

**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 CONTRACT NO.

06/09/2020 HSCEDM-17-D-00009

ORDER NO.

70CDCR20FR0000036

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>Contracting Officer: (b) (6), (b) (7)(C) 202-732- (b) (6), (b) (7)(C) @ice.dhs.gov</p> <p>The purpose of this Task Order 70CDCR20FR0000036 between the Department of Homeland Security, Immigration and Customs Enforcement, and GEO, is to provide detention and detention-related services. This Task Order is placed in accordance with HSCEDM-17-D-00009. The Contractor shall provide the services contained in this contract.</p> <p>Department of Labor Wage Determination 2015-5233, Rev. 14, dated 12/23/2019 is hereby incorporated.</p> <p>The total obligated amount for this task order is increased: From: (b) (3) (A), (b) (4) By: (b) (3) (A), (b) (4) To: (b) (3) (A), (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. Period of Performance: 04/12/2017 to 08/17/2028</p>					
2001	<p>Detention Services - Guaranteed Minimum - (b) (3) (A), (b) (4) Beds Per Day in accordance with the Performance Work Statement</p> <p>Maximum billable amount per year is (b) (3) (A), (b) (4) Continued ...</p>	(b) (3) (A), (b) (4) (b) (3) (A)		(b) (3) (A), (b) (4)	(b) (3) (A), (b) (4)	
TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))						(b) (3) (A), (b) (4)

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**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 CONTRACT NO.

06/09/2020 HSCEDM-17-D-00009

ORDER NO.

70CDCR20FR0000036

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>Beds (b) (3) (A), (b) (4) Bed Days)</p> <p>Modification P00018 increased the BDR From: (b) (3) (A), (b) (4) By: To:</p> <p>Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p>					
2002	<p>Detention Services - Above Guaranteed Minimum - up to (b) (3) (A), (b) (4) Beds in accordance with the Performance Work Statement</p> <p>Maximum billable amount per year is (b) (3) (A), (b) (4) Bed Days (b) (3) (A), (b) (4) Bed Days)</p> <p>Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p>	(b) (3) (A), (b) (4)	(b) (3) (A)	(b) (3) (A), (b) (4)	(b) (3) (A), (b) (4)	
2003	<p>Transportation - Guaranteed Minimum - (b) (3) (A), (b) (4) Miles Annually in accordance with the Performance Work Statement and Inclusive all associated transportation costs.</p> <p>Modification P00018 increased the Fixed Monthly Price From: (b) (3) (A), (b) (4) By: To:</p> <p>Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p> <p>Continued ...</p>				(b) (3) (A), (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 CONTRACT NO.

06/09/2020 HSCEDM-17-D-00009

ORDER NO.

70CDCR20FR0000036

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
2005	<p>Detainee Volunteer Wages = (b) (3) (A), (b) (4) Per Day</p> <p>Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p>				(b) (3) (A), (b) (4)	
2006	<p>On-Call Post / Guard Services in accordance with the Performance Work Statement</p> <p>Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (3) (A), (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> <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>Continued ...</p>	(b) (3) (A), (b) (4)	(b) (3) (A)	(b) (3) (A), (b) (4)	(b) (3) (A), (b) (4)	

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**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 CONTRACT NO.

06/09/2020 HSCEDM-17-D-00009

ORDER NO.

70CDCR20FR0000036

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>DHS, ICE Financial Operations - Burlington P.O. Box 1620 Williston, VT 05495-1620</p> <p>ATTN: ICE-ERO/FOD-FHO</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>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</p> <p>Continued ...</p>					

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

PAGE NO

6

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

DATE OF ORDER

CONTRACT NO.

06/09/2020

HSCEDM-17-D-00009

ORDER NO.

70CDCR20FR0000036

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>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>(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 Continued ...</p>					

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**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

CONTRACT NO.

06/09/2020

HSCEM-17-D-00009

ORDER NO.

70CDCR20FR0000036

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>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:</p> <p>a. Detention Bed Space Services. For Continued ...</p>					

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(b) (3) (A), (b) (4)

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

PAGE NO

8

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

DATE OF ORDER

CONTRACT NO.

06/09/2020

HSCEDM-17-D-00009

ORDER NO.

70CDCR20FR0000036

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>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>• (b) (3) (A), (b) (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 Continued ...</p>					

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

(b) (3) (A), (b) (4)

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**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

CONTRACT NO.

06/09/2020

HSCEM-17-D-00009

ORDER NO.

70CDCR20FR0000036

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>charges for detainee support itens (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>(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</p> <p>Continued ...</p>					

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**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.

06/09/2020

HSCEDM-17-D-00009

ORDER NO.

70CDCR20FR0000036

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>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 1-877-491-6521 or by e-mail at (b) (7)(E)@ice.dhs.gov.</p>					

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(b) (5) (A), (b) (7) (E)

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Prescribed by GSA FPMR (41 CFR) 101-11.6

<b>AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT</b>		1. CONTRACT ID CODE		PAGE OF PAGES 1 2	
2. AMENDMENT/MODIFICATION NO. P00001		3. EFFECTIVE DATE See Block 16C		4. REQUISITION/PURCHASE REQ. NO. 192120FHOSINK0071	
6. ISSUED BY 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		7. ADMINISTERED BY (If other than Item 6) CODE		5. PROJECT NO. (If applicable)	
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code) GEO GROUP INC THE ATTN (b) (6), (b) (7)(C) 4955 TECHNOLOGY WAY BOCA RATON FL 334313367		(x)		9A. AMENDMENT OF SOLICITATION NO.	
CODE 6127064650000		FACILITY CODE		9B. DATED (SEE ITEM 11)	
		X		10A. MODIFICATION OF CONTRACT/ORDER NO. HSCEDM-17-D-00009 70CDCR20FR0000036	
				10B. DATED (SEE ITEM 13) 06/09/2020	
<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) (3) (A), (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: 612706465					
COR: (b) (6), (b) (7)(C)					
Phone: 832-256-(b) (6), (b) (7)(C)					
Email: (b) (6), (b) (7)(C)@ice.dhs.gov					
ACOR: (b) (6), (b) (7)(C)					
Phone: 832-571-(b) (6), (b) (7)(C)					
Email: (b) (6), (b) (7)(C)@ice.dhs.gov					
Contract Specialist: (b) (6), (b) (7)(C)					
Phone: 202-732-(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 HSCEDM-17-D-00009/70CDCR20FR0000036/P00001	PAGE	OF
		2	2

NAME OF OFFEROR OR CONTRACTOR  
GEO GROUP INC THE

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>Contracting Officer: (b) (6), (b) (7)(C)</p> <p>Phone: 202-732- (b) (6), (b) (7)(C)</p> <p>Email: (b) (6), (b) (7)(C)@ice.dhs.gov</p> <p>There is a requisition associated with this modification; 192120FHOSINK0071</p> <p>The purpose of modification P00001 is to add CLIN 2007 in the amount of (b) (3) (A), (b) (4) to Task Order 70CDCR20FR0000036.</p> <p>As a result, the total obligated amount for this task order is increased:</p> <p>From: (b) (3) (A), (b) (4)</p> <p>By: (b) (3) (A), (b) (4)</p> <p>To: (b) (3) (A), (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 IGSA 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 IGSA 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: (b) (3) (A), (b) (4)</p> <p>Net (b) (3) (A), (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Period of Performance: 04/12/2017 to 08/17/2028</p> <p>Add Item 2007 as follows:</p> <p>2007 IHSC Requested Floor Mounted Sink</p> <p>All terms and conditions of Task Order 70CDCR20FR0000036 shall remain unchanged.</p>				
		(b) (3) (A), (b) (3) (A)		(b) (3) (A), (b) (4)	(b) (3) (A), (b) (4)



<b>AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT</b>		1. CONTRACT ID CODE		PAGE OF PAGES 1 5	
2. AMENDMENT/MODIFICATION NO. P00002		3. EFFECTIVE DATE See Block 16C		4. REQUISITION/PURCHASE REQ. NO. 192121FHO0MPC0004	
6. ISSUED BY 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		7. ADMINISTERED BY (If other than Item 6) CODE		5. PROJECT NO. (If applicable)	
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code) GEO GROUP INC THE ATTN (b) (6), (b) (7)(C) 4955 TECHNOLOGY WAY BOCA RATON FL 334313367		(x) 9A. AMENDMENT OF SOLICITATION NO.		9B. DATED (SEE ITEM 11)	
CODE 6127064650000		FACILITY CODE		X 10A. MODIFICATION OF CONTRACT/ORDER NO. HSCEDM-17-D-00009 70CDCR20FR0000036 10B. DATED (SEE ITEM 13) 06/09/2020	
<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) (3) (A), (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: 612706465					
COR: (b) (6), (b) (7)(C)					
Phone: 832-256-(b) (6), (b) (7)(C)					
Email: (b) (6), (b) (7)(C)@ice.dhs.gov					
ACOR: (b) (6), (b) (7)(C)					
Phone: 832-571-(b) (6), (b) (7)(C)					
Email: (b) (6), (b) (7)(C)@ice.dhs.gov					
Contracting Officer/Specialist: (b) (6), (b) (7)(C)					
Phone: 202-732-(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 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 HSCEDM-17-D-00009/70CDCR20FR0000036/P00002	PAGE	OF
		2	5

NAME OF OFFEROR OR CONTRACTOR  
GEO GROUP INC THE

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>There is a requisition associated with this modification; 192120FH00MPC0004</p> <p>The purpose of modification P00002 is to providing funding in the amount of (b) (3) (A), (b) (4) to Task Order 70CDCR20FR0000036.</p> <p>As a result, the total obligated amount for this task order is increased:</p> <p>From: (b) (3) (A), (b) (4)</p> <p>By: (b) (3) (A), (b) (4)</p> <p>To: (b) (3) (A), (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 IGSA 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 IGSA 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) (3) (A), (b) (4)</p> <p>Period of Performance: 08/18/2020 to 08/17/2021</p> <p>Change Item 2001 to read as follows (amount shown is the obligated amount):</p> <p>2001 Detention Services - Guaranteed Minimum - (b) (3) (A), (b) (4) Beds Per Day in accordance with the Performance Work Statement</p> <p>Maximum billable amount per year is (b) (3) (A), (b) (4) Beds (b) (3) (A), (b) (4) Bed Days)</p> <p>As a result, the funding for this CLIN has increased</p> <p>From: (b) (3) (A), (b) (4)</p> <p>By: (b) (3) (A), (b) (4)</p> <p>To: (b) (3) (A), (b) (4)</p> <p>Continued ...</p>				(b) (3) (A), (b) (4)

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED HSCEDM-17-D-00009/70CDCR20FR0000036/P00002	PAGE	OF
		3	5

NAME OF OFFEROR OR CONTRACTOR  
GEO GROUP INC THE

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>As a result, the quantity for this CLIN has increased</p> <p>From: (b) (3) (A), (b) (4)</p> <p>By: (b) (3) (A), (b) (4)</p> <p>To: (b) (3) (A), (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p> <p>Change Item 2003 to read as follows (amount shown is the obligated amount):</p> <p>2003 Transportation - Guaranteed Minimum - (b) (3) (A), (b) (4)</p> <p>Miles Annually in accordance with the Performance Work Statement and Inclusive all associated transportation costs.</p> <p>As a result, the funding for this CLIN has increased</p> <p>From: (b) (3) (A), (b) (4)</p> <p>By: (b) (3) (A), (b) (4)</p> <p>To: (b) (3) (A), (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p> <p>Monthly Rate: (b) (3) (A), (b) (4)</p> <p>Change Item 2005 to read as follows (amount shown is the obligated amount):</p> <p>Continued ...</p>				(b) (3) (A), (b) (4)

<b>CONTINUATION SHEET</b>	REFERENCE NO. OF DOCUMENT BEING CONTINUED HSCEDM-17-D-00009/70CDCR20FR0000036/P00002	PAGE	OF
		4	5

NAME OF OFFEROR OR CONTRACTOR  
GEO GROUP INC THE

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
2005	<p>Detainee Volunteer Wages = (b) (3) (A), (b) (4) Per Day</p> <p>As a result, the funding for this CLIN has increased</p> <p>From: (b) (3) (A), (b) (4)</p> <p>By: (b) (3) (A), (b) (4)</p> <p>To: (b) (3) (A), (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p>				(b) (3) (A), (b) (4)
2006	<p>On-Call Post / Guard Services in accordance with the Performance Work Statement</p> <p>As a result, the funding for this CLIN has increased</p> <p>From: (b) (3) (A), (b) (4)</p> <p>By: (b) (3) (A), (b) (4)</p> <p>To: (b) (3) (A), (b) (4)</p> <p>As a result, the quantity for this CLIN has increased</p> <p>From: (b) (3) (A), (b) (4)</p> <p>By: (b) (3) (A), (b) (4)</p> <p>To: (b) (3) (A), (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p> <p>Continued ...</p>	(b) (3) (A), (b) (4)	(b) (3) (A)	(b) (3) (A), (b) (4)	(b) (3) (A), (b) (4)

<b>CONTINUATION SHEET</b>	REFERENCE NO. OF DOCUMENT BEING CONTINUED HSCEDM-17-D-00009/70CDCR20FR0000036/P00002	PAGE	OF
		5	5

NAME OF OFFEROR OR CONTRACTOR  
GEO GROUP INC THE

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
2008	<p>Add Item 2008 as follows:</p> <p>IHSC Phone Line Requirement Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info: (b) (7)(E)</p> <p>Funded: (U) (S) (A), (U) (9)</p> <p>All terms and conditions of Task Order 70CDCR20FR0000036 shall remain unchanged.</p>	(b) (3) (A)	(b) (3) (A)	(b) (3) (A), (b) (4)	(b) (3) (A), (b) (4)

<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. 192121FAO00000011.2	
5. PROJECT NO. (If applicable)		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)		(x) 9A. AMENDMENT OF SOLICITATION NO.  9B. DATED (SEE ITEM 11)			
GEO GROUP INC THE 4955 TECHNOLOGY WAY BOCA RATON FL 33431		x 10A. MODIFICATION OF CONTRACT/ORDER NO. 70CDCR20D00000012 70CDCR20FR0000050 10B. DATED (SEE ITEM 13) 07/31/2020			
CODE 6127064650000		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) (3) (A), (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: 612706465 COR: (b) (6), (b) (7)(C) Phone: (830) 326-(b) (6), (b) (7)(C) Email: (b) (6), (b) (7)(C)@ice.dhs.gov  COR: (b) (6), (b) (7)(C) Phone: (210) 231-(b) (6), (b) (7)(C) Email: (b) (6), (b) (7)(C)@ice.dhs.gov  ACOR: (b) (6), (b) (7)(C) Phone: (210) 283-(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	
				(b) (6), (b) (7)(C)	
(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 70CDCR20D00000012/70CDCR20FR0000050/P00004	PAGE 2	OF 5
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NAME OF OFFEROR OR CONTRACTOR  
GEO GROUP INC THE

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0001b	<p>Email: (b) (6), (b) (7)(C) @ice.dhs.gov</p> <p>Contracting Officer: (b) (6), (b) (7)(C)</p> <p>Phone: (202) 732- (b) (6), (b) (7)(C)</p> <p>Email: (b) (6), (b) (7)(C) @ice.dhs.gov</p> <p>Contract Specialist: (b) (6), (b) (7)(C)</p> <p>Phone: (202) 843- (b) (6), (b) (7)(C)</p> <p>Email: (b) (6), (b) (7)(C) @ice.dhs.gov</p> <p>This modification is associated with Requisition 192121FAO00000011.2.</p> <p>The purpose of modification P00004 is to:</p> <ol style="list-style-type: none"> <li>1. Provide funds in the amount of (b) (3) (A), (b) (4) CLIN 0001b. The value of this CLIN has increased from (b) (3) (A), (b) (4) by (b) (3) (A), (b) (4) to (b) (3) (A), (b) (4)</li> <li>2. Provide funds in the amount of (b) (3) (A), (b) (4) for CLIN 0002. The value of this CLIN has increased from (b) (3) (A), (b) (4) by (b) (3) (A), (b) (4) to (b) (3) (A), (b) (4)</li> <li>3. Provide funds in the amount of (b) (3) (A), (b) (4) for CLIN 0003a. The value of this CLIN has increased from (b) (3) (A), (b) (4) by (b) (3) (A), (b) (4) to (b) (3) (A), (b) (4)</li> <li>4. Provide funds in the amount of (b) (3) (A), (b) (4) for CLIN 0004. The value of this CLIN has increased from (b) (3) (A), (b) (4) by (b) (3) (A), (b) (4) to (b) (3) (A), (b) (4)</li> </ol> <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) (3) (A)</p> <p>Period of Performance: 08/06/2020 to 08/05/2021</p> <p>Change Item 0001b to read as follows (amount shown is the obligated amount):</p> <p>Base Period: Detention Services Continued ...</p>				(b) (3) (A), (b) (4)



CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000012/70CDCR20FR0000050/P00004	PAGE	OF
		3	5

NAME OF OFFEROR OR CONTRACTOR  
GEO GROUP INC THE

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0002	<p>PoP: 08/06/2020 - 08/05/2021</p> <p>Tier (b) (3) (A), (b) (4)</p> <p>Tier (b) (3) (A), (b) (4)</p> <p>The value of this CLIN increases:</p> <p>From: (b) (3) (A), (b) (4)</p> <p>By: (b) (3) (A), (b) (4)</p> <p>To: (b) (3) (A), (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) (3) (A), (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (3) (A), (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>PoP: 08/06/2020 - 08/05/2021</p> <p>Regular Rate: (b) (3) (A), (b) (4)</p> <p>Overtime Rate (b) (3) (A), (b) (4)</p> <p>NOT-TO-EXCEED (NTE): (b) (3) (A), (b) (4)</p> <p>The value of this CLIN increases</p> <p>FROM: (b) (3) (A), (b) (4)</p> <p>BY: (b) (3) (A), (b) (4)</p> <p>TO: (b) (3) (A), (b) (4)</p> <p>Product/Service Code: S206</p> <p>Continued ...</p>				(b) (3) (A), (b) (4)

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000012/70CDCR20FR0000050/P00004	PAGE	OF
		4	5

NAME OF OFFEROR OR CONTRACTOR  
GEO GROUP INC THE

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0003a	Product/Service Description: HOUSEKEEPING- GUARD  Accounting Info: (b) (7)(E) Funded: (b) (3) (A), (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (3) (A), (b) (4)  Change Item 0003a to read as follows (amount shown is the obligated amount):  Base Period: Transportation Services - Labor PoP: 08/06/2020 - 08/05/2021  Fixed Price: (b) (3) (A), (b) (4) /month NTE: (b) (3) (A), (b) (4) miles/year  The value of this CLIN increases:  From: (b) (3) (A), (b) (4) By: To: Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD  Accounting Info: (b) (7)(E) Funded: (b) (3) (A), (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (3) (A), (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (3) (A), (b) (4)  Change Item 0004 to read as follows (amount shown is the obligated amount):				(b) (3) (A), (b) (4)
	0004 Base Period: Detainee Work Program Continued ...	(b) (3) (A), (b) (4)	(b) (3) (A)	(b) (3) (A), (b) (4)	(b) (3) (A), (b) (4)

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000012/70CDCR20FR0000050/P00004	PAGE	OF
		5	5

NAME OF OFFEROR OR CONTRACTOR  
GEO GROUP INC THE

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>PoP: 08/06/2020 - 08/05/2021</p> <p>(b) (3) (A)</p> <p>Day</p> <p>(b) (3) (A), (b) (4)</p> <p>NTE: (b) (3) (A), (b) (4)</p> <p>The value of this CLIN increases</p> <p>FROM: (b) (3) (A), (b) (4)</p> <p>BY: (b) (3) (A), (b) (4)</p> <p>TO: (b) (3) (A), (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) (3) (A), (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (3) (A), (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. 192121FAO00000011.3	
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 70CDRCR		5. PROJECT NO. (If applicable)	
		7. ADMINISTERED BY (If other than Item 6) ICE/DCR		CODE ICE/DCR	
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)  GEO GROUP INC THE 4955 TECHNOLOGY WAY BOCA RATON FL 33431		(x)		9A. AMENDMENT OF SOLICITATION NO.	
				9B. DATED (SEE ITEM 11)	
		x		10A. MODIFICATION OF CONTRACT/ORDER NO. 70CDRCR20D00000012 70CDRCR20FR0000050	
CODE 6127064650000		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) (3) (A), (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: 612706465					
COR: (b) (6), (b) (7)(C)					
Phone: (830) 326-(b) (6), (b) (7)(C)					
Email: (b) (6), (b) (7)(C)@ice.dhs.gov					
COR: (b) (6), (b) (7)(C)					
Phone: (210) 231-(b) (6), (b) (7)(C)					
Email: (b) (6), (b) (7)(C)@ice.dhs.gov					
ACOR: (b) (6), (b) (7)(C)					
Phone: (210) 283-(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	
				(b) (6), (b) (7)(C)	
(Signature of person authorized to sign)				16C. DATE SIGNED	
NSN 7540-01-152-8070 Previous edition unusable		STANDARD FORM 30 (REV. 10-83) Prescribed by GSA FAR (48 CFR) 53.243			

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000012/70CDCR20FR0000050/P00005	PAGE 2	OF 5
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NAME OF OFFEROR OR CONTRACTOR  
GEO GROUP INC THE

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>Contracting Officer: (b) (6), (b) (7)(C)</p> <p>Phone: (202) 732- (b) (6), (b) (7)(C)</p> <p>Email: (b) (6), (b) (7)(C)@ice.dhs.gov</p> <p>Contract Specialist: (b) (6), (b) (7)(C)</p> <p>Phone: (202) 843- (b) (6), (b) (7)(C)</p> <p>Email: (b) (6), (b) (7)(C)@ice.dhs.gov</p> <p>This modification is associated with Requisition 192121FAO00000011.3.</p> <p>The purpose of modification P00005 is to:</p> <ol style="list-style-type: none"> <li>1. Provide funds in the amount of (b) (3) (A), (b) (4) for CLIN 0001b. The value of this CLIN has increased from (b) (3) (A), (b) (4) by (b) (3) (A), (b) (4) to (b) (3) (A), (b) (4)</li> <li>2. Provide funds in the amount of (b) (3) (A), (b) (4) for CLIN 0002. The value of this CLIN has increased from (b) (3) (A), (b) (4) by (b) (3) (A), (b) (4) to (b) (3) (A), (b) (4)</li> <li>3. Provide funds in the amount of (b) (3) (A), (b) (4) for CLIN 0003a. The value of this CLIN has increased from (b) (3) (A), (b) (4) by (b) (3) (A), (b) (4) to (b) (3) (A), (b) (4)</li> <li>4. Provide funds in the amount of (b) (3) (A), (b) (4) for CLIN 0004. The value of this CLIN has increased from (b) (3) (A), (b) (4) by (b) (3) (A), (b) (4) to (b) (3) (A), (b) (4)</li> </ol> <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) (3) (A), (b) (4)</p> <p>Period of Performance: 08/06/2020 to 08/05/2021</p> <p>Change Item 0001b to read as follows (amount shown is the obligated amount):</p> <p>Continued ...</p>				

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000012/70CDCR20FR0000050/P00005	PAGE	OF
		3	5

NAME OF OFFEROR OR CONTRACTOR  
GEO GROUP INC THE

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0001b	<p>Base Period: Detention Services PoP: 08/06/2020 - 08/05/2021</p> <p>Tier (b) (3) (A), (b) (4) Tier (b) (3) (A), (b) (4)</p> <p>The value of this CLIN increases:</p> <p>From: (b) (3) (A), (b) (4) By: To:</p> <p>Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4) Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4) Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4) Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4) Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4) Accounting Info: (b) (7)(E)</p> <p>Change Item 0002 to read as follows (amount shown is the obligated amount):</p>				(b) (3) (A), (b) (4)
0002	<p>Base Period: On-Call Stationary Guard Services PoP: 08/06/2020 - 08/05/2021</p> <p>Regular Rate: (b) (3) (A), (b) (4) Overtime Rate:</p> <p>NOT-TO-EXCEED (NTE): (b) (3) (A), (b) (4) hours Continued ...</p>				(b) (3) (A), (b) (4)

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000012/70CDCR20FR0000050/P00005	PAGE 4	OF 5
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NAME OF OFFEROR OR CONTRACTOR  
GEO GROUP INC THE

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0003a	<p>The value of this CLIN increases FROM: (b) (3) (A), (b) (4) BY: (b) (3) (A), (b) (4) TO: [REDACTED] Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4) Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4) Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4) Accounting Info: (b) (7)(E)</p> <p>Change Item 0003a to read as follows(amount shown is the obligated amount):</p> <p>Base Period: Transportation Services - Labor PoP: 08/06/2020 - 08/05/2021</p> <p>Fixed Price: (b) (3) (A), (b) (4) month NTE: (b) (3) (A), (b) (4) miles/year</p> <p>The value of this CLIN increases:</p> <p>From: (b) (3) (A), (b) (4) By: [REDACTED] To: [REDACTED] Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4) Accounting Info: (b) (7)(E)</p> <p>Continued ...</p>				(b) (3) (A), (b) (4)



CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000012/70CDCR20FR0000050/P00005	PAGE	OF
		5	5

NAME OF OFFEROR OR CONTRACTOR  
GEO GROUP INC THE

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0004	Funded: (b) (3) (A), (b) (4) Accounting Info: (b) (7)(E)				
	Funded: (b) (3) (A), (b) (4) Accounting Info: (b) (7)(E)				
	Funded: (b) (3) (A), (b) (4)  Change Item 0004 to read as follows (amount shown is the obligated amount):				
	Base Period: Detainee Work Program PoP: 08/06/2020 - 08/05/2021	(b) (3) (A), (b) (4), (b) (5) (A)		(b) (3) (A), (b) (4)	(b) (3) (A), (b) (4)
	(b) (3) (A) Day				
	NTE: (b) (3) (A), (b) (4)				
	The value of this CLIN increases				
	FROM: (b) (3) (A), (b) (4) BY: (b) (3) (A), (b) (4) TO: (b) (3) (A), (b) (4)				
	Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD				
	Accounting Info: (b) (7)(E)				
	Funded: (b) (3) (A), (b) (4) Accounting Info: (b) (7)(E)				
	Funded: (b) (3) (A), (b) (4) Accounting Info: (b) (7)(E)				
	Funded: (b) (3) (A), (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.	
5. PROJECT NO. (If applicable)		6. ISSUED BY CODE 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)  GEO GROUP INC THE 4955 TECHNOLOGY WAY BOCA RATON FL 33431		(x)		9A. AMENDMENT OF SOLICITATION NO.	
				9B. DATED (SEE ITEM 11)	
		x		10A. MODIFICATION OF CONTRACT/ORDER NO. 70CDCR20D00000012 70CDCR20FR0000050	
CODE 6127064650000 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					
<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.					
X 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)					
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: 612706465 COR: (b) (6), (b) (7)(C) Phone: (830) 326- (b) (6), (b) (7)(C) Email: (b) (6), (b) (7)(C)@ice.dhs.gov  COR: (b) (6), (b) (7)(C) Phone: (210) 231- (b) (6), (b) (7)(C) Email: (b) (6), (b) (7)(C)@ice.dhs.gov  ACOR: (b) (6), (b) (7)(C) Phone: (210) 283- (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 (b) (6), (b) (7)(C)	
(Signature of person authorized to sign)				16C. DATE SIGNED	
NSN 7540-01-152-8070 Previous edition unusable		STANDARD FORM 30 (REV. 10-83) Prescribed by GSA FAR (48 CFR) 53.243			

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000012/70CDCR20FR00000050/P00003	PAGE	OF
		2	2

NAME OF OFFEROR OR CONTRACTOR  
GEO GROUP INC THE

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>Contracting Officer: (b) (6), (b) (7)(C)</p> <p>Phone: (202) 732-(b) (6), (b) (7)(C)</p> <p>Email: (b) (6), (b) (7)(C)@ice.dhs.gov</p> <p>Contract Specialist: (b) (6), (b) (7)(C)</p> <p>Phone: (202)-923-(b) (6), (b) (7)(C)</p> <p>Email: (b) (6), (b) (7)(C)@ice.dhs.gov</p> <p>There is no requisition associated with this modification.</p> <p>The purpose of modification P00003 is to:</p> <p>1. Update COR information for subject Task Order 70CDCR20FR00000050 to add (b) (6), (b) (7)(C) as a Contracting Officer's Representative (COR).</p> <p>As a result, the following COR has been added to the Task Order:</p> <p>COR: (b) (6), (b) (7)(C)</p> <p>Phone: (830) 326-(b) (6), (b) (7)(C)</p> <p>Email: (b) (6), (b) (7)(C)@ice.dhs.gov</p> <p>All other terms and conditions IAW this purchase order remain unchanged and in full force and effect.</p> <p>Period of Performance: 08/06/2020 to 08/05/2021</p>				

<b>AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT</b>		1. CONTRACT ID CODE		PAGE OF PAGES 1 4	
2. AMENDMENT/MODIFICATION NO. P00006		3. EFFECTIVE DATE See Block 16C		4. REQUISITION/PURCHASE REQ. NO. 192121FAO00000011.4	
5. PROJECT NO. (If applicable)		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)  GEO GROUP INC THE 4955 TECHNOLOGY WAY BOCA RATON FL 33431		(x)		9A. AMENDMENT OF SOLICITATION NO.	
				9B. DATED (SEE ITEM 11)	
		x		10A. MODIFICATION OF CONTRACT/ORDER NO. 70CDCR20D00000012 70CDCR20FR0000050	
CODE 6127064650000		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) (3) (A), (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: 612706465					
COR: (b) (6), (b) (7)(C)					
Phone: (830) 326- (b) (6), (b) (7)(C)					
Email: (b) (6), (b) (7)(C)@ice.dhs.gov					
COR: (b) (6), (b) (7)(C)					
Phone: (210) 231- (b) (6), (b) (7)(C)					
Email: (b) (6), (b) (7)(C)@ice.dhs.gov					
ACOR: (b) (6), (b) (7)(C)					
Phone: (210) 283- (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 (b) (6), (b) (7)(C)	
(Signature of person authorized to sign)				16C. DATE SIGNED	
NSN 7540-01-152-8070 Previous edition unusable		STANDARD FORM 30 (REV. 10-83) Prescribed by GSA FAR (48 CFR) 53.243			

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000012/70CDCR20FR0000050/P00006	PAGE	OF
		2	4

NAME OF OFFEROR OR CONTRACTOR  
GEO GROUP INC THE

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>Contracting Officer: (b) (6), (b) (7)(C)</p> <p>Phone: (202) 732- (b) (6), (b) (7)(C)</p> <p>Email: (b) (6), (b) (7)(C) @ice.dhs.gov</p> <p>Contract Specialist: (b) (6), (b) (7)(C)</p> <p>Phone: (202) 843- (b) (6), (b) (7)(C)</p> <p>Email: (b) (6), (b) (7)(C) @ice.dhs.gov</p> <p>This modification is associated with Requisition 192121FA00000011.4.</p> <p>The purpose of modification P00006 is to:</p> <p>1. Provide funds in the amount of (b) (3) (A), (b) (4) for CLIN 0003a. The value of this CLIN has increased from (b) (3) (A), (b) (4) by (b) (3) (A), (b) (4) to (b) (3) (A), (b) (4).</p> <p>2. Provide funds in the amount of (b) (3) (A), (b) (4) for CLIN 0003b. The value of this CLIN has increased from (b) (3) (A), (b) (4) by (b) (3) (A), (b) (4) to (b) (3) (A), (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) (3) (A)</p> <p>Period of Performance: 08/06/2020 to 08/05/2021</p> <p>Change Item 0003a to read as follows (amount shown is the obligated amount):</p> <p>Base Period: Transportation Services - Labor PoP: 08/06/2020 - 08/05/2021</p> <p>Fixed Price: (b) (3) (A), (b) (4)/month NTE: (b) (3) (A), (b) (4) miles/year</p> <p>The value of this CLIN increases: Continued ...</p>				(b) (3) (A), (b) (4)



CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000012/70CDCR20FR0000050/P00006	PAGE 3	OF 4
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NAME OF OFFEROR OR CONTRACTOR  
GEO GROUP INC THE

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0003b	<p>From: (b) (3) (A), (b) (4)</p> <p>By: [REDACTED]</p> <p>To: [REDACTED]</p> <p>Product/Service Code: S206</p> <p>Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p> <p>Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p> <p>Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p> <p>Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p> <p>Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (3) (A), (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>PoP: 08/06/2020 - 08/05/2021</p> <p>Mileage Rate: (b) (3) (A), (b) (4)</p> <p>NTE: (b) (3) (A), (b) (4) miles/year</p> <p>The value of this CLIN increases:</p> <p>From: (b) (3) (A), (b) (4)</p> <p>By: [REDACTED]</p> <p>To: [REDACTED]</p> <p>Product/Service Code: S206</p> <p>Continued ...</p>				(b) (3) (A), (b) (4)

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000012/70CDCR20FR0000050/P00006	PAGE	OF
		4	4

NAME OF OFFEROR OR CONTRACTOR  
GEO GROUP INC THE

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	Product/Service Description: HOUSEKEEPING- GUARD  Accounting Info: (b) (7)(E) Funded: (b) (3) (A), (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (3) (A), (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (3) (A), (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (3) (A), (b) (4)				



<b>AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT</b>		1. CONTRACT ID CODE		PAGE OF PAGES 1 8	
2. AMENDMENT/MODIFICATION NO. P00007		3. EFFECTIVE DATE See Block 16C		4. REQUISITION/PURCHASE REQ. NO. 192122FA000000011.50	
6. ISSUED BY 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		CODE 70CDCR		7. ADMINISTERED BY (If other than Item 6) 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)  GEO GROUP INC THE 4955 TECHNOLOGY WAY BOCA RATON FL 33431		(x)		9A. AMENDMENT OF SOLICITATION NO.	
				9B. DATED (SEE ITEM 11)	
		X		10A. MODIFICATION OF CONTRACT/ORDER NO. 70CDCR20D00000012 70CDCR20FR0000050	
CODE JMLKZZ1NL226		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 Decrease: (b) (3) (A), (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) FAR 4.804, Contract Closeout				
<b>E. IMPORTANT:</b> Contractor <input type="checkbox"/> is not. <input checked="" 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.)					
COR: (b) (6), (b) (7)(C)					
Phone: (830) 326- (b) (6), (b) (7)(C)					
Email: (b) (6), (b) (7)(C)@ice.dhs.gov					
COR: (b) (6), (b) (7)(C)					
Phone: 956-728- (b) (6), (b) (7)(C)					
Email: (b) (6), (b) (7)(C)@ice.dhs.gov					
ACOR: (b) (6), (b) (7)(C)					
Phone: (210) 283- (b) (6), (b) (7)(C)					
Email: (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)		15A. 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		STANDARD FORM 30 (REV. 10-83) Prescribed by GSA FAR (48 CFR) 53.243			

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000012/70CDCR20FR0000050/P00007	PAGE	OF
		2	8

NAME OF OFFEROR OR CONTRACTOR  
GEO GROUP INC THE

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>Contracting Officer: (b) (6), (b) (7)(C) Phone: (202) 732- (b) (6), (b) (7)(C) Email: (b) (6), (b) (7)(C)@ice.dhs.gov</p> <p>This modification is associated with Requisition 192122FAO00000011.50.</p> <p>The purpose of this modification is to de-obligate excess funds and closeout this contract. The parties agree as follows:</p> <p>1) All services/supplies have been received, inspected and accepted by the Government</p> <p>2) The Contactor releases the Government from any and all 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) Line Item 0001a is decreased by (b) (3) (A), (b) (4) from (b) (3) (A), (b) (4) to (b) (3) (A), (b) (4)</p> <p>5) Line Item 0002 is decreased by (b) (3) (A), (b) (4) from (b) (3) (A), (b) (4) to (b) (3) (A), (b) (4)</p> <p>6) Line Item 0003a is decreased by (b) (3) (A), (b) (4) from (b) (3) (A), (b) (4) to (b) (3) (A), (b) (4)</p> <p>7) Line Item 0003b is decreased by (b) (3) (A), (b) (4) from (b) (3) (A), (b) (4) to (b) (3) (A), (b) (4)</p> <p>8) Line Item 0004 is decreased by (b) (3) (A), (b) (4) from (b) (3) (A), (b) (4) to (b) (3) (A), (b) (4)</p> <p>The total obligated amount is decreased by (b) (3) (A), (b) (4) from (b) (3) (A), (b) (4) to (b) (3) (A), (b) (4)</p> <p>The total contract value is decreased by (b) (3) (A), (b) (4) from (b) (3) (A), (b) (4) to (b) (3) (A), (b) (4). This contract is closed.</p> <p>Discount Terms: Net (b) (3) (A)</p> <p>Period of Performance: 08/06/2020 to 08/05/2021</p> <p>Change Item 0001a to read as follows (amount shown is the obligated amount):</p> <p>0001a Furniture Needs This is a Firm Fixed Price Line Item</p> <p>Deobligate (b) (3) (A), (b) (4) from FFMS Item (b) (3) (A) MDL (b) (3) (A)</p> <p>Continued ...</p>				(b) (3) (A), (b) (4)

NAME OF OFFEROR OR CONTRACTOR  
GEO GROUP INC THE

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	Deobligate (b) (3) (A), (b) (4) from FFMS Item 4DL (b) (3) (A) Deobligate [REDACTED] from FFMS Item 4DL Deobligate [REDACTED] from FFMS Item 4DL Deobligate [REDACTED] from FFMS Item 4DL  The total obligated funding on this CLIN is decreased as follows: From: (b) (3) (A), (b) (4) By: [REDACTED] To: [REDACTED] Award Type: Firm-fixed-price Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD  Accounting Info: (b) (7)(E) Funded: (b) (3) (A), (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (3) (A), (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (3) (A), (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (3) (A), (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (3) (A), (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (3) (A), (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (3) (A), (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (3) (A), (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (3) (A), (b) (4) Continued ...				

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000012/70CDCR20FR0000050/P00007	PAGE 4	OF 8
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NAME OF OFFEROR OR CONTRACTOR  
GEO GROUP INC THE

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0002	<p>Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p> <p>Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p> <p>Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (3) (A), (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: 08/06/2020 - 08/05/2021</p> <p>Regular Rate: (b) (3) (A), (b) (4) Overtime Rate: (b) (3) (A), (b) (4)</p> <p>NOT-TO-EXCEED (NTE): (b) (3) (A), (b) (4) hours</p> <p>Deobligate (b) (3) (A), (b) (4) from FFMS Item (b) (3) (A), (b) (4) MDL (b) (3) (A), (b) (4)</p> <p>The total obligated funding on this CLIN is decreased as follows: From: (b) (3) (A), (b) (4) By: (b) (3) (A), (b) (4) To: (b) (3) (A), (b) (4)</p> <p>Award Type: Labor-hour Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p> <p>Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p> <p>Accounting Info: (b) (7)(E)</p> <p>Continued ...</p>				(b) (3) (A), (b) (4)

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000012/70CDCR20FR0000050/P00007	PAGE	OF
		5	8

NAME OF OFFEROR OR CONTRACTOR  
GEO GROUP INC THE

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0003a	<p>(b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p> <p>Change Item 0003a to read as follows (amount shown is the obligated amount):</p> <p>Base Period: Transportation Services - Labor PoP: 08/06/2020 - 08/05/2021</p> <p>Fixed Price: (b) (3) (A), (b) (4) /month</p> <p>NTE: (b) (3) (A), (b) (4) miles/year</p> <p>Deobligate (b) (3) (A), (b) (4) from FFMS Item (b) (3) (A), (b) (4) MDL (b) (3) (A), (b) (4)</p> <p>The total obligated funding on this CLIN is decreased as follows: From: (b) (3) (A), (b) (4) By: To:</p> <p>Award Type: Firm-fixed-price Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p> <p>Accounting Info:</p> <p>Continued ...</p>				(b) (3) (A), (b) (4)

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000012/70CDCR20FR0000050/P00007	PAGE	OF
		6	8

NAME OF OFFEROR OR CONTRACTOR  
GEO GROUP INC THE

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0003b	<p>(b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (3) (A), (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>PoP: 08/06/2020 - 08/05/2021</p> <p>Mileage Rate: (b) (3) (A), (b) (4)</p> <p>NTE: (b) (3) (A), (b) (4) miles/year</p> <p>Deobligate (b) (3) (A), (b) (4) from FFMS Item (b) (3) (A), (b) (4) MDL (b) (3) (A), (b) (4)</p> <p>Deobligate (b) (3) (A), (b) (4) from FFMS Item (b) (3) (A), (b) (4) MDL (b) (3) (A), (b) (4)</p> <p>Deobligate (b) (3) (A), (b) (4) from FFMS Item (b) (3) (A), (b) (4) MDL (b) (3) (A), (b) (4)</p> <p>The total obligated funding on this CLIN is decreased as follows:</p> <p>From: (b) (3) (A), (b) (4)</p> <p>By: (b) (3) (A), (b) (4)</p> <p>To: (b) (3) (A), (b) (4)</p> <p>Award type: Firm-fixed-price</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) (3) (A), (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Continued ...</p>				(b) (3) (A), (b) (4)

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000012/70CDCR20FR0000050/P00007	PAGE	OF
		7	8

NAME OF OFFEROR OR CONTRACTOR  
GEO GROUP INC THE

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0004	<p>(b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p> <p>Change Item 0004 to read as follows (amount shown is the obligated amount):</p> <p>Base Period: Detainee Work Program PoP: 08/06/2020 - 08/05/2021</p> <p>(b) (3) (A) Day</p> <p>NTE: (b) (3) (A), (b) (4)</p> <p>Deobligate (b) (3) (A), (b) (4) from FFMS Item (b) (3) (A) MDL (b) (3) (A)</p> <p>The total obligated funding on this CLIN is decreased as follows:</p> <p>From: (b) (3) (A), (b) (4)</p> <p>By:</p> <p>To:</p> <p>Award Type: Firm-fixed-price Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p> <p>Accounting Info:</p> <p>(b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p> <p>Continued ...</p>				(b) (3) (A), (b) (4)



CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000012/70CDCR20FR0000050/P00007	PAGE	OF
		8	8

NAME OF OFFEROR OR CONTRACTOR  
GEO GROUP INC THE

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	Accounting Info: (b) (7)(E) Funded: (b) (3) (A), (b) (4) Accounting Info: (b) (7)(E) Funded: (b) (3) (A), (b) (4)				

ORDER FOR SUPPLIES OR SERVICES						PAGE OF PAGES		
IMPORTANT: Mark all packages and papers with contract and/or order numbers.						1	12	
1. DATE OF ORDER 07/31/2020		2. CONTRACT NO. (If any) 70CDCR20D00000012		6. SHIP TO:				
3. ORDER NO. 70CDCR20FR0000050		4. REQUISITION/REFERENCE NO. 192120FA00000011.8		a. NAME OF CONSIGNEE  ICE ENFORCEMENT REMOVAL				
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 IMMIGRATION AND CUSTOMS ENFORCEMENT 801 I STREET NW (b) (6), (b) (7)(C)				
				c. CITY WASHINGTON		d. STATE DC	e. ZIP CODE 20536	
7. TO:				f. SHIP VIA				
a. NAME OF CONTRACTOR GEO GROUP INC THE				8. TYPE OF ORDER  <input type="checkbox"/> a. PURCHASE <input checked="" type="checkbox"/> b. DELIVERY  REFERENCE YOUR: 70CDCR20R0000001  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.				
b. COMPANY NAME								
c. STREET ADDRESS 4955 TECHNOLOGY WAY								
d. CITY BOCA RATON		e. STATE FL		f. ZIP CODE 33431				
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		14. GOVERNMENT B/L NO.		15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date)		16. DISCOUNT TERMS		
a. INSPECTION Destination		b. ACCEPTANCE Destination				Net (b) (3) (A)		
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: 612706465 COR: (b) (6), (b) (7)(C) Phone: (210) 283- (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:								17(i) GRAND TOTAL
a. NAME  DHS ICE								
b. STREET ADDRESS (or P.O. Box)  BURLINGTON FINANCE CENTER PO BOX 1620 ATTN ICE-ERODRO-FOD-FAO								
c. CITY WILLISTON								
				d. STATE VT	e. ZIP CODE 05495-1620			
22. UNITED STATES OF AMERICA BY (Signature)  (b) (6), (b) (7)(C)				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 CONTRACT NO.

07/31/2020 70CDCR20D00000012

ORDER NO.

70CDCR20FR0000050

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>Phone: (210) 231- (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: (202) 732- (b) (6), (b) (7)(C)</p> <p>Email: (b) (6), (b) (7)(C)@ice.dhs.gov</p> <p>There is (b) (3) (A), (b) (4) requisition associated with this Task Order: 192120FA00000011.8.</p> <p>This task order is being issued against Indefinite-Delivery Indefinite-Quantity (IDIQ) contract 70CDCR20D00000012 for Detention and Transportation Services at the South Texas ICE Processing Center located in Pearsall, Texas.</p> <p>Funding is in the total amount of (b) (3) (A), (b) (4). The total amount of the contract is increased:</p> <p>From: (b) (3) (A), (b) (4)</p> <p>By: (b) (3) (A), (b) (4)</p> <p>To: (b) (3) (A), (b) (4)</p> <p>The details for funding of each CLIN is as follows:</p> <p>1. Provide funding to CLIN 0001a in the total amount of (b) (3) (A), (b) (4). As a result, funding for CLIN 0001a has increased:</p> <p>From: (b) (3) (A), (b) (4)</p> <p>By: (b) (3) (A), (b) (4)</p> <p>To: (b) (3) (A), (b) (4)</p> <p>2. Provide funding to CLIN 0001b in the total amount of (b) (3) (A), (b) (4). As a result, funding for CLIN 0001b has increased:</p> <p>From: (b) (3) (A), (b) (4)</p> <p>By: (b) (3) (A), (b) (4)</p> <p>To: (b) (3) (A), (b) (4)</p> <p>3. Provide funding to CLIN 0002 in the</p> <p>Continued ...</p>					

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(b) (3) (A), (b) (4)

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**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 CONTRACT NO.

07/31/2020 70CDCR20D00000012

ORDER NO.

70CDCR20FR00000050

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>total amount of (b) (3) (A), (b) (4). As a result, funding for CLIN 0002 has increased:</p> <p>From: (b) (3) (A), (b) (4)</p> <p>By: (b) (3) (A), (b) (4)</p> <p>To: (b) (3) (A), (b) (4)</p> <p>4. Provide funding to CLIN 0003a in the total amount of (b) (3) (A), (b) (4). As a result, funding for CLIN 0003 has increased:</p> <p>From: (b) (3) (A), (b) (4)</p> <p>By: (b) (3) (A), (b) (4)</p> <p>To: (b) (3) (A), (b) (4)</p> <p>5. Provide funding to CLIN 0003b in the total amount of (b) (3) (A), (b) (4). As a result, funding for CLIN 0004 has increased:</p> <p>From: (b) (3) (A), (b) (4)</p> <p>By: (b) (3) (A), (b) (4)</p> <p>To: (b) (3) (A), (b) (4)</p> <p>6. Provide funding to CLIN 0004 in the total amount of (b) (3) (A), (b) (4). As a result, funding for CLIN 0005 has increased:</p> <p>From: (b) (3) (A), (b) (4)</p> <p>By: (b) (3) (A), (b) (4)</p> <p>To: (b) (3) (A), (b) (4)</p> <p>The Period of Performance for this task order is currently from 08/06/2020 to 08/05/2020 which matches the base period of IDIQ 70CDCR20D00000012.</p> <p>Notwithstanding the period of performance indicated in this task order, 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 Continued ...</p>					

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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

CONTRACT NO.

07/31/2020

70CDCR20D00000012

ORDER NO.

70CDCR20FR0000050

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
0001a	<p>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. Period of Performance: 08/06/2020 to 08/05/2021</p> <p>Furniture Needs This is a Firm Fixed Price Line Item</p> <p>The amount of this CLIN has increased: Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p> <p>Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p> <p>Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p> <p>Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p> <p>Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p>				(b) (3) (A), (b) (4)	
0001b	<p>Base Period: Detention Services PoP: 08/06/2020 - 08/05/2021</p> <p>Tier (b) (3) (A), (b) (4)</p> <p>Continued ...</p>				(b) (3) (A), (b) (4)	

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**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

CONTRACT NO.

07/31/2020

70CDCR20D00000012

ORDER NO.

70CDCR20FR0000050

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
0002	<p>Tier (b) (3) (A), (b) (4) (b) (3) (A), (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) (3) (A), (b) (4)</p> <p>Base Period: On-Call Stationary Guard Services</p> <p>PoP: 08/06/2020 - 08/05/2021</p> <p>Regular Rate: (b) (3) (A), (b) (4)</p> <p>Overtime Rate: (b) (3) (A), (b) (4)</p> <p>NOT-TO-EXCEED (NTE): (b) (3) (A), (b) (4) hours</p> <p>Product/Service Code: S206</p> <p>Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p>				(b) (3) (A), (b) (4)	
0003a	<p>Base Period: Transportation Services - Labor</p> <p>PoP: 08/06/2020 - 08/05/2021</p> <p>Fixed Price: (b) (3) (A), (b) (4) month</p> <p>NTE: (b) (3) (A), (b) (4) miles/year</p> <p>Product/Service Code: S206</p> <p>Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p>				(b) (3) (A), (b) (4)	
0003b	<p>Base Period: Transportation Services - Continued ...</p>				(b) (3) (A), (b) (4)	

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

PAGE NO

6

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

DATE OF ORDER CONTRACT NO.

07/31/2020 70CDCR20D00000012

ORDER NO.

70CDCR20FR00000050

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>Mileage Rate PoP: 08/06/2020 - 08/05/2021</p> <p>Mileage Rate: (b) (3) (A), (b) (4)</p> <p>NTE: (b) (3) (A), (b) (4) miles/year</p> <p>Product/Service Code: S206</p> <p>Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p> <p>Accounting Info: (b) (7)(E)</p> <p>Funded: (b) (3) (A), (b) (4)</p>					
0004	<p>Base Period: Detainee Work Program PoP: 08/06/2020 - 08/05/2021</p> <p>(b) (3) (A) Day</p> <p>NTE: (b) (3) (A), (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) (3) (A), (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 Continued ...</p>	(b) (3) (A), (b) (4)	(b) (3) (A)	(b) (3) (A), (b) (4)	(b) (3) (A), (b) (4)	

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(b) (3) (A), (b) (4)

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**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

CONTRACT NO.

07/31/2020

70CDCR20D00000012

ORDER NO.

70CDCR20FR0000050

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>[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> <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: ICE-ERO-FOD-FAO</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. Note: the Service Providers or Contractors Dunn and Bradstreet (D&amp;B) DUNS Number must be registered in the System for Award</p> <p>Continued ...</p>					

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(b) (5), (A), (b) (4)

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

PAGE NO

8

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

DATE OF ORDER

CONTRACT NO.

07/31/2020

70CDCR20D00000012

ORDER NO.

70CDCR20FR0000050

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>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>(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>Continued ...</p>					

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

(b) (3) (A), (B) (4)

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**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 CONTRACT NO.

07/31/2020 70CDCR20D00000012

ORDER NO.

70CDCR20FR0000050

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<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 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> </ul> <p>Continued ...</p>					

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**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.

07/31/2020

70CDCR20D00000012

ORDER NO.

70CDCR20FR0000050

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>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> <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: Continued ...</p>					

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

PAGE NO

11

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

DATE OF ORDER

CONTRACT NO.

07/31/2020

70CDCR20D00000012

ORDER NO.

70CDCR20FR0000050

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>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>(b) (5) (A), (b) (6) 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>Continued ...</p>					

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**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.

07/31/2020

70CDCR20D00000012

ORDER NO.

70CDCR20FR0000050

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<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 1-877-491-6521 or by e-mail at (b) (7)(E)@ice.dhs.gov.</p>					

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<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. 192120FAO00000011.10	
5. PROJECT NO. (If applicable)		6. ISSUED BY CODE 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)  GEO GROUP INC THE 4955 TECHNOLOGY WAY BOCA RATON FL 33431		(x)		9A. AMENDMENT OF SOLICITATION NO.	
				9B. DATED (SEE ITEM 11)	
		x		10A. MODIFICATION OF CONTRACT/ORDER NO. 70CDCR20D00000012 70CDCR20FR0000050	
CODE 6127064650000		FACILITY CODE		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)

Net Increase:

(b) (3) (A), (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.
X	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)

**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: 612706465

COR: (b) (6), (b) (7)(C)

Phone: (210) 283- (b) (6), (b) (7)(C)

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

COR: (b) (6), (b) (7)(C)

Phone: (210) 231- (b) (6), (b) (7)(C)

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

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

Phone: (202) 732- (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) (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. UN (b) (6), (b) (7)(C) S OF AMERICA (b) (6), (b) (7)(C)	16C. DATE SIGNED 09/15/2020
(Signature of person authorized to sign)		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 70CDCR20D00000012/70CDCR20FR0000050/P00001		PAGE 2	OF 3
NAME OF OFFEROR OR CONTRACTOR GEO GROUP INC THE					
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>There is (b) (3) (A), (b) (4) requisition associated with this Task Order: 192120FA000000011.10.</p> <p>This modification provides additional funding provided in the amount of (b) (3) (A), (b) (4). The total amount of the contract is increased:</p> <p>From: (b) (3) (A), (b) (4) By: To:</p> <p>The details for funding of each CLIN is as follows:</p> <p>1. Provide funding to CLIN 0001b in the total amount of (b) (3) (A), (b) (4). As a result, funding for CLIN 0001b has increased:</p> <p>From: (b) (3) (A), (b) (4) By: To:</p> <p>The Period of Performance for this task order is currently from 08/06/2020 to 08/05/2020 which matches the base period of IDIQ 70CDCR20D00000012.</p> <p>Notwithstanding the period of performance indicated in this task order, 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) (3) (A)</p> <p>Accounting Info: (b) (7)(E)</p> <p>Period of Performance: 08/06/2020 to 08/05/2021</p> <p>Change Item 0001b to read as follows(amount shown Continued ...</p>				

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR20D00000012/70CDCR20FR0000050/P00001	PAGE	OF
		3	3

NAME OF OFFEROR OR CONTRACTOR  
GEO GROUP INC THE

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0001b	<p>is the obligated amount):</p> <p>Base Period: Detention Services PoP: 08/06/2020 - 08/05/2021</p> <p>Tier (b) (3) (A), (b) (4)</p> <p>Tier (b) (3) (A), (b) (4)</p> <p>The value of this CLIN increases:</p> <p>From: (b) (3) (A), (b) (4)</p> <p>By:</p> <p>To:</p> <p>Product/Service Code: S206</p> <p>Product/Service Description: HOUSEKEEPING- GUARD</p>				(b) (3) (A), (b) (4)