment offered;</p> <p>(viii) Remit to Address;</p> <p>(ix) Name, title, and phone number of person to notify in event of defective invoice;</p> <p>(x) ICE Program Office designated on the order/contract/agreement; and</p> <p>(xi) Whether the invoice is "Interim" or "Final"</p> <p>3. Invoice submission: shall be submitted via one of the following two methods. Improper invoices or those submitted by means other than these two methods will be returned. Email is the preferred method.</p> <p>a. Primary method of submission is email. The Contractor shall submit one (1) invoice in PDF format per e-mail and the subject line of the e-mail will reference the Continued ...</p>					

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

**(b) (4)**

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**OPTIONAL FORM 348** (Rev. 4/2006)  
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2023-ICLI-00006 3190

2023-ICLI-00006 3866

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

PAGE NO  
4

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

DATE OF ORDER 05/12/2021	CONTRACT NO. ODT-10-C-0001	ORDER NO. 70CDCR21FIGR00137
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ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>invoice number of the attached invoice to: (b) (7)(E) @ice.dhs.gov Attn: ICE - (Insert program office name or code) Invoice</p> <p>b. Mail: DHS, ICE Financial Service Center Burlington Attn: (b) (7)(E) Invoice P.O. Box 1620 Williston, VT 05495-1620</p> <p>4. Payment Inquiries: Questions regarding invoice submission or payment, please contact Financial Service Center Burlington at 1-877-491-(b) (7)(E) or by e-mail at (b) (7)(E) @ice.dhs.gov</p> <p>Invoices without the above information may be returned for resubmission. INVOICE INSTRUCTIONS</p> <p>1. The contractor shall be active in the System for Award Management (www.SAM.gov) for invoice processing. Besides the information identified below, a proper invoice shall also include; contractor's Dunn and Bradstreet (D&amp;B) DUNS number; the ICE Program Office; and state whether the invoice is "INTERIM" or "FINAL".</p> <p>2. In accordance with Contract Clauses, FAR 52.212-4 (g) (1), Contract Terms and Conditions - Commercial Items, or FAR 52.232-25 (a) (3), Prompt Payment, as applicable, the information required with each invoice submission is as follows: "...An invoice must include-</p> <p>(i) Name and address of the Contractor. The name, address and DUNS number on the invoice MUST match the information in both the Contract/Agreement and the information in SAM;</p> <p>Continued ...</p>					

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

(b) (4)

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OPTIONAL FORM 348 (Rev. 4/2006)  
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2023-ICLI-00006 3191

2023-ICLI-00006 3867

## ORDER FOR SUPPLIES OR SERVICES

PAGE NO

## SCHEDULE - CONTINUATION

5

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

DATE OF ORDER	CONTRACT NO.	ORDER NO.
05/12/2021	ODT-10-C-0001	70CDCR21FIGR00137

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>(ii) Dunn and Bradstreet (D&amp;B) DUNS number;</p> <p>(iii) Invoice date and number;</p> <p>(iv) Contract number, line items and, if applicable, the order number;</p> <p>(v) Description, quantity, unit of measure, unit price and extended price of the items delivered;</p> <p>(vi) Shipping number and date of shipment, including the bill of lading number and weight of shipment if shipped on Government bill of lading;</p> <p>(vii) Terms of any discount for prompt payment offered;</p> <p>(viii) Remit to Address;</p> <p>(ix) Name, title, and phone number of person to notify in event of defective invoice;</p> <p>(x) ICE Program Office designated on the order/contract/agreement; and</p> <p>(xi) Whether the invoice is "Interim" or "Final"</p> <p>3. Invoice submission: shall be submitted via one of the following two methods. Improper invoices or those submitted by means other than these two methods will be returned. Email is the preferred method.</p> <p>a. Primary method of submission is email. The Contractor shall submit one (1) invoice in PDF format per e-mail and the subject line of the e-mail will reference the invoice number of the attached invoice to: (b) (7)(E)@ice.dhs.gov Attn: ICE - (Insert program office name or code) Invoice</p> <p>b. Mail: DHS, ICE Financial Service Center Burlington Attn: ICE-_____ Invoice (Insert program office name or code) P.O. Box 1620 Williston, VT 05495-1620</p> <p>Continued ...</p>					

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

(b) (4)

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OPTIONAL FORM 348 (Rev. 4/2006)

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2023-ICLI-00006 3192

2023-ICLI-00006 3868

## ORDER FOR SUPPLIES OR SERVICES

PAGE NO

## SCHEDULE - CONTINUATION

6

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

DATE OF ORDER

CONTRACT NO.

ORDER NO.

05/12/2021

ODT-10-C-0001

70CDCR21FIGR00137

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>4. Payment Inquiries: Questions regarding invoice submission or payment, please contact Financial Service Center Burlington at 1-877-491-(b) (7)(E) or by e-mail at (b) (7)(E)@ice.dhs.gov</p> <p>Invoices without the above information may be returned for resubmission.</p>					

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

(b) (4)

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PREVIOUS EDITION NOT USABLE

OPTIONAL FORM 348 (Rev. 4/2006)

Prescribed by GSA FPMR (41 CFR) 101-11.6

2023-ICLI-00006 3193

2023-ICLI-00006 3869

<b>AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT</b>		1. CONTRACT ID CODE		PAGE OF PAGES 1 3	
2. AMENDMENT/MODIFICATION NO. P00004		3. EFFECTIVE DATE See Block 16C		4. REQUISITION/PURCHASE REQ. NO. 192122FSLVVG00003.2	
6. ISSUED BY DETENTION MANAGEMENT - LAGUNA US IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 24000 AVILA ROAD (b) (6), (b) (7)(C) LAGUNA NIGUEL CA 92677		CODE 70CDLG		5. PROJECT NO. (If applicable) ICE/DM/DC-LAGUNA	
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code) CORECIVIC INC ATTN (b) (6), (b) (7)(C) 5501 VIRGINIA WAY (b) (6), (b) (7)(C) BRENTWOOD TN 37027-7684		(x)		7. ADMINISTERED BY (If other than Item 6) ICE/DETENT MNGT/DETENT CONTRACT-LAG IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 24000 AVILA ROAD (b) (6), (b) (7)(C) ATTN (b) (6), (b) (7)(C) LAGUNA NIGUEL CA 92677	
CODE 1597341510000		FACILITY CODE		9A. AMENDMENT OF SOLICITATION NO. 9B. DATED (SEE ITEM 11) 10A. MODIFICATION OF CONTRACT/ORDER NO. ODT-8-C-0001 70CDCR21FIGR00180 10B. DATED (SEE ITEM 13) 04/28/2021	

**11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS**

☐ The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers ☐ is extended. ☐ is not extended.  
Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning \_\_\_\_\_ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By 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 desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes 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)

See Schedule

**13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.**

CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.
	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 ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:
X	D. OTHER (Specify type of modification and authority) Unilateral Modification / Update Contract ODT-8-C-0001 changes

**E. IMPORTANT:** Contractor ☒ is not, ☐ is required to sign this document and return \_\_\_\_\_ copies to the issuing office.

14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)

DUNS Number: 159734151

Contracting Officer Representative (COR): (b) (6), (b) (7)(C)

(b) (6), (b) (7)(C) @ice.dhs.gov

ACOR: (b) (6), (b) (7)(C) @ice.dhs.gov

Contract Specialist: (b) (6), (b) (7)(C) @ice.dhs.gov

Contracting Officer: (b) (6), (b) (7)(C) @ice.dhs.gov

Service Provider: (b) (6), (b) (7)(C) @corecivic.com

The purpose of this modification is to incorporate in the contract 70CDCR21FIGR00180 the revised Contract ODT-8-C-0001 dated on January 06, 2022.

Continued ...

Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.

15A. NAME AND TITLE OF SIGNER (Type or print) (b) (6), (b) (7)(C)		16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print) (b) (6), (b) (7)(C)	
		EMAIL: (b) (6), (b) (7)(C) @ice.dhs.gov	
15B. CONTRACTOR/OFFEROR  (Signature of person authorized to sign)	15C. DATE SIGNED	16B. UNITED STATES OF AMERICA  (Signature of Contracting Officer)	16C. DATE SIGNED

NSN 7540-01-152-8070

Previous edition unusable

2023-ICLI-00006 3194

2023-ICLI-00006 3870

STANDARD FORM 30 (REV. 10-83)

Prescribed by GSA

FAR (48 CFR) 53.243

## CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED  
ODT-8-C-0001/70CDCR21FIGR00180/P00004PAGE OF  
2 3NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>The transportation services hourly rate increased to (b) (4) effective October 01, 2021.</p> <p>All other terms and conditions remain the same.</p> <p>This is a fixed rate to supply services at the amounts indicated. Contractors (Service Provider) shall not provide and additional supplies or services and/or additional bills for any additional amount without authorization from the Contracting Officer (CO).</p> <p>.</p> <p>.</p> <p>LIST OF CHANGES:</p> <p>Reason for Modification: Other Administrative Action</p> <p>Total Amount for this Modification: (b) (4)</p> <p>New Total Amount for this Award: (b) (4)</p> <p>CHANGES FOR LINE ITEM NUMBER: 1202</p> <p>(b) (7)(E)</p> <p>Amount: (b) (4)</p> <p>CHANGES FOR LINE ITEM NUMBER: 1202.</p> <p>(b) (7)(E)</p> <p>Amount: (b) (4)</p> <p>.</p> <p>Discount Terms:</p> <p>Net (b) (4)</p> <p>Period of Performance: 05/01/2021 to 04/30/2022</p> <p>Change Item 1202 to read as follows (amount shown is the obligated amount):</p> <p>1202 Escort/Guard Services (10/01/2021-09/30/2022) In Accordance with Department of Justice, Office of the Federal Detention Trustee Contract No. ODT-8-C-0001.</p> <p>The unit price has increased as follows: From: (b) (4)</p> <p>Change Item 1202. to read as follows (amount shown Continued ...</p>				

(b) (4)

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED ODT-8-C-0001/70CDCR21FIGR00180/P00004	PAGE	OF
		3	3

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
1202.	<p>is the obligated amount):</p> <p>Guard (Transportation) Services (10/01/2021-09/30/2022) In Accordance with Department of Justice, Office of the Federal Detention Trustee Contract No. ODT-8-C-0001.</p> <p>The unit price has increased as follows: From: (b) (4)</p> <p>Note: 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.</p> <p>The funding provided in this modification 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 work on those items beyond that point. The Government will not be obligated to reimburse the Service Provider in excess of the amount allotted to those items for performance beyond the funding allotted.</p>				(b) (4)

<b>AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT</b>		1. CONTRACT ID CODE		PAGE OF PAGES	
				1      3	
2. AMENDMENT/MODIFICATION NO. P00005		3. EFFECTIVE DATE See Block 16C		4. REQUISITION/PURCHASE REQ. NO. 192122FSLVVG00003.3	
6. ISSUED BY		CODE		5. PROJECT NO. (If applicable)	
		70CDLG		ICE/DM/DC-LAGUNA	
DETENTION MANAGEMENT - LAGUNA US IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 24000 AVILA ROAD (b) (6), (b) (7)(C) LAGUNA NIGUEL CA 92677			ICEDETENT MNGTDETENT CONTRACT-LAG IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 24000 AVILA ROAD (b) (6), (b) (7)(C) ATTN (b) (6), (b) (7)(C) LAGUNA NIGUEL CA 92677		
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)			9A. AMENDMENT OF SOLICITATION NO.		
CORECIVIC INC ATTN (b) (6), (b) (7)(C) 5501 VIRGINIA WAY (b) (6), (b) (7)(C) BRENTWOOD TN 37027-7684			(x)		
			9B. DATED (SEE ITEM 11)		
			X 10A. MODIFICATION OF CONTRACT/ORDER NO. ODT-8-C-0001 70CDCR21FIGR00180 10B. DATED (SEE ITEM 13) 04/28/2021		
CODE 1597341510000		FACILITY CODE			
<b>11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS</b>					
<input type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers <input type="checkbox"/> is extended. <input type="checkbox"/> is not extended. Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By 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 desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes 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)					
See Schedule      Net Increase: (b) (4)					
<b>13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.</b>					
CHECK ONE					
A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.					
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 ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).					
C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:					
D. OTHER (Specify type of modification and authority)					
X Unilateral Modification / Funding Only Action					
E. IMPORTANT: Contractor <input checked="" type="checkbox"/> is not. <input type="checkbox"/> is required to sign this document and return _____ copies to the issuing office.					
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)					
DUNS Number: 159734151					
Contracting Officer Representative (COR): (b) (6), (b) (7)(C)					
(b) (6), (b) (7)(C)@ice.dhs.gov					
ACOR: (b) (6), (b) (7)(C)@ice.dhs.gov					
Contract Specialist: (b) (6), (b) (7)(C)@ice.dhs.gov					
Contracting Officer: (b) (6), (b) (7)(C)@ice.dhs.gov					
Service Provider: (b) (6), (b) (7)(C)@corecivic.com					
The purpose of this modification is to add funds at a total amount of (b) (4) under CLINs 1201 and 1202.					
Continued ...					
Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.					
15A. NAME AND TITLE OF SIGNER (Type or print)			16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)		
			(b) (6), (b) (7)(C)		
			TEL:      EMAIL: (b) (6), (b) (7)(C)@ice.dhs.gov		
15B. CONTRACTOR/OFFEROR		15C. DATE SIGNED		16B. UNITED STATES OF AMERICA	
(Signature of person authorized to sign)				(Signature of Contracting Officer)	

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>All other terms and conditions remain the same.</p> <p>This is a fixed rate to supply services at the amounts indicated. Contractors (Service Provider) shall not provide supplies or services and/or additional bills for any additional amount without authorization from the Contracting Officer (CO).</p> <p>.</p> <p>.</p> <p>LIST OF CHANGES:</p> <p>Reason for Modification: Funding Only Action</p> <p>Total Amount for this Modification: (b) (4)</p> <p>New Total Amount for this Award: (b) (4)</p> <p>CHANGES FOR LINE ITEM NUMBER: 1201</p> <p>Quantity changed from (b) (4)</p> <p>Total Amount changed from (b) (4) to (b) (4)</p> <p>Obligated Amount for this Modification: (b) (4)</p> <p>(b) (7)(E)</p> <p>Amount: (b) (4)</p> <p>(b) (7)(E)</p> <p>Amount: (b) (4)</p> <p>CHANGES FOR LINE ITEM NUMBER: 1202.</p> <p>Total Amount changed from (b) (4)</p> <p>Obligated Amount for this Modification: (b) (4)</p> <p>(b) (7)(E)</p> <p>Amount: (b) (4)</p> <p>.</p> <p>Discount Terms:</p> <p>Net (b) (4)</p> <p>Period of Performance: 05/01/2021 to 04/30/2022</p> <p>Change Item 1201 to read as follows (amount shown is the obligated amount):</p> <p>Continued ...</p>				

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED ODT-8-C-0001/70CDCR21FIGR00180/P00005	PAGE	OF
		3	3

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
1201	<p>Option Period No. 2 (10/01/2021-09/30/2022)</p> <p>Incremental Unit Price Per Detainee Day (b) (4) In Accordance with Department of Justice, Office of the Federal Detention Trustee Contract No. ODT-8-C-0001.</p> <p>Unit of Issue: DA = Day Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Change Item 1202. to read as follows (amount shown is the obligated amount):</p>	(b) (4)	DA	(b) (4)	
1202.	<p>Guard (Transportation) Services at (b) (4) per hour (10/01/2021-09/30/2022)</p> <p>In Accordance with Department of Justice, Office of the Federal Detention Trustee Contract No. ODT-8-C-0001.</p> <p>Note: 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.</p> <p>The funding provided in this modification 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 work on those items beyond that point. The Government will not be obligated to reimburse the Service Provider in excess of the amount allotted to those items for performance beyond the funding allotted.</p>				(b) (4)

## ORDER FOR SUPPLIES OR SERVICES

PAGE OF PAGES

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

1. DATE OF ORDER 04/28/2021		2. CONTRACT NO. (If any) ODT-8-C-0001		6. SHIP TO: a. NAME OF CONSIGNEE Multiple Destinations	
3. ORDER NO. 70CDCR21FIGR00180		4. REQUISITION/REFERENCE NO. 192121FSLVG00005			
5. ISSUING OFFICE (Address correspondence to) DETENTION MANAGEMENT - LAGUNA US IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 24000 AVILA ROAD (b) (6), (b) (7)(C) LAGUNA NIGUEL CA 92677				b. STREET ADDRESS	
				c. CITY	d. STATE e. ZIP CODE
7. TO: (b) (6), (b) (7)(C)				f. SHIP VIA	
a. NAME OF CONTRACTOR CORECIVIC INC				8. TYPE OF ORDER	
b. COMPANY NAME				<input type="checkbox"/> a. PURCHASE REFERENCE YOUR:  Please furnish the following on the terms and conditions specified on both sides of this order and on the attached sheet, if any, including delivery as indicated.	
c. STREET ADDRESS 5501 VIRGINIA WAY (b) (6), (b) (7)(C)				<input checked="" type="checkbox"/> b. DELIVERY Except for billing instructions on the reverse, this delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.	
d. CITY BRENTWOOD		e. STATE TN	f. ZIP CODE 37027-7684		
9. ACCOUNTING AND APPROPRIATION DATA See Schedule				10. REQUISITIONING OFFICE ICE ENFORCEMENT REMOVAL	
11. BUSINESS CLASSIFICATION (Check appropriate box(es)) <input type="checkbox"/> a. SMALL <input type="checkbox"/> b. OTHER THAN SMALL <input type="checkbox"/> c. DISADVANTAGED <input type="checkbox"/> d. WOMEN-OWNED <input type="checkbox"/> e. HUBZone <input type="checkbox"/> f. SERVICE-DISABLED VETERAN-OWNED <input type="checkbox"/> g. WOMEN-OWNED SMALL BUSINESS (WOSB) ELIGIBLE UNDER THE WOSB PROGRAM <input type="checkbox"/> h. EDWOSB					
13. PLACE OF a. INSPECTION Destination		b. ACCEPTANCE Destination		12. F.O.B. POINT	
				14. GOVERNMENT B/L NO.	
				15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date) 04/30/2022	
				16. DISCOUNT TERMS Net (b) (4)	

## 17. SCHEDULE (See reverse for Rejections)

ITEM NO. (a)	SUPPLIES OR SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	DUNS Number: 159734151 Contracting Officer Representative (COR): (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) @ice.dhs.gov ACOR: (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) @ice.dhs.gov Continued ...					

SEE BILLING INSTRUCTIONS ON REVERSE	18. SHIPPING POINT		19. GROSS SHIPPING WEIGHT		20. INVOICE NO.		17(h) TOTAL (Cont. pages)
	21. MAIL INVOICE TO:						
	a. NAME DHS ICE		(b) (4)				17(i) GRAND TOTAL
	b. STREET ADDRESS (or P.O. Box) BURLINGTON FINANCE CENTER PO BOX 1620 ATTN (b) (7)(E)		(b) (4)				
c. CITY WILLISTON		d. STATE VT	e. ZIP CODE 05495-1620				
22. UNITED STATES OF AMERICA BY (Signature)					23. NAME (Typed) (b) (6), (b) (7)(C) TITLE: CONTRACTING/ORDERING OFFICER		

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

PAGE NO  
2

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

DATE OF ORDER 04/28/2021	CONTRACT NO. ODT-8-C-0001	ORDER NO. 70CDCR21FIGR00180
-----------------------------	------------------------------	--------------------------------

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>Contract Specialist: (b) (6), (b) (7)(C) 949-315-(b) (6), (b) (7)(C) @ice.dhs.gov Contracting Officer: (b) (6), (b) (7)(C) 202-430-(b) (6), (b) (7)(C) @ice.dhs.gov</p> <p>Service Provider: (b) (6), (b) (7)(C) 615-263-(b) (6), (b) (7)(C) @corecivic.com</p> <p>This Task Order is issued under the Terms and Conditions of accordance with Department of Justice, Office of the Federal Detention Trustee Contract No. ODT-8-C-0001 with Pahrump Detention Center for Detention, Guard/Transportation Services for ICE detainees housed at Pahrump, NV.</p> <p>This task order replaces 70CDCR20FIGR00131.</p> <p>This is a fixed rate to supply services at the amounts indicated. Contractors (Service Provider) shall not provide and additional supplies or services and/or additional bills for any additional amount without authorization from the Contracting Officer (CO).</p> <p>Period of Performance: 05/01/2021 to 04/30/2022</p>					
0001	<p>Detainee Work Program Reimbursement--</p> <p>Unit of Issue: DA = Day</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p>	(b) (4)	DA	(b) (4)		
1101	<p>Option Period No. 2 (10/01/2020-09/30/2025)</p> <p>Incremental Unit Price Per Detainee Day (751+) In Accordance with Department of Justice, Office of the Federal Detention Trustee Contract No. ODT-8-C-0001.</p> <p>Continued ...</p>	(b) (4)	DA	(b) (4)		

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

(b) (4)

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2023-ICLI-00006 3201

2023-ICLI-00006 3877

## ORDER FOR SUPPLIES OR SERVICES

PAGE NO

## SCHEDULE - CONTINUATION

3

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

DATE OF ORDER

CONTRACT NO.

ORDER NO.

04/28/2021

ODT-8-C-0001

70CDCR21FIGR00180

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	Unit of Issue: DA = Day  Accounting Info: (b) (7)(E) Funded: (b) (4)					
1102	Escort/Guard Services Option Period No. 2 (10/01/2020-09/30/2025) In Accordance with Department of Justice, Office of the Federal Detention Trustee Contract No. ODT-8-C-0001.  Unit of Issue: HR = Hour  Accounting Info: (b) (7)(E) Funded: (b) (4)	(b) (4)	HR	(b) (4)		
1102.	Guard (Transportation) Services Option Period No. 2 In Accordance with Department of Justice, Office of the Federal Detention Trustee Contract No. ODT-8-C-0001. Unit of Issue: HR = Hour  Accounting Info: (b) (7)(E) Funded: (b) (4) 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 amount currently allotted to the items funded under the Task Order. The service provider is not authorized to continue work on those item(s) beyond that point. The Government will not be obligated to reimburse the service provider in excess of Continued ...	(b) (4)	HR	(b) (4)		
TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))						(b) (4)

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OPTIONAL FORM 348 (Rev. 4/2006)

Prescribed by GSA FPMR (48 CFR) 53.213(f)

2023-ICLI-00006 3202

2023-ICLI-00006 3878

## SCHEDULE - CONTINUATION

4

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

DATE OF ORDER		CONTRACT NO.			ORDER NO.	
04/28/2021		ODT-8-C-0001			70CDCR21FIGR00180	
ITEM NO.	SUPPLIES/SERVICES	QUANTITY ORDERED	UNIT	UNIT PRICE	AMOUNT	QUANTITY ACCEPTED
(a)	(b)	(c)	(d)	(e)	(f)	(g)
	<p>the amount allotted to those item(s) for performance beyond the funding allotted.</p> <p>Invoice Instructions: ICE - ERO Contracts</p> <p>Service Providers/Contractors shall use these procedures when submitting an invoice.</p> <p>1. Invoice Submission: Invoices shall be submitted in a ".pdf" format in accordance with the contract terms and conditions on a monthly basis via email, United States Postal Service (USPS) or facsimile as follows:</p> <p>a) Email:</p> <ul style="list-style-type: none"><li>• (b) (7)(E) @ice.dhs.gov</li><li>• Contracting Officer Representative (COR) or Government Point of Contact (GPOC)</li><li>• Contract Specialist/Contracting Officer</li></ul> <p>Each email shall contain only (1) invoice and the invoice number shall be indicated on the subject line of the email.</p> <p>b) USPS:</p> <p>DHS, ICE Financial Operations - Burlington P.O. Box 1620 Williston, VT 05495-1620 ATTN: (b) (7)(E)</p> <p>The Contractors Data Universal Numbering System (DUNS) Number must be registered and active in the System for Award Management (SAM) at <a href="https://www.sam.gov">https://www.sam.gov</a> 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.</p> <p>c) Facsimile: Continued ...</p>					

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

(b) (4)

## ORDER FOR SUPPLIES OR SERVICES

PAGE NO

## SCHEDULE - CONTINUATION

5

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

DATE OF ORDER	CONTRACT NO.	ORDER NO.
04/28/2021	ODT-8-C-0001	70CDCR21FIGR00180

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>Alternative Invoices shall be submitted to: (802)-288-7658</p> <p>Submissions by facsimile shall include a cover sheet, point of contact and the number of total pages.</p> <p>Note: the Service Providers or Contractors Dunn and Bradstreet (D&amp;B) DUNS Number must be registered in the System for Award Management (SAM) at <a href="https://www.sam.gov">https://www.sam.gov</a> 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.</p> <p>2. Content of Invoices: Each invoice shall contain the following information in accordance with 52.212-4 (g), as applicable:</p> <p>(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;</p> <p>(ii). Dunn and Bradstreet (D&amp;B) DUNS Number;</p> <p>(iii). Invoice date and invoice number;</p> <p>(iv). Agreement/Contract number, contract line item number and, if applicable, the order number;</p> <p>(v). Description, quantity, unit of measure, unit price, extended price and period of performance of the items or services delivered;</p> <p>Continued ...</p>					

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(b) (4)

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2023-ICLI-00006 3204

2023-ICLI-00006 3880

## ORDER FOR SUPPLIES OR SERVICES

PAGE NO

## SCHEDULE - CONTINUATION

6

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

DATE OF ORDER

CONTRACT NO.

ORDER NO.

04/28/2021

ODT-8-C-0001

70CDCR21FIGR00180

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>(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;</p> <p>(vii). Terms of any discount for prompt payment offered;</p> <p>(viii). Remit to Address;</p> <p>(ix). Name, title, and phone number of person to resolve invoicing issues;</p> <p>(x). ICE program office designated on order/contract/agreement and</p> <p>(xi). Mark invoice as "Interim" (Ongoing performance and additional billing expected) and "Final" (performance complete and no additional billing)</p> <p>(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.</p> <p>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:</p> <p>(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 Continued ...</p>					

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(b) (4)

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2023-ICLI-00006 3205

2023-ICLI-00006 3881

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

PAGE NO  
7

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

DATE OF ORDER 04/28/2021	CONTRACT NO. ODT-8-C-0001	ORDER NO. 70CDCR21FIGR00180
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ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>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:</p> <p>a. Detention Bed Space Services</p> <ul style="list-style-type: none"> <li>• Bed day rate;</li> <li>• Detainees check-in and check-out dates;</li> <li>• Number of bed days multiplied by the bed day rate;</li> <li>• Name of each detainee;</li> <li>• Detainees identification information</li> </ul> <p>(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:</p> <p>a. Detention Bed Space Services. For detention bed space CLINs without a GM, the supporting documentation must include:</p> <ul style="list-style-type: none"> <li>• Bed day rate;</li> <li>• Detainees check-in and check-out dates;</li> <li>• Number of bed days multiplied by the bed day rate;</li> <li>• Name of each detainee;</li> <li>• Detainees identification information</li> </ul> <p>b. Transportation Services: For transportation CLINs without a GM, the supporting documentation must include:</p> <ul style="list-style-type: none"> <li>• Mileage rate being applied for that invoice;</li> <li>• Number of miles;</li> <li>• Transportation routes provided;</li> </ul> <p>Continued ...</p>					

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

(b) (4)

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2023-ICLI-00006 3206

2023-ICLI-00006 3882

## ORDER FOR SUPPLIES OR SERVICES

PAGE NO

## SCHEDULE - CONTINUATION

8

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

DATE OF ORDER

CONTRACT NO.

ORDER NO.

04/28/2021

ODT-8-C-0001

70CDCR21FIGR00180

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<ul style="list-style-type: none"><li>• Locations serviced;</li><li>• Names of detainees transported;</li><li>• Itemized listing of all other charges; and,</li><li>• for reimbursable expenses (e.g. travel expenses, special meals, etc.) copies of all receipts.</li></ul> <p>c. Stationary Guard Services: The itemized monthly invoice shall state:</p> <ul style="list-style-type: none"><li>• The location where the guard services were provided,</li><li>• The employee guard names and number of hours being billed,</li><li>• The employee guard names and duration of the billing (times and dates), and</li><li>• (4) for individual or detainee group escort services only, the name of the detainee(s) that was/were escorted.</li></ul> <p>d. Other Direct Charges (e.g. VTC support, transportation meals/sack lunches, volunteer detainee wages, etc.):</p> <p>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.</p> <p>(iii) Firm Fixed-Price CLINs. Supporting documentation is not required for charges for FFP CLINs.</p> <p>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, Continued ...</p>					

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

(b) (4)

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OPTIONAL FORM 348 (Rev. 4/2006)

Prescribed by GSA FPMR (48 CFR) 53.213(f)

2023-ICLI-00006 3207

2023-ICLI-00006 3883

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

PAGE NO  
9

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

DATE OF ORDER 04/28/2021	CONTRACT NO. ODT-8-C-0001	ORDER NO. 70CDCR21FIGR00180
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ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>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 other unique identifier and full date of birth, citizenship, or immigration status.</p> <p>As part of your obligation to safeguard information, the follow precautions are required:</p> <p>(i) Email supporting documents containing Sensitive PII in an encrypted attachment with password sent separately to the Contracting Officer Representative assigned to the contract.</p> <p>(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.</p> <p>(iii) Use shredders when discarding paper documents containing Sensitive PII.</p> <p>(iv) Refer to the DHS Handbook for Safeguarding Sensitive Personally Identifiable Information (March 2012) found at <a href="http://www.dhs.gov/xlibrary/assets/privacy/dhs-privacy-safeguardingsensitivepiihandbook-march2012.pdf">http://www.dhs.gov/xlibrary/assets/privacy/dhs-privacy-safeguardingsensitivepiihandbook-march2012.pdf</a> for more information on and/or examples of Sensitive PII.</p> <p>5. Invoice Inquiries. If you have questions regarding payment, please contact ICE Financial Operations at 1-877-491-(b)(7)(E) or by e-mail at (b)(7)(E)@ice.dhs.gov.</p> <p>The obligated amount of award: Continued ...</p>					

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

(b) (4)

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**OPTIONAL FORM 348** (Rev. 4/2006)  
Prescribed by GSA FPMR (48 CFR) 53.213(f)

2023-ICLI-00006 3208

2023-ICLI-00006 3884

ORDER FOR SUPPLIES OR SERVICES  
SCHEDULE - CONTINUATION

PAGE NO  
10

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

DATE OF ORDER	CONTRACT NO.	ORDER NO.
04/28/2021	ODT-8-C-0001	70CDCR21FIGR00180

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	(b) (4) The total for this award is shown in box 17(i).					

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

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(b) (4)

OPTIONAL FORM 348 (Rev. 4/2006)  
Prescribed by GSA FPMR (41 CFR) 101-11.6

2023-ICLI-00006 3209

2023-ICLI-00006 3885

<b>AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT</b>		1. CONTRACT ID CODE		PAGE OF PAGES	
				1 4	
2. AMENDMENT/MODIFICATION NO.		3. EFFECTIVE DATE		4. REQUISITION/PURCHASE REQ. NO.	
P00001		See Block 16C		192121FSLVVG00005.1	
6. ISSUED BY		CODE		5. PROJECT NO. (If applicable)	
		70CDLG		ICE/DM/DC-LAGUNA	
DETENTION MANAGEMENT - LAGUNA US IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 24000 AVILA ROAD (b) (6), (b) (7)(C) LAGUNA NIGUEL CA 92677			ICEDETENT MNGTDETENT CONTRACT-LAG IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 24000 AVILA ROAD (b) (6), (b) (7)(C) ATTN (b) (6), (b) (7)(C) LAGUNA NIGUEL CA 92677		
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)			9A. AMENDMENT OF SOLICITATION NO.		
CORECIVIC INC ATTN (b) (6), (b) (7)(C) 5501 VIRGINIA WAY (b) (6), (b) (7)(C) BRENTWOOD TN 37027-7684			(x)		
			9B. DATED (SEE ITEM 11)		
			10A. MODIFICATION OF CONTRACT/ORDER NO. ODT-8-C-0001		
			70CDCR21FIGR00180		
			10B. DATED (SEE ITEM 13)		
			04/28/2021		
CODE 1597341510000		FACILITY CODE			
<b>11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS</b>					
<input type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers <input type="checkbox"/> is extended. <input type="checkbox"/> is not extended. Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By 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 desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes 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)					
See Schedule Net Increase: (b) (4)					
<b>13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.</b>					
CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.				
	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 ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).				
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:				
X	D. OTHER (Specify type of modification and authority) Unilateral Modification / FAR 32.703-1 (a) Fully Funding				
E. IMPORTANT: Contractor <input checked="" type="checkbox"/> is not, <input type="checkbox"/> is required to sign this document and return _____ copies to the issuing office.					
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)					
DUNS Number: 159734151					
Contracting Officer Representative (COR): (b) (6), (b) (7)(C)					
(b) (6), (b) (7)(C) @ice.dhs.gov					
ACOR: (b) (6), (b) (7)(C) @ice.dhs.gov					
Contract Specialist: (b) (6), (b) (7)(C) @ice.dhs.gov					
Contracting Officer: (b) (6), (b) (7)(C) @ice.dhs.gov					
Service Provider: (b) (6), (b) (7)(C) @corecivic.com					
The purpose of this modification is to add funds at a total amount of (b) (4) under CLINs 0001, 1101, 1102, and 1002 for the 05/01/2021 to 04/30/2022.					
Continued ...					
Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.					
15A. NAME AND TITLE OF SIGNER (Type or print)			16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)		
			(b) (6), (b) (7)(C)		
			TEL: (b) (6), (b) (7)(C) @ice.dhs.gov		
			EMAIL: (b) (6), (b) (7)(C) @ice.dhs.gov		
15B. CONTRACTOR/OFFEROR		15C. DATE SIGNED		16B. UNITED STATES OF AMERICA	
(Signature of person authorized to sign)		(Signature of Contracting Officer)			

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED ODT-8-C-0001/70CDCR21FIGR00180/P00001	PAGE	OF
		2	4

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>This is a fixed rate to supply services at the amounts indicated. Contractors (Service Provider) shall not provide and additional supplies or services and/or additional bills for any additional amount without authorization from the Contracting Officer (CO).</p> <p>LIST OF CHANGES:</p> <p>Reason for Modification: Funding Only Action</p> <p>Total Amount for this Modification: (b) (4)</p> <p>New Total Amount for this Award: (b) (4)</p> <p>CHANGES FOR LINE ITEM NUMBER: 1</p> <p>Quantity changed from (b) (4)</p> <p>Total Amount changed from (b) (4)</p> <p>Obligated Amount for this Modification: (b) (4)</p> <p>(b) (7)(E)</p> <p>Quantity (b) (4)</p> <p>Amount: (b) (4)</p> <p>CHANGES FOR LINE ITEM NUMBER: 1101</p> <p>Quantity changed from (b) (4)</p> <p>Total Amount changed from (b) (4) to (b) (4)</p> <p>Obligated Amount for this Modification: (b) (4)</p> <p>(b) (7)(E)</p> <p>Quantity (b) (4)</p> <p>Amount: (b) (4)</p> <p>CHANGES FOR LINE ITEM NUMBER: 1102</p> <p>Quantity changed from (b) (4)</p> <p>Total Amount changed from (b) (4)</p> <p>Obligated Amount for this Modification: (b) (4)</p> <p>(b) (7)(E)</p> <p>Quantity (b) (4)</p> <p>Amount: (b) (4)</p> <p>CHANGES FOR LINE ITEM NUMBER: 1102.</p> <p>Quantity changed from (b) (4)</p> <p>Total Amount changed from (b) (4)</p> <p>Obligated Amount for this Modification: (b) (4)</p> <p>(b) (7)(E)</p> <p>Continued ...</p>				

## CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED  
ODT-8-C-0001/70CDCR21FIGR00180/P00001

PAGE 3 OF 4

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	(b) (7)(E) Quantity (b) (4) Amount: (b) (4) Discount Terms: Net (b) (4) Period of Performance: 05/01/2021 to 04/30/2022  Change Item 0001 to read as follows (amount shown is the obligated amount):  0001 Detainee Work Program Reimbursenent-- (b) (4) DA (b) (4)  Unit of Issue: DA = Day  Change Item 1101 to read as follows (amount shown is the obligated amount):  1101 Option Period No. 2 (b) (4) DA (b) (4) (10/01/2020-09/30/2025) Incremental Unit Price Per Detainee Day (b) (4) In Accordance with Department of Justice, Office of the Federal Detention Trustee Contract No. ODT-8-C-0001.  Unit of Issue: DA = Day  Change Item 1102 to read as follows (amount shown is the obligated amount):  1102 Escort/Guard Services (b) (4) HR (b) (4) Option Period No. 2 (10/01/2020-09/30/2025) In Accordance with Department of Justice, Office of the Federal Detention Trustee Contract No. ODT-8-C-0001.  Unit of Issue: HR = Hour  Change Item 1102. to read as follows (amount shown is the obligated amount):  1102. Guard (Transportation) Services (b) (4) HR (b) (4) Option Period No. 2 In Accordance with Department of Justice, Office of the Federal Detention Trustee Contract No. ODT-8-C-0001. Continued ...				

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	Unit of Issue: HR = Hour  All other terms and conditions remain the same.				

<b>AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT</b>		1. CONTRACT ID CODE		PAGE OF PAGES	
				1      3	
2. AMENDMENT/MODIFICATION NO. P00002		3. EFFECTIVE DATE See Block 16C		4. REQUISITION/PURCHASE REQ. NO. 192121FSLVVG00005.2	
6. ISSUED BY		CODE 70CDLG		5. PROJECT NO. (If applicable)	
DETENTION MANAGEMENT - LAGUNA US IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 24000 AVILA ROAD (b) (6), (b) (7)(C) LAGUNA NIGUEL CA 92677		7. ADMINISTERED BY (If other than Item 6)		CODE ICE/DM/DC-LAGUNA	
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)		9A. AMENDMENT OF SOLICITATION NO.			
CORECIVIC INC ATTN (b) (6), (b) (7)(C) 5501 VIRGINIA WAY (b) (6), (b) (7)(C) BRENTWOOD TN 37027-7684		(x)			
		9B. DATED (SEE ITEM 11)			
		X 10A. MODIFICATION OF CONTRACT/ORDER NO. ODT-8-C-0001 70CDCR21FIGR00180			
		10B. DATED (SEE ITEM 13) 04/28/2021			
CODE 1597341510000		FACILITY CODE			
<b>11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS</b>					
<input type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers <span style="float: right;"><input type="checkbox"/> is extended. <input type="checkbox"/> is not extended.</span> Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By 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 desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes 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) See Schedule <span style="float: right;">Net Increase: (b) (4)</span>					
<b>13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.</b>					
CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.				
	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 ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).				
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:				
X	D. OTHER (Specify type of modification and authority) Unilateral Modification / FAR 32.703-1 (a) Fully Funding				
E. IMPORTANT: Contractor <input checked="" type="checkbox"/> is not. <input type="checkbox"/> is required to sign this document and return _____ copies to the issuing office.					
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)					
DUNS Number: 159734151					
Contracting Officer Representative (COR): (b) (6), (b) (7)(C)					
(b) (6), (b) (7)(C)@ice.dhs.gov					
ACOR: (b) (6), (b) (7)(C)@ice.dhs.gov					
Contract Specialist: (b) (6), (b) (7)(C)@ice.dhs.gov					
Contracting Officer: (b) (6), (b) (7)(C)@ice.dhs.gov					
Service Provider: (b) (6), (b) (7)(C)@corecivic.com					
The purpose of this modification is to add funds at a total amount of (b) (4) under CLINs 0001, 1101, and 1102, for the 05/01/2021 to 04/30/2022.					
Continued ...					
Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.					
15A. NAME AND TITLE OF SIGNER (Type or print)		16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)			
		(b) (6), (b) (7)(C)			
		TEL: EMAIL: (b) (6), (b) (7)(C)@ice.dhs.gov			
15B. CONTRACTOR/OFFEROR		15C. DATE SIGNED		16B. UNITED STATES OF AMERICA	
(Signature of person authorized to sign)				(Signature of Contracting Officer)	
NSN 7540-01-152-8070				STANDARD FORM 30 (REV. 10-83)	
Previous edition unusable				Prescribed by GSA	
				FAR (48 CFR) 53.243	

CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED  
ODT-8-C-0001/70CDCR21FIGR00180/P00002

PAGE OF  
2 3

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>This is a fixed rate to supply services at the amounts indicated. Contractors (Service Provider) shall not provide and additional supplies or services and/or additional bills for any additional amount without authorization from the Contracting Officer (CO).</p> <p>.</p> <p>.</p> <p>LIST OF CHANGES:</p> <p>Reason for Modification: Funding Only Action</p> <p>Total Amount for this Modification: (b) (4)</p> <p>New Total Amount for this Award: (b) (4)</p> <p>CHANGES FOR LINE ITEM NUMBER: 1</p> <p>Quantity changed from (b) (4)</p> <p>Total Amount changed from (b) (4)</p> <p>Obligated Amount for this Modification: (b) (4)</p> <p>(b) (7)(E)</p> <p>Quantity (b) (4)</p> <p>Amount: (b) (4)</p> <p>CHANGES FOR LINE ITEM NUMBER: 1101</p> <p>Quantity changed from (b) (4)</p> <p>Total Amount changed from (b) (4) to (b) (4)</p> <p>Obligated Amount for this Modification: (b) (4)</p> <p>(b) (7)(E)</p> <p>Quantity (b) (4)</p> <p>Amount: (b) (4)</p> <p>CHANGES FOR LINE ITEM NUMBER: 1102</p> <p>Quantity changed from (b) (4)</p> <p>Total Amount changed from (b) (4)</p> <p>Obligated Amount for this Modification: (b) (4)</p> <p>(b) (7)(E)</p> <p>Quantity (b) (4)</p> <p>Amount: (b) (4)</p> <p>Discount Terms:</p> <p>Net (b) (4)</p> <p>Period of Performance: 05/01/2021 to 04/30/2022</p> <p>Change Item 0001 to read as follows (amount shown is the obligated amount):</p> <p>Continued ...</p>				

<b>CONTINUATION SHEET</b>	REFERENCE NO. OF DOCUMENT BEING CONTINUED ODT-8-C-0001/70CDCR21FIGR00180/P00002	PAGE	OF
		3	3

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0001	<p>Detainee Work Program Reimbursenent--</p> <p>Unit of Issue: DA = Day</p> <p>Change Item 1101 to read as follows (amount shown is the obligated amount):</p>	(b) (4)	DA	(b) (4)	
1101	<p>Option Period No. 2 (10/01/2020-09/30/2025)</p> <p>Incremental Unit Price Per Detainee Day (b) (4) In Accordance with Department of Justice, Office of the Federal Detention Trustee Contract No. ODT-8-C-0001.</p> <p>Unit of Issue: DA = Day</p> <p>Change Item 1102 to read as follows (amount shown is the obligated amount):</p>	(b) (4)	DA	(b) (4)	
1102	<p>Escort/Guard Services</p> <p>Option Period No. 2 (10/01/2020-09/30/2025)</p> <p>In Accordance with Department of Justice, Office of the Federal Detention Trustee Contract No. ODT-8-C-0001.</p> <p>Unit of Issue: HR = Hour</p> <p>All other terms and conditions remain the same.</p>	(b) (4)	HR	(b) (4)	

<b>AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT</b>		1. CONTRACT ID CODE		PAGE OF PAGES 1 4	
2. AMENDMENT/MODIFICATION NO. P00003		3. EFFECTIVE DATE See Block 16C		4. REQUISITION/PURCHASE REQ. NO. See Schedule	
6. ISSUED BY CODE 70CDLG		7. ADMINISTERED BY (If other than Item 6) CODE ICE/DM/DC-LAGUNA		5. PROJECT NO. (If applicable)	
DETENTION MANAGEMENT - LAGUNA US IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 24000 AVILA ROAD (b) (6), (b) (7)(C) LAGUNA NIGUEL CA 92677		ICEDETENT MNGTDETENT CONTRACT-LAG IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 24000 AVILA ROAD (b) (6), (b) (7)(C) ATTN (b) (6), (b) (7)(C) LAGUNA NIGUEL CA 92677			
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)  CORECIVIC INC ATTN (b) (6), (b) (7)(C) 5501 VIRGINIA WAY (b) (6), (b) (7)(C) BRENTWOOD TN 37027-7684		<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">           (x) 9A. AMENDMENT OF SOLICITATION NO.             9B. DATED (SEE ITEM 11)         </div> <div style="width: 45%;">           X 10A. MODIFICATION OF CONTRACT/ORDER NO.            ODT-8-C-0001            70CDCR21FIGR00180            10B. DATED (SEE ITEM 13)            04/28/2021         </div> </div>			
CODE 1597341510000		FACILITY CODE			
<b>11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS</b>					
<input type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers <span style="float: right;"><input type="checkbox"/> is extended. <input type="checkbox"/> is not extended.</span> Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By 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 desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes 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) See Schedule		Net Increase: (b) (4)			
<b>13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.</b>					
CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.				
	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 ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).				
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:				
X	D. OTHER (Specify type of modification and authority) Unilateral Modification / FAR 32.703-1(a) Fully Funding				
<b>E. IMPORTANT:</b> Contractor <input checked="" type="checkbox"/> is not, <input type="checkbox"/> is required to sign this document and return _____ copies to the issuing office.					
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)					
DUNS Number: 159734151					
Contracting Officer Representative (COR): (b) (6), (b) (7)(C)					
(b) (6), (b) (7)(C) @ice.dhs.gov					
ACOR: (b) (6), (b) (7)(C) @ice.dhs.gov					
Contract Specialist: (b) (6), (b) (7)(C) @ice.dhs.gov					
Contracting Officer: (b) (6), (b) (7)(C) @ice.dhs.gov					
Service Provider: (b) (6), (b) (7)(C) @corecivic.com					
The purpose of this modification is to add funds at a total amount of (b) (4) under CLINs 0001, 1201, and 1202.					
Continued ...					
Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.					
15A. NAME AND TITLE OF SIGNER (Type or print)		16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print) (b) (6), (b) (7)(C)			
		TEL: EMAIL: (b) (6), (b) (7)(C) @ice.dhs.gov			
15B. CONTRACTOR/OFFEROR		15C. DATE SIGNED		16B. UNITED STATES OF AMERICA	
(Signature of person authorized to sign)				(Signature of Contracting Officer)	
NSN 7540-01-152-8070 Previous edition unusable		2023-ICLI-00006 3217		STANDARD FORM 30 (REV. 10-83) Prescribed by GSA FAR (48 CFR) 53.243	

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0001	<p>This is a fixed rate to supply services at the amounts indicated. Contractors (Service Provider) shall not provide and additional supplies or services and/or additional bills for any additional amount without authorization from the Contracting Officer (CO).</p> <p>Discount Terms: Net (b) (4)</p> <p>Period of Performance: 05/01/2021 to 04/30/2022</p> <p>Change Item 0001 to read as follows (amount shown is the obligated amount):</p> <p>Detainee Work Program Reimbursenent--</p> <p>Unit of Issue: DA = Day Requisition No: 192121FSLVVG00005, 192121FSLVVG00005.1, 192121FSLVVG00005.2, 192122FSLVVG00003</p> <p>Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4) Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4) Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4) Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4)</p>	(b) (4)	DA	(b) (4)	(b) (4)
1201	<p>Add Item 1201 as follows:</p> <p>Option Period No. 2 (10/01/2021-09/30/2022)</p> <p>Incremental Unit Price Per Detainee Day (b) (4) In Accordance with Department of Justice, Office of the Federal Detention Trustee Contract No. Continued ...</p>	(b) (4)	DA	(b) (4)	(b) (4)

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED ODT-8-C-0001/70CDCR21FIGR00180/P00003	PAGE	OF
		3	4

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	ODT-8-C-0001.  Unit of Issue: DA = Day Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD Requisition No: 192122FSLVVG00003, 192122FSLVVG00003.1  Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4)				
1202	Add Item 1202 as follows:  Escort/Guard Services Option Period No. 2 (10/01/2021-09/30/2022) In Accordance with Department of Justice, Office of the Federal Detention Trustee Contract No. ODT-8-C-0001.  Unit of Issue: HR = Hour Requisition No: 192122FSLVVG00003, 192122FSLVVG00003.1  Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4)	(b) (4)	HR	(b) (4)	
1202.	Add Item 1202. as follows:  Guard (Transportation) Services Option Period No. 2 (10/01/2021-09/30/2022) In Accordance with Department of Justice, Office of the Federal Detention Trustee Contract No. Continued ...	(b) (4)	HR	(b) (4)	

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>ODT-8-C-0001.</p> <p>Unit of Issue: HR = Hour</p> <p>Requisition No: 192122FSLVVG00003, 192122FSLVVG00003.1</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>.</p> <p>All other terms and conditions remain the same.</p>				

<b>SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS</b> <b>OFFEROR TO COMPLETE BLOCKS 12, 17, 23, 24, &amp; 30</b>				1. REQUISITION NUMBER 192121FNE00CCA120		PAGE OF 1 11	
2. CONTRACT NO. ODT-5-C-0010		3. AWARD/ EFFECTIVE DATE		4. ORDER NUMBER 70CDCR21FIGR00246		5. SOLICITATION NUMBER	
7. <b>FOR SOLICITATION INFORMATION CALL:</b>		a. NAME (b) (6), (b) (7)(C)		b. TELEPHONE NUMBER 202-732- (b) (6), (b) (7)(C)		8. OFFER DUE DATE/LOCAL TIME	
9. ISSUED BY CODE 70CDCR DETENTION COMPLIANCE AND REMOVALS US IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I ST NW (b) (6), (b) (7)(C) WASHINGTON DC 20536				10. THIS ACQUISITION IS <input checked="" type="checkbox"/> UNRESTRICTED OR <input type="checkbox"/> SET ASIDE: % FOR:  <input type="checkbox"/> SMALL BUSINESS <input type="checkbox"/> HUBZONE SMALL BUSINESS <input type="checkbox"/> SERVICE-DISABLED VETERAN-OWNED SMALL BUSINESS <input type="checkbox"/> WOMEN-OWNED SMALL BUSINESS (WOSB) ELIGIBLE UNDER THE WOMEN-OWNED SMALL BUSINESS PROGRAM <input type="checkbox"/> EDWOSB <input type="checkbox"/> 8(A) NAICS 561612 SIZE STANDARD: \$22.0			
11. DELIVERY FOR FOB DESTINATION UNLESS BLOCK IS MARKED <input checked="" type="checkbox"/> SEE SCHEDULE		12. DISCOUNT TERMS Net (b) (4)		13a. THIS CONTRACT IS A RATED ORDER UNDER DPAS (15 CFR 700)		13b. RATING	
15. DELIVER TO CODE ICE/ERO ICE ENFORCEMENT REMOVAL IMMIGRATION AND CUSTOMS ENFORCEMENT 801 I STREET NW (b) (6), (b) (7)(C) WASHINGTON DC 20536				16. ADMINISTERED BY CODE ICE/DCR ICE DETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW (b) (6), (b) (7)(C) WASHINGTON DC 20536			
17a. CONTRACTOR/OFFEROR CODE 1597341510000 FACILITY CODE CORECIVIC INC ATTN CORECIVIC INC 5501 VIRGINIA WAY (b) (6), (b) (7)(C) BRENTWOOD TN 370277684		18a. PAYMENT WILL BE MADE BY CODE (b) (7)(E) DHS ICE BURLINGTON FINANCE CENTER PO BOX 1620 ATTN (b) (7)(E) WILLISTON VT 05495-1620					
TELEPHONE NO. <input type="checkbox"/> 17b. CHECK IF REMITTANCE IS DIFFERENT AND PUT SUCH ADDRESS IN OFFER				18b. SUBMIT INVOICES TO ADDRESS SHOWN IN BLOCK 18a UNLESS BLOCK BELOW IS CHECKED <input type="checkbox"/> SEE ADDENDUM			
19. ITEM NO.	20. SCHEDULE OF SUPPLIES/SERVICES			21. QUANTITY	22. UNIT	23. UNIT PRICE	24. AMOUNT
	DUNS Number: 159734151 CONTRACT ADMINISTRATION POC: Program Office. COR: (b) (6), (b) (7)(C) (b) (6), (b) (7)(C)@ice.dhs.gov Contracting Officer: (b) (6), (b) (7)(C) (b) (6), (b) (7)(C)@ice.dhs.gov Contract Specialist: (b) (6), (b) (7)(C) (b) (6), (b) (7)(C)@ice.dhs.gov  The purpose of this Task Order is to provide continuing detention services for ICE detainees (Use Reverse and/or Attach Additional Sheets as Necessary)						
25. ACCOUNTING AND APPROPRIATION DATA See schedule						26. TOTAL AWARD AMOUNT (For Govt. Use Only) (b) (4)	
<input type="checkbox"/> 27a. SOLICITATION INCORPORATES BY REFERENCE FAR 52.212-1, 52.212-4, FAR 52.212-3 AND 52.212-5 ARE ATTACHED. ADDENDA <input type="checkbox"/> 27b. CONTRACT/PURCHASE ORDER INCORPORATES BY REFERENCE FAR 52.212-4, FAR 52.212-5 IS ATTACHED. ADDENDA						<input type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED. <input type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED.	
<input type="checkbox"/> 28. CONTRACTOR IS REQUIRED TO SIGN THIS DOCUMENT AND RETURN COPIES TO ISSUING OFFICE. CONTRACTOR AGREES TO FURNISH AND DELIVER ALL ITEMS SET FORTH OR OTHERWISE IDENTIFIED ABOVE AND ON ANY ADDITIONAL SHEETS SUBJECT TO THE TERMS AND CONDITIONS SPECIFIED.				<input type="checkbox"/> 29. AWARD OF CONTRACT: _____ OFFER DATED _____ YOUR OFFER ON SOLICITATION (BLOCK 5), INCLUDING ANY ADDITIONS OR CHANGES WHICH ARE SET FORTH HEREIN, IS ACCEPTED AS TO ITEMS:			
30a. SIGNATURE OF OFFEROR/CONTRACTOR				31a. UNITED STATES OF AMERICA (SIGNATURE OF CONTRACTING OFFICER)			
30b. NAME AND TITLE OF SIGNER (Type or print)		30c. DATE SIGNED		31b. NAME OF CONTRACTING OFFICER (Type or print) (b) (6), (b) (7)(C)		31c. DATE SIGNED	

19. ITEM NO.	20. SCHEDULE OF SUPPLIES/SERVICES	21. QUANTITY	22. UNIT	23. UNIT PRICE	24. AMOUNT
1201	<p>at Elizabeth Contract Detention Facility for the period of performance beginning September 01, 2021 through August 31, 2022 under the provisions of ICE/ERO Contract no. ODT-5-C-0010 with CORECIVIC INC.</p> <p>Funding is provided for CLINS 1201, 1202, 1203, 1204A, 1204B, 1204C, and 1205 in the amount of (b) (4)</p> <p>The total obligated amount is increased as follows: FROM (b) (4) BY: TO: Period of Performance: 09/01/2021 to 08/31/2022</p> <p>DETAINEE SERVICES (HOUSING) (b) (4) BEDS, FLAT RATE @ (b) (4) PER MONTH.</p> <p>The total amount of this CLIN has increased: FROM (b) (4) BY: TO:</p> <p>Accounting Info: (b) (7)(E)</p> <p>Continued ...</p>				(b) (4)

32a. QUANTITY IN COLUMN 21 HAS BEEN

☐ RECEIVED    ☐ INSPECTED    ☐ ACCEPTED, AND CONFORMS TO THE CONTRACT, EXCEPT AS NOTED: \_\_\_\_\_

32b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE		32c. DATE	32d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE	
32e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE			32f. TELEPHONE NUMBER OF AUTHORIZED GOVERNMENT REPRESENTATIVE	
			32g. E-MAIL OF AUTHORIZED GOVERNMENT REPRESENTATIVE	
33. SHIP NUMBER  <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL	34. VOUCHER NUMBER	35. AMOUNT VERIFIED CORRECT FOR	36. PAYMENT  <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL	37. CHECK NUMBER
38. S/R ACCOUNT NUMBER	39. S/R VOUCHER NUMBER	40. PAID BY		
41a. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT			42a. RECEIVED BY ( <i>Print</i> )	
41b. SIGNATURE AND TITLE OF CERTIFYING OFFICER			41c. DATE	
			42b. RECEIVED AT ( <i>Location</i> )	
			42c. DATE REC'D (YY/MM/DD)	42d. TOTAL CONTAINERS

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
1202	Funded: (b) (4)  DETAINEE SERVICES (HOUSING) (b) (4) BEDS @ (b) (4) EA  The total amount of this CLIN has increased: FROM (b) (4) BY: TO:  Accounting Info: (b) (7)(E)  Funded: (b) (4)		EA	(b) (4)	
1203	DETAINEE SERVICES (HOUSING) (b) (4) BEDS @ (b) (4) EA  The total amount of this CLIN has increased: FROM (b) (4) BY: TO:  Accounting Info: (b) (7)(E)  Funded: (b) (4)		EA	(b) (4)	
1204a	GUARD SERVICES (TRANSPORTATION) @ FLAT RATE OF (b) (4) PER MONTH.  The total amount of this CLIN has increased: FROM (b) (4) BY: TO:  Accounting Info: (b) (7)(E)  Funded: (b) (4)				(b) (4)
1204b	TRANSPORTATION MILEAGE @ (b) (4) PER MILE.  The total amount of this CLIN has increased: FROM: (b) (4) Continued ...				(b) (4)

## CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED  
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NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	BY: (b) (4) TO: (b) (4)  Accounting Info: (b) (7)(E) Funded: (b) (4)				
1204c	ADDITIONAL GUARD SERVICES PER DIEM RATE @ \$25.81 PER HOUR.  The total amount of this CLIN has increased: FROM (b) (4) BY: (b) (4) TO: (b) (4)  Accounting Info: (b) (7)(E) Funded: (b) (4)				(b) (4)
1205	DETAINEE WAGES @ (b) (4) PER MONTH.  The total amount of this CLIN has increased: FROM (b) (4) BY: (b) (4) TO: (b) (4)  Accounting Info: (b) (7)(E) Funded: (b) (4) INVOICE INSTRUCTIONS - ERO  1. The contractor shall be active in the System for Award Management (www.SAM.gov) for invoice processing. Besides the information identified below, a proper invoice shall also include; contractor's Dunn and Bradstreet (D&B) DUNS number; the ICE Program Office; and state whether the invoice is "INTERIM" or "FINAL".  2. In accordance with Contract Clauses, FAR 52.212-4 (g) (1), Contract Terms and Conditions - Continued ...				(b) (4)

## CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED  
ODT-5-C-0010/70CDCR21FIGR00246PAGE OF  
5 11NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>Commercial Items, or FAR 52.232-25 (a) (3), Prompt Payment, as applicable, the information required with each invoice submission is as follows:</p> <p>"...An invoice must include-</p> <p>(i) Name and address of the Contractor. The name, address and DUNS number on the invoice MUST match the information in both the Contract/Agreement and the information in SAM;</p> <p>(ii) Dunn and Bradstreet (D&amp;B) DUNS number;</p> <p>(iii) Invoice date and number;</p> <p>(iv) Contract number, line items and, if applicable, the order number;</p> <p>(v) Description, quantity, unit of measure, unit price and extended price of the items delivered;</p> <p>(vi) Shipping number and date of shipment, including the bill of lading number and weight of shipment if shipped on Government bill of lading;</p> <p>(vii) Terms of any discount for prompt payment offered;</p> <p>(viii) Remit to Address;</p> <p>(ix) Name, title, and phone number of persons to notify in event of defective invoice;</p> <p>(x) ICE Program Office designated on the order/contract/agreement; and</p> <p>(xi) Whether the invoice is "Interim" or "Final"</p> <p>3. Invoice submission: shall be submitted via one of the following two methods. Improper invoices or those submitted by means other than these two methods will be returned. Email is the preferred method.</p> <p>a. Primary method of submission is email. The Contractor shall submit one (1) invoice in PDF format per e-mail and the subject line of the e-mail will reference the invoice number of the attached invoice to:</p> <p>(b) (7)(E) @ice.dhs.gov</p> <p>Attn: ICE - (Insert program office name or code)</p> <p>Invoice</p> <p>b. Mail:</p> <p>DHS, ICE</p> <p>Financial Service Center Burlington</p> <p>Attn: (b) (7)(E)</p> <p>P.O. Box 1620</p> <p>Continued ...</p>				

## CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED  
ODT-5-C-0010/70CDCR21FIGR00246

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NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>Williston, VT 05495-1620</p> <p>(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.</p> <p>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:</p> <p>(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:</p> <p>a. Detention Bed Space Services</p> <ul style="list-style-type: none"><li>• Bed day rate;</li><li>• Detainees check-in and check-out dates;</li><li>• Number of bed days multiplied by the bed day rate;</li><li>• Name of each detainee;</li><li>• Detainees identification information</li></ul> <p>(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: Continued ...</p>				

## CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED  
ODT-5-C-0010/70CDCR21FIGR00246

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NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>a. Detention Bed Space Services. For detention bed space CLINs without a GM, the supporting documentation must include:</p> <ul style="list-style-type: none"><li>• Bed day rate;</li><li>• Detainees check-in and check-out dates;</li><li>• Number of bed days multiplied by the bed day rate;</li><li>• Name of each detainee;</li><li>• Detainees identification information</li></ul> <p>b. Transportation Services: For transportation CLINs without a GM, the supporting documentation must include:</p> <ul style="list-style-type: none"><li>• Mileage rate being applied for that invoice;</li><li>• Number of miles;</li><li>• Transportation routes provided;</li><li>• Locations serviced;</li><li>• Names of detainees transported;</li><li>• Itemized listing of all other charges; and,</li><li>• for reimbursable expenses (e.g. travel expenses, special meals, etc.) copies of all receipts.</li></ul> <p>c. Stationary Guard Services: The itemized monthly invoice shall state:</p> <ul style="list-style-type: none"><li>• The location where the guard services were provided,</li><li>• The employee guard names and number of hours being billed,</li><li>• The employee guard names and duration of the billing (times and dates), and</li><li>• for individual or detainee group escort services only, the name of the detainee(s) that was/were escorted.</li></ul> <p>d. Other Direct Charges (e.g. VTC support, transportation meals/sack lunches, volunteer detainee wages, etc.):</p> <p>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.</p> <p>Continued ...</p>				

## CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED  
ODT-5-C-0010/70CDCR21FIGR00246

PAGE 8 OF 11

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>(iii) Firm Fixed-Price CLINs. Supporting documentation is not required for charges for FFP CLINs.</p> <p>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 other unique identifier and full date of birth, citizenship, or immigration status.</p> <p>As part of your obligation to safeguard information, the follow precautions are required:</p> <p>(i) Email supporting documents containing Sensitive PII in an encrypted attachment with password sent separately to the Contracting Officer Representative assigned to the contract.</p> <p>(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.</p> <p>(iii) Use shredders when discarding paper documents containing Sensitive PII.</p> <p>(iv) Refer to the DHS Handbook for Safeguarding Sensitive Personally Identifiable Information (March 2012) found at <a href="http://www.dhs.gov/xlibrary/assets/privacy/dhs-privacy-safeguardingsensitivepiihandbook-march2012.pdf">http://www.dhs.gov/xlibrary/assets/privacy/dhs-privacy-safeguardingsensitivepiihandbook-march2012.pdf</a> for more information on and/or examples of Sensitive PII.</p> <p>Continued ...</p>				

## CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED  
ODT-5-C-0010/70CDCR21FIGR00246PAGE OF  
9 11

NAME OF OFFEROR OR CONTRACTOR

CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>4. Payment Inquiries: Questions regarding invoice submission or payment, please contact Financial Service Center Burlington at 1-877-491-(b) (7)(E) Option (b) (7)(E) or by e-mail at (b) (7)(E)@ice.dhs.gov</p> <p>Invoices without the above information may be returned for resubmission.</p> <p>INVOICE COR: COR: (b) (6), (b) (7)(C) COR Email: (b) (6), (b) (7)(C)@ice.dhs.gov COR Phone Number: 973-776 (b) (6), (b) (7)(C)</p> <p>5. 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:</p> <p>(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:</p> <p>a. Detention Bed Space Services</p> <ul style="list-style-type: none"><li>• Bed day rate;</li><li>• Detainees check-in and check-out dates;</li><li>• Number of bed days multiplied by the bed day rate;</li><li>• Name of each detainee;</li><li>• Detainees identification information</li></ul> <p>(ii). Allowable Incurred Cost. Fixed Unit Price Items (items for allowable incurred costs, such as transportation services, stationary guard or Continued ...</p>				

## CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED  
ODT-5-C-0010/70CDCR21FIGR00246PAGE OF  
10 11NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>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:</p> <p>a. Detention Bed Space Services. For detention bed space CLINs without a GM, the supporting documentation must include:</p> <ul style="list-style-type: none"><li>• Bed day rate;</li><li>• Detainees check-in and check-out dates;</li><li>• Number of bed days multiplied by the bed day rate;</li><li>• Name of each detainee;</li><li>• Detainees identification information</li></ul> <p>b. Transportation Services: For transportation CLINs without a GM, the supporting documentation must include:</p> <ul style="list-style-type: none"><li>• Mileage rate being applied for that invoice;</li><li>• Number of miles;</li><li>• Transportation routes provided;</li><li>• Locations serviced;</li><li>• Names of detainees transported;</li><li>• Itemized listing of all other charges; and,</li><li>• for reimbursable expenses (e.g. travel expenses, special meals, etc.) copies of all receipts.</li></ul> <p>c. Stationary Guard Services: The itemized monthly invoice shall state:</p> <ul style="list-style-type: none"><li>• The location where the guard services were provided,</li><li>• The employee guard names and number of hours being billed,</li><li>• The employee guard names and duration of the billing (times and dates), and</li><li>• (4) for individual or detainee group escort services only, the name of the detainee(s) that was/were escorted.</li></ul> <p>d. Other Direct Charges (e.g. VTC support, transportation meals/sack lunches, volunteer Continued ...</p>				

## CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED  
ODT-5-C-0010/70CDCR21FIGR00246PAGE OF  
11 11NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>detainee wages, etc.):</p> <p>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.</p> <p>(iii) Firm Fixed-Price CLINs. Supporting documentation is not required for charges for FFP CLINs.</p> <p>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 other unique identifier and full date of birth, citizenship, or immigration status.</p> <p>As part of your obligation to safeguard information, the follow precautions are required:</p> <p>(i) Email supporting documents containing Sensitive PII in an encrypted attachment with password sent separately to the Contracting Officer Representative assigned to the contract.</p> <p>6. Invoice Inquiries. If you have questions regarding payment, please contact ICE Financial Operations at 1-877-491-(b) (7)(E) or by e-mail at (b) (7)(E)@ice.dhs.gov. The total amount of award: (b) (4) The obligation for this award is shown in box 17(i).</p>				

<b>AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT</b>		1. CONTRACT ID CODE		PAGE OF PAGES 1 4	
2. AMENDMENT/MODIFICATION NO. P00001		3. EFFECTIVE DATE See Block 16C		4. REQUISITION/PURCHASE REQ. NO. 192122FNE00CCA122	
5. PROJECT NO. (If applicable) 07/02/2021		6. ISSUED BY CODE 70CDCR		7. ADMINISTERED BY (If other than Item 6) CODE ICE/DCR	
DETENTION COMPLIANCE AND REMOVALS US IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I ST NW (b) (6), (b) (7)(C) WASHINGTON DC 20536		ICEDETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW (b) (6), (b) (7)(C) WASHINGTON DC 20536			
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)  CORECIVIC INC ATTN CORECIVIC INC 5501 VIRGINIA WAY (b) (6), (b) (7)(C) BRENTWOOD TN 370277684		<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">           (x) 9A. AMENDMENT OF SOLICITATION NO.             9B. DATED (SEE ITEM 11)             X 10A. MODIFICATION OF CONTRACT/ORDER NO.            ODT-5-C-0010            70CDCR21FIGR00246            10B. DATED (SEE ITEM 13)            07/28/2021         </div> <div style="width: 45%; border-left: 1px solid black; padding-left: 5px;">           CODE 1597341510000 FACILITY CODE         </div> </div>			
<b>11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS</b>					
<input type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers <span style="float: right;"><input type="checkbox"/> is extended. <input type="checkbox"/> is not extended.</span> Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By 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 desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes 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) See Schedule		Net Increase: (b) (4)			
<b>13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.</b>					
CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.				
	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 ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).				
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:				
X	D. OTHER (Specify type of modification and authority) Funding Only Action				
<b>E. IMPORTANT:</b> Contractor <input checked="" type="checkbox"/> is not, <input type="checkbox"/> is required to sign this document and return _____ copies to the issuing office.					
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)					
DUNS Number: 159734151					
CONTRACT ADMINISTRATION POC:					
Program Office. COR: (b) (6), (b) (7)(C)@ice.dhs.gov					
Contracting Officer: (b) (6), (b) (7)(C)@ice.dhs.gov					
Contract Specialist: (b) (6), (b) (7)(C)@ice.dhs.gov					
The purpose of this modification is to provide continuing detention services for ICE detainees at Elizabeth Contract Detention Facility. Funding is provided for CLINs 1201, 1204A, 1204B, and 1204C in the amount of (b) (4)					
The total obligated amount is increased as follows: Continued ...					
Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.					
15A. NAME AND TITLE OF SIGNER (Type or print)		16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)			
		(b) (6), (b) (7)(C)			
		TEL: 202-923-(b) (6), (b) (7)(C)		EMAIL: (b) (6), (b) (7)(C)@ice.dhs.gov	
15B. CONTRACTOR/OFFEROR		15C. DATE SIGNED		16B. UNITED STATES OF AMERICA	
(Signature of person authorized to sign)				(Signature of Contracting Officer)	
NSN 7540-01-152-8070 Previous edition unusable		2023-ICLI-00006 3232		STANDARD FORM 30 (REV. 10-83) Prescribed by GSA FAR (48 CFR) 53.243	

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NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
1201	<p>FROM (b) (4)</p> <p>BY: (b) (4)</p> <p>TO: (b) (4)</p> <p>Period of Performance: 09/01/2021 to 08/31/2022</p> <p>Change Item 1201 to read as follows (amount shown is the obligated amount):</p> <p>DETAINEE SERVICES (HOUSING) (b) (4) BEDS, FLAT RATE @ (b) (4) PER MONTH.</p> <p>The total amount of this CLIN has increased:</p> <p>FROM (b) (4)</p> <p>BY: (b) (4)</p> <p>TO: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p>				(b) (4)
1204a	<p>Change Item 1204a to read as follows (amount shown is the obligated amount):</p> <p>GUARD SERVICES (TRANSPORTATION) @ FLAT RATE OF (b) (4) PER MONTH.</p> <p>The total amount of this CLIN has increased:</p> <p>FROM (b) (4)</p> <p>BY: (b) (4)</p> <p>TO: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Change Item 1204b to read as follows (amount shown Continued ...</p>				(b) (4)

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED ODT-5-C-0010/70CDCR21FIGR00246/P00001	PAGE	OF
		3	4

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
1204b	<p>is the obligated amount):</p> <p>TRANSPORTATION MILEAGE @ (b) (4) PER MILE.</p> <p>The total amount of this CLIN has increased: FROM (b) (4) BY: (b) (4) TO:</p> <p>Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4)</p>				(b) (4)
1204c	<p>Change Item 1204c to read as follows (amount shown is the obligated amount):</p> <p>ADDITIONAL GUARD SERVICES PER DIEM RATE @ (b) (4) PER HOUR.</p> <p>The total amount of this CLIN has increased: FROM (b) (4) BY: (b) (4) TO:</p> <p>Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4)</p> <p>Notwithstanding the period of performance indicated above, the funding provided in this modification 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 currently funded under this task order. The service provider is not authorized to continue to work on those item(s)</p> <p>Continued ...</p>				(b) (4)

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	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.				

<b>AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT</b>		1. CONTRACT ID CODE		PAGE OF PAGES	
				1      2	
2. AMENDMENT/MODIFICATION NO. P00002		3. EFFECTIVE DATE See Block 16C		4. REQUISITION/PURCHASE REQ. NO. 192122FNE00CCA123	
5. PROJECT NO. (If applicable) 07/02/2021		6. ISSUED BY CODE 70CDCR		7. ADMINISTERED BY (If other than Item 6) CODE ICE/DCR	
DETENTION COMPLIANCE AND REMOVALS US IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I ST NW (b) (6), (b) (7)(C) WASHINGTON DC 20536		ICEDETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW (b) (6), (b) (7)(C) WASHINGTON DC 20536			
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)  CORECIVIC INC ATTN CORECIVIC INC 5501 VIRGINIA WAY (b) (6), (b) (7)(C) BRENTWOOD TN 370277684		<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">           (x)             9A. AMENDMENT OF SOLICITATION NO.             9B. DATED (SEE ITEM 11)             X            10A. MODIFICATION OF CONTRACT/ORDER NO.            ODT-5-C-0010            70CDCR21FIGR00246            10B. DATED (SEE ITEM 13)            07/28/2021         </div> <div style="width: 45%; border-left: 1px solid black; padding-left: 5px;">           9A. AMENDMENT OF SOLICITATION NO.             9B. DATED (SEE ITEM 11)             10A. MODIFICATION OF CONTRACT/ORDER NO.            ODT-5-C-0010            70CDCR21FIGR00246            10B. DATED (SEE ITEM 13)            07/28/2021         </div> </div>			
CODE 1597341510000		FACILITY CODE			
<b>11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS</b>					
<input type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers <span style="float: right;"><input type="checkbox"/> is extended. <input type="checkbox"/> is not extended.</span> Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By 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 desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes 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) See Schedule		Net Increase: \$(b) (4)			
<b>13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.</b>					
CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.				
	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 ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).				
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:				
X	D. OTHER (Specify type of modification and authority) Funding Only Action				
<b>E. IMPORTANT:</b> Contractor <input checked="" type="checkbox"/> is not, <input type="checkbox"/> is required to sign this document and return _____ copies to the issuing office.					
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)					
DUNS Number: 159734151					
CONTRACT ADMINISTRATION POC:					
Program Office. COR: (b) (6), (b) (7)(C)@ice.dhs.gov					
Contracting Officer: (b) (6), (b) (7)(C)@ice.dhs.gov					
Contract Specialist: (b) (6), (b) (7)(C)@ice.dhs.gov					
The purpose of this modification is to provide continuing detention services for ICE detainees at Elizabeth Contract Detention Facility. Funding is provided for CLIN 1201 in the amount of (b) (4)					
The total obligated amount is increased as follows: Continued ...					
Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.					
15A. NAME AND TITLE OF SIGNER (Type or print)		16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)			
		(b) (6), (b) (7)(C)			
		TEL: 202-923-(b) (6), (b) (7)(C) EMAIL: (b) (6), (b) (7)(C)@ice.dhs.gov			
15B. CONTRACTOR/OFFEROR		15C. DATE SIGNED		16B. UNITED STATES OF AMERICA	
(Signature of person authorized to sign)				(Signature of Contracting Officer)	
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 ODT-5-C-0010/70CDCR21FIGR00246/P00002	PAGE	OF
		2	2

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
1201	<p>FROM (b) (4)</p> <p>BY: (b) (4)</p> <p>TO: (b) (4)</p> <p>Accounting Info: (b) (7)(E)</p> <p>Period of Performance: 09/01/2021 to 08/31/2022</p> <p>Change Item 1201 to read as follows (amount shown is the obligated amount):</p> <p>DETAINEE SERVICES (HOUSING) 0 - 285 BEDS, FLAT RATE @ (b) (4) PER MONTH.</p> <p>The total amount of this CLIN has increased: FROM (b) (4)</p> <p>BY: (b) (4)</p> <p>TO: (b) (4)</p> <p>Notwithstanding the period of performance indicated above, the funding provided in this modification 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 currently 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.</p>				(b) (4)

<b>AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT</b>		1. CONTRACT ID CODE		PAGE OF PAGES	
				1      2	
2. AMENDMENT/MODIFICATION NO. P00003		3. EFFECTIVE DATE See Block 16C		4. REQUISITION/PURCHASE REQ. NO. 192122FNE00CCA124	
5. PROJECT NO. (If applicable) 07/02/2021		6. ISSUED BY CODE 70CDCR		7. ADMINISTERED BY (If other than Item 6) CODE ICE/DCR	
DETENTION COMPLIANCE AND REMOVALS US IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I ST NW (b) (6), (b) (7)(C) WASHINGTON DC 20536		ICEDETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW (b) (6), (b) (7)(C) WASHINGTON DC 20536			
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)  CORECIVIC INC ATTN CORECIVIC INC 5501 VIRGINIA WAY (b) (6), (b) (7)(C) BRENTWOOD TN 370277684		(x)		9A. AMENDMENT OF SOLICITATION NO.	
				9B. DATED (SEE ITEM 11)	
		X		10A. MODIFICATION OF CONTRACT/ORDER NO. ODT-5-C-0010 70CDCR21FIGR00246	
				10B. DATED (SEE ITEM 13) 07/28/2021	
CODE 1597341510000		FACILITY CODE			
<b>11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS</b>					
<input type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers <span style="float: right;"><input type="checkbox"/> is extended. <input type="checkbox"/> is not extended.</span> Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By 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 desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes 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) See Schedule <span style="float: right;">Net Increase: (b) (4)</span>					
<b>13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.</b>					
CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.				
	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 ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).				
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:				
X	D. OTHER (Specify type of modification and authority) Funding Only Action				
E. IMPORTANT: Contractor <input checked="" type="checkbox"/> is not. <input type="checkbox"/> is required to sign this document and return _____ copies to the issuing office.					
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)					
DUNS Number: 159734151					
CONTRACT ADMINISTRATION POC:					
Program Office. COR: (b) (6), (b) (7)(C) @ice.dhs.gov					
Contracting Officer: (b) (6), (b) (7)(C) @ice.dhs.gov					
Contract Specialist: (b) (6), (b) (7)(C) @ice.dhs.gov					
The purpose of this modification is to provide continuing detention services for ICE detainees at Elizabeth Contract Detention Facility. Funding is provided for CLIN 1201 in the amount of (b) (4)					
The total obligated amount is increased as follows: Continued ...					
Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.					
15A. NAME AND TITLE OF SIGNER (Type or print)		16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print) (b) (6), (b) (7)(C) TEL: 202-923- (b) (6), (b) (7)(C) EMAIL: (b) (6), (b) (7)(C) @ice.dhs.gov			
15B. CONTRACTOR/OFFEROR  (Signature of person authorized to sign)		15C. DATE SIGNED		16B. UNITED STATES OF AMERICA  (Signature of Contracting Officer)	
				16C. DATE SIGNED	

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED ODT-5-C-0010/70CDCR21FIGR00246/P00003	PAGE	OF
		2	2

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
1201	<p>FROM (b) (4)</p> <p>BY: (b) (4)</p> <p>TO: (b) (4)</p> <p>Period of Performance: 09/01/2021 to 08/31/2022</p> <p>Change Item 1201 to read as follows (amount shown is the obligated amount):</p> <p>DETAINEE SERVICES (HOUSING) 0 - 285 BEDS, FLAT RATE @ (b) (4) PER MONTH.</p> <p>The total amount of this CLIN has increased:</p> <p>FROM (b) (4)</p> <p>BY: (b) (4)</p> <p>TO: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Notwithstanding the period of performance indicated above, the funding provided in this modification 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 currently 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.</p>				(b) (4)

<b>AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT</b>		1. CONTRACT ID CODE		PAGE OF PAGES	
				1      2	
2. AMENDMENT/MODIFICATION NO. P00004		3. EFFECTIVE DATE See Block 16C		4. REQUISITION/PURCHASE REQ. NO. 192122FNE00CCA126	
5. PROJECT NO. (If applicable) 07/02/2021		6. ISSUED BY CODE 70CDCR		7. ADMINISTERED BY (If other than Item 6) CODE ICE/DCR	
DETENTION COMPLIANCE AND REMOVALS US IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I ST NW (b) (6), (b) (7)(C) WASHINGTON DC 20536		ICEDETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW (b) (6), (b) (7)(C) WASHINGTON DC 20536			
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)  CORECIVIC INC ATTN CORECIVIC INC 5501 VIRGINIA WAY (b) (6), (b) (7)(C) BRENTWOOD TN 370277684		(x) 9A. AMENDMENT OF SOLICITATION NO.  9B. DATED (SEE ITEM 11)  X 10A. MODIFICATION OF CONTRACT/ORDER NO. ODT-5-C-0010 70CDCR21FIGR00246 10B. DATED (SEE ITEM 13) 07/28/2021			
CODE 1597341510000		FACILITY CODE			
<b>11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS</b>					
<input type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers <input type="checkbox"/> is extended. <input type="checkbox"/> is not extended. Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By 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 desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes 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) See Schedule      Net Increase: (b) (4)					
<b>13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.</b>					
CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.				
	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 ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).				
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:				
X	D. OTHER (Specify type of modification and authority) Funding Only Action				
<b>E. IMPORTANT:</b> Contractor <input checked="" type="checkbox"/> is not. <input type="checkbox"/> is required to sign this document and return _____ copies to the issuing office.					
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)					
DUNS Number: 159734151					
CONTRACT ADMINISTRATION POC:					
Program Office. COR: (b) (6), (b) (7)(C)@ice.dhs.gov					
Contracting Officer: (b) (6), (b) (7)(C)@ice.dhs.gov					
Contract Specialist: (b) (6), (b) (7)(C)@ice.dhs.gov					
The purpose of this modification is to provide continuing detention services for ICE detainees at Elizabeth Contract Detention Facility. Funding is provided for CLIN 1201a and 1201b in the amount of (b) (4)					
The total obligated amount is increased as follows: Continued ...					
Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.					
15A. NAME AND TITLE OF SIGNER (Type or print)		16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print) (b) (6), (b) (7)(C) TEL: 202-923-(b) (6), (b) (7)(C) EMAIL: (b) (6), (b) (7)(C)@ice.dhs.gov			
15B. CONTRACTOR/OFFEROR		15C. DATE SIGNED		16B. UNITED STATES OF AMERICA	
(Signature of person authorized to sign)				(Signature of Contracting Officer)	
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 ODT-5-C-0010/70CDCR21FIGR00246/P00004	PAGE	OF
		2	2

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>FROM (b) (4)</p> <p>BY: (b) (4)</p> <p>TO: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Period of Performance: 09/01/2021 to 08/31/2022</p> <p>Change Item 1204a to read as follows (amount shown is the obligated amount):</p> <p>1204a GUARD SERVICES (TRANSPORTATION) @ FLAT RATE OF (b) (4) PER MONTH.</p> <p>The total amount of this CLIN has increased:</p> <p>FROM (b) (4)</p> <p>BY: (b) (4)</p> <p>TO: (b) (4)</p> <p>Change Item 1204b to read as follows (amount shown is the obligated amount):</p> <p>1204b TRANSPORTATION MILEAGE @ (b) (4) PER MILE.</p> <p>The total amount of this CLIN has increased:</p> <p>FROM (b) (4)</p> <p>BY: (b) (4)</p> <p>TO: (b) (4)</p> <p>Notwithstanding the period of performance indicated above, the funding provided in this modification 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 currently 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.</p>				<p>(b) (4)</p> <p>(b) (4)</p>

<b>AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT</b>		1. CONTRACT ID CODE		PAGE OF PAGES	
				1      5	
2. AMENDMENT/MODIFICATION NO. P00005		3. EFFECTIVE DATE See Block 16C		4. REQUISITION/PURCHASE REQ. NO. 192122FNE00CCA128	
5. PROJECT NO. (If applicable) 07/02/2021		6. ISSUED BY CODE 70CDCR		7. ADMINISTERED BY (If other than Item 6) CODE ICE/DCR	
DETENTION COMPLIANCE AND REMOVALS US IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I ST NW (b) (6), (b) (7)(C) WASHINGTON DC 20536		ICEDETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW (b) (6), (b) (7)(C) WASHINGTON DC 20536			
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)  CORECIVIC INC ATTN CORECIVIC INC 5501 VIRGINIA WAY (b) (6), (b) (7)(C) BRENTWOOD TN 370277684		<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">           (x) 9A. AMENDMENT OF SOLICITATION NO.             9B. DATED (SEE ITEM 11)             X 10A. MODIFICATION OF CONTRACT/ORDER NO.            ODT-5-C-0010            70CDCR21FIGR00246            10B. DATED (SEE ITEM 13)            07/28/2021         </div> <div style="width: 45%; border-left: 1px solid black; padding-left: 5px;">           CODE 1597341510000      FACILITY CODE         </div> </div>			
<b>11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS</b>					
<input type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers <span style="float: right;"><input type="checkbox"/> is extended. <input type="checkbox"/> is not extended.</span> Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By 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 desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes 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) See Schedule		Net Increase: <span style="background-color: green; color: white; padding: 2px 10px;">(b) (4)</span>			
<b>13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.</b>					
CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.				
	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 ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).				
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:				
X	D. OTHER (Specify type of modification and authority) Funding Only Action				
<b>E. IMPORTANT:</b> Contractor <input checked="" type="checkbox"/> is not, <input type="checkbox"/> is required to sign this document and return _____ copies to the issuing office.					
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)					
DUNS Number: 159734151 CONTRACT ADMINISTRATION POC: Program Office. COR: (b) (6), (b) (7)(C) @ice.dhs.gov Contracting Officer: (b) (6), (b) (7)(C) @ice.dhs.gov Contract Specialist: (b) (6), (b) (7)(C) @ice.dhs.gov					
The purpose of this modification is to provide continuing detention services for ICE detainees at Elizabeth Contract Detention Facility. Funding is provided for CLINs 1201, 1204a, 1204b, 1204c and 1205 in the amount of <span style="background-color: green; color: white; padding: 2px 10px;">(b) (4)</span> Period of Performance: 09/01/2021 to 08/31/2022					
Continued ...					
Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.					
15A. NAME AND TITLE OF SIGNER (Type or print)		16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print) (b) (6), (b) (7)(C) TEL: 202-923- (b) (6), (b) (7)(C)      EMAIL: (b) (6), (b) (7)(C) @ice.dhs.gov			
15B. CONTRACTOR/OFFEROR		15C. DATE SIGNED		16B. UNITED STATES OF AMERICA	
(Signature of person authorized to sign)				(Signature of Contracting Officer)	
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 ODT-5-C-0010/70CDCR21FIGR00246/P00005	PAGE	OF
		2	5

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
1201	<p>Change Item 1201 to read as follows (amount shown is the obligated amount):</p> <p>DETAINEE SERVICES (HOUSING) 0 - 285 BEDS, FLAT RATE @ (b) (4) PER MONTH.</p> <p>The total amount of this CLIN has increased: FROM (b) (4) BY: TO:</p> <p>Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4) Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4) Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4) Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4) Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4) Accounting Info: (b) (7)(E)</p>				(b) (4)
1204a	<p>Change Item 1204a to read as follows (amount shown is the obligated amount):</p> <p>GUARD SERVICES (TRANSPORTATION) @ FLAT RATE OF (b) (4) PER MONTH.</p> <p>The total amount of this CLIN has increased: FROM (b) (4) BY: TO:</p> <p>Accounting Info: Continued ...</p>				(b) (4)

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	(b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4) Discount Terms: Net (b) (4)  Change Item 1204b to read as follows (amount shown is the obligated amount):  1204b TRANSPORTATION MILEAGE @ (b) (4) PER MILE.  The total amount of this CLIN has increased: FROM (b) (4) BY: (b) (4) TO:  Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: Continued ...				(b) (4)

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p><b>(b) (7)(E)</b></p> <p>Funded: <b>(b) (4)</b></p> <p>Change Item 1204c to read as follows (amount shown is the obligated amount):</p> <p>1204c    ADDITIONAL GUARD SERVICES PER DIEM RATE @ <b>(b) (4)</b> PER HOUR. <span style="float: right;"><b>(b) (4)</b></span></p> <p>The total amount of this CLIN has increased: FROM <b>(b) (4)</b> BY: TO:</p> <p>Accounting Info: <b>(b) (7)(E)</b> Funded: <b>(b) (4)</b> Accounting Info: <b>(b) (7)(E)</b> Funded: <b>(b) (4)</b> Accounting Info: <b>(b) (7)(E)</b> Funded: <b>(b) (4)</b> Change Item 1205 to read as follows (amount shown is the obligated amount):</p> <p>1205    DETAINEE WAGES @ <b>(b) (4)</b> PER MONTH. <span style="float: right;"><b>(b) (4)</b></span></p> <p>The total amount of this CLIN has increased: FROM <b>(b) (4)</b> BY: TO:</p> <p>Accounting Info: <b>(b) (7)(E)</b> Funded: <b>(b) (4)</b> Accounting Info: Continued ...</p>				

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<div>(b) (7)(E)</div> <div>Funded: (b) (4)</div> <div>The total obligated amount on this task order is increased as follows:</div> <div>FROM (b) (4)</div> <div>BY:</div> <div>TO:</div> <div>Notwithstanding the period of performance indicated above, the funding provided in this modification 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 currently 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.</div>				

<b>AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT</b>		1. CONTRACT ID CODE		PAGE OF PAGES 1   5	
2. AMENDMENT/MODIFICATION NO. P00006		3. EFFECTIVE DATE See Block 16C		4. REQUISITION/PURCHASE REQ. NO. See Schedule	
5. PROJECT NO. (If applicable) 07/02/2021		6. ISSUED BY CODE 70CDCR		7. ADMINISTERED BY (If other than Item 6) CODE ICE/DCR	
DETENTION COMPLIANCE AND REMOVALS US IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I ST NW (b) (6), (b) (7)(C) WASHINGTON DC 20536		ICEDETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW (b) (6), (b) (7)(C) WASHINGTON DC 20536			
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)  CORECIVIC INC ATTN CORECIVIC INC 5501 VIRGINIA WAY (b) (6), (b) (7)(C) BRENTWOOD TN 370277684		9A. AMENDMENT OF SOLICITATION NO.  9B. DATED (SEE ITEM 11)  10A. MODIFICATION OF CONTRACT/ORDER NO. ODT-5-C-0010 70CDCR21FIGR00246 10B. DATED (SEE ITEM 13) 07/28/2021			
CODE 1597341510000		FACILITY CODE			
<b>11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS</b>					
<input type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers <input type="checkbox"/> is extended. <input type="checkbox"/> is not extended. Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By 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 desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes 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) See Schedule		Net Increase: (b) (4)			
<b>13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.</b>					
CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.  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 ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).  C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:  D. OTHER (Specify type of modification and authority) X Funding Only Action				
<b>E. IMPORTANT:</b> Contractor <input checked="" type="checkbox"/> is not. <input type="checkbox"/> is required to sign this document and return _____ copies to the issuing office.					
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)					
DUNS Number: 159734151					
CONTRACT ADMINISTRATION POC:					
Program Office. COR: (b) (6), (b) (7)(C)@ice.dhs.gov					
Contracting Officer: (b) (6), (b) (7)(C)@ice.dhs.gov					
Contract Specialist: (b) (6), (b) (7)(C)@ice.dhs.gov					
Note: There are two requisition associated with this modification: (192122FNE00CCA129 and 192122FNE00CCA130)					
The purpose of this modification is to:					
Continued ...					
Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.					
15A. NAME AND TITLE OF SIGNER (Type or print)		16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print) (b) (6), (b) (7)(C) TEL: 202-923-(b) (6), (b) (7)(C) EMAIL: (b) (6), (b) (7)(C)@ice.dhs.gov			
15B. CONTRACTOR/OFFEROR  (Signature of person authorized to sign)		15C. DATE SIGNED		16B. UNITED STATES OF AMERICA  (Signature of Contracting Officer)	
16C. DATE SIGNED					

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED ODT-5-C-0010/70CDCR21FIGR00246/P00006	PAGE	OF
		2	5

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
1201	<p>1.) Address the REA funding for CLIN 1201. Attachment 1, Schedule, reflects September 01, 2021 thru August 31, 2022 @ Unit Price (b) (4)</p> <p>2.) Provide continuing detention services for ICE detainees at Elizabeth Contract Detention Facility. Funding is provided for CLINs, 1201a, 1204c, and 1205 in the amount of (b) (4). The total funding for this modification is (b) (4). Period of Performance: 09/01/2021 to 08/31/2022</p> <p>Change Item 1201 to read as follows (amount shown is the obligated amount):</p> <p>DETAINEE SERVICES (HOUSING) (b) (4) BEDS, FLAT RATE @ (b) (4) PER MONTH.</p> <p>Rate reflects September 01, 2021 thru August 31, 2022</p> <p>The total amount of this CLIN has increased: FROM: (b) (4) BY: TO:</p> <p>Requisition No: 192121FNE00CCA120, 192122FNE00CCA122, 192122FNE00CCA123, 192122FNE00CCA124, 192122FNE00CCA128, 192122FNE00CCA129, 192122FNE00CCA130</p> <p>Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4) Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4) Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4) Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4) Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4) Continued ...</p>				(b) (4)



NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>TO: (b) (4)</p> <p>Requisition No: 192121FNE00CCA120, 192122FNE00CCA122, 192122FNE00CCA128, 192122FNE00CCA129, 192122FNE00CCA130</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Change Item 1205 to read as follows (amount shown is the obligated amount):</p> <p>1205     DETAINEE WAGES @ (b) (4) PER MONTH.</p> <p>The total amount of this CLIN has increased:</p> <p>FROM (b) (4)</p> <p>BY:</p> <p>TO:</p> <p>Requisition No: 192121FNE00CCA120, 192122FNE00CCA128, 192122FNE00CCA129</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Continued ...</p>				

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED ODT-5-C-0010/70CDCR21FIGR00246/P00006	PAGE	OF
		5	5

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>Funded: (b) (4)</p> <p>Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>The total obligated amount on this task order is increased as follows:</p> <p>FROM (b) (4)</p> <p>BY: (b) (4)</p> <p>TO: (b) (4)</p> <p>Notwithstanding the period of performance indicated above, the funding provided in this modification 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 currently 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.</p>				

<b>AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT</b>		1. CONTRACT ID CODE		PAGE OF PAGES	
				1 2	
2. AMENDMENT/MODIFICATION NO.		3. EFFECTIVE DATE		4. REQUISITION/PURCHASE REQ. NO.	
P00007		See Block 16C		192122FNE00CCA131	
5. PROJECT NO. (If applicable)		07/02/2021			
6. ISSUED BY		CODE		7. ADMINISTERED BY (If other than Item 6)	
		70CDCR		CODE ICE/DCR	
DETENTION COMPLIANCE AND REMOVALS US IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I ST NW (b) (6), (b) (7)(C) WASHINGTON DC 20536			ICEDETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW (b) (6), (b) (7)(C) WASHINGTON DC 20536		
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)			9A. AMENDMENT OF SOLICITATION NO.		
CORECIVIC INC ATTN CORECIVIC INC 5501 VIRGINIA WAY (b) (6), (b) (7)(C) BRENTWOOD TN 370277684			(x)		
			9B. DATED (SEE ITEM 11)		
			10A. MODIFICATION OF CONTRACT/ORDER NO. ODT-5-C-0010		
			70CDCR21FIGR00246		
			10B. DATED (SEE ITEM 13)		
			07/28/2021		
CODE 1597341510000		FACILITY CODE			

**11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS**

☐ The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers ☐ is extended. ☐ is not extended.  
Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning \_\_\_\_\_ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By 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 desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes 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)

See Schedule

Net Increase:

(b) (4)

**13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.**

CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.
	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 ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:
X	D. OTHER (Specify type of modification and authority) Funding Only Action

**E. IMPORTANT:** Contractor ☒ is not. ☐ is required to sign this document and return \_\_\_\_\_ copies to the issuing office.

14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)

DUNS Number: 159734151

CONTRACT ADMINISTRATION POC:

Program Office. COR: (b) (6), (b) (7)(C) ice.dhs.gov

Contracting Officer: (b) (6), (b) (7)(C) ice.dhs.gov

Contract Specialist: (b) (6), (b) (7)(C) @ice.dhs.gov

The purpose of this modification is to provide funding for retroactive payment for additional guard service hours CLIN 1204C1. Funding is provided in the amount of (b) (4)

Accounting Info:

Continued ...

Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.

15A. NAME AND TITLE OF SIGNER (Type or print)		16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)	
		(b) (6), (b) (7)(C)	
		TEL: 202-923-(b) (6), (b) (7) EMAIL: (b) (6), (b) (7)(C) ice.dhs.gov	
15B. CONTRACTOR/OFFEROR	15C. DATE SIGNED	16B. UNITED STATES OF AMERICA	16C. DATE SIGNED
(Signature of person authorized to sign)		(Signature of Contracting Officer)	

NSN 7540-01-152-8070

Previous edition unusable

2023-ICLI-00006 3252

2023-ICLI-00006 3928

STANDARD FORM 30 (REV. 10-83)

Prescribed by GSA

FAR (48 CFR) 53.243

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED ODT-5-C-0010/70CDCR21FIGR00246/P00007	PAGE	OF
		2	2

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p><b>(b) (7)(E)</b></p> <p>Period of Performance: 09/01/2021 to 08/31/2022</p> <p>Add Item 1204C1 as follows:</p> <p>1204C1 ADDITIONAL GUARD SERVICES, REA RETROACTIVE PAYMENT, <b>(b) (4)</b> HRS @ <b>(b) (4)</b> PER HOUR.</p> <p>The total obligated amount on this task order is increased as follows:</p> <p>FROM <b>(b) (4)</b></p> <p>BY:</p> <p>TO:</p> <p>Notwithstanding the period of performance indicated above, the funding provided in this modification 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 currently 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.</p>				<b>(b) (4)</b>

<b>AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT</b>		1. CONTRACT ID CODE		PAGE OF PAGES 1   5	
2. AMENDMENT/MODIFICATION NO. P00008		3. EFFECTIVE DATE See Block 16C		4. REQUISITION/PURCHASE REQ. NO. 192122FNE00CCA132	
5. PROJECT NO. (If applicable) 07/02/2021		6. ISSUED BY CODE 70CDCR		7. ADMINISTERED BY (If other than Item 6) CODE ICE/DCR	
DETENTION COMPLIANCE AND REMOVALS US IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I ST NW (b) (6), (b) (7)(C) WASHINGTON DC 20536		ICEDETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW (b) (6), (b) (7)(C) WASHINGTON DC 20536			
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)  CORECIVIC INC ATTN CORECIVIC INC 5501 VIRGINIA WAY (b) (6), (b) (7)(C) BRENTWOOD TN 370277684		<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">           (x) 9A. AMENDMENT OF SOLICITATION NO.             9B. DATED (SEE ITEM 11)             X 10A. MODIFICATION OF CONTRACT/ORDER NO.            ODT-5-C-0010            70CDCR21FIGR00246            10B. DATED (SEE ITEM 13)            07/28/2021         </div> <div style="width: 45%; border-left: 1px solid black; padding-left: 5px;">           CODE HJGMJN1JKL46            FACILITY CODE         </div> </div>			
<b>11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS</b>					
<input type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers <span style="float: right;"><input type="checkbox"/> is extended. <input type="checkbox"/> is not extended.</span> Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By 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 desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes 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) See Schedule		Net Increase: (b) (4)			
<b>13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.</b>					
CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.				
	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 ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).				
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:				
X	D. OTHER (Specify type of modification and authority) Funding Only Action				
<b>E. IMPORTANT:</b> Contractor <input checked="" type="checkbox"/> is not, <input type="checkbox"/> is required to sign this document and return _____ copies to the issuing office.					
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)					
CONTRACT ADMINISTRATION POC: Program Office. COR: (b) (6), (b) (7)(C)@ice.dhs.gov Contracting Officer: (b) (6), (b) (7)(C)@ice.dhs.gov Contract Specialist: (b) (6), (b) (7)(C)@ice.dhs.gov					
The purpose of this modification is to provide continuing detention and transportation services for ICE detainees at Elizabeth Contract Detention Facility. Funding is provided for CLINs 1201, 1204a, and 1204b, in the amount of (b) (4)					
Period of Performance: 09/01/2021 to 08/31/2022 Continued ...					
Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.					
15A. NAME AND TITLE OF SIGNER (Type or print)		16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print) (b) (6), (b) (7)(C) TEL: 202-923- (b) (6), (b) (7)(C) EMAIL: (b) (6), (b) (7)(C)@ice.dhs.gov			
15B. CONTRACTOR/OFFEROR		15C. DATE SIGNED		16B. UNITED STATES OF AMERICA	
16C. DATE SIGNED					
(Signature of person authorized to sign)		(Signature of Contracting Officer)			



NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
1204a	<p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Change Item 1204a to read as follows (amount shown is the obligated amount):</p> <p>GUARD SERVICES (TRANSPORTATION) @ FLAT RATE OF (b) (4) PER MONTH.</p> <p>The total amount of this CLIN has increased: FROM (b) (4) BY: TO:</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Continued ...</p>				(b) (4)

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED ODT-5-C-0010/70CDCR21FIGR00246/P00008	PAGE	OF
		4	5

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
1204b	<p>(b) (7)(E)</p> <p>Funded: (b) (4)</p> <p>Change Item 1204b to read as follows (amount shown is the obligated amount):</p> <p>TRANSPORTATION MILEAGE @ (b) (4) PER MILE.</p> <p>The total amount of this CLIN has increased: FROM (b) (4) BY: TO:</p> <p>Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (4) The total obligated amount on this task order is increased as follows: FROM BY: TO:</p> <p>Notwithstanding the period of performance Continued ...</p>				(b) (4)

NAME OF OFFEROR OR CONTRACTOR  
CORECIVIC INC

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	indicated above, the funding provided in this modification 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 currently 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.				

<b>AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT</b>		1. CONTRACT ID CODE		PAGE OF PAGES 1 5	
2. AMENDMENT/MODIFICATION NO. P00009		3. EFFECTIVE DATE See Block 16C		4. REQUISITION/PURCHASE REQ. NO. 192122FNE00CCA133	
5. PROJECT NO. (If applicable) 07/02/2021		6. ISSUED BY CODE 70CDCR		7. ADMINISTERED BY (If other than Item 6) CODE ICE/DCR	
DETENTION COMPLIANCE AND REMOVALS U.S. Immigration and Customs Enforcement Office of Acquisition Management 801 I ST NW, (b) (6), (b) (7)(C) WASHINGTON DC 20536		ICE/Detention Compliance & Removals Immigration and Customs Enforcement Office of Acquisition Management 801 I Street NW, (b) (6), (b) (7)(C) Washington DC 20536			
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)  CORECIVIC INC ATTN CORECIVIC INC 5501 VIRGINIA WAY (b) (6), (b) (7)(C) BRENTWOOD TN 370277684		9A. AMENDMENT OF SOLICITATION NO.  9B. DATED (SEE ITEM 11)  10A. MODIFICATION OF CONTRACT/ORDER NO. ODT-5-C-0010 70CDCR21FIGR00246 10B. DATED (SEE ITEM 13) 07/28/2021			
CODE HJGMJN1JKL46		FACILITY CODE			
<b>11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS</b>					
<input type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers <input type="checkbox"/> is extended. <input type="checkbox"/> is not extended. Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By 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 desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes 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) See Schedule		Net Increase: (b) (4)			
<b>13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.</b>					
CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.  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 ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).  C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:  D. OTHER (Specify type of modification and authority) X Funding Only Action				
<b>E. IMPORTANT:</b> Contractor <input checked="" type="checkbox"/> is not. <input type="checkbox"/> is required to sign this document and return _____ copies to the issuing office.					
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)					
CONTRACT ADMINISTRATION POC: Program Office. COR: (b) (6), (b) (7)(C) @ice.dhs.gov Contracting Officer: (b) (6), (b) (7)(C) @ice.dhs.gov Contract Specialist: (b) (6), (b) (7)(C) @ice.dhs.gov					
The purpose of this modification is to provide continuing detention and transportation services for ICE detainees at Elizabeth Contract Detention Facility. Funding is provided for CLINs 1201, 1204a, and 1204b, in the amount of (b) (4)					
Period of Performance: 09/01/2021 to 08/31/2022					
Continued ...					
Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.					
15A. NAME AND TITLE OF SIGNER (Type or print)		16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print) (b) (6), (b) (7)(C) TEL: 202-923-(b) (6), (b) (7)(C) EMAIL: (b) (6), (b) (7)(C) @ice.dhs.gov			
15B. CONTRACTOR/OFFEROR  (Signature of person authorized to sign)		15C. DATE SIGNED		16B. UNITED STATES OF AMERICA  (Signature of Contracting Officer)	
15D. DATE SIGNED		16C. DATE SIGNED		16D. DATE SIGNED	