AMENDMENT OF SOLICITATION/MODIFIC	ATION OF CONTRACT		CONTRACT ID CODE		PAGE OF	PAGES 3					
2. AMENDMENT/MODIFICATION NO. 3. EFFECTIVE DATE			EQUISITION/PURCHASE REQ. NO.	5. PR	OJECT NC). (If applicable)					
P00010	See Block 16C	192	118FA00000012								
6. ISSUED BY CODE	ICE/DCR	7. A	DMINISTERED BY (If other than Item 6)	CODE							
ICEDETENTION COMPLIANCE REM IMMIGRATION AND CUSTOMS ENFO OFFICE OF ACQUISITION MANAGE 801 I STREET NW SUITE 930 WASHINGTON DC 20536											
8. NAME AND ADDRESS OF CONTRACTOR (No., street	, county, State and ZIP Code)	(x) S	A. AMENDMENT OF SOLICITATION NO.								
WILLIAMSON COUNTY OF ATTN DAN GATTIS 710 S MAIN STREET SUITE 301			9B. DATED (SEE ITEM 11)								
GEORGETOWN TX 78626			0A. MODIFICATION OF CONTRACT/ORDER N DROIGSA-10-0002, HSCEDM-17-F-IG022	10.							
	I FACILITY CODE	- 1	0B. DATED (SEE ITEM 13)								
CODE 0769300490000	FACILITY CODE		01/10/2017		100000000000000000000000000000000000000						
The above numbered solicitation is amended as set for	11. THIS ITEM ONLY APPLIES TO				is not e						
separate letter or telegram which includes a reference THE PLACE DESIGNATED FOR THE RECEIPT OF 0 virtue of this amendment you desire to change an offereference to the solicitation and this amendment, and 12. ACCOUNTING AND APPROPRIATION DATA (If regulated See Schedule	to the solicitation and amendment num DEFERS PRIOR TO THE HOUR AND D r already submitted, such change may l is received prior to the opening hour and uired)	bers. ATE S be mad d date :	PECIFIED MAY RESULT IN REJECTION OF YO le by telegram or letter, provided each telegram or	BE RE UR OF or letter	CEIVED AT FER If by makes						
CHECK ONE A. THIS CHANGE ORDER IS ISSUED FORDER NO. IN ITEM 10A.	PURSUANT TO: (Specify authority) THE	CHAI	NGES SET FORTH IN ITEM 14 ARE MADE IN T	HE CO	NTRACT						
B. THE ABOVE NUMBERED CONTRAC appropriation date, etc.) SET FORTH			DMINISTRATIVE CHANGES (such as changes of FAR 43.103(b).	in payin	ng office,						
C. THIS SUPPLEMENTAL AGREEMEN	I IS ENTERED INTO PURSUANT TO A	UHU	RITT OF.								
D. OTHER (Specify type of modification	and authority)										
X Correct Bed Day Rate	IAW DROIGSA-10-0002	2									
	x is required to sign this document ar		n1 copies to the issuin	g office							
14.DESCRIPTION OF AMENDMENT/MODIFICATION DUNS Number: 076930049 Field Office and COR: Nancy Phone: 210-283-4479 Email: Nancy.Kennamer@ice.dh	Kennamer 210-283-447		g solicitation/contract subject matter where feasib	ble.)							
Contractor POC: Dan Gattis Phone: 512-943-1550 Email: dgattis@wilco.org											
Contracting Officer: Trina F Phone: 202-732-2929 Continued Except as provided herein, all terms and conditions of the		_									
15A. NAME AND TITLE OF SIGNER (Type or print)	,		A. NAME AND TITLE OF CONTRACTING OFFIC	UER (T)	ype or print)					
15B. CONTRACTOR/OFFEROR	15C. DATE SIGNED 1-30-18		RINA FISHER B. UNITED STATES OF AMERICA JUNE 15 Contracting Officers		_ 16	C. 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 DROIGSA-10-0002, /HSCEDM-17-F-IG022/P00010
 PAGE DROIGSA-10-0002, /HSCEDM-17-F-IG022/P00010

NAME OF OFFEROR OR CONTRACTOR
WILLIAMSON COUNTY OF

TEM NO.	SUPPLIES/SERVICES	QUANTITY		UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	Email: Trina.Fisher@ice.dhs.gov				
	Dalling Catal				
	Contract Specialist: Rubina Satar Phone: 202-732-2682				
	Email: Rubina.Satar@ice.dhs.gov				
	Email: Rubina.Salareice.dns.gov				
	The purpose of this modification is to make				
	corrections to modification P00007. The				
	corrections are:				
	array balandari (canoni dandari) (canoni da				
	1) Correct the new bed day rate as a result of				
	the REA from \$109.94 to \$109.68.				
	2) Correct the effective date of the REA to				
	3/1/17.				
	3) Correct the amount of back pay owed as a				
	result of the REA from \$808,388.82 to \$578,499.68.				
	4) Remove the incorporation of the new Wage				
	Determination number 2015-5215, Revision 5, in				
	its entirety.				
	As a result of this modification, the total value				
	of this task order is unchanged:				
	FROM: \$19,948,612.50				
	BY: \$0.00				
	TO: \$19,948,612.50				
	Exempt Action: N Sensitive Award: SPII				
	Delivery: 30 Days After Award				
	Discount Terms:				
	Net 30				
	Delivery Location Code: ICE/ERO				
	ICE ENFORCEMENT REMOVAL				
	IMMIGRATION AND CUSTOMS ENFORCEMENT				
	801 I STREET NW				
	SUITE 900				
	WASHINGTON DC 20536				
	FOB: Destination				
	Period of Performance: 01/01/2017 to 12/31/2017				
	Change Item 0001a to read as follows(amount shown				
	is the total amount):				
001a	Detainee Housing @ \$109.68 per man day.				4,253,028.
	As a result of this modification, funding for				
	this CLIN is unchanged:				
	FROM: \$4,253,028.90				
	BY: \$0.00				
	To: \$4,253,028.90				
	Continued				

CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED

DROIGSA-10-0002, /HSCEDM-17-F-IG022/P00010

REFERENCE NO. OF DOCUMENT BEING CONTINUED

3 3

NAME OF OFFEROR OR CONTRACTOR
WILLIAMSON COUNTY OF

EM NO.	SUPPLIES/SERVICES	QUANTITY	1 1	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	Product/Service Code: s206				
	MI 400 100 100 100 100 100 100 100 100 100				
	Accounting Info:				
	ERODETN-J03 UP 31-12-00-000 18-62-0700-40-50-00-00 GE-25-72-00	l			
	000000 Funded: \$0.00				
	Accounting Info:				
	ERODETN-J03 E1 31-12-00-000				
	18-62-0700-40-50-00-00 GE-25-72-00	1			
	000000				
	Funded: \$0.00				
	Accounting Info:				
	ERODETN-J03 E1 31-12-00-000				
	18-62-0700-40-50-00-00 GE-25-72-00				
	000000				
	Funded: \$0.00				
	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	1			
	obligated to reimburse the service provider in				
	excess of the amount allotted to those item(s)	1			
	for performance beyond the funding allotted.				
		1			
	All other terms and conditions are unchanged.				
		1			
			11		
			1 1		
			1 1		
			1		
	3	1			
	1	1	1 1	1	