AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT

1. CONTRACT ID CODE

2. AMENDMENT/MODIFICATION NO.	3. EFFECTIVE DATE	4. REQUISITION/PURCHASE REQ. NO.	5. PROJECT NO. (If applicable)
P00012	See Block 16C		

6. ISSUED BY CODE 70CDCR

DETENTION COMPLIANCE AND REMOVALS
U.S. Immigration and Customs Enforcement
Office of Acquisition Management
500 12th St SW
WASHINGTON DC 20024

7. ADMINISTERED BY (If other than Item 6) CODE ICE/DCR

ICE/Detention Compliance & Removals
Immigration and Customs Enforcement
Office of Acquisition Management
500 12th St SW
Washington DC 20024

8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)

WEBB COUNTY OF
WEBB CNTY SHERIFFS OFC ADMIN
902 VICTORIA ST
LAREDO TX 780404456

CODE RGDEVLDBFWD8 FACILITY CODE

(x) 9A. AMENDMENT OF SOLICITATION NO.

9B. DATED (SEE ITEM 11)

X 10A. MODIFICATION OF CONTRACT/ORDER NO.
70CDCR18DIG000010
70CDCR24FIGR00012

10B. DATED (SEE ITEM 13)
12/18/2023

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 electronic communication 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 letter or electronic communication, provided each letter or electronic communication makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified.

12. ACCOUNTING AND APPROPRIATION DATA (If required)
See Schedule

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

CHECK ONE	
	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.
	B. THE ABOVE NUMBERED CONTRACT/ORDER IS MODIFIED TO REFLECT THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation data, 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) IAW 70CDCR18DIG000010

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.)

UEI: RGDEVLDBFWD8

COR: Sandra Solis
Phone: 956-206-3760
Email: Sandra.A.Solis@ice.dhs.gov

ALTERNATE COR: Jose Garcia Longoria
Phone: 956-389-7806
Email: JoseGarcia.Longoria@ice.dhs.gov

ALTERNATE COR: Alfonso De Leon III
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)	
		BRITTANY TOBIAS	
15B. CONTRACTOR/OFFEROR	15C. DATE SIGNED	16B. UNITED STATES OF AMERICA	16C. DATE SIGNED
Judge Tano Tijerina (Signature of person authorized to sign)	10/4/24	Brittany Tobias (Signature of Contracting Officer)	Digitally signed by BRITTANY M TOBIAS Date: 2024.09.30 16:19:18 -04'00'

Previous edition unusable

STANDARD FORM 30 (REV. 11/2016)
Prescribed by GSA FAR (48 CFR) 53.243

FILED October 7th 20 24 @ 12:00 p.m.
MARGIE RAMIREZ IBARRA
COUNTY CLERK, WEBB COUNTY, TEXAS
BY __________ DEPUTY

NAME OF OFFEROR OR CONTRACTOR
WEBB COUNTY OF

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	Phone: 956-389-7187 Email: alfonso.a.de-leoniii@ice.dhs.gov Contractor POC: Natasha Metcalf Phone: Office 615-263-3290 | Mobile 615-804-5968 Email: natasha.metcalf@corecivic.com Contracting Officer: Brittany Tobias Phone: (202) 878-1666 Email: brittany.tobias@ice.dhs.gov There are no requisitions associated with this modification. The purpose of this modification is to: 1. Update CLIN 0001 and CLIN 0003 rates to reflect the REA approved 70CDCR18DIG000010 P00030. See below for details. For billing purposes, the new rates as indicated below shall take effect 09/15/2024. 2. A retroactive payment in the total amount of $30,485.75 for CLIN 0001 is approved to satisfy the increases between 07/16/2024 - 09/14/2024. 3. The total obligated funding of this task order remains unchanged at $12,444,529.49. For inquiries regarding ICE detainee information or ICE's usage of this agreement, there shall be no public disclosures regarding this agreement made by the Provider (or any subcontractors) without review and approval of such disclosure by ICE. 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. Continued ...				

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR18DIG000010/70CDCR24FIGR00012/P00012	PAGE 3	OF 5

NAME OF OFFEROR OR CONTRACTOR
WEBB COUNTY OF

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	--- Discount Terms: Net 30 Period of Performance: 12/16/2023 to 10/14/2024 Change Item 0001 to read as follows(amount shown is the obligated amount):				
0001	Detention Services Effective 9/15/2023: CLIN 0001: Tier 1: 1-300: $115.78 Tier 2: 301-400: $68.69 Effective 1/1/2024: CLIN 0001: Tier 1: 1-300: $115.92 Tier 2: 301-400: $68.69 Effective 03/16/2024: CLIN 0001: Tier 1: 1-300: $129.99 Tier 2: 301-400: $27.00 Effective 09/15/2024: Tier 1: 1-300: $131.52 Tier 2: 301-404: $27.00 The total obligated funding on this CLIN remains unchanged at $12,178,729.49. Accounting Info: ERODETN-J04 E1 31-12-00-000 18-62-0900-00-00-00-00 GE-25-72-00- ------ --- 000000 Funded: $0.00 Accounting Info: ERODETN-J04 E1 31-12-00-000 18-62-0900-00-00-00-00 GE-25-72-00- ------ --- 000000 Funded: $0.00 Accounting Info: ERODETN-J04 E1 31-12-00-000 18-62-0900-00-00-00-00 GE-25-72-00- ------ --- 000000 Funded: $0.00 Accounting Info: Continued ...				0.00

NAME OF OFFEROR OR CONTRACTOR
WEBB COUNTY OF

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	ERODETN-J04 E1 31-12-00-000 18-62-0900-00-00-00-00 GE-25-72-00- ------ --- 000000 Funded: $0.00 Accounting Info: ERODETN-J04 E1 31-12-00-000 18-62-0900-00-00-00-00 GE-25-72-00- ------ --- 000000 Funded: $0.00 Accounting Info: ERODETN-J04 E1 31-12-00-000 18-62-0900-00-00-00-00 GE-25-72-00- ------ --- 000000 Funded: $0.00 Accounting Info: ERODETN-J04 E1 31-12-00-000 18-62-0900-00-00-00-00 GE-25-72-00- ------ --- 000000 Funded: $0.00 Accounting Info: ERODETN-J04 E1 31-12-00-000 18-62-0900-00-00-00-00 GE-25-72-00- ------ --- 000000 Funded: $0.00 Accounting Info: ERODETN-J04 E1 31-12-00-000 18-62-0900-00-00-00-00 GE-25-72-00- ------ --- 000000 Funded: $0.00 Accounting Info: ERODETN-J04 E1 31-12-00-000 18-62-0900-00-00-00-00 GE-25-72-00- ------ --- 000000 Funded: $0.00 Change Item 0003 to read as follows(amount shown is the obligated amount):				
0003	Stationary Guard Services Effective July 1, 2023, the guard rate is $38.83/hr Effective September 15, 2024, the guard rate is: $40.24/hr The total amount on this CLIN remains unchanged at $236,000.00. Continued ...				0.00

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR18DIG000010/70CDCR24FIGR00012/P00012	PAGE 5	OF 5

NAME OF OFFEROR OR CONTRACTOR
WEBB COUNTY OF

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	Accounting Info: ERODETN-J04 E1 31-12-00-000 18-62-0900-00-00-00-00 GE-25-70-00- ------ --- 000000 Funded: $0.00 Accounting Info: ERODETN-J04 E1 31-12-00-000 18-62-0900-00-00-00-00 GE-25-70-00- ------ --- 000000 Funded: $0.00 Accounting Info: ERODETN-J04 E1 31-12-00-000 18-62-0900-00-00-00-00 GE-25-70-00- ------ --- 000000 Funded: $0.00 Accounting Info: ERODETN-J04 E1 31-12-00-000 18-62-0900-00-00-00-00 GE-25-70-00- ------ --- 000000 Funded: $0.00 Accounting Info: ERODETN-J04 E1 31-12-00-000 18-62-0900-00-00-00-00 GE-25-70-00- ------ --- 000000 Funded: $0.00 Accounting Info: ERODETN-J04 E1 31-12-00-000 18-62-0900-00-00-00-00 GE-25-70-00- ------ --- 000000 Funded: $0.00 Accounting Info: ERODETN-J04 E1 31-12-00-000 18-62-0900-00-00-00-00 GE-25-70-00- ------ --- 000000 Funded: $0.00				

ATTESTED:

Margie Ramirez-Ibarra

Margie Ramirez-Ibarra
Webb County Clerk