		ORDE	R FOR SU	PPLIES OR SE	RVI	CES					PAGE (OF PAGES	
IMPORTANT:	Mark all packages and										1		10
1. DATE OF OR	DER 2. CONTRACT	NO. (If any) .1-D-00003							6. SHIP TO:				
05/02/20		.1-D-00003				a. NAME (OF CC	NSIGNEE					
3. ORDER NO. 70CDCR18	FR0000052	4. R (b)(7		REFERENCE NO.]	ICE E	NFO:	RCEMENT REMO	VAL				
5. ISSUING OFFICE (Address correspondence to) ICEDETENTION COMPLIANCE REMOVALS				1	RAT	RESS ION AND CUSTO REET NW	MS ENFOR	CEM	MENT				
IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW SUITE (b)(6)				SUITE	(b)(6) (b)(7)	,							
WASHINGT	ON DC 20536					c. CITY WASHI	NGT	ON			d. STATE DC	e. ZIP CO 20536	DDE
7. TO: GEO	GROUP INC THE	1				f. SHIP VI	A						
	P INC THE							8. TYF	PE OF ORDER				
b. COMPANY N	AME					a. PUI	RCHA	SE		X	b. DELIVERY	,	
c. STREET ADD 621 NW 5	RESS 3RD ST STE(b)(6)					REFEREN	NCE Y	OUR:			ept for billing i		on the
										subj	ject to instructi	tions contained on	
								ne following on the terms		issu	side only of th ed subject to t	the terms ar	nd
d. CITY BOCA RATO	ON		e. STATE	f. ZIP CODE 334878242		this order	and or	pecified on both sides of the attached sheet, if elivery as indicated.			ditions of the a tract.	ibove-numb	ered
9. ACCOUNTING	GAND APPROPRIATION (DATA						NING OFFICE RCEMENT REMO	VAL				
11. BUSINESS	CLASSIFICATION (Check					-				1	2. F.O.B. POI	NT	
a. SMALL	X b. OTHER TH.	AN SMALL /OMEN-OWNED SN	c. DISADVA		. WON	MEN-OWNED)	e. HUBZone		D	estinat	ion	
	_	GIBLE UNDER THE			h. El	DWOSB							
	13. PLACE (OF		14. GOVERNMENT	B/L NO	D.		15. DELIVER TO F.O.B.		Т	16. DISCOU	NT TERMS	
a. INSPECTION Destinat		ACCEPTANCE estination						ON OR BEFORE (Date 30 Days Afte	r Award			Ne	t 30
				17. SCHEDULE	(See	reverse for	Rejec	ions)		_			
ITEM NO.		SUPPLIES OR SE	ERVICES			QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	I	DUNT	-	ACC	ANTITY EPTED (g)
	DUNS Number: (b)(6); (b)(7)(0 ACOR:	612706465 C) 720	-875 -(h) (b)(6):		(0)		(0)		(')			(9)
	Procurement P	OC: (b)(6); (b)(7	(0)	313-446- <mark>(b)(</mark>	3);								
I	This is a new Continued	task orde	r to co	ntinue									
	18. SHIPPING POINT			19. GROSS SHIPP	ING W	/EIGHT		20. INVOICE NO.					17(h) TOTAL (Cont.
			2	21. MAIL INVOICE TO):								pages)
SEE BILLING	a. NAME	DHS IC	Œ						\$1,3	61,	148.43		
INSTRUCTIONS ON REVERSE	b. STREET ADDRESS (or P.O. Box)			NANCE CENTI	ΞR								470
	(6. 1. 16. 26.)	PO BOX	(1620 CE-EROF	'OD-FDN									17(i) GRAND
		711114 2	.ch bkor	OD I DIV					61 0	C 1	140 42		TOTAL
c. CITY				d. STA		e. ZIP CODE	\$1,361,148.43			—			
	WILLISTON	M 1/01 // 1/21	<u>(0) 1</u>	0		VT		05495-1620	I				
22. UNITED S	STATES OF A BY (Signature)	(b)(6); (b)(7)	(C)	Digitally	signe	d by(b)(6);	23. NAME (Typed) (h)(6): (h)(7)(0	(:)				
	/			Date: 20	18.05.	02 20:36:52	-04'0	0'TITLE: CONTRACTING	ORDERING OF	FICE	R		

AUTHORIZED FOR LOCAL REPRODUCTION PREVIOUS EDITION NOT USABLE

PAGE NO

2

IMPORTANT: Mark all packages and papers with contract and/or order numbers. DATE OF ORDER CONTRACT NO. HSCEDM-11-D-00003 70CDCR18FR0000052 05/02/2018 SUPPLIES/SERVICES ITEM NO. QUANTITY UNIT UNIT AMOUNT QUANTITY ORDERED PRICE ACCEPTED (a) (d) (f) detention and transportation services for ICE detainees at the Aurora, Colorado CDF effective 9/16/2018. The previous task order number was HSCEDM-17-J-00031. Exempt Action: Y Sensitive Award: SPII Period of Performance: 09/16/2018 to 09/15/2019 (b)(4)3001A GUARANTEED BEDS 854,122.50 Accounting Info: (b)(7)(E)Funded: \$854,122.50 (b)(4)242,686.05 3001B VARIABLE BEDS Accounting Info: (b)(7)(E)Funded: \$242,686.05 (b)(4)3002A TRANSPORTATION (FLAT RATE) -83,128.80 Accounting Info: (b)(7)(E)Funded: \$83,128.80 (b)(4)3002B CLIN 3002B - FUEL PASS THRU 3,000.00 Accounting Info: (b)(7)(E) Funded: \$3,000.00 3003 REMOTE CUSTODY 15,107.22 (b)(4)Accounting Info: (b)(7)(E)Continued ...

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

\$1,198,044.57

	ORDER FOR SUPPLIES OR SER	VICES		PAGE NO	
	SCHEDULE - CONTINUATION	ON		3	
	T: Mark all packages and papers with contract and/or order numbers.				
05/02/2				ERNO. CDCR18FR0000052	
ITEM NO.	SUPPLIES/SERVICES	QUANTITY UNIT	UNIT	AMOUNT	QUANTITY
(a)	(b)	ORDERED (d)	PRICE (e)	(f)	ACCEPTED (g)
	Funded: \$15,107.22				
		(1-)(4)		(b)(4)	٦
3004	DETAINEE WAGES	(b)(4)		(0)(1)	
	Accounting Info:				
	(b)(7)(E)				
	Funded: (b)(4)				
3005	MEDICAL SERVICES	(b)(4)		116,630.26	
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$116,630.26				
3005A	MEDICAL SERVICES - TIER 1 (b)(4)	(b)(4)		8,100.00	
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$8,100.00				
3005B	MEDICAL SERVICES - TIER 2 (b)(4)	(b)(4)		7,620.00	
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$7,620.00				
3005C	MEDICAL SERVICES - TIER 3 (b)(4)	(b)(4)		22,656.60	
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$22,656.60				
3008	TELE-RADIOLOGY	(b)(4)		6,500.00	
	Accounting Info:				
	Continued				
	TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))			\$163,103.86	

ORDER FOR SUPPLIES OR SERVICES

PAGE NO

SCHEDULE - CONTINUATION IMPORTANT: Mark all packages and papers with contract and/or order numbers. DATE OF ORDER CONTRACT NO. 70CDCR18FR0000052 05/02/2018 HSCEDM-11-D-00003 ITEM NO. SUPPLIES/SERVICES QUANTITY UNIT AMOUNT QUANTITY ORDERED PRICE ACCEPTED (b)(7)(E) (b)(7)(E)Funded: \$6,500.00 Invoice Instructions: ICE - ERO Contracts Service Providers/Contractors shall use these procedures when submitting an invoice. 1. Invoice Submission: Invoices shall be submitted in a ".pdf" format in accordance with the contract terms and conditions [Contract Specialist and Contracting Officer to disclose if on a monthly basis or other agreed to terms"] via email, United States Postal Service (USPS) or facsimile as follows: Email: a) (b)(6); (b)(7)(C); (b)(7)(E)Contracting Officer Representative (COR or Government Point of Contact (GPOC) Contract Specialist/Contracting Officer Each email shall contain only (1) invoice and the invoice number shall be indicated on the subject line of the email. USPS: b) DHS, ICE Financial Operations - Burlington P.O. Box 1620 Williston, VT 05495-1620 ATTN: ICE-ERO/FOD-FDN The Contractors Data Universal Numbering System (DUNS) Number must be registered and active in the System for Award Management (SAM) at https://www.sam.gov prior to award and shall be notated on every invoice submitted to ensure prompt payment Continued ... \$0.00 TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))

PAGE NO

5

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

 DATE OF ORDER
 CONTRACT NO.

 ORDER NO.

M NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT	QUANTITY
(a)	(b)	(c)	(d)	(e)	(f)	(g)
	provisions are met. The ICE program office					
	identified in the task order/contract shall					
	also be notated on every invoice.					
	c) Facsimile:		l			
	Alternative Invoices shall be submitted to:					
	(802) -288(b)(6); (b)(7)(C)					
	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&B) DUNS Number must					
	be registered in the System for Award					
	Management (SAM) at https://www.sam.gov					
	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.					
	2. Content of Invoices: Each invoice shall					
	contain the following information in					
	accordance with 52.212-4 (g), as					
	applicable:					
	(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;					
	(ii). Dunn and Bradstreet (D&B) DUNS Number;					
	(iii). Invoice date and invoice number;					
	(iv). Agreement/Contract number, contract					
	line item number and, if applicable, the					
	order number;					
	Continued					
	TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))	<u> </u>	l		\$0.00	<u> </u>

PAGE NO

6

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

DATE OF ORDER CONTRACT NO. ORDER NO.

05/02/2018 HSCEDM-11-D-00003 70CDCR18FR0000052

EM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT	AMOUNT	QUANTITY
(a)	(b)	ORDERED (c)	(d)	PRICE (e)	(f)	ACCEPTED (g)
						ĺ
	(v). Description, quantity, unit of					
	measure, unit price, extended price and					
	period of performance of the items or					
	services delivered;					
	(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;					
	(vii). Terms of any discount for prompt					
	payment offered;					
	(viii). Remit to Address;					
	(ix). Name, title, and phone number of					
	person to resolve invoicing issues;					
	(x). ICE program office designated on					
	order/contract/agreement and					
	(xi). Mark invoice as "Interim" (Ongoing					
	performance and additional billing					
	expected) and "Final" (performance complete					
	and no additional billing)					
	(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.					
	nanagemene:					
	3. Invoice Supporting Documentation. To					
	ensure payment, the vendor must submit					
	supporting documentation which provides					
	substantiation for the invoiced costs to		l			
	the Contracting Officer Representative		l			
	(COR) or Point of Contact (POC) identified		ĺ			
	in the contract. Invoice charges must		l			
	align with the contract CLINs. Supporting					
	documentation is required when guaranteed					
	minimums are exceeded and when allowable					
	costs are incurred. Details are as					
	Continued					
	TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))		<u> </u>	I	\$0.00	1

PAGE NO

7

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

DATE OF ORDER CONTRACT NO. ORDER NO.

05/02/2018 HSCEDM-11-D-00003 70CDCR18FR0000052

EM NO.	SUPPLIES/SERVICES	QUANTITY		UNIT	AMOUNT	QUANTITY
(a)	(b)	ORDERED (c)	(d)	PRICE (e)	(f)	ACCEPTEI (g)
	follows:					
			l			
	(i). Guaranteed Minimums. If a guaranteed		l			
	minimum is not exceeded on a CLIN(s) for		l			
	the invoice period, no supporting					
	documentation is required. When a					
	quaranteed minimum is exceeded on a CLIN					
	(s) for the invoice period, the Contractor		l			
	is required to submit invoice supporting		l			
	documentation for all detention services		l			
	provided during the invoice period which					
	provides the information described below:					
	a. Detention Bed Space Services					
	Bed day rate;		l			
	 Detainees check-in and check-out dates; 		l			
	• Number of bed days multiplied by the be	d	l			
	day rate;		l			
	Name of each detainee;		l			
	Detainees identification information					
	(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		l			
	documentation substantiating the costs		l			
	and/or reflecting the established price in		l			
	the contract and shall be submitted in .pdf		l			
	format:					
	a. Detention Bed Space Services. For					
	detention bed space CLINs without a GM, the					
	supporting documentation must include:					
	Bed day rate;					
	Bed day rate;Detainees check-in and check-out dates;					
	 Number of bed days multiplied by the be 	4				1
	day rate;	۲				
	Name of each detainee;					
	Detainees identification information					
	Detainees identification information					
	b. Transportation Services: For					
	transportation CLINs without a GM, the					
	Continued					1
					\$0.00	1

PAGE NO

8

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

DATE OF ORDER CONTRACT NO. ORDER NO.

05/02/2018 HSCEDM-11-D-00003 70CDCR18FR0000052

M NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT	AMOUNT	QUANTITY
(a)	(b)	ORDERED (c)	(d)	PRICE (e)	(f)	ACCEPTED (g)
	supporting documentation must include:					1
	Mileage rate being applied for that					
	invoice;					
	Number of miles;Transportation routes provided;					
	• Locations serviced;					
	• Names of detainees transported;					
	 Itemized listing of all other charges; 					
	and,					
	• for reimbursable expenses (e.g. travel					
	expenses, special meals, etc.) copies of					
	all receipts.					
	c. Stationary Guard Services: The itemized					
	monthly invoice shall state:					
	The location where the guard services					İ
	were provided,					
	The employee guard names and number of					
	hours being billed,	6				
	• The employee guard names and duration of the billing (times and dates), and					
	• (4) for individual or detainee group					
	escort services only, the name of the					
	detainee(s) that was/were escorted.					
	d. Other Direct Charges (e.g. VTC support,					
	transportation meals/sack lunches,					
	volunteer detainee wages, etc.):					
	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.					
	(iii) Firm Fixed-Price CLINs. Supporting					
	documentation is not required for charges					
	for FFP CLINs.					
	4. Safeguarding Information: As a					
	contractor or vendor conducting business					
	Continued					
					\$0.00	1

ORDER FOR SUPPLIES OR SERVICES

PAGE NO

SCHEDULE - CONTINUATION IMPORTANT: Mark all packages and papers with contract and/or order numbers. DATE OF ORDER CONTRACT NO. 70CDCR18FR0000052 HSCEDM-11-D-00003 05/02/2018 ITEM NO. SUPPLIES/SERVICES QUANTITY UNIT AMOUNT QUANTITY ORDERED PRICE ACCEPTED (d) (f) 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. As part of your obligation to safeguard information, the follow precautions are required: (i) Email supporting documents containing Sensitive PII in an encrypted attachment with password sent separately to the Contracting Officer Representative assigned to the contract. (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. Use shredders when discarding paper documents containing Sensitive PII. Refer to the DHS Handbook for Safeguarding Sensitive Personally Identifiable Information (March 2012) found at (b)(7)(E) (b)(7)(E) for more information on and/or examples of Sensitive PII. 5. Invoice Inquiries. If you have questions Continued ...

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

\$0.00

ORDER FOR SUPPLIES OR SERVICES

PAGE NO **SCHEDULE - CONTINUATION** 10 IMPORTANT: Mark all packages and papers with contract and/or order numbers. DATE OF ORDER CONTRACT NO. ORDER NO. HSCEDM-11-D-00003 70CDCR18FR0000052 05/02/2018 SUPPLIES/SERVICES QUANTITY UNIT ITEM NO. UNIT AMOUNT QUANTITY ACCEPTED ORDERED PRICE (d) (g) regarding payment, please contact ICE Financial Operations at 1-877-491 (b)(6); or by e-mail at (h)(7)(F) The total amount of award: \$1,361,148.43. The obligation for this award is shown in box 17(i).

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

\$0.00

AMENDMENT OF SOLICITATION/MODIFIC	CATION OF CONTRACT	CONTRACT ID CODE	PAGE OF PAGES
		A DECIMAL DESCRIPTION OF THE PROPERTY OF THE P	1 3
2. AMENDMENT/MODIFICATION NO.	3. EFFECTIVE DATE	4. REQUISITION/PURCHASE REQ. NO. (b)(7)(E)	5. PROJECT NO. (If applicable)
P00001 6. ISSUED BY CODE	See Block 16C	7. ADMINISTERED BY (If other than Item 6)	CODE
	MOVALS ORCEMENT		
8. NAME AND ADDRESS OF CONTRACTOR (No., stree	et, county, State and ZIP Code)	(x) 9A. AMENDMENT OF SOLICITATION NO).
GEO GROUP INC THE		(N)	
ATTN GEO GROUP INC THE 621 NW 53RD ST (b)(6); 30CA RATON FL 334878242		9B. DATED (SEE ITEM 11) x 10A. MODIFICATION OF CONTRACT/OF HSCEDM-11-D-00003	RDER NO.
		70CDCR18FR0000052	
		10B. DATED (SEE ITEM 13)	
CODE (b)(7)(E)	FACILITY CODE	05/02/2018	
	11. THIS ITEM ONLY APPLIES TO	AMENDMENTS OF SOLICITATIONS	
separate letter or telegram which includes a reference THE PLACE DESIGNATED FOR THE RECEIPT OF virtue of this amendment you desire to change an of reference to the solicitation and this amendment, and 12. ACCOUNTING AND APPROPRIATION DATA (If respectively see Schedule	OFFERS PRIOR TO THE HOUR AND D fer already submitted , such change may I d is received prior to the opening hour and	DATE SPECIFIED MAY RESULT IN REJECTION be made by telegram or letter, provided each tel	OF YOUR OFFER If by
13. THIS ITEM ONLY APPLIES TO	MODIFICATION OF CONTRACTS/ORDER	RS. IT MODIFIES THE CONTRACT/ORDER NO	. AS DESCRIBED IN ITEM 14.
	ACT/ORDER IS MODIFIED TO REFLECT TH IN ITEM 14, PURSUANT TO THE AUT NT IS ENTERED INTO PURSUANT TO A	T THE ADMINISTRATIVE CHANGES (such as ci THORITY OF FAR 43.103(b).	nanges in paying office,
D. OTHER (Specify type of modification	n and authority)		
X Funding Only Action			
E. IMPORTANT: Contractor X is not.	is required to sign this document an	nd return copies to the	e issuing office.
14. DESCRIPTION OF AMENDMENT/MODIFICATION DUNS Number: 612706465 COR: (b)(6): (b)(7)(C) 720-875(ACOR: (b)(6); (b)(7)(C) 720-8 CO: (b)(6); 202-732(b)(6): Procurement POC: (b)(6): (b)(7)(C)	(b)(6); 75-(b)(6);	ncluding solicitation/contract subject matter when	e feasible.)
The purpose of this modificated the detention beds and medical s		fund CLINs 3009 and 3010	for emergency
This will increase the amounts 1,860,206.43	nt obligated by (b)(4)		to
Continued			
Except as provided herein, all terms and conditions of	the document referenced in Item 9 A or 10	0A, 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 (b)(6); (b)(7)(C)	G OFFICER (Type or print)
15B. CONTRACTOR/OFFEROR	15C. DATE SIGNED	16B. (b)(6); (b)(7)(C)	Digitally signed by (b)(6);
(Signature of person authorized to sign)			(b)(6):
NSN 7540-01-152-8070			Date: 2018.07.11 14:54:19 - STANDARD FÖRM 30 (REV. 10-83)
Previous edition unusable			Prescribed by GSA FAR (48 CFR) 53.243

2018-ICLI-00016 3978

CONTINUATION	SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED HSCEDM-11-D-00003/70CDCR18FR0000052/P00001 PAGE 2

ITEM NO.	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	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. Exempt Action: Y 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 (b)(6): WASHINGTON DC 20536 FOB: Destination Period of Performance: 09/16/2018 to 09/15/2019 Add Item 3009 as follows:				
3009	NEW CLIN 3009 - 128 EMERGENCY DETENTION BEDS THIS CLIN IS EFFECTIVE FROM SEPTEMBER 16, 2018 THROUGH SEPTEMBER 15, 2019	(b)(4)			410,738.00
3010	Accounting Info: (b)(7)(E) Funded: \$410,738.00 Add Item 3010 as follows: NEW CLIN 3010 - MEDICAL SERVICES FOR CLIN 3009 THIS CLIN IS EFFECTIVE FROM SEPTEMBER 16, 2018 THROUGH SEPTEMBER 15, 2019 Accounting Info: Continued	(b)(4)			88,320.00
NSN 7540-01-152					OPTIONAL FORM 336 (4-86)

CONTINUATION CUEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED	PAGE	OF
CONTINUATION SHEET	HSCEDM-11-D-00003/70CDCR18FR0000052/P00001	3	3

EM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	(b)(7)(E)				
		li			
		IJ			
	Funded: \$88,320.00				
	All other terms and conditions remain unchanged.				
		İ			
		1			
		1			
		1			
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AMENDMENT OF SOLICITATION/MODI	FICATION OF CONTRACT	CONTRACT ID CODE	PAGE OF PAGES
		A DECIMONAL PROPERTY OF THE PR	1 7
2. AMENDMENT/MODIFICATION NO.	3. EFFECTIVE DATE	(b)(7)(E)	5. PROJECT NO. (If applicable)
P00002 6. ISSUED BY CC	See Block 16C	7. ADMINISTERED BY (If other than Item	n 6) CODE
	REMOVALS NFORCEMENT AGEMENT		
8. NAME AND ADDRESS OF CONTRACTOR (No.,	street, county, State and ZIP Code)	(x) 9A. AMENDMENT OF SOLICITATION	√ NO.
GEO GROUP INC THE ATTN GEO GROUP INC THE (b)(6); (b)(6); (b)(7); (b)(7); (b)(7); (b)(7); (b)(7); (c)(7); (d)(7); (d)(7		9B. DATED (SEE ITEM 11) x 10A. MODIFICATION OF CONTRACT HSCEDM-11-D-00003 70CDCR18FR0000052	T/ORDER NO.
(b)/7)/F)		10B. DATED (SEE ITEM 13)	
CODE (b)(7)(E)	FACILITY CODE	05/02/2018 TO AMENDMENTS OF SOLICITATIONS	
Items 8 and 15, and returning separate letter or telegram which includes a refer THE PLACE DESIGNATED FOR THE RECEIPT virtue of this amendment you desire to change ar reference to the solicitation and this amendment, 12. ACCOUNTING AND APPROPRIATION DATA (I See Schedule	rence to the solicitation and amendment re OF OFFERS PRIOR TO THE HOUR AN a offer already submitted , such change me and is received prior to the opening hour frequired)	ND DATE SPECIFIED MAY RESULT IN REJECT may be made by telegram or letter, provided each r and date specified. Net Increase:	SEMENT TO BE RECEIVED AT STORM OF YOUR OFFER If by the telegram or letter makes (b)(4)
13. THIS ITEM ONLY APPLIES	O MODIFICATION OF CONTRACTS/OR	RDERS. IT MODIFIES THE CONTRACT/ORDER	NO. AS DESCRIBED IN ITEM 14.
C. THIS SUPPLEMENTAL AGREED D. OTHER (Specify type of modification)	MENT IS ENTERED INTO PURSUANT 1	ECT THE ADMINISTRATIVE CHANGES (such a AUTHORITY OF FAR 43.103(b). TO AUTHORITY OF:	as changes in paying office,
X Funding Only Action	on		
	ION (Organized by UCF section heading 5 (h)(6): -875 (b)(6);	<u> </u>	to the issuing office. where feasible.)
The purpose of this modifi services at the Aurora CDF		nding for detention and	transportation
This will increase the amo \$6,662,006.43. Continued	ount obligated from (b	0)(4)	to
Except as provided herein, all terms and conditions 15A. NAME AND TITLE OF SIGNER (Type or print)		or 10A, as heretofore changed, remains unchan 16A. NAME AND TITLE OF CONTRAC (b)(6): (b)(7)(C)	
15B. CONTRACTOR/OFFEROR	15C. DATE SIGNE		(b)(6); (b)(7)(C)
(Signature of person authorized to sign)			STANDARD FORM 30 (REV./10-83)
NSN 7540-01-152-8070 Previous edition unusable		•	Prescribed by GSA FAR (48 CFR) 53.243

CONTINUATION	SHEET

HSCEDM-11-D-00003/70CDCR18FR0000052/P00002

PAGE 2 OF 7

ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
3001A	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. Exempt Action: Y 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 (b)(6): WASHINGTON DC 20536 FOB: Destination Period of Performance: 09/16/2018 to 09/15/2019 Change Item 3001A to read as follows(amount shown is the obligated amount): GUARANTEED BEDS Quantity increases from (b)(4) Funding increases from (b)(4) Funding increases from (b)(4) Funding increases from (b)(4) Continued Continued				3,473,431.50

CONTINUES INC.	REFERENCE NO. OF DOCUMENT BEING CONTINUED	PAGE ()F
CONTINUATION SHEET	HSCEDM-11-D-00003/70CDCR18FR0000052/P00002	3	7

ITEM NO.	SUPPLIES/SERVICES	QUANTITY		UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
3001B	(b)(7)(E) Funded: \$1,473,631.50 Change Item 3001B to read as follows (amount shown is the obligated amount): VARIABLE BEDS Quantity increases from (b)(4) Funding increases from to \$744,237.22 Accounting Info: (b)(7)(E)	(b)(4)		(E)	(F) 501,551.17
3002A	Funded: \$501,551.17 Change Item 3002A to read as follows(amount shown is the obligated amount): TRANSPORTATION (FLAT RATE) (b)(4) Funding increases from (b)(4) to \$398.864.99 Accounting Info: (b)(7)(E)				315,736.19
3002B	Funded: \$315,736.19 Change Item 3002B to read as follows(amount shown is the obligated amount): CLIN 3002B - FUEL PASS THRU Quantity increases from (b)(4) Continued	(b)(4)			6,000.00

CONTINUIATION CUEFT	REFERENCE NO. OF DOCUMENT BEING CONTINUED	PAGE C)F
CONTINUATION SHEET	HSCEDM-11-D-00003/70CDCR18FR0000052/P00002	4	7

NAME OF OFFEROR OR CONTRACTOR

ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
003	Funding increases from (b)(7)(E); (b)(4) \$9,000.00 Accounting Info: (b)(7)(E) Funded: \$6,000.00 Change Item 3003 to read as follows(amount shown is the obligated amount): REMOTE CUSTODY	(b)(4)			30,263.8
	Quantity increases from (b)(4) Funding increases from (b)(4) to \$45,371.03 Accounting Info: (b)(7)(E) Funded: \$30,263.81 Change Item 3004 to read as follows(amount shown is the obligated amount):				
004	DETAINEE WAGES	(b)(4)			(b)(4)
	Quantity increases from (b)(4) Funding increases from (b)(4) Accounting Info: (b)(7)(E) Continued				

CONTINUATION CUEFT	REFERENCE NO. OF DOCUMENT BEING CONTINUED
CONTINUATION SHEET	HSCEDM-11-D-00003/70CDCR18FR0000052/P00002

PAGE OF 5

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT	UNIT PRICE (E)	AMOUNT (F)
(A)	(b)(7)(E)	(0)	(5)	(15)	()
	Funded: \$3,194.00				
	Change Item 3005 to read as follows(amount shown is the obligated amount):				
3005	MEDICAL SERVICES - (b)(4)				379,311.6
	Funding increases from (b)(4) to \$495,941.95	1			
	Accounting Info: (b)(7)(E)				
	Funded: \$0.00 Accounting Info:				
	(b)(7)(E)				
	Funded: \$3/9,311.69	1			
	Change Item 3005A to read as follows(amount shown is the obligated amount):				
3005A	MEDICAL SERVICES - TIER 1 (b)(4)	(b)(4)			16,740.00
	Quantity increases from (b)(4)				
	Funding increases from (b)(4) \$24,840.00				
	Accounting Info: (b)(7)(E)	<u> </u> 			
	Funded: \$0.00 Accounting Info: (b)(7)(E)	-			
	Funded: \$16,740.00				
	Change Item 3005B to read as follows(amount shown is the obligated amount):				
3005B	MEDICAL SERVICES - TIER 2 (b)(4)	(b)(4)			15,748.00
	Quantity increases from (b)(4) Continued				
SN 7540-01-15	2,9067	<u> </u>			OPTIONAL FORM 336 (4-86)

CONTINUE ATION CUEFT	REFERENCE NO. OF DOCUMENT BEING CONTINUED
CONTINUATION SHEET	HSCEDM-11-D-00003/70CDCR18FR0000052/P00002

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ITEM NO.	SUPPLIES/SERVICES	QUANTITY		l	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	Funding increases from (b)(4)				
	\$23,368.00				
	Accounting Info:				
	(b)(7)(E)	1			
	Funded: \$0.00	1			
	Accounting Info: (b)(7)(E)	ł			
	Funded: \$15,748.00	1			
	Change Item 3005C to read as follows (amount shown is the obligated amount):				
3005C	MEDICAL SERVICES - TIER 3 (b)(4)	(b)(4)		<u> </u>	46,823.64
	Quantity increases from (b)(4) (b)(4)				
	Funding increases from (b)(4)				
	to \$69,480.24				
	Accounting Info: (b)(7)(E)	-			
	(-/\·/\-/				
	Funded: \$0.00	1			
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$46,823.64]			
	Change Item 3008 to read as follows(amount shown				
	is the obligated amount):				
3008	TELE-RADIOLOGY	(b)(4)			13,000.00
	Quantity increases from(b)(4)				
	Funding increases from (b)(4) \$19,500.00				
	Accounting Info: (b)(7)(E)	1			
	-continued	1			
NSN 7540-01-152					OPTIONAL FORM 336 (4-86)

CONTINUATION CUEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED	PAGE	OF
CONTINUATION SHEET	HSCEDM-11-D-00003/70CDCR18FR0000052/P00002	7	7

1 NO.	SUPPLIES/SERVICES	QUANTITY		UNIT PRICE	AMOUNT
ł)	(B)	(C)	(D)	(E)	(F)
	(b)(7)(E)		П		
	Funded: \$0.00	İ	ΙI		
	Accounting Info:				
	(b)(7)(E)				
		_			
	Funded: \$13,000.00				
	All other terms and conditions remain unchanged.				
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AMENDMENT OF SOLICITATION/MODIFIC	CATION OF CONTR	ACT	1. CONTR	ACT ID CODE	PA	AGE OF PAGES	
			DEOLUCITION/D	UPCHASE REO. NO.	Is BBO	1	6
2. AMENDMENT/MODIFICATION NO.	3. EFFECTIVE DATE	(b)	(7)(E)		5. PROJ	ECT NO. (If applic	able)
P00003 6. ISSUED BY CODE	See Block 1 E ICE/DCR		ADMINISTERED	D BY (If other than Item 6)	CODE		
ICEDETENTION COMPLIANCE RE IMMIGRATION AND CUSTOMS ENFOFFICE OF ACQUISITION MANAGE 801 I STREET NW SUITE (b)(6); WASHINGTON DC 20536	EMOVALS FORCEMENT						
8. NAME AND ADDRESS OF CONTRACTOR (No., stre	eet, county, State and ZIP Coo	(x	9A. AMENDME	NT OF SOLICITATION NO.			
SEC SPOUR THE BUE		100	7				
GEO GROUP INC THE ATTN GEO GROUP INC THE			9B. DATED (SE	E ITEM 11)			
521 NW 53RD ST (b)(6);			00.07.120 (02	,			
BOCA RATON FL 334878242							
		×	HSCEDM-1	ATION OF CONTRACT/ORI	DER NO.		
			70CDCR18	FR0000052			
·			10B. DATED (S	EE ITEM 13)			
CODE (b)(7)(E)	FACILITY CODE		05/02/2	018			
	11. THIS ITEM ONL	Y APPLIES TO AME	ENDMENTS OF SO	OLICITATIONS			
The above numbered solicitation is amended as set	forth in Item 14. The hou	ur and date specified	for receipt of Offe	ers	is extended.	is not extended.	
THE PLACE DESIGNATED FOR THE RECEIPT OF virtue of this amendment you desire to change an oi reference to the solicitation and this amendment, and 12. ACCOUNTING AND APPROPRIATION DATA (If respectively).	ffer already submitted , sund is received prior to the c	ch change may be n pening hour and da	nade by telegram			•	
13. THIS ITEM ONLY APPLIES TO	MODIFICATION OF CON	TRACTS/ORDERS.	IT MODIFIES THE	CONTRACT/ORDER NO.	AS DESCRIBED	IN ITEM 14.	
A. THIS CHANGE ORDER IS ISSUED ORDER NO. IN ITEM 10A.	PURSUANT TO: (Specif	y authority) THE CH	HANGES SET FO	RTH IN ITEM 14 ARE MAD	E IN THE CONT	RACT	
B. THE ABOVE NUMBERED CONTR. appropriation date, etc.) SET FOR	ACT/ORDER IS MODIFIE TH IN ITEM 14, PURSUA	D TO REFLECT TH NT TO THE AUTHO	E ADMINISTRATI RITY OF FAR 43.	VE CHANGES (such as cha 103(b).	anges in paying o	office,	
C. THIS SUPPLEMENTAL AGREEME	NT IS ENTERED INTO P	URSUANT TO AUT	HORITY OF:				
D. OTHER (O							
D. OTHER (Specify type of modification	• •						
X Funding Only Action							
E. IMPORTANT: Contractor x is not.	is required to sign t				issuing office.		
14. DESCRIPTION OF AMENDMENT/MODIFICATION DUNS Number: 612706465 COR: (b)(6); (b)(7)(C) 720-875 ACOR: (b)(6); (b)(7)(C) 720-8 CO: (b)(6); (b)(7)(C) 202-732 CS: (b)(6); (b)(7)(C) 202-732-(b)(6)	-(b)(6); 75-(b)(6); -(b)(6);	ion neaungs, moiac	ang sonotaton/co	mad subject mater where	, геазиле.)		
The purpose of this modific medical services at the Aur		ıdd funding	g for dete	ention, detain	nee wages	, and	
This will increase the amou \$9,097,973.17.	nt obligated	from (b)(4)					
Continued							
Except as provided herein, all terms and conditions of	the document referenced	in Item 9 A or 10A,	as heretofore char	nged, remains unchanged a	and in full force a	nd effect.	
15A. NAME AND TITLE OF SIGNER (Type or print)		Ī	b)(6);	TITLE OF CONTRACTING	OFFICER (Type	or print)	
15B CONTRACTOR/OFFEROR	450.5	Ž	L\\7\\\C\	TES OF AMERICA		100 DATE (SIGNED
15B. CONTRACTOR/OFFEROR	15C. E		16B. UNITED STA b)(6); (b)(7):	TES OF AMERICA		16C. DATE S	SIGNED
(Olana)		(/ \ - / ; \ \~ / \ ' /	\ = /		09/30/	2018
(Signature of person authorized to sign) NSN 7540-01-152-8070					STANDAPD	FORM 30 (REV.	10-83)
Previous edition unusable					Prescribed t	by GSA	00/

2018-ICLI-00016 3988

CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED

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OF 6

SUPPLIES/SERVICES	I		UNIT PRICE	AMOUNT
(B)	(C)	(D)	(E)	(F)
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. Exempt Action: Y Sensitive Award: SPII Discount Terms: Net 30 FOB: Destination Period of Performance: 09/16/2018 to 09/15/2019 Change Item 3001A to read as follows(amount shown is the obligated amount):	(b)(4)			1,708,245.0
Funded: \$1,708,245.00 Continued				
SEE STOCK THE TELESTIC SECTION OF THE SECTION OF TH	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. Exempt Action: Y Sensitive Award: SPII Discount Terms: Net 30 FOB: Destination Period of Performance: 09/16/2018 to 09/15/2019 Change Item 3001A to read as follows (amount shown is the obligated amount): SQUARANTEED BEDS Quantity increases from (b)(4) Punding increases from (b)(4) Squantity increases from (b)(4) Funded: \$0.00 Accounting Info: D)(7)(E) Funded: \$0.00 Accounting Info: D)(7)(E) Funded: \$0.00 Accounting Info: Funded: \$0.00 Accounting Info: D)(7)(E)	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 Sovernment 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. Exempt Action: Y Sensitive Award: SPII Discount Terms: Net 30 FOB: Destination Period of Performance: 09/16/2018 to 09/15/2019 Change Item 3001A to read as follows (amount shown is the obligated amount): SUARRANTEED BEDS Quantity increases from (b)(4) Pounding increases from (b)(4) Scounting Info: D)(7)(E) Funded: \$0.00 Accounting Info: D)(7)(E) Funded: -\$0.00 Accounting Info: Change Item 30.00 Accounting Info: D)(7)(E) Funded: \$0.00 Accounting Info: D)(7)(E)	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 titems currently funded under this Task Order. The service provider is not authorized to continue to work on those item(s) beyond that point. The Sovernment 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. Exempt Action: Y Sensitive Award: SPII Discount Terms: Net 30 FOB: Destination Period of Performance: 09/16/2018 to 09/15/2019 Change Item 3001A to read as follows (amount shown is the obligated amount): SUARANTEED BEDS Quantity increases from (b)(4) 0)(4) Funding increases from (b)(4) 0)(4) Funded: \$0.00 Accounting Info: b)(7)(E) Funded: -\$0.00 Accounting Info: 0)(7)(E) Funded: \$0.00 Accounting Info: 0)(7)(E) Funded: \$0.00 Accounting Info:	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 30vernment 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. Sement Action: Y Sensitive Award: SPII Discount Terms: Net 30 FOB: Destination Period of Performance: 09/16/2018 to 09/15/2019 Change Item 3001A to read as follows (amount shown is the obligated amount): SUARANTEED BEDS Quantity increases from (b)(4) SQUARANTEED BEDS Quantity increases from (b)(4) Funded: \$0.00 Accounting Info: D)(7)(E) Funded: \$0.00 Accounting Info: D)(7)(E) Funded: \$0.00 Accounting Info: D)(7)(E) Funded: \$0.00 Accounting Info:

CONTINUATION OUTET	REFERENCE NO. OF DOCUMENT BEING CONTINUED	PAGE (OF.
CONTINUATION SHEET	HSCEDM-11-D-00003/70CDCR18FR0000052/P00003	3	6

NAME OF OFFEROR OR CONTRACTOR

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
(A)	(b)	(0)	(0)	(E)	(1)
	Change Item 3001B to read as follows(amount shown is the obligated amount):				
3001B	VARIABLE BEDS	(b)(4)			252,904.41
	Quantity increases from $(b)(4)$]			
	Funding increases from (b)(4) to \$997,141.63.				
	Accounting Info: (b)(7)(E)				
	Funded: \$0.00 Accounting Info: (b)(7)(E)	1			
	Funded: \$0.00 Accounting Info: (b)(7)(E)				
	Funded: \$252,904.41 Change Item 3004 to read as follows(amount shown				
		1			
3004	is the obligated amount): DETAINEE WAGES	(b)(4)		(b	(b)(4)
3004	is the obligated amount):	(b)(4)	<u>Ц</u> П	(b)((b)(4)
3004	is the obligated amount): DETAINEE WAGES	(b)(4)		(b)((b)(4)
3004	is the obligated amount): DETAINEE WAGES Quantity increases from (b)(4)	(b)(4)		(b)((b)(4)
3004	is the obligated amount): DETAINEE WAGES Quantity increases from (b)(4) Funding increases from (b)(4) Accounting Info:	(b)(4)		(b)((b)(4)
3004	is the obligated amount): DETAINEE WAGES Quantity increases from (b)(4) Funding increases from (b)(4) Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info:	(b)(4)		(b)((b)(4)
3004	is the obligated amount): DETAINEE WAGES Quantity increases from (b)(4) Funding increases from (b)(4) Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info:	(b)(4)		(b)((b)(4)

CONTINUIATION CUEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED	PAGE	OF	
CONTINUATION SHEET	HSCEDM-11-D-00003/70CDCR18FR0000052/P00003	4	1 6	6

NAME OF OFFEROR OR CONTRACTOR

GEO GROUP INC THE

ITEM NO.	SUPPLIES/SERVICES (B)	QUANTITY U	UNIT PRICE (E)	AMOUNT (F)
	Funded: (b)(4)			
	Change Item 3005 to read as follows(amount shown is the obligated amount):			
3005	MEDICAL SERVICES - (b)(4) month			379,311.69
	Funding increases from (b)(4) to \$875,253.64.			
	Accounting Info: (b)(7)(E)	-		
	Funded: \$0.00			
	Accounting Info: (b)(7)(E)	1		
	Funded: \$0.00	-		
	Accounting Info: (b)(7)(E)	1		
	Funded: \$379,311.69	.		
	Change Item 3005A to read as follows(amount shown is the obligated amount):			
3005A	MEDICAL SERVICES - TIER 1 (b)(4)	(b)(4)		16,740.00
	Quantity increases from $(b)(4)$			
	Funding increases from (b)(4) to \$41,580.00.			
	Accounting Info: (b)(7)(E)	1		
	Funded: \$0.00]		
	Accounting Info: (b)(7)(E)	1		
	Funded: \$0.00	-		
	Accounting Info: (b)(7)(E)			
	Continued			
NSN 7540-01-15		<u> </u>		OPTIONAL FORM 336 (4-86)

CONTINUATION CUEFT	REFERENCE NO. OF DOCUMENT BEING CONTINUED	PAGE	OF
CONTINUATION SHEET	HSCEDM-11-D-00003/70CDCR18FR0000052/P00003	5	6

ITEM NO.	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT	UNIT PRICE	AMOUNT (F)
	Funded: \$16,740.00 Change Item 3005B to read as follows(amount shown is the obligated amount):				
3005B	MEDICAL SERVICES - TIER 2 (b)(4) Quantity increases from (b)(4) Funding increases from (b)(4) to \$39,116.00. Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$15,748.00 Change Item 3005C to read as follows(amount shown is the obligated amount):	(b)(4)			15,748.00
3005C	MEDICAL SERVICES - TIER 3 (b)(4) Quantity increases from (b)(4) Funding increases from (b)(4) to \$116,303.88. Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: Continued	(b)(4)			46,823.64

CONTINUESTICAL CUEST	REFERENCE NO. OF DOCUMENT BEING CONTINUED	PAGE C	F
CONTINUATION SHEET	HSCEDM-11-D-00003/70CDCR18FR0000052/P00003	6	6

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT	UNIT PRICE (E)	AMOUNT (F)
	(b)(7)(E)				
	Funded: \$46,823.64				
	Change Item 3008 to read as follows(amount shown is the obligated amount):				
3008	TELE-RADIOLOGY	(b)(4)			13,000.00
	Quantity increases from (b)(4)				
	Funding increases from (b)(4) to \$32,500.00				
	Accounting Info: (b)(7)(E)	-			
	Funded: \$0.00				
	Accounting Info: (b)(7)(E)				
	Funded: \$0.00 Accounting Info:				
	(b)(7)(E)				
	Funded: \$13,000.00 All other terms and conditions remain unchanged.				

AMENDMENT OF SOLICITATION/N	1. CONTRAC	T ID CODE	PAGE OF PAGES				
						1	10
2. AMENDMENT/MODIFICATION NO.	3. EFFECTIV	E DATE	4. REQUISITION/PUR (b)(7)(E)	CHASE REQ. NO.	5. PF	OJECT NO	. (If applicable)
P00004	See Blo	ck 16C					
6. ISSUED BY	CODE ICE/DCR	t .	7. ADMINISTERED B	Y (If other than Item 6)) CODI	<u> </u>	
ICEDETENTION COMPLIANCE							
IMMIGRATION AND CUSTOMS							
OFFICE OF ACQUISITION N 801 I STREET NW SUITE(b							
WASHINGTON DC 20536)(0),						
8. NAME AND ADDRESS OF CONTRACTOR	₹ (No., street, county, State an	d ZIP Code)	, , 9A. AMENDMENT	OF SOLICITATION N	O.		
	time, occor, county, ciaco an	- L	(x)				
GEO GROUP INC THE ATTN GEO GROUP <u>INC THE</u>			9B. DATED (SEE I	TEM 11)			
621 NW 53RD ST (b)(6);				,			
BOCA RATON FL 334878242							
			× HSCEDM-11	ON OF CONTRACT/O -D-00003	RDER NO.		
			70CDCR18F	R0000052			
			10B. DATED (SEE	ITEM 13)			
CODE (b)(7)(E)	FACILITY CO	DE	05/02/201	. 8			
	11. THIS IT	TEM ONLY APPLIES TO A	 MENDMENTS OF SOLI	CITATIONS			
The above numbered solicitation is amende	ed as set forth in Item 14.	The hour and date specifi	ied for receipt of Offers		is extended.	is not e	xtended.
Offers must acknowledge receipt of this am					•		•
Items 8 and 15, and returning separate letter or telegram which includes a		ndment; (b) By acknowled					
THE PLACE DESIGNATED FOR THE REC							
virtue of this amendment you desire to char	nge an offer already subm	itted, such change may be	e made by telegram or l			,	
reference to the solicitation and this amend 12. ACCOUNTING AND APPROPRIATION D					(b)(4)		
See Schedule	(ii roquii ou)	Net	Increase:		V-7V-7		
	LIES TO MODIFICATION (OF CONTRACTS/ORDERS	S. IT MODIFIES THE CO	ONTRACT/ORDER NO	D. AS DESCRIB	ED IN ITEM	14.
A. THIS CHANGE ORDER IS ORDER NO. IN ITEM 10A	ISSUED PURSUANT TO	: (Specify authority) THE	CHANGES SET FORTI	IN ITEM 14 ARE MA	ADE IN THE CO	NTRACT	
ORDER NO. IN TEM TOA							
B. THE ABOVE NUMBERED appropriation date, etc.) S	CONTRACT/ORDER IS N	MODIFIED TO REFLECT	THE ADMINISTRATIVE	CHANGES (such as o	changes in payi	ng office,	
appropriation date, etc.)	ETTORTHINTEM 14, F	OKSOANT TO THE ACTI	10K111 01 17K40.100	(6).			
C. THIS SUPPLEMENTAL AC	REEMENT IS ENTERED	INTO PURSUANT TO AU	JTHORITY OF:				
D. OTHER (Specify type of m	odification and authority)						
X Funding Only Ad	ction						
E. IMPORTANT: Contractor	x is not, is required	to sign this document and	return	copies to the	he issuing office		
14. DESCRIPTION OF AMENDMENT/MODIF	FICATION (Organized by I	JCF section headings, inc	luding solicitation/contra	act subject matter whe	ere feasible.)		
DUNS Number: 612706465	i						
Contracting Officer's R	epresen <u>tative</u>	(COR): (b)(6):	(b)(7)(C) 7	20-875 (b)(6);	;		
ACOR: $(b)(6)$; $(b)(7)(C)$ 7	₁₂₀₋₈₇₅₋ (b)(6);						
Contracting Officer: (b)(6); (b)(7)(C)	202-732 (b)(6));				
Contract Specialist:(b)(3-446 -(b)(6) ;					
1	<u></u>	(~)(~),					
The purpose of this mod	lification to	task order 70	OCDCR18FR000	0052 is to	provide	addi+	ional
funding in the amount of			tion and Tra				
detainees at the Aurora	. , . ,			_			
	, contract bet	encion facili	rcy under th	e brovision	12 OT COI	ıcıact	1101IDET
Continued	the said of the				, ,, , , , ,		
Except as provided herein, all terms and cond		erenced in Item 9 A or 10/					
15A. NAME AND TITLE OF SIGNER (Type of	print)			LE OF CONTRACTIN	NG OFFICER (T	ype or print)	
			(b)(6); (b)(7)(C	;)			0
15B. CONTRACTOR/OFFEROR		15C. DATE SIGNED	168(b)(6): (b)(7	<u></u>	(b)(6);	(b)(7)(C)
			¹⁶⁸ (b)(6); (b)(7)(C)			
(Signature of person authorized to s	sign)						
NSN 7540-01-152-8070	<u> </u>	1			STANDA	RD FORM	30 (FLEV. 10-83)
Previous edition unusable						ed by GSA	
					FAR (48	CFR) 53.24	3

CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED

HSCEDM-11-D-00003/70CDCR18FR0000052/P00004

PAGE 2 OF 10

ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	HSCEDM-11-D-00003. The total obligated amount of this Task Order has increased: From (b)(4) By: To: \$10,513,680.04 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.	I	l I		
	Exempt Action: Y 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 (b)(6); WASHINGTON DC 20536				
	FOB: Destination Period of Performance: 09/16/2018 to 09/15/2019 Change Item 3001A to read as follows (amount shown is the obligated amount):				
3001A	GUARANTEED BEDS	(b)(4)			36,984.86
	Funding for this CLIN has increased: From (b)(4) By: To: \$6,072,783.86 Quantity of funded detention beds has increased: From: (b)(4) Continued	(0)(4)			

CONTINUATION	SHEET

HSCEDM-11-D-00003/70CDCR18FR0000052/P00004

PAGE 3 OF 10

ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	Ву (6)(4)				
	To: (b)(4)				
	3 counting Today				
	Accounting Info: (b)(7)(E)	ł			
	Funded: \$0.00	1			
	Accounting Info:				
	(b)(7)(E)]			
		ļ			
	Funded: \$0.00				
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$0.00				
	Accounting Info:				
	(b)(6); (b)(7)(C)				
	Funded: \$0.00				
	Accounting Info:	ł			
	(b)(7)(E)				
	Funded: \$36,984.86	1			
	Change Item 3001B to read as follows(amount shown				
	is the obligated amount):				
00015		(1.)(4)			504 005 0
3001B	VARIABLE BEDS	(b)(4)			521,987.8
	Funding for the CLIN has increased:				
	From(b)(4)				
	By:				
	To: \$1,519,129.52				
	The quantity of detention beds have increased:				
	From(b)(4)				
	By:				
	To: (b)(4)				
	Accounting Info:				
	(b)(7)(E)				
	Continued				

CONTINUATION	SHEET

HSCEDM-11-D-00003/70CDCR18FR0000052/P00004

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OF 10

ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	Funded: \$0.00				
	Accounting Info:	4			
	(b)(7)(E)				
	Funded: \$0.00	Ĭ			
	Accounting Info:				
	(b)(7)(E)	1			
	Funded: \$0.00	1			
	Accounting Info:				
	(b)(7)(E)	ĺ			
	L Funded: \$521,987.89	ļ			
	runded: \$521,987.89				
	Change Item 3002A to read as follows(amount shown				
	is the obligated amount):				
	(b)(4)				
3002A	TRANSPORTATION (FLAT RATE) - (b)(4)				183,036.5
	Funding for the CLIN has increased:				
	From(b)(4)				
	By:		İ		
	To: \$581,901.57				
	Accounting Info:				
	(b)(7)(E)				
	(~/(-/(-/				
	Funded: \$0.00				
	Accounting Info: (b)(7)(E)				
	Funded: \$0.00				
	Accounting Info:	1			
	(b)(7)(E)				
	Funded: \$183,036.58	1			
	Change Item 3002B to read as follows(amount shown				
	is the obligated amount):				
3002B	CLIN 3002B - FUEL PASS THRU	(b)(4)	<u> </u>		12,000.0
30021	COURT A CHIM A AAACC A AAACC	[]
	Funded amount for this CLIN has increased:				
	From: (b)(4)				
	Continued				
NON 7540 01 152	0007	1		l	<u> </u>

CONTINUATION	SHEET

HSCEDM-11-D-00003/70CDCR18FR0000052/P00004

PAGE 5

OF 10

ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
		1	ı	l	
NON 7540 04 452					

	REFERENCE NO. OF DOCUMENT BEING CONTINUED
CONTINUATION SHEET	HSCEDM-11-D-00003/70CDCR18FR0000052/P00004

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ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	(b)(7)(E)				
	Funded: \$60,527.62				
	runded: \$60,327.62				
	Change Item 3004 to read as follows(amount shown				
	is the obligated amount):				
		(b)(4)			
3004	DETAINEE WAGES	(0)(4)			
	Funding for this CLIN has increased:				
	From(b)(4)				
	Bv:				
	To: (b)(4)				
	Oughtitu for this CITN has increased.				
	Quantity for this CLIN has increased: From(b)(4)				
	Bu.	1			
	To: (b)(4)	İ			
		1			
	Accounting Info:				
	(b)(7)(E)	1			
		╛			
	Funded: \$0.00				
	Accounting Info: (b)(7)(E)	┨			
	(~)(.)(=)				
	Funded: \$0.00	7			
	Accounting Info:	_			
	(b)(7)(E)				
	Funded: \$0.00	ᅦ			
	Accounting Info:	_			
	(b)(7)(E)				
	Funded: (b)(4)	ᆀ			
	runded. (O/C)				
	Change Item 3005A to read as follows(amount shown	İ			
	is the obligated amount):				
20057	MDD 10.1 (b)(4)	(I-) (A)			1
3005A	MEDICAL SERVICES - TIER 1 (b)(4)	(b)(4)			16,200.00
	Funding for this CLIN has increased:				
	From: (b)(4)				
	Continued	1			
NON 7540 04 152					<u> </u>

CONTINUATION	SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED HSCEDM-11-D-00003/70CDCR18FR0000052/P00004 PAGE 7

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ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	By: (b)(4) To: \$57,780.00 Quantity for this CLIN has increased: From(b)(4)				
	By: To: (b)(4) Accounting Info: (b)(7)(E)				
	Funded: \$0.00 Accounting Info: (b)(4)				
	Funded: \$0.00 Accounting Info: (b)(7)(E)				
	Funded: \$0.00 Accounting Info: (b)(7)(E)				
	Funded: \$16,200.00 Change Item 3005B to read as follows(amount shown is the obligated amount):				
3005B	MEDICAL SERVICES - TIER 2 (b)(4)	(b)(4)			15,240.00
	Funding for this CLIN has increased: From(b)(4) By: To: \$54,356.00				
	Quantity for this CLIN has increased: From(b)(4) By: To: (b)(4)				
	Accounting Info: (b)(7)(E) Funded: \$0.00				
	Accounting Info: Continued				
NCN 7540 04 452	0007				

CONTINUATION CHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED	PAGE
CONTINUATION SHEET	HSCEDM-11-D-00003/70CDCR18FR0000052/P00004	8

ITEM NO.	SUPPLIES/SERVICES	QUANTITY		UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	(b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E)				
	Funded: \$0.00 Accounting Info: (b)(7)(E)	J -			
	Funded: \$15,240.00 Change Item 3005C to read as follows(amount shown is the obligated amount):	(b)(4)			
3005C	MEDICAL SERVICES - TIER 3 (b)(4)	(b)(4)			45,313.20
	Funding for this CLIN has increased: From(b)(4) By: To: \$161,617.08 Quantity for this CLIN has increased: From(b)(4) By: To: (b)(4)				
	Accounting Info: (b)(7)(E)				
	Funded: \$0.00 Accounting Info: (b)(7)(E)				
	Funded: \$0.00 Accounting Info: (b)(7)(E)]			
	Funded: \$0.00 Accounting Info: (b)(7)(E)]			
	Continued				

CONTINUATION	SHEET

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ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	Funded: \$45,313.20		Т		
	Change Item 3008 to read as follows(amount shown				
	is the obligated amount):				
3008	TELE-RADIOLOGY	(b)(4)			13,000.00
	Funded amount for this CLIN has increased: From(b)(4) By: To: \$45,500.00				
	Quantity for this CLIN has increased: From(b)(6); By: (b)(7)(C) To: (b)(4)				
	Quantity increases from (b)(4) (b)(4)				
	Funding increases from (b)(4) to \$32,500.00				
	Accounting Info:				
((b)(4)	1			
L	Funded: \$0.00	4			
	Accounting Info:				
	(b)(4)	l			
	Funded: \$0.00	l			
	Accounting Info:				
	(b)(7)(E)	1			
	Funded: \$0.00	4			
	Accounting Info:				
	(b)(7)(E)	1			
	Funded: \$13,000.00	1			
	Change Item 3009 to read as follows(amount shown				
	is the obligated amount):				
		ļ			
3009	CLIN 3009 - 128 EMERGENCY DETENTION BEDS	(b)(4)	_		391,102.72
	Funding for this CLIN has increased: From: (b)(4) Continued				
NSN 7540 01 152		<u> </u>	<u> </u>		<u> </u>

CONTINUATION SHEET	REFERENCE NO.	OF DOCUMENT	F BEING CONTINUE
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HSCEDM-11-D-00003/70CDCR18FR0000052/P00004

NAME OF OFFEROR OR CONTRACTOR GEO GROUP INC THE

ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	By: (b)(4) To: \$801,840.72 Quantity of Bed Days for this CLIN has increased: From(b)(4) By: To: (b)(4)				
	Accounting Info: (b)(7)(E)				
	Funded: (b)(4) Change Item 3010 to read as follows(amount shown is the obligated amount):				
3010	CLIN 3010 - MEDICAL SERVICES FOR CLIN 3009	(b)(4)			117,120.00
	Funding for this CLIN has increased: From(b)(4) By: To: \$205,440.00				
	Quantity of units of service have increased: From (b)(4) By: To: (b)(4)				
	Accounting Info: (b)(7)(E)				
	Funded: \$117,120.00				
	All other terms and conditions remain unchanged.				

PAGE

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OF

10

AMENDMI	ENT OF SOLICITATION	MODIFIC	ATION OF CO	NTRACT		CONTRACT ID CODE		PAGE OF PA	
2. AMENDME	ENT/MODIFICATION NO.		3. EFFECTIVE [DATE		UISITION/PURCHASE REQ. NO.	5. PF	1 1 ROJECT NO. (If a	11 applicable)
P00005			See Bloc	k 16C	(b)(7)	(E)			
6. ISSUED B	Υ	CODE			7. AD	MINISTERED BY (If other than Item 6)	COD	E	
IMMIGRA OFFICE 801 I S	ENTION COMPLIANC ATION AND CUSTON OF ACQUISITION STREET NW SUITE GTON DC 20536	IS ENFO MANAGE							
8. NAME ANI	D ADDRESS OF CONTRACTO	OR (No., street	t, county, State and 2	ZIP Code)	(x) 9A	AMENDMENT OF SOLICITATION NO	D.		
CEO CDO	IID INC BUE				(/				
	UP INC THE O GROUP INC THE				9B	DATED (SEE ITEM 11)			
	53RD ST (b)(6);	٦				,			
	TON FL 33487824	2			100				
					× H3	A. MODIFICATION OF CONTRACT/OF SCEDM-11-D-00003	RDER NO.		
					70	CDCR18FR0000052			
					10	B. DATED (SEE ITEM 13)			
CODE (b)((7)(E)		FACILITY CODE	E	1 lo	5/02/2018			
		<u> </u>	11. THIS ITE	M ONLY APPLIES TO	AMEND	IENTS OF SOLICITATIONS			
Offers mus Items 8 and separate le THE PLAC	d 15, and returning etter or telegram which included CE DESIGNATED FOR THE RE	mendment p co s a reference	prior to the hour ar opies of the amend of to the solicitation OFFERS PRIOR 1	nd date specified in the ment; (b) By acknowle and amendment numl TO THE HOUR AND D	solicitati dging re bers. F/ ATE SPE	on or as amended , by one of the follow beipt of this amendment on each copy of NILURE OF YOUR ACKNOWLEDGEM! CIFIED MAY RESULT IN REJECTION by telegram or letter, provided each tel	wing methods: of the offer sub ENT TO BE RE OF YOUR OF	omitted; or (c) By ECEIVED AT FFER If by	ng
reference t	to the solicitation and this amer	ndment, and	is received prior to						_
	ITING AND APPROPRIATION	DATA (If req	uired)	Net	Inc	rease:	(b)(4)		
See Sch		DI IEC TO M	IODIFICATION OF	CONTRACTS/ORDER	O IT M	DDIESE THE CONTRACT/ORDER NO	AS DESCRIP	ED IN ITEM 44	
	13. THIS TIEM ONLY AP	PLIES TO M	IODIFICATION OF	CONTRACTS/ORDER	(S. 11 M)	ODIFIES THE CONTRACT/ORDER NO	. AS DESCRIB	ED IN ITEM 14.	
CHECK ONE	A. THIS CHANGE ORDER ORDER NO. IN ITEM 10	IS ISSUED I A.	PURSUANT TO: (Specify authority) THE	CHANG	SES SET FORTH IN ITEM 14 ARE MAI	DE IN THE CO	NTRACT	
	B. THE ABOVE NUMBERE appropriation date, etc.)	D CONTRAC	CT/ORDER IS MO H IN ITEM 14, PU	DIFIED TO REFLECT RSUANT TO THE AUT	THE AD	MINISTRATIVE CHANGES (such as cl OF FAR 43.103(b).	hanges in payi	ng office,	
	C. THIS SUPPLEMENTAL	AGREEMEN	IT IS ENTERED IN	ITO PURSUANT TO A	UTHORI	TY OF:			
	D. OTHED (Consider to most of	us a differentia u	and authority						
.,	D. OTHER (Specify type of		and authority)						
X	Funding Only F	Action							
E. IMPORTAN		x is not.		sign this document an			e issuing office).	
			(Organized by UC	F section headings, in	cluding s	olicitation/contract subject matter when	re feasible.)		
DUNS Nu	ımber: 61270646	5							
		D		(GOD) (I-)(O)	/L-\/ 7	\(\o\)	_		
	cting Officer's			(COR) : (b)(b)	, (D)(1)(C) 720-875(b)(6);			
			5-(b)(6);	202-732(b)(6)					
	cting Officer: (b)	, , , , , , ,	(-)(-)		,				
contrac	t Specialist: (b)(b); (b)((/)(C) 313	3-446- <mark>(b)(6);</mark>					
ml.		11.61			0.00	D107D0000000			1
						R18FR0000052 is to			
	in the amount					and Transportation			
		a Cont	ract Dete	ention Facil	ıty	under the provision	s of co	ntract n	umber
	ied								
		nditions of th	he document refere	anced in Itam Q A or 10	_	retofore changed, remains unchanged NAME_AND_TITLE_OF_CONTRACTING			
Except as pro				enced in item 3 A or it	404	DIABLE AND THE EACTING	a checkby /7		
Except as pro	ovided herein, all terms and co AND TITLE OF SIGNER (Type			enced in item 9 A of 10			O OI I IOLIK (7	ype or print)	
Except as pro				enced in item 9 A OF TO		6); (b)(7)(C)	O OI TIOLIC()	ype or print)	
Except as pro				15C. DATE SIGNED	(b)(O OTTIOLIC(7		ATE SIGNED
Except as pro	AND TITLE OF SIGNER (<i>Type</i>				(b)(6); (b)(7)(C)	OOTTOLK(7		ATE SIGNED
Except as pro	AND TITLE OF SIGNER (<i>Type</i>	or print)			(b)(6); (b)(7)(C)			ATE SIGNED

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PAGE 2 OF 11

ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	HSCEDM-11-D-00003. The total obligated amount of this Task Order has increased: From(b)(4) By: To: \$13,391,810.85 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. Exempt Action: Y Sensitive Award: SPII Discount Terms: Net 30	ı	I	l	
3001A	Discount Terms:				1,768,278.75
NSN 7540-01-152	Continued				OPTIONAL FORM 336 (4-86)

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ITEM NO.	SUPPLIES/SERVICES	QUANTITY	ı	1	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	By (b)(4) To: (b)(4)				
	Delivery: 30 Days After Award Accounting Info:				
	(b)(7)(E)	1			
	Funded: \$0.00	ᆘ			
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$0.00	1			
	Accounting Info:	۱			
	(b)(7)(E)				
]			
	Funded: \$0.00 Accounting Info:				
	(b)(7)(E)	1			
	Funded: \$0.00	-			
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$0.00	1			
	Accounting Info: (b)(7)(E)	4			
	(~)(-)(-)				
		_			
	Funded: \$1,768,278.75				
	Change Item 3001B to read as follows(amount shown				
	is the obligated amount):				
3001B	VARIABLE BEDS				502,051.8
					·
	Funding for the CLIN has increased: From(b)(4)				
	By: (b)(4)				
	To: \$2,021,181.34				
	Effective 12/01/2018, the new rate for this CLIN				
	has increased:				
	Fron (b)(4)				
	By 5 To: (b)(4)				
	Continued				

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NAME OF OFFEROR OR CONTRACTOR GEO GROUP INC THE SUPPLIES/SERVICES ITEM NO. QUANTITY UNIT UNIT PRICE AMOUNT (C) (D) (E) (F) (A) (B) Delivery: 30 Days After Award Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E)Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$502,051.82 Change Item 3004 to read as follows (amount shown is the obligated amount): (b)(4)3004 DETAINEE WAGES (b)(4) Funding for this CLIN has increased: From (b)(4) By: To: (b)(4) Quantity for this CLIN has increased: Fron(b)(4)By: To: (b)(4) Delivery: 30 Days After Award Accounting Info: (b)(7)(E)Continued ...

CONTINUATION SHEET

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EM NO.	SUPPLIES/SERVICES	QUANTITY		I I	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	Funded: \$0.00 Accounting Info:				
	ERODETN-V01 E1 31-13-00-000				
	(b)(7)(E)	ጎ			
	(-/\-/\-/				
	Funded: \$0.00	┪			
	Accounting Info:	1	İ		
	(b)(7)(E)	1			
	Funded: \$0.00	-			
	Accounting Info:				
	(b)(7)(E)	1			
	(2)(1)(2)				
		J	ĺ		
	Funded: \$0.00				
	Accounting Info:	<u> </u>			
	(b)(7)(E)				
	Funded: (b)(4)	1			
	Change Item 3005 to read as follows(amount shown				
	is the obligated amount):				
0.0.5	MEDICAL CEDUTCES (AVA)				226 440
005	MEDICAL SERVICES - (b)(4)				236,449
	Funding increases from (b)(4)	1			
	to \$1,111,703.60.	1			
			İ		
	Effective 12/01/2018, the new rate for this CLIN				
	has increased:				
	Fro(b)(4)				
	To: \$236,449.36				
	10. 4200, 113.00				
	Delivery: 30 Days After Award				
	Accounting Info:	1			
	(b)(7)(E)				
	Funded: \$0.00	┨			
	Accounting Info:				
	(b)(7)(E)	1			
		_			
	Funded: \$0.00				
	Accounting Info:	۱			
	(b)(7)(E)				
		4			

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NAME OF OFFEROR OR CONTRACTOR

GEO GROUP INC THE

ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	(b)(7)(E) Funded: (b)(4) Accounting Info: (b)(7)(E) Funded: \$236,449.96				
3005A	Change Item 3005A to read as follows(amount shown is the obligated amount): MEDICAL SERVICES - TIER 1 (b)(4)	(b)(4)			16,740.00
	Funding for this CLIN has increased: From (b)(4) By: To: \$74,520.00 Quantity for this CLIN has increased:				
	From (b)(4) By: To: (b)(4) Delivery: 30 Days After Award				
	Accounting Info: (b)(7)(E) Funded: \$0.00	_			
	Accounting Info: (b)(7)(E) Funded: \$0.00	-			
	Accounting Info: (b)(7)(E) Funded: \$0.00				
	Accounting Info: (b)(7)(E) Funded: \$0.00				
	Accounting Info: (b)(7)(E)				
	Funded: \$16,740.00 Continued				

CONTINUATION	SHEET

HSCEDM-11-D-00003/70CDCR18FR0000052/P00005

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ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	Change Item 3005B to read as follows(amount shown				
	is the obligated amount):				
3005B	MEDICAL SERVICES - TIER 2 (b)(4)	(b)(4)			15,748.0
	Funding for this CLIN has increased:				
	From(b)(4)				
	By:				
	To: \$70,104.00				
	Quantity for this CLIN has increased:				
	From(b)(4)				
	By:				
	To: (b)(4)				
	Delivery: 30 Days After Award				
	Accounting Info:				
	(b)(7)(E)	1			
	Funded: \$0.00	ļ			
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$0.00				
	Accounting Info:				
	(b)(7)(E)	i			
	Funded: \$0.00	ļ			
	Accounting Info:				
	(b)(7)(E)	i			
	V- //- //-				
	Funded: \$0.00	ļ			
	Accounting Info:				
	(b)(7)(E)	l			
	Funded: \$15,748.00				
	Change Item 3005C to read as follows(amount shown				
	is the obligated amount):				
					ļ
3005C	MEDICAL SERVICES - TIER 3 (b)(4)	(b)(4)			46,823.6
	Funding for this CLIN has increased:				
	From(b)(4)				
	By:				
	Continued	l			

CONTINUATION	SHEET

HSCEDM-11-D-00003/70CDCR18FR0000052/P00005

PAGE 8 OF 11

ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	To: \$208,440.72				
	Quantity for this CLIN has increased: From (b)(4) By: To: (b)(4)				
	Delivery: 30 Days After Award Accounting Info: (b)(7)(E)				
	Funded: \$0.00] T			
	Accounting Info: (b)(7)(E)				
	Funded: \$0.00 Accounting Info: (b)(7)(E)				
	Funded: \$0.00 Accounting Info:				
	(b)(7)(E) Funded: \$0.00]			
	Accounting Info: (b)(7)(E)				
	Funded: \$46,823.64 Change Item 3008 to read as follows(amount shown				
	is the obligated amount):				
3008	TELE-RADIOLOGY	(b)(4)			13,000.00
	Funded amount for this CLIN has increased: From (b)(4) By: To: \$45,500.00				
	Quantity for this CLIN has increased: From(b)(4) By: To: (b)(4)				
	Continued				
NICNI 7540 01 152		l	<u> </u>		<u> </u>

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ITEM NO.	SUPPLIES/SERVICES	QUANTITY	1 1	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	Funding increases from (b)(4)				
	to \$58,500.00				
	Delivery: 30 Days After Award				
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$0.00	-			
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$0.00	4			
	Accounting Info:				
	(b)(7)(E)	7			
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	Funded: \$0.00 Accounting Info:				
	(b)(7)(E)	ור			
		╝			
	Funded: \$0.00				
	Accounting Info: (b)(7)(E)	4			
	Funded: \$13,000.00				
	Change Item 2000 to word as fallows/amount shows				
	Change Item 3009 to read as follows (amount shown is the obligated amount):				
	To the obligation amount,				
3009	CLIN 3009 - 128 EMERGENCY DETENTION BEDS				198,955.5
	For diag. Contable CLTN has decreased				
	Funding for this CLIN has increased: From(b)(4)				
	By:				
	To: \$1,000,796.24				
	Effective 12/01/2018, the new rate for this CLIN has increased:				
	Fron(b)(4)				
	By \$				
	To: (b)(4)				
	Delivery: 30 Days After Award Accounting Info:				
	(b)(7)(E)	7			
	Continued	1			
NSN 7540-01-15		1	<u> </u>		OPTIONAL FORM 336 (4-86)

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ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	(b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$198,955.52				
3010	Change Item 3010 to read as follows (amount shown is the obligated amount): CLIN 3010 - MEDICAL SERVICES FOR CLIN 3009	(b)(4)			59,520.00
	Funding for this CLIN has increased: From(b)(4) By: To: \$264,960.00	(5)(4)			
	Quantity of units of service have increased: From(b)(4) By: To:(b)(4)				
	Delivery: 30 Days After Award Accounting Info: (b)(6); (b)(7)(C) Funded: \$0.00 Accounting Info: (b)(7)(F)				
3012	Funded: \$59,520.00 Add Item 3012 as follows: Lump Sum Payment in the amount of \$17,369.12 for the increases as a result of new Wage Determination Number 2015-5419, Rev. 10, dated 08/03/2018 incorporated in Modification P00034. This amount covers the period from 9/16/2018 to 11/30/2018. Product/Service Code: \$206 Product/Service Description: HOUSEKEEPING- GUARD Accounting Info: (b)(7)(E) Continued				17,369.12

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED	PAGE C)F
	HSCEDM-11-D-00003/70CDCR18FR0000052/P00005	11	11

NAME OF OFFEROR OR CONTRACTOR

GEO GROUP INC THE	
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EM NO.	SUPPLIES/SERVICES	QUANTITY		UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	(b)(7)(E)				
	Funded: \$17,369.12				
	runded: \$17,369.12				
	All other terms and conditions remain unchanged.				
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AMENDMENT OF COLUMN TATION MADDIFICATION OF CONTRACT			CONTRACT ID CODE		PAGE O	OF PAGES
AMENDMENT OF SOLICITATION/MODII	FICATION OF CONTRACT				1	14
2. AMENDMENT/MODIFICATION NO.	3. EFFECTIVE DATE	4. RE	QUISITION/PURCHASE REQ. NO.	5. PR	OJECT NO	O. (If applicable)
P00006	See Block 16C	See	Schedule			
6. ISSUED BY CO	DE ICE/DCR	7. AI	OMINISTERED BY (If other than Item 6)	CODE	E	
ICEDETENTION COMPLIANCE FINMIGRATION AND CUSTOMS EN	REMOVALS NFORCEMENT					
OFFICE OF ACQUISITION MANA						
801 I STREET NW SUITE (b)(6)	<u>.</u>					
WASHINGTON DC 20536						
8. NAME AND ADDRESS OF CONTRACTOR (No., s	treet, county, State and ZIP Code)	(x) 9	A. AMENDMENT OF SOLICITATION NO.			
EO GROUP INC THE						
ATTN GEO GROUP INC THE		9	B. DATED (SEE ITEM 11)			
521 NW 53RD ST STE (b)(6); 50CA RATON FL 334878242						
30CA RATON FL 3348/8242		x 10	0A. MODIFICATION OF CONTRACT/ORD	ER NO.		
			OCDCR18FR0000052			
			OB. DATED (SEE ITEM 13)			
CODE (b)(7)(E)	FACILITY CODE		•			
(0)(1)(1)			05/02/2018			
The above numbered solicitation is amended as s	11. THIS ITEM ONLY APPLIES			extended.	☐ is not e	
Offers must acknowledge receipt of this amendment and the state of the	ent prior to the hour and date specified copies of the amendment; (b) By ack ence to the solicitation and amendment OF OFFERS PRIOR TO THE HOUR A	in the solicital nowledging ret numbers. F ND DATE SF	ation or as amended , by one of the following ceipt of this amendment on each copy of the fallure of Your ACKNOWLEDGEMEN PECIFIED MAY RESULT IN REJECTION O	ng methods: the offer sub IT TO BE RE PF YOUR OF	(a) By com mitted; or ECEIVED A FER If by	npleting (c) By NT
reference to the solicitation and this amendment,				(b)(4)		
 ACCOUNTING AND APPROPRIATION DATA (IF See Schedule 	required)	Net In	crease:	(6)(4)		
	O MODIFICATION OF CONTRACTS/O	RDERS IT N	MODIFIES THE CONTRACT/ORDER NO. A	S DESCRIB	ED IN ITEN	M 14
10. 1110 11211 01121 71 1220 1		TOLINO. II II	NOSIN LO THE CONTINUO NONDER NO. A	DEGOTAB		
A. THIS CHANGE ORDER IS ISSUIORDER NO. IN ITEM 10A.	ED PURSUANT TO: (Specify authority,) THE CHAN	IGES SET FORTH IN ITEM 14 ARE MADE	IN THE CO	NTRACT	
B. THE ABOVE NUMBERED CONT appropriation date, etc.) SET FC	RACT/ORDER IS MODIFIED TO REF PRTH IN ITEM 14, PURSUANT TO THE	LECT THE AI E AUTHORIT	DMINISTRATIVE CHANGES (such as chai Y OF FAR 43.103(b).	nges in payii	ng office,	
C. THIS SUPPLEMENTAL AGREEN	MENT IS ENTERED INTO PURSUANT	TO AUTHOR	RITY OF:			
D. OTHER (Specify type of modifica	ation and authority)					
X Funding Only Actio	n					
E. IMPORTANT: Contractor X is no	ot, is required to sign this docume	ent and return	n copies to the i	ssuing office		
14. DESCRIPTION OF AMENDMENT/MODIFICATION Number: 612706465				feasible.)		
Contracting Officer's Repr	esentative (COR):(b))(6); (b)(7	7)(C) 720-875 (b)(6);	1		
	875-(b)(6);		(C 7 C 7)	,		
Contracting Officer: (b)(6); ((b)(6);				
Contract Specialist: (b)(6):(
<u>lianon (</u>	DK: KO	77				
The purpose of this modifi	cation to Task Orde	r 70CD0	TR18FR0000052 is to b	rowide	addit	ional
funding in the amount $(b)(4)$			on and Transportation			
letainees at the Aurora Co			_			
	merace perention fa	СТТТСУ	auder the broatstons	01 001	iciaci	. Humber
ontinued	afilia danima (f) () () ()					
Except as provided herein, all terms and conditions I5A. NAME AND TITLE OF SIGNER (Type or print)			neretofore changed, remains unchanged ar . NAME AND TITLE OF CONTRACTING			
TOO. TANKE AND THEE OF SIGNER (Type of print)				OFFICER (1)	ype or prin	y
		(b)	(6); (b)(7)(C)	Die:	- بالمه	ianed by (b)(6); (b)(7)
15B. CONTRACTOR/OFFEROR	15C. DATE SIGN	IED 1/h)(6); (b)(7)(C)			
		11,2	/(=/, (=/(-/(=/	(b)(b);	(b)(7)(O)
(Signature of person authorized to sign)						
NSN 7540-01-152-8070						30 (KEV. 10-83)
Previous edition unusable					ed by GSA CER) 53.2	

CONTINUATION	SHEET

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ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	HSCEDM-11-D-00003.				
(A) 3001A	(B)	I			
NON 7540 04 459					

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NAME OF OFFEROR OR CONTRACTOR

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GEO	GROUP	INC	THE	

ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A)	(B)	I .	(D)	(E)	(F)
	(b)(7)(E)	_	\vdash		
	Funded: \$0.00				
	Accounting Info:		İ		
	(b)(7)(E)				
	Funded: \$0.00 Accounting Info:				
	(b)(7)(E)				
			ĺ		
	Funded: \$0.00				
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$0.00				
	Accounting Info:	i	İ		
	(b)(7)(E)				
	Funded: \$0.00	 ∥			
	Accounting Info:				
	(b)(7)(E)	\neg			
			İ		
	Funded: \$3,422,475.00				
	Change Item 3001B to read as follows (amount sh	own			
	is the obligated amount):				
3001B	VARIABLE BEDS				971,713.20
	Effective 12/01/2018, the new rate for this CL	TN			
	is:(b)(4) Bed Day				
	(3)(4)		l		
	Funding for the CLIN has increased:	İ			
	From(b)(4)				
	By:				
	Requisition No: (b)(7)(E)				
	(b)(7)(E)				
	Accounting Info:				
	(b)(7)(E)	─ ─			
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	Continued		1		
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OF 14

ITEM NO.	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT	1	AMOUNT (F)
\-*/	Funded: \$0.00	1 , 5 /	, ,	\/	(2)
	Accounting Info:	4			
	(b)(7)(E)				
	Funded: \$0.00				
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$0.00	1			
	Accounting Info:	_			
	(b)(7)(E)				
	Funded: \$0.00	_			
	Accounting Info:	4			
	(b)(7)(E)				
	Funded: \$0.00				
	Accounting Info:	-			
	(b)(7)(E)				
	Funded: \$971,713.20	1			
	Change Item 3002A to read as follows(amount shown is the obligated amount):				
3002A	TRANSPORTATION (FLAT RATE)				499,303.2
	Effective 12/01/2018, the new rate for this CLIN is: (b)(4) Month				
	Funding for the CLIN has increased: From (b)(4)				
	By: To: \$1,081,204.77				
(t	Requisition No: (b)(7)(E)				
_	(b)(7)(E)	-			
	(0)(7)(E)				
	Funded: \$0.00	1			
	Accounting Info:				
	Continued				

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CONTINUATION SHEET	HSCEDM-11-D-00003/70CDCR18FR0000052/P00006

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ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$499,303.20 Change Item 3002B to read as follows(amount shown				
	is the obligated amount):				
3002B	CLIN 3002B - FUEL PASS THRU	(b)(4)			18,000.00
	Funded amount for this CLIN has increased: From(b)(4) By: To: \$39,000.00 Quantity of months funded have increased: From(b)(4) By: To: (b)(4) By: To: (b)(4) By: To: (b)(7)(E) Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Continued				

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ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	(b)(7)(E)				
	Funded: \$18,000.00				
	Change Item 3003 to read as follows(amount shown				
	is the obligated amount):				
3003	REMOTE CUSTODY				90,883.38
	Effective 12/01/2018, the new rate for this CLIN				
	is: (b)(4) Hour				
	Funding for this CLIN has increased:				
	From(b)(4) By:				
	To: \$196,782.03				
	(b)(7)(E)				
(h	Requisition No: (7)(E)				
(5	(()(L)				
L					
	Accounting Info:				
	(b)(7)(E)				
l	Funded: \$0.00				
	Accounting Info:	4			
	(b)(7)(E)				
	Funded: \$0.00	1			
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$0.00	\dashv			
	Accounting Info:	Ц			
	(b)(7)(E)				
	Funded: \$90,883.38	┪			
	Change Item 3004 to read as follows(amount shown		l		
	is the obligated amount):				
3004	DETAINEE WAGES	(b)(4)		l	(b)(4)
5001	22	F // /	_		[
	Funding for this CLIN has increased:				
	From(b)(4)				
	By: Continued				
	concentration				
NICH 7540 01 153	2007				

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NAME OF OFFEROR OR CONTRACTOR

GEO GROUP INC THE

(A) To D(4) Quantity for this CLIN has increased: Pros(D)(4) By: To: D(7)(E) Accounting Info: (D)(7)(E) Funded: \$0.00 Accounting Info: (D)(7)(E) Funded:	ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
Quantity for this CLIN has increased: From (b)(4) By: To: (b)(4) Requisition No: (D(7)(E) D(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E)	(A)		(C)	(D)	(E)	(F)
From (D)(4) By: To: [D)(4) Requisition No.: [D)(7)(E) Accounting Info: (D)(7)(E) Funded: \$0.00 Accounting Info:		To (b)(4)				
From (D)(4) By: To: [D)(4) Beguisition No.: [D)(7)(E) Accounting Info: (D)(7)(E) Funded: \$0.00 Accounting Info:						
By: DOTAL SERVICES Remusiation No: DOTAL SERVICES By: DOTAL SERVICES Effective 12/01/2018, the new rate for this CLIN Continued		Quantity for this CLIN has increased:				
To: (0)(4) Requisition No: (0)(7)(E) Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funde						
Requisition No: DNT/NE) DO(TNE) Accounting Info: (b)(T)(E) Funded: \$0.00 Accounting Info: (b)(T)(E) Funded: \$0.00 Accounting Info: (b)(T)(E) Funded: \$0.00 Accounting Info: (b)(T)(E) Funded: \$0.00 Accounting Info: (b)(T)(E) Funded: \$0.00 Accounting Info: (b)(T)(E) Funded: \$0.00 Accounting Info: (b)(T)(E) Funded: \$0.00 Accounting Info: (b)(T)(E) Funded: \$0.00 Accounting Info: (c)(T)(E)						
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Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Fu		(b)(7)(E)				
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(b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (c)(7)(E)	L		İ	İ		
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Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: bb(4) Change Item 3005 to read as follows(amount shown is the obligated amount): 3005 MEDICAL SERVICES Effective 12/01/2018, the new rate for this CLIN Continued						
Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: bb(4) Change Item 3005 to read as follows(amount shown is the obligated amount): 3005 MEDICAL SERVICES Effective 12/01/2018, the new rate for this CLIN Continued		Funded: \$0.00	4			
Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: [b)(4) Change Item 3005 to read as follows(amount shown is the obligated amount): MEDICAL SERVICES 472,899.92 Effective 12/01/2018, the new rate for this CLIN Continued		Accounting Info:				
Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (c)(8)(E) Available: \$0.00 Accounting Info: (c)(8)(E) Available: \$0.00 Accounting Info: (c)(8)(E) Available: \$0.00 Accounting Info: (c)((b)(7)(E)				
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(b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: [b)(4) Change Item 3005 to read as follows(amount shown is the obligated amount): 3005 MEDICAL SERVICES Effective 12/01/2018, the new rate for this CLIN Continued		Accounting Info:				
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Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: (b)(4) Change Item 3005 to read as follows(amount shown is the obligated amount): MEDICAL SERVICES Effective 12/01/2018, the new rate for this CLIN Continued			1			
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Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: (b)(4) Change Item 3005 to read as follows(amount shown is the obligated amount): MEDICAL SERVICES Effective 12/01/2018, the new rate for this CLIN Continued		Fundad, CO OO	-			
(b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: (b)(4) Change Item 3005 to read as follows (amount shown is the obligated amount): MEDICAL SERVICES Effective 12/01/2018, the new rate for this CLIN Continued						
Accounting Info: (b)(7)(E) Funded: (b)(4) Change Item 3005 to read as follows(amount shown is the obligated amount): 3005 MEDICAL SERVICES Effective 12/01/2018, the new rate for this CLIN Continued		(b)(7)(E)				
Accounting Info: (b)(7)(E) Funded: (b)(4) Change Item 3005 to read as follows(amount shown is the obligated amount): 3005 MEDICAL SERVICES Effective 12/01/2018, the new rate for this CLIN Continued						
Accounting Info: (b)(7)(E) Funded: (b)(4) Change Item 3005 to read as follows(amount shown is the obligated amount): 3005 MEDICAL SERVICES Effective 12/01/2018, the new rate for this CLIN Continued			l			
(b)(7)(E) Funded: (b)(4) Change Item 3005 to read as follows(amount shown is the obligated amount): MEDICAL SERVICES Effective 12/01/2018, the new rate for this CLIN Continued						
Funded: (b)(4) Change Item 3005 to read as follows(amount shown is the obligated amount): MEDICAL SERVICES Effective 12/01/2018, the new rate for this CLIN Continued			1			
Change Item 3005 to read as follows(amount shown is the obligated amount): MEDICAL SERVICES Effective 12/01/2018, the new rate for this CLIN Continued		\-\.\.\ - \				
Change Item 3005 to read as follows(amount shown is the obligated amount): MEDICAL SERVICES Effective 12/01/2018, the new rate for this CLIN Continued			1			
is the obligated amount): MEDICAL SERVICES Effective 12/01/2018, the new rate for this CLIN Continued		Funded: (b)(4)				
is the obligated amount): MEDICAL SERVICES Effective 12/01/2018, the new rate for this CLIN Continued		Change Item 3005 to read as follows(amount shown				
MEDICAL SERVICES Effective 12/01/2018, the new rate for this CLIN Continued						
Effective 12/01/2018, the new rate for this CLIN Continued						
Continued	3005	MEDICAL SERVICES				472,899.92
Continued		Effective 12/01/2018 the new rate for this CLIM				

PAGE

CONTINUATION	SHEET

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ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	is: (b)(4) Month				
	Funding for this CLIN has increased: From (b)(4) By: To: \$1,584,603.52 Requisition No: (b)(7)(E)				
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$0.00	1			
	Accounting Info:	4			
	(b)(7)(E)				
'	Funded: \$0.00	1			
	Accounting Info: (b)(7)(E)	1			
	(5)(7)(2)				
	Funded: \$0.00	1			
	Accounting Info:	ļ			
	(b)(7)(E)				
	Funded: \$0.00	1			
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$472,899.92				
	Change Item 3005A to read as follows(amount shown is the obligated amount):				
3005A	MEDICAL SERVICES - TIER 1 (b)(4)	(b)(4)			31,860.00
	Funding for this CLIN has increased: From (b)(4) By: To: \$106,380.00				
	Quantity for this CLIN has increased: From (b)(4) By: Continued				
NSN 7540 04 452	0007				<u> </u>

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED
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ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	To: (b)(4) (b)(7)(E)				
ı	Requisition No: (b)(7)(E)	1			
	(b)(r)(E)				
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$0.00	-			
	Accounting Info:				
	(b)(7)(E)	1			
	Funded: \$0.00 Accounting Info:				
	(b)(7)(E)	1			
		_			
	Funded: \$0.00				
	Accounting Info: (b)(7)(E)	-			
	() () () () () () () () () ()				
	Funded: \$0.00 Accounting Info:				
	(b)(7)(E)	1			
	Funded: \$0.00	4			
	Accounting Info:				
	(b)(7)(E)]			
	Funded: \$31,860.00]			
	Funded: \$31,860.00				
	Change Item 3005B to read as follows(amount shown				
	is the obligated amount):				
3005B	MEDICAL SERVICES - TIER 2 (b)(4)	(b)(6); (l)/7)	(C)	
30036	MEDICAL SERVICES - ITER 2 1000	(5)(0), (1)(<i>r</i>)	(C)	
	Funding for this CLIN has increased:				
	Fron(b)(7)(E)				
	By:				
	To: \$100,076.00				
	Quantity for this CLIN has increased:				
	Fron(b)(4)				
	By:				
	Continued				
NICH 7540 04 450	0007				

CONTINUATION OUTET	REFERENCE NO. OF DOCUMENT BEING CONTINUED	PAGE C)F
CONTINUATION SHEET	HSCEDM-11-D-00003/70CDCR18FR0000052/P00006	10	14

ITEM NO.	SUPPLIES/SERVICES	QUANTI	TY UNIT	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	To: (b)(4)				
(b)(7	LVEGUTIPITION NO. I				
			1		
			-		
	Accounting Info: (b)(7)(E)				
	Funded: \$0.00				
	Accounting Info: (b)(7)(E)				
	Funded: \$0.00				
	Accounting Info: (b)(7)(E)				
	Funded: \$0.00				
	Accounting Info: (b)(7)(E)				
			1		
	Funded: \$0.00				
	Accounting Info: (b)(7)(E)				
	(~)(-)(-)				
	Funded: \$0.00				
	Accounting Info: (b)(7)(E)				
	Funded: \$29,972.00				
	Change Item 3005C to read as follows(amount	t shown			
	is the obligated amount):				
3005C	MEDICAL SERVICES - TIER 3 (b)(4)				89,115.96
30050	MEDICAL SERVICES - IIER 3				09,113.96
	Effective 03/01/2019, the rate for this CL:	IN	İ		
	increases:				
	From (b)(4) By:				
	To: (b)(4)				
	Funding for this CLIN has increased: From: (b)(4)				
	Continued				
					<u> </u>

CONTINUATION	SHEET

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ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
(A)	By: (b)(4) To: \$297,556.68 Requisition No: (b)(7)(E) (b)(7)(E) Accounting Info: (b)(7)(E)	(C)	(D)	(E)	(F)
	Funded: \$0.00 Accounting Info: (b)(7)(E)				
	Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00				
	Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E)				
	Funded: \$0.00 Accounting Info: (b)(7)(E)				
3008	Funded: \$89,115.96 Change Item 3008 to read as follows(amount shown is the obligated amount): TELE-RADIOLOGY	(h) (4)			26,000.00
	Funded amount for this CLIN has increased: From (b)(4) By: To: \$84,500.00	(b)(4)			20,000.00
NICN 7540 04 452	Quantity for this CLIN has increased: Continued				

CONTINUATION CUEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED
CONTINUATION SHEET	HSCEDM-11-D-00003/70CDCR18FR0000052/P00006

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ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	From (b)(4)				
	By: (5)(4)				
	To: (b)(4)				
	(b)(7)(E) Requisition No:				
	b)(7)(E)				
•	Aggoveting Info				
	Accounting Info: (b)(7)(E)	1			
	Funded: \$0.00	1			
	Accounting Info:	ار			
	(b)(7)(E)				
	Funded: \$0.00	1			
	Accounting Info:				
	(b)(7)(E)	1			
	Funded: \$0.00	4			
	Accounting Info:				
	(b)(7)(E)	1			
		_			
	Funded: \$0.00				
	Accounting Info: (b)(7)(E)	ıl			
	Funded: \$0.00	1			
	Accounting Info: (b)(7)(E)	-			
	Funded: \$26,000.00	1			
	Change Item 3009 to read as follows (amount shown				
	is the obligated amount):				
3009	CLIN 3009 - 128 EMERGENCY DETENTION BEDS				397,911.04
	Rate is(b)(4) bed				
	Funding for this CLIN has insured.				
	Funding for this CLIN has increased: From(b)(4)				
	By:				
	Continued				
NON 7540 01 15					<u> </u>

CONTINUATION	SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED
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ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
(A) 3010		1		l	
NON 7540 04 452	<u> </u>	ı	<u> </u>		<u> </u>

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CONTINUATION SHEET	HSCEDM-11-D-00003/70CDCR18FR0000052/P00006	14	14

ITEM NO.	SUPPLIES/SERVICES (B)	QUANTITY UNIT	UNIT PRICE	AMOUNT (F)
,	Accounting Info: (b)(7)(E)		,-,	\- <i>\</i>
	Funded: \$119,040.00			
	Add Item 3011 as follows:			
3011	SURGE DETENTION BEDS (b)(4)	(b)(4)		5,340,000.00
	Rate:(b)(4) Month Requisition No: 192119FDN31000001.2,			
	192119FDN31000001.6			
	Accounting Info: (b)(7)(E)			
	Funded: \$3,560,000.00			
	Accounting Info: (b)(7)(E)			
	Funded: \$1,780,000.00			

AMENDMENT OF SOLICITATION	/MODIFICATION	OF CONTRACT	CONTRACT ID CODE	PAGE OF PAGES
			A DECURCITION/PURCUACE DEC. 112	1 16
2. AMENDMENT/MODIFICATION NO.		ECTIVE DATE	4. REQUISITION/PURCHASE REQ. NO. See Schedule	5. PROJECT NO. (If applicable)
P00007 6. ISSUED BY		Block 16C	7. ADMINISTERED BY (If other than Item	(6) CODE
ICEDETENTION COMPLIAN IMMIGRATION AND CUSTO OFFICE OF ACQUISITION 801 I STREET NW SUITE WASHINGTON DC 20536	CE REMOVAL MS ENFORCEM MANAGEMENT	ENT		
8. NAME AND ADDRESS OF CONTRACT	OR (No., street, county, !	State and ZIP Code)	(x) 9A. AMENDMENT OF SOLICITATION	NO.
GEO GROUP INC THE			(^)	
ATTN GEO GROUP INC THE	1		9B. DATED (SEE ITEM 11)	
621 NW 53RD ST (b)(6); (b)(7				
BOCA RATON FL 33407024	2		10A. MODIFICATION OF CONTRACT	(ORDER NO
			* HSCEDM-11-D-00003	TORDER NO.
			70CDCR18FR0000052	
(h)(7)(E)	1	T/ 000E	10B. DATED (SEE ITEM 13)	
CODE (b)(7)(E)		TY CODE	05/02/2018	
The above numbered solicitation is ame			AMENDMENTS OF SOLICITATIONS	is extended. is not extended.
THE PLACE DESIGNATED FOR THE R	ECEIPT OF OFFERS hange an offer already andment, and is receive	PRIOR TO THE HOUR AND E y submitted , such change may ed prior to the opening hour an	nbers. FAILURE OF YOUR ACKNOWLEDG DATE SPECIFIED MAY RESULT IN REJECT be made by telegram or letter, provided each d date specified. t Increase:	ON OF YOUR OFFER If by
	PDI IES TO MODIFICA	ATION OF CONTRACTS/OPE	RS. IT MODIFIES THE CONTRACT/ORDER	NO AS DESCRIBED IN ITEM 14
13. THIS TEM ONE! A	-FEIES TO MODIFICA	KITON OF CONTRACTS/ORDE	rs. II WODIFIES THE CONTRACT/ORDER	NO. AS DESCRIBED IN THEM 14.
ORDER NO. IN ITEM 1	0A.		E CHANGES SET FORTH IN ITEM 14 ARE	
B. THE ABOVE NUMBERI appropriation date, etc.)	ED CONTRACT/ORDE SET FORTH IN ITEM	ER IS MODIFIED TO REFLECT M 14, PURSUANT TO THE AU	FTHE ADMINISTRATIVE CHANGES (such a THORITY OF FAR 43.103(b).	s changes in paying office,
C. THIS SUPPLEMENTAL	AGREEMENT IS ENT	FERED INTO PURSUANT TO A	AUTHORITY OF:	
D. OTHER (Specify type o	f modification and auti	hority)		
X Funding Only		,		
E. IMPORTANT: Contractor		equired to sign this document a	nd return copies to	the issuing office.
			ncluding solicitation/contract subject matter w	
DUNS Number: 6127064		ou by our socion nedalings, ii	iolading Solioladolii contadol Sabject Matter II	note reasiste.
COR: (b)(6)·(b)(7)(C)	720-875 (b)(6):		
(b)(6); (b)(7)(C)				
Program Office, (b)(6); (b)(7)(C)	720-875 (b)(6);		
(b)(6)· (b)(7)(C)		1837737		
_				
2	o)(6); (b)(7)(C)	202-732 (b)	(6);	
b)(6); (b)(7)(C)			··	
Continued				
		nent referenced in Item 9 A or 1	0A, as heretofore changed, remains unchanged	
15A. NAME AND TITLE OF SIGNER (Type	or print)		16A. NAME AND TITLE OF CONTRACT	FING OFFICER (Type or print)
			(b)(6); (b)(7)(C)	
15B. CONTRACTOR/OFFEROR		15C. DATE SIGNED	16B-UNITED STATES OF AMERICA	(b)(6); (b)(7)(C)
			(b)(6); (b)(7)(C)	
(Signature of person authorized	to sign)			
NSN 7540-01-152-8070				
Previous edition unusable				Prescribed by GSA FAR (48 CFR) 53.243

CONTINUATION SHEET

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ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	Contract Specialist: (b)(6); (b)(7)(C) 313-446-(b)(6); (b)(6); (b)(7)(C) The purpose of this modification to Task Order 70CDCR18FR0000052 is to provide additional funding in the amount of (b)(4) for Detention and Transportation services for ICE detainees at the Aurora Contract Detention Facility under the provisions of contract number HSCEDM-11-D-00003. The total obligated amount of this Task Order has increased: From (b)(4) By: To: \$29,690,068.19 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 funded under this Task Order. The Service Provider is not authorized to continue work on those items beyond that point. The Government will not be obligated to reimburse the Service Provider in excess of the amount allotted to those items for performance beyond the funding allotted.	(C)		(E)	(F)
001A	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 (b)(6); WASHINGTON DC 20536 Period of Performance: 09/16/2018 to 09/15/2019 Change Item 3001A to read as follows (amount shown is the obligated amount): GUARANTEED BEDS Continued				1,711,237

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(A) (B) (C) (D) (E) (F) Effective 12/01/2018, the new rate for this CLIN is: (b)(4) Bed Day Funding for this CLIN has increased: From (b)(4) By: To: \$12,974,775.11 Requisition No: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E)	Effective 12/01/2018, the new rate for this CLIN is: \(\begin{align*}{ c c c c c c c c c c c c c c c c c c c	Effective 12/01/2018, the new rate for this CLIN is:(b)(4) Best Day Funding for this CLIN has increased: From(b)(4) By: To: \$12,974,775.11 Regulsition No:(0)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info:	(A)	(B)	(C)	(D)	/= \	
is:(b)(4) Bed Day Funding for this CLIN has increased: From(b)(4) By: To: \$12,974,775.11 Requisition No:(b)(7)(E) b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E)	Is: (b)(4) Bed Day Punding for this CLIN has increased: From (b)(4) By: (b)(4) By: (c)(4) By: (c)(7)(E) Accounting Info: (c)(7)(E) Funded: \$0.00 Accounting Info: (c)(7)(E) Funded: \$0.00 Accounting Info: (c)(7)(E) Funded: \$0.00 Accounting Info: (c)(7)(E) Funded: \$0.00 Accounting Info: (c)(7)(E) Funded: \$0.00 Accounting Info: (c)(7)(E) Funded: \$0.00 Accounting Info: (c)(7)(E) Funded: \$0.00 Accounting Info: (c)(7)(E) Funded: \$0.00 Accounting Info: (c)(7)(E) Funded: \$0.00 Accounting Info: (c)(7)(E) Funded: \$0.00 Accounting Info: (c)(7)(E) Funded: \$0.00 Accounting Info: (c)(7)(E)	is: (b)(4) Bed Day Funding for this CLIN has increased: From (b)(4) By: To: \$12,974,775.11 Requisition No: (b)(7)(E) DO(7)(E) Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E)			()	(D)	(E)	(F)
Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info:	Concinued	Concernaca	(b	Effective 12/01/2018, the new rate for this CLIN is: (b)(4) Bed Day Funding for this CLIN has increased: From (b)(4) By: To: \$12,974,775.11 Requisition No: (b)(7)(E) Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E)			(E)	(F)

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CONTINUATION SHEET	

REFERENCE NO. OF DOCUMENT BEING CONTINUED

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(b)(7)(E) Funded: \$1,711,237.50 Change Item 3001B to read as follows(amount shown is the obligated amount):	856.60
Tunded: \$1,711,237.50 Change Item 3001B to read as follows(amount shown is the obligated amount): 3001B VARIABLE BEDS Effective 12/01/2018, the new rate for this CLIN	856.6
Change Item 3001B to read as follows(amount shown is the obligated amount): VARIABLE BEDS Effective 12/01/2018, the new rate for this CLIN	856.60
is the obligated amount): VARIABLE BEDS Effective 12/01/2018, the new rate for this CLIN	856.60
Effective 12/01/2018, the new rate for this CLIN	856.6
Funding for the CLIN has increased: From (b)(4) By: To: \$3,478,751.14	
Requisition No: (b)(7)(E)	
Accounting Info:	
(b)(7)(E)	
Funded: \$0.00	
Accounting Info: (b)(7)(E)	
Funded: \$0.00	
Accounting Info:	
(b)(7)(E)	
Funded: \$0.00	
Accounting Info:	
(b)(7)(E)	
Funded: \$0.00	
Accounting Info:	
(b)(7)(E)	
Funded: \$0.00 Accounting Info:	
(b)(7)(E)	
Continued	

CONTINUATION	SHEET

HSCEDM-11-D-00003/70CDCR18FR0000052/P00007

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ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	(b)(7)(E)				
	Funded: \$0.00				
	Accounting Info: (b)(7)(E)	1			
	Funded: \$485,856.60				
	Change Item 3002A to read as follows(amount shown is the obligated amount):	1			
3002A	TRANSPORTATION (FLAT RATE)				166,434.40
	Effective 12/01/2018, the new rate for this CLIN is: (b)(4) /Month				
	Funding for the CLIN has increased:				
	From(b)(4) By:				
	To: \$1,247,639.17				
To the state of th	Requisition No: (b)(7)(E)				
(b)(7)(E)				
	Accounting Info:				
	(b)(7)(E)	1			
	(-/·//-/				
	Funded: \$0.00	1			
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$0.00				
	Accounting Info: (b)(7)(E)				
	Funded: \$0.00				
	Accounting Info: (b)(7)(E)				
	Funded: \$0.00				
	Accounting Info: (b)(7)(E)				
	(-), (-), (-)				
	Continued				

CONTINUATION	SHEET

HSCEDM-11-D-00003/70CDCR18FR0000052/P00007

PAGE 6 OF 16

ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	Funded: (b)(4)		\vdash		
	Change Item 3002B to read as follows(amount shown is the obligated amount):				
3002B	CLIN 3002B - FUEL PASS THRU	(b)	(4)		6,000.00
	Funded amount for this CLIN has increased: From (b)(4) By: To: \$45,000.00				
	Quantity of months funded have increased: From(b)(4) By: To:(b)(4) Requisition No:(b)(7)(E)				
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$0.00				
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$0.00				
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$0.00				
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$0.00				
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$6,000.00				
	Change Item 3003 to read as follows(amount shown is the obligated amount):				
3003	REMOTE CUSTODY				30,294.46
-	Continued				
		l			

CONTINUATION	SHEET

HSCEDM-11-D-00003/70CDCR18FR0000052/P00007

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ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
(A)			ı	l	
	Quantity for this CLIN has increased: Continued				
NON 7540 01 152	0007	<u> </u>	ı		<u> </u>

CONTINUATION	SHEET

HSCEDM-11-D-00003/70CDCR18FR0000052/P00007

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OF

(A) (B) (C) (D) (E) (F) From (b)(4)	ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
Requisition No: DN/NE) Requisition No: DN/NE) Accounting Info: (D)(7)(E) Funded: \$0.00 Accounting Info: (D)(7)(E)	(A)	(B)	(C)	(D)	(E)	(F)
Change Item 3005 to read as follows(amount shown is the obligated amount): 3005 MEDICAL SERVICES 236,449.9	(A)	From (b)(4) By: (b)(4) To: (b)(7)(E) Requisition No: (b)(7)(E) Accounting Info: ((b)(7)(E) Funded: \$0.00 Accounting Info: ((b)(7)(E) Funded: \$0.00 Accounting Info: ((b)(7)(E) Funded: \$0.00 Accounting Info: ((b)(7)(E) Funded: \$0.00 Accounting Info: ((b)(7)(E) Funded: \$0.00 Accounting Info: ((b)(7)(E) Funded: \$0.00 Accounting Info: ((b)(7)(E) Funded: \$0.00 Accounting Info: ((b)(7)(E)	1			
	3005	Change Item 3005 to read as follows(amount shown is the obligated amount): MEDICAL SERVICES				236,449.96
NSN 7540-01-152-8067						

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HSCEDM-11-D-00003/70CDCR18FR0000052/P00007

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ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	Effective 12/01/2018, the new rate for this CLIN				
	is: (b)(4) /Month				
	Funding for this CLIN has ingressed.				
	Funding for this CLIN has increased: From(b)(4)				
	By:				
	To: \$1,821,053.48				
	Requisition No: (b)(7)(E)				
(1	b)(7)(E)				
_	Accounting Info:				
	(b)(4)				
	Funded: \$0.00	İ			
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$0.00				
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$0.00				
	Accounting Info:				
	(b)(7)(E)				
	Fundea: \$0.00				
	Accounting Info:				
	(b)(4)				
	Funded: (b)(4)				
	Accounting Info: (b)(7)(E)				
	(6)(1)(2)				
	Funded: \$236,449.96				
		İ			
	Change Item 3005A to read as follows(amount shown				
	is the obligated amount):				
3005A	MEDICAL SERVICES - TIER 1 (b)(4)	(b)(4)	L		16,200.0
3003A	HEDICAL SERVICES - IIEV I	(b)(4)			10,200.0
	Continued				
NON 7540 01 152	***				

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REFERENCE NO. OF DOCUMENT BEING CONTINUED
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ITEMNO	QUIDDUEQ/QEDV/QEQ	QUANTITY	LINUT	UNIT PRICE	AMOUNT
ITEM NO.	SUPPLIES/SERVICES (B)		(D)		AMOUNT (F)
(A)		(0)	(D)	(E)	(1)
	Funding for this CLIN has increased:				
	From (b)(4)				
	By: 100 500 00				
	To: \$122,580.00				
	Quantity for this CLIN has increased:				
	From(b)(4) By:				
	To: (b)(4)				
	Requisition No: (b)(7)(E)				
1	(b)(7)(E)				
Į					
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$0.00				
	Accounting Info:				
	(b)(7)(E)				
			l		
	Funded: \$0.00				
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$0.00				
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$0.00				
	Accounting Info:				
	(b)(7)(E)				
	/-/·/—/				
,	Funded: \$0.00				
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$0.00	ĺ			
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$16,200.00				
	Continued				
					<u> </u>

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED
	HSCEDM-11-D-00003/70CDCR18FR0000052/P00007

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ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	Change Item 3005B to read as follows(amount shown				
	is the obligated amount):				
3005B	MEDICAL SERVICES - TIER 2 (b)(4)	(b)(4)	ш		15,240.00
	Funding for this CLIN has increased.				
	Funding for this CLIN has increased: From (b)(4)				
	By:				
	To: \$115,316.00				
	Quantity for this CLIN has increased:				
	From(b)(4)				
	By: (b)(4) To:				
	Requisition No: (b)(7)(E)				
F	(b)(7)(E)				
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$0.00				
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$0.00				
	Accounting Info: (b)(7)(E)				
	(-/\·/\-/				
	Funded: \$0.00 Accounting Info:				
	(b)(7)(E)				
	Funded: \$0.00				
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$0.00				
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$0.00				
	Accounting Info:				
	Continued				
NON 7540 04 452					

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ITEM NO.	SUPPLIES/SERVICES	QUANTIT	1	1	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	(b)(7)(E)				
	Funded: \$15,240.00				
	1		1		
	Change Item 3005C to read as follows(amount shown	1	1		
	is the obligated amount):				
3005C	MEDICAL SERVICES - TIER 3 (b)(4)				45,313.20
30030	MEDICAL SERVICES TIER 5 (D)(4)				45,515.20
	Effective 03/01/2019, the new rate for this CLIN		İ		
	is (b)(4)				
	Funding for this CLIN has increased:				
	From (b)(4)				
	By: (8)(4)		1		
	To: \$342,869.88				
	Requisition No:				
(b	Requisition No:				
Ì	^ ^ /				
			1		
L		1	1		
	Accounting Info:				
	(b)(7)(E)		1		
			1		
	Funded: \$0.00				
	Accounting Info:				
	(b)(7)(E)				
			1		
	Funded: \$0.00				
	Accounting Info:		1		
	ERODETN-V01 BD 31-13-00-000		1		
	(b)(7)(E)				
	Funded: \$0.00				
	Accounting Info:				
	(b)(7)(E)		1		
	Funded: \$0.00				
	Accounting Info:				
	(b)(7)(E)				
	Durada da 60 00				
	Funded: \$0.00 Accounting Info:				
	(b)(7)(E)				
	Continued				
					<u> </u>

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ITEM NO.	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT		AMOUNT (F)
(A)		(0)	(D)	(E)	(1)
	(b)(7)(E)				
	Funded: \$0.00				
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$45,313.20				
	Change Item 3008 to read as follows(amount shown				
	is the obligated amount):				
3008	TELE-RADIOLOGY				28,000.00
	Funded amount for this CLIN has increased: From (b)(4)				
	By:				
	To: \$112,500.00				
	(b)(7)(E)				
VE	Requisition No: (C)(T)(E)				
(,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
L					
	Accounting Info: (b)(7)(E)				
	(2)(1)(2)				
	Funded: \$0.00				
	Accounting Info: (b)(7)(E)	ı			
	(~)(~)(~)				
	Funded: \$0.00				
	Accounting Info: (b)(7)(E)				
	Funded: \$0.00				
	Accounting Info: (b)(7)(E)				
	Funded: \$0.00				
	Accounting Info: (b)(7)(E)				
	(~\(\.\)				
	Funded: \$0.00				
	Accounting Info: Continued				
	Concinued				

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ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	(b)(7)(E) Funded: \$0.00				
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$28,000.00				
	Change Item 3009 to read as follows(amount shown is the obligated amount):				
3009	CLIN 3009 - 128 EMERGENCY DETENTION BEDS				198,955.52
	Rate is (b)(4) bed				
	Funding for this CLIN has increased: From (b)(4) By: To: \$1,597,662.80				
ſ	Requisition No: (b)(7)(E) (b)(7)(E)				
L	Accounting Info:				
	(b)(7)(E)				
	Funded: \$0.00 Accounting Info:				
	(b)(7)(E)				
	Funded: \$0.00				
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$0.00 Accounting Info:				
	(b)(7)(E)				
	Funded: \$198,955.52				
	Change Item 3010 to read as follows(amount shown is the obligated amount):				
	Continued				
	I .	1		i	I

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ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
3010	CLIN 3010 - MEDICAL SERVICES FOR CLIN 3009	(b)(4)			59,520.00
	Funding for this CLIN has increased: From (b)(4) By: To: \$443,520.00 Quantity for this CLIN has increased:				
	Fron(b)(4) By: To:(b)(4)				
	Requisition No: (b)(7)(E)				
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$0.00				
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$0.00				
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$0.00				
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$59,520.00				
	Change Item 3011 to read as follows(amount shown is the obligated amount):				
3011	SURGE DETENTION BEDS (b)(4)	(b)(4)			1,780,000.00
	Rate:(b)(4) /Month				
	Funding increases: from(b)(4) by { To: \$7,120,000.00 Requisition No: (b)(7)(E) Continued				
NON 7540 04 452					

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	HSCEDM-11-D-00003/70CDCR18FR0000052/P00007	16	16

ITEM NO.	SUPPLIES/SERVICES		QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A)	(B)			(D)		(F)
,,	(b)(7)(E)		, - ,	, - /	, - /	\- /
	Quantity: 3					
	Accounting Info:					
	(b)(7)(E)					
	Funded: \$0.00					
	Accounting Info:					
	(b)(7)(E)					
	Funded: \$0.00					
	Tunaca. 70.00					
	Quantity: 1					
	Accounting Info:					
	(b)(7)(E)					
	Funded: \$1,780,000.00					
	All other terms and conditions remain the	same.				

AMENDMENT OF SOLICITATION/MODIF	ICATION OF CONTRACT		CONTRACT ID CODE		PAGE OF	
2. AMENDMENT/MODIFICATION NO.	3. EFFECTIVE DATE	4. REQ	UISITION/PURCHASE REQ. NO.	5. PF	ROJECT NO.	(If applicable)
P00008	See Block 16C	See	Schedule			
6. ISSUED BY COD		7. ADN	INISTERED BY (If other than Item 6)	COD	E	
ICEDETENTION COMPLIANCE RIMMIGRATION AND CUSTOMS EN OFFICE OF ACQUISITION MANAGED I STREET NW SUITE (b)(6) WASHINGTON DC 20536	GEMENT					
8. NAME AND ADDRESS OF CONTRACTOR (No., st	reet, county, State and ZIP Code)	(x) 9A.	AMENDMENT OF SOLICITATION NO.			
GEO GROUP INC THE						
ATTN GEO GROUP INC THE (b)(7)(E)		9B.	DATED (SEE ITEM 11)			
621 NW 53RD ST STE ON NE						
30CA RATON FL 3340/0242		x 10A	. MODIFICATION OF CONTRACT/ORD	DER NO.		
			CDCR18FR0000052			
			. DATED (SEE ITEM 13)			
CODE (b)(7)(E)	FACILITY CODE	<u> </u>	5/02/2018			
	11. THIS ITEM ONLY APPLIES					
The above numbered solicitation is amended as se				s extended.	is not ext	ended
Offers must acknowledge receipt of this amendmen						
			eipt of this amendment on each copy of	-		-
separate letter or telegram which includes a refere	nce to the solicitation and amendment	numbers. FA	LURE OF YOUR ACKNOWLEDGEME	NT TO BE RE	ECEIVED AT	
THE PLACE DESIGNATED FOR THE RECEIPT OF	F OFFERS PRIOR TO THE HOUR AN	ND DATE SPE	CIFIED MAY RESULT IN REJECTION (OF YOUR OF	FER If by	
virtue of this amendment you desire to change an				gram or lette	r makes	
reference to the solicitation and this amendment, a	an according at			(b)(4)		
12. ACCOUNTING AND APPROPRIATION DATA (IF 1 See Schedule	required)	Net Inc	rease:	(5)(4)		
						
13. THIS ITEM ONLY APPLIES TO	MODIFICATION OF CONTRACTS/OF	RDERS. IT MC	DIFIES THE CONTRACT/ORDER NO.	AS DESCRIB	ED IN ITEM 1	4.
CHECK ONE A. THIS CHANGE ORDER IS ISSUE ORDER NO. IN ITEM 10A.	D PURSUANT TO: (Specify authority)) THE CHANG	ES SET FORTH IN ITEM 14 ARE MAD	E IN THE CO	NTRACT	
B. THE ABOVE NUMBERED CONTR appropriation date, etc.) SET FOR	RACT/ORDER IS MODIFIED TO REFL RTH IN ITEM 14, PURSUANT TO THE	LECT THE ADM AUTHORITY	MINISTRATIVE CHANGES (such as cha OF FAR 43.103(b).	anges in payi	ng office,	
C. THIS SUPPLEMENTAL AGREEM	ENT IS ENTERED INTO PURSUANT	TO AUTHORIT	Y OF:			
D. OTHER (Specify type of modificat	ion and authority)					
X Funding Only Action						
E. IMPORTANT: Contractor X is not	, srequired to sign this docume	ent and return	copies to the	issuing office).	
14. DESCRIPTION OF AMENDMENT/MODIFICATION	N (Organized by UCF section heading	gs, including s	olicitation/contract subject matter where	feasible.)		
DUNS Number: 612706465						
COR:(b)(6); (b)(7)(C) 720-87	75 -(b)(6) ;					
	(6)(0),					
(b)(6); (b)(7)(C)						
(1) (2) (1) (3) (4) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4						
Program Office, $(b)(6)$; $(b)(7)(0)$	720-875 (h)(6)·]				
b)(6): (b)(7)(C)						
Contracting Officer: (b)(6):(h)/7)/C) 202-732-(h)/6	3).				
	DILLICI 205-125-[D)(0	7),				
(b)(6); (b)(7)(C)						
Continued						
Except as provided herein, all terms and conditions of	of the document referenced in Item 9 A	or 10A, as her	etofore changed, remains unchanged a	and in full force	e and effect.	
15A. NAME AND TITLE OF SIGNER (Type or print)		16A. N	IAME AND TITLE OF CONTRACTING	OFFICER (7	ype or print)	
		/l= \ / /	S): /b)/7)/C)			
		(b)(d	6); (b)(7)(C)			
15B. CONTRACTOR/OFFEROR	15C. DATE SIGNE		INITED STATES OF AMERICA	1 \/8\ "		DATE SIGNED
		(b)	(6); (b)(7)(C)	b)(6); (b)(7)(C)	
(Signature of person authorized to sign)		-	(Signature of Contracting Officer)			
NSN 7540-01-152-8070					RD FORM 30	(REV. 10-83)

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-11-D-00003/70CDCR18FR0000052/P00008

NAME OF OFFEROR OR CONTRACTOR

GEO	GROUP	INC	THE	

(3)	SUPPLIES/SERVICES	QUANTITY	1 1	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	Contract Specialist: (b)(6); (b)(7)(C) 313-446-(b)(6): (b)(6); (b)(7)(C)	-			
	The purpose of this modification to Task Order 70CDCR18FR0000052 is to provide additional				
	funding in the amount of (b)(4) for Detention and Transportation services for ICE				
	detainees at the Aurora Contract Detention				
	Facility under the provisions of contract number HSCEDM-11-D-00003.				
	The total obligated amount of this Task Order has increased:				
	From(b)(4)				
	By: To: \$31,948,397.72				
	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 funded under this Task Order. The Service				
	Provider is not authorized to continue work on				
	those items beyond that point. The Government will not be obligated to reimburse the Service				
	Provider in excess of the amount allotted to				
	those items for performance beyond the funding allotted.				
	allocted.				
	Discount Terms:				
	Net 30 Delivery Location Code: ICE/ERO				
	ICE ENFORCEMENT REMOVAL				
	IMMIGRATION AND CUSTOMS ENFORCEMENT 801 I STREET NW				
	SUITE (b)(6);				
	WASHINGTON DC 20536				
	Period of Performance: 09/16/2018 to 09/15/2019				
	Change Item 3001A to read as follows(amount shown is the obligated amount):				
3001A	GUARANTEED BEDS				1,768,278.7
	Continued				

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м no. A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	Effective 12/01/2018, the new rate for this CLIN				
	is: (b)(4) Bed Day				
	Funding for this CLIN has increased:				
	From (b)(4)				
	By:				
	To: \$14,743,053.86				
	Requisition No: (b)(7)(E)				
	(b)(7)(E)				
•	Accounting Info:				
	(b)(7)(E)				
	Funded: \$0.00				
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$0.00				
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$0.00				
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$0.00				
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$0.00				
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$0.00 Accounting Info:				
	(b)(7)(E)				
	N-N-N-				
	Funded: \$0.00				
	Continued				

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CONTINUATION SHEET	HSCEDM-11-D-00003/70CDCR18FR0000052/P00008	4	6

ITEM NO.	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT		AMOUNT (F)
(A)		(C)	(D)	(E)	(1)
	Accounting Info: (b)(7)(E)				
	Funded: \$0.00				
	Accounting Info:		İ		
	(b)(7)(E)				
	Funded: \$1,768,278.75				
	Tunded: \(\frac{1}{7}\) \(\frac{7}{2}\) \(\frac{7}{6}\) \(\f				
	Change Item 3001B to read as follows(amount shown				
	is the obligated amount):		l		
3001B	VARIABLE BEDS				430,050.78
	Effective 12/01/2018, the new rate for this CLIN				
	is: $(b)(4)$ Bed Day				
	2	İ	l		
	Funding for the CLIN has increased:				
	From (b)(4)				
	By: To: \$3,908,801.92				
	Requisition No: (b)(7)(E)				
(b)	(7)(E)		l		
<u> </u>	Accounting Info:				
	(b)(7)(E)				
	Funded: \$0.00				
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$0.00				
	Accounting Info: (b)(7)(E)				
	Funded: \$0.00				
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$0.00	1			
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CONTINUATION SHEET	HSCEDM-11-D-00003/70CDCR18FR0000052/P00008	5		6

NAME OF OFFEROR OR CONTRACTOR

GEO GROUP INC THE

ITEM NO. SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A) (B)	(C)	(D)	(E)	(F)
Accounting Info:	_			
(b)(7)(E)]			
Funded: \$0.00	J			
Accounting Info:				
(b)(7)(E)	1			
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		İ		
Funded: \$0.00				
Accounting Info:				
(b)(7)(E)				
Funded: \$0.00				
Accounting Info:				
(b)(7)(E)		İ		
- 1 1 4400 0F0 70				
Funded: \$430,050.78				
Change Item 3002A to read as follows(amount show	n			
is the obligated amount):				
3002A TRANSPORTATION (FLAT RATE)				60,000.00
Effective 12/01/2018, the new rate for this CLIN				
is: (b)(4) /Month				
, , , , , , , , , , , , , , , , , , , ,				
Funding for the CLIN has increased:		İ		
From(b)(4)				
By:				
To: \$1,307,639.17 Requisition No: (b)(7)(E)				
(b)(7)(E)				
Accounting Info:	٦			
(b)(7)(E)				
Funded: \$0.00	-			
Accounting Info:				
(b)(7)(E)				
Thursday 00,00				
Funded: \$0.00 Accounting Info:				
(b)(7)(E)				
Continued				
		1		
NON 7540 04 459 9067				<u> </u>

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CONTINUATION SHEET	HSCEDM-11-D-00003/70CDCR18FR0000052/P00008	6	6

NAME OF OFFEROR OR CONTRACTOR

JEO GROUP INC THE	
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и no. A)	SUPPLIES/SERVICES	QUANTIT (C)	Y UNIT (D)		AMOUNT (F)
m.)	(B)	(0)	(ח)	(正)	(F.)
	(b)(7)(E)				
	Funded: \$0.00				
	Accounting Info:				
	(b)(7)(E)				
	Funded: \$0.00				
	Accounting Info: (b)(7)(E)	٦			
	Funded: \$0.00	ᆀ			
	Accounting Info:				
	(b)(7)(E)	1			
	Funded: \$60,000.00	ا ا			
	All other terms and conditions remain the same.				
	All other terms and conditions remain the same.				
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AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT				CONTRACT ID CODE	AGE OF	OF PAGES		
2. AMENDMENT/MODIFICATION N		3. EFFECTIVE DATE	TA DE	QUISITION/PURCHASE REQ. NO.	ls ppo	1	3	
P00035	40.	20 20 20 20 20 20 20 20 20 20 20 20 20 2	4. KE	EQUISITION/PURCHASE REQ. NO.	5. PRO	JECT NO.	(If applicable)	
6. ISSUED BY	CODE	See Block 16C ICE/DCR	7 AI	DMINISTERED BY (If other than Item 6)	CODE	_		
ICE/Detention Comp Immigration and Cu Office of Acquisit 801 I Street, NW S WASHINGTON DC 2053	eliance & Factorian Stoms Enfo ion Manage uite (b)(6);	Removals			0002			
8. NAME AND ADDRESS OF CONT	RACTOR (No., stree	t, county, State and ZIP Code)	(x) 9	A. AMENDMENT OF SOLICITATION NO.				
CEO CDOUD INC BUE			(^)					
GEO GROUP INC THE ATTN GEO GROUP INC 621 NW 53RD ST (b)(6); BOCA RATON FL 3348	(0)		x 11	B. DATED (SEE ITEM 11) DA. MODIFICATION OF CONTRACT/ORDER NO SCEDM-11-D-00003 DB. DATED (SEE ITEM 13)	D.			
CODE (b)(7)(E)		FACILITY CODE	- 1					
-/· //-/		11. THIS ITEM ONLY APPLIES TO		09/15/2011				
THE PLACE DESIGNATED FOR virtue of this amendment you desi reference to the solicitation and the 12. ACCOUNTING AND APPROPRISEE Schedule 13. THIS ITEM OF	THE RECEIPT OF or re to change an offer is amendment, and ATION DATA (If required to MATA) and the second of the s	OFFERS PRIOR TO THE HOUR AND D r already submitted, such change may t is received prior to the opening hour and uired) ODIFICATION OF CONTRACTS/ORDER	be made d date s	AILURE OF YOUR ACKNOWLEDGEMENT TO I ECIFIED MAY RESULT IN REJECTION OF YOU by telegram or letter, provided each telegram or pecified. MODIFIES THE CONTRACT/ORDER NO. AS DES GES SET FORTH IN ITEM 14 ARE MADE IN TH	JR OFFE letter ma	R If by akes	i.	
B. THE ABOVE NUM appropriation date	MBERED CONTRAC e, etc.) SET FORTH	CT/ORDER IS MODIFIED TO REFLECT I IN ITEM 14, PURSUANT TO THE AUT T IS ENTERED INTO PURSUANT TO A		OMINISTRATIVE CHANGES (such as changes in Y OF FAR 43.103(b).	paying (office,		
D. OTHER (Specify I		500 00						
X FAR 43.103	(a) Mutual	Agreement of the Pa	artie	es				
E. IMPORTANT: Contractor	☐ is not.	x is required to sign this document an	nd return	1 copies to the issuing	office.			
14. DESCRIPTION OF AMENDMEN DUNS Number: 61270 Contracting Officer (b)(6); (b)(7)(C)	06465		cluding	solicitation/contract subject matter where feasible	9.)			
(720) 875-(b)(6);								
Alternate COR:								
b)(6); (b)(7)(C)								
(303) 361-(b)(6):		_						
Continued								
Except as provided herein, all terms. 15A. NAME AND TITLE OF SIGNER (h)(6)·(h)(7)(C) Exe	(Type or print)		16A.	eretofore changed, remains unchanged and in ful NAME AND TITLE OF CONTRACTING OFFICE (6);				
15B. CONTRACTOR/OFFEEDOR (b)(6); (b)(7)(C) (Signature of person aurin	ят гео to sign)	15C. DATE SIGNED 11/14/2018		UNITED STATES OF AMERICA (6); (b)(7)(C) (Signature of Contracting Officer)		16C. I	DATE SIGNED	
NSN 7540-01-152-8070 Previous edition unusable				STA Pre	scribed b		(REV. 10-83)	

CONTINUIATION CUEFT	REFERENCE NO. OF DOCUMENT BEING CONTINUED	PAGE	OF
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ITEM NO.	SUPPLIES/SERVICES	QUANTITY	LINIT	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	Contracting Officer:	_			
	(b)(6); (b)(7)(C)				
	(2002) 720 (b)(6):				
	(202) 732-(b)(<u>6</u>);				
	Contract Specialist:				
	(b)(6); (b)(7)(C)			- 1	
	(313) 446 -(b)(6				
	(313) 446-(b)(6)			1	
	The purpose of this modification is to add CLIN				
	3011 for 432 Surge Detention Beds that can be				
	used for up to 90 days at (b)(4) at the Denver Contract Detention Facility. The 90				
	day period of performance and billing for CLIN				
	3011 will commence the day detainees are housed				
	at the facility.				
	The optimal requirements under Sections 5.4 and				
	6.3 of the PBNDS 2011 have been waived for the				
	regular standards, and a waiver to the regular				
	PBNDS 2011 has been approved for Section 5.7.				
	Sections 5.4, 5.7, and 6.3 of the PBNDS 2011 have been revised below and apply only to the 432				
	beds. All other terms and conditions to PBNDS				
	2011 remain in full effect.				
	PBNDS 5.4 RECREATION, SECTION II, EXPECTED				
	OUTCOMES:				
	1. Detainees shall opportunities at a reasonable				
	time of day to participate in leisure time activities outside their respective living areas.				
	2. Detainees shall have access to exercise				
	opportunities and equipment at a reasonable time				
	of day, including at least one hour daily of				
	physical exercise outside the living area, and outdoors when practical.				
	mon placeloal.				
N.	DDNDC 5 7 UTCTMAMION CROMION I No. 1 HOURS AND				
	PBNDS 5.7 VISITATION, SECTION I, No. 1, HOURS AND TIME LIMITS:				
	Detainees would receive no less than thirty (30)				
	minutes of visitation time everyday.				
	PBNDS 6.3, LAW LIBRARIES AND LEGAL MATERIAL:				
	1. Detainees shall have access to a properly				
	equipped law library, legal materials and				
	equipment (including photocopying resources) to				
	facilitate the preparation of documents. 2.Detainees shall have meaningful access (no less				
	Continued				

CONTINUATION SUFEE	REFERENCE NO. OF DOCUMENT BEING CONTINUED	PAGE	OF
CONTINUATION SHEET	HSCEDM-11-D-00003/P00035	3	3

(A)	SUPPLIES/SERVICES (B)	QUANTITY UNI		AMOUNT (F)
	than five hours per week) to law libraries, legal materials and equipment.			
	Exempt Action: Y Sensitive Award: NONE Discount Terms: Net 30 Delivery Location Code: ICE/ERO ICE Enforcement & Removal Immigration and Customs Enforcement 801 I Street, NW Suite (b)(6); Washington DC 20536 FOB: Destination			
	Period of Performance: 09/16/2011 to 09/15/2021 Add Item 3011 as follows:			
3011	Surge Detention Beds	(b)(4)	(b)(4)]
	432 Detention Beds for a Fixed Fee of (b)(4) per month.			
	The Period of Performance is for up to 90 days from the first day detainees are housed. Total value of CLIN 3011 is (b)(4)			
	Obligated Amount: (b)(A) Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD			
	No funding is obligated on this base contract. Any funding shall be provided on the current Task Order.			
	All other terms and conditions remain unchanged.			

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT						CONTRACT ID CODE	PAGE OF PAGES		
				-				1	3
	T/MODIFICATION NO.		3. EFFECTIVE DA	TE	4. REQI	JISITION/PURCHASE REQ. NO.	5.	PROJECT NO). (If applicable)
P00037 6. ISSUED BY		CODE	See Block	16C	7 4014	INISTERED BY (If other than Item	- 6)	- DE	
ICE/Dete Immigrat Office o 801 I St	ention Compliion and Cust f Acquisition reet, NW Sui	ance & R oms Enfo	rcement		- ADM	INISTERED BY (II Other than nen	769 66	DE	
8. NAME AND A	DDRESS OF CONTRAC	CTOR (No., street	county, State and ZIP	Code)	(x) 9A.	AMENDMENT OF SOLICITATION	NO.		
ATTN GEO 621 NW 53	P INC THE GROUP INC THE BRD ST (D)(6); SND ST (S)(7)(7) N FL 3348782				9B. 1	DATED (SEE ITEM 11) MODIFICATION OF CONTRACT CEDM-11-D-00003 DATED (SEE ITEM 13)	VORDER NO.		
CODE (b)(7)	(E)		FACILITY CODE		1 log	/15/2011			
			11. THIS ITEM O	ONLY APPLIES TO		NTS OF SOLICITATIONS			
Items 8 and 1 separate lette THE PLACE I virtue of this a reference to the	5, and returning or or telegram which inclu DESIGNATED FOR THE amendment you desire to the solicitation and this ar NG AND APPROPRIATIO	copides a reference RECEIPT OF Control of the change an offer mendment, and	oies of the amendmento the solicitation are FFERS PRIOR TO ralready submitted, s received prior to the	ent; (b) By acknowle and amendment num THE HOUR AND D such change may	edging rece bers. FAII DATE SPEC be made b	n or as amended , by one of the foilipt of this amendment on each course of YOUR ACKNOWLEDGI ITIED MAY RESULT IN REJECTI y telegram or letter, provided each ified.	py of the offer so EMENT TO BE I ION OF YOUR O	ubmitted; or (d RECEIVED AT DFFER If by	e) By
	13. THIS ITEM ONLY	APPLIES TO M	ODIFICATION OF CO	ONTRACTS/ORDER	RS. IT MOI	DIFIES THE CONTRACT/ORDER	NO. AS DESCR	IBED IN ITEM	14.
CHECK ONE	A. THIS CHANGE ORDE ORDER NO. IN ITEM	ER IS ISSUED F I 10A.	URSUANT TO: (Spe	ecify authority) THE	E CHANGE	S SET FORTH IN ITEM 14 ARE I	MADE IN THE C	CONTRACT	
	B. THE ABOVE NUMBE appropriation date, et C. THIS SUPPLEMENTA					INISTRATIVE CHANGES (such a F FAR 43.103(b).	s changes in pa	ying office,	
1	D. OTHER (Specify type			+ +- END (E0 000	4.2			
· ·	Bilateral Mo					1			
OUNS Numk	ON OF AMENDMENT/M	465	,	section headings, in		icitation/contract subject matter w	the issuing officience feasible.)	ce.	
b)(6); (b)(7)(C	ing Officer's	o nepres							
b)(6); (b)(7)(C (720) 875		.dhs.gov							
Alternate b)(6); (b)(7)(C b)(6); (b)(7)(C (303) 361	ice 1-(0)(0); (0)(7)(]					
	Executive VP			n ed in Item 9 A or 10		tofore changed, remains unchang			
134. NAIVIE ANL	TITLE of hee Ge	ซ ซางน	p, inc.		(b)(6); (b)(7)(C)	ING OFFICER	Type or print)	
(b)(6);	(b)(7)(C)	sign)	150	25/19		rited states of AMERICA ; (b)(7)(C)	(b)(6	160 3); (b)(7)(C. DATE SIGNED
NSN 7540-01-15 Previous edition		-57					Prescri	ARD FORM 3 bed by GSA 8 CFR) 53.243	0 (REV. 10-83)

CONTINUATION	SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED

HSCEDM-11-D-00003/P00037

PAGE 2

NAME OF OFFEROR OR CONTRACTOR

GEO GROUP INC THE

TEM NO.	SUPPLIES/SERVICES	QUANTITY	l .	UNIT PRIÇE	AMOUNT
(A)	(B)	(C)	(D)	(王)	(F)
	Contracting Officer:				
	(b)(6); (b)(7)(C)				
	(202) 732-(b)(6);				
	Contract Specialist: (b)(6); (b)(7)(C)				
	(313) 446·(b)(6);				
		1			
	The purpose of this modification to contract HSCEDM-11-D-90003 is to:				
	HACKEM-1:-5-00003 13 300				
	1.) Exercise CLIN 3011 to activate 432 beds at				
	Aurora for use starting 1/21/19.	-			
	No funding is obligated on this base contract				
	HSCEDM-11-D-00003. Funding will be provided	1			
	Subject to Availability of funds via the current				
	funding Task Order.				
	*******]			
	Exempt Action: Y Sensitive Award: NONE				
	Delivery: 01/21/2019	[
	Discount Terms:]			
	Net 30 Delivery Location Code: ICE/ERO	ĺ			
	ICE Enforcement & Removal]			
	Immigration and Customs Enforcement	ì			
	801 I Street, NW				
	Suite (h)/6	1		1	
	Washington DC 20536				
	FOB: Destination			:	
	Period of Performance: 09/16/2011 to 09/15/2021]			
	Change Item 3011 to read as follows(amount shown			i	
	is the total amount):				
		[[[]		(1.374)	,
011	Surge Detention Beds	(b)(4)		(b)(4)	
	432 Detention Bods for a Fixed Fee of (b)(4)	1		i	
	per month			;	
		-			
	The Period of Performance is for up to 90 days from the first day detainees are housed. Total				
	value of CLIN 3011 is $(b)(4)$	'		į	
		ᅱ			
	Obligatori Impunt (/b)///			İ	
	Obligated Amount: (b)(4) Continued				
	CONTENED				
				ĺ	
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CONTINUATION SHEET	HSCEDM-11-D-00003/P00037	3	1 3

QUANTITY UNIT

(D)

(C)

UNIT PRICE

(E)

AMOUNT

(F)

NAME OF OFFEROR OR CONTRACTOR GEO GROUP INC THE

ITEM NO.

(A)

Product/Service Code: \$206

SUPPLIES/SERVICES

(B)

Product/Service Description: HOUSEKEEPING- GUARD This procurement is awarded in accordance with FAR 52.232-18 (Subject to Availability of Funds). Funds are not presently available for this contract. The Government's obligation under this contract is contingent upon the availability of appropriated funds from which payment for contract purposes can be made. No legal liability on the part of the Government for any payment may arise until funds are made available to the Contracting Officer for this contract and until the Contractor receives notice of such availability, to be confirmed in writing by the Contracting Officer. Performance under this contract has been designated by ICE as necessary for avoidance of imminent threat(s) to the safety of human life or

the protection of property and this work is exempt from the restriction under 31 U.S.C. % 1341, Limitations on Expending and Obligating Amounts, Against Creating an Obligation in Advance of Appropriated Funds. Accordingly, despite the fact that appropriated funds are not. presently available to make all payments under this task order, the contractor is authorized to perform under the contract; the government will make payments otherwise required by the contract once the Department of Homeland Security is provided appropriated funds for this contract. The Contracting Officer shall notify the contractor immediately upon DHS receiving or failing to receive such appropriated funds and shall make such funds received available for payment under this contract within 10 days.

All other terms and conditions remain unchanged.

AMENDM	IENT OF SOLICITATI	ON/MODIFIC	ATION OF CONTRACT	1. CONTRACT ID COI	1. CONTRACT ID CODE		
				A DECUMPATION OF THE PARTY OF T	250 110	1	2
	IENT/MODIFICATION NO.		3. EFFECTIVE DATE	4. REQUISITION/PURCHASE F	REQ. NO.	5. PROJECT	NO. (If applicable)
P00039 6. ISSUED B	ov	CODE	See Block 16C	7. ADMINISTERED BY (If other	r than Itam 6)	CODE	
ICE/De Immigra Office 801 I	tention Compliation and Custof Acquisition Street, NW Su:	iance & F toms Enfo on Manage	ercement ement				
B. NAME AN	D ADDRESS OF CONTRA	CTOR (No., street	, county, State and ZIP Code)	9A. AMENDMENT OF SOLI	CITATION NO.		
		,,	, , , ,	(x) SAL AMENDMENT OF SOLE			
	OUP INC THE	UE		9B. DATED (SEE ITEM 11)			
21 NW	O GROUP TNC T (b)(6); 53RD ST(b)(7)(c)			Job. Divided (SEE Tream 11)			
	TON FL 334878	242		404 MODIFICATION OF CO	ONTO A CTIODOED NO		
				x HSCEDM-11-D-00	003).	
				10B. DATED (SEE ITEM 13))		
(b)((7)(E)		FACILITY CODE	09/15/2011			
			11. THIS ITEM ONLY APPLIES TO	AMENDMENTS OF SOLICITATION	IS		
virtue of th reference to 2. ACCOUN	is amendment you desire to the solicitation and this a ITING AND APPROPRIATI	o change an offer mendment, and i	FFERS PRIOR TO THE HOUR AND I r already submitted, such change may s received prior to the opening hour an irred)	be made by telegram or letter, prov			y
ee Sch		APPLIES TO M	ODIFICATION OF CONTRACTS/ORDE	RS. IT MODIFIES THE CONTRACT	CORDER NO. AS DES	CRIBED IN ITE	M 14.
CHECK ONE	A. THIS CHANGE ORD ORDER NO. IN ITEM	ER IS ISSUED P I 10A.	URSUANT TO: (Specify authority) TH	E CHANGES SET FORTH IN ITEM	114 ARE MADE IN TH	E CONTRACT	
	B. THE ABOVE NUMBE appropriation date, e	RED CONTRAC tc.) SET FORTH	T/ORDER IS MODIFIED TO REFLECT IN ITEM 14, PURSUANT TO THE AU	THE ADMINISTRATIVE CHANGE THORITY OF FAR 43.103(b).	S (such as changes in	paying office,	
	C. THIS SUPPLEMENT	AL AGREEMENT	IS ENTERED INTO PURSUANT TO A	AUTHORITY OF:			
	D. OTHER (Specify type	e of modification	and authority)				
X	FAR 52.243-1	Changes	- Fixed-Price (AUG	1987) - Alternate	≥ I (AUG 198	37)	
. IMPORTAN	NT: Contractor	☐ is not.	x is required to sign this document ar	nd return1	copies to the issuing	office.	
			Organized by UCF section headings, in	ocluding solicitation/contract subject	t matter where feasible	9.)	
UNS Nu							
)(6); (b)	<u></u>	s Represe	entative (COR):				
)(0), (b)	(1)(0)						
720) 8	75-(b)(6);		l				
lterna	te COR:						
o)(6); (b))(7)(C)						
303) 3	61-(b)(6);						
	5. C <u>.</u> C.						
ontinu	ed						
			document referenced in Item 9 A or 10				
	b)(7)(C) Execu	rpe or print) utive Vice F	President	(b)(6): (b)(7)(C)	IN I KACTING OFFICE	:K (Type or prin	ot)
				(b)(6); (b)(7)(C)	EDICA	- 1.	C DATE DIOLES
DB. CUNTR	(b)((b)(6); 7)(C)	15C. DATE SIGNED 4/12/2019	(b)(6); (b)(7)(C)	:NICA		6C. DATE SIGNED
	(Signature of person authorize	ed to sign)		(Signature of Cor		NDARS SS	100 /DEV 12 5
NSN 7540-01 Previous editi	l-152-8070 ion unusable				Pres	INDARD FORM scribed by GSA (48 CFR) 53.2	

2018-ICLI-00016 4075

	REFERENCE NO. OF DOCUMENT BEING CONTINUED				
CONTINUATION SHEET	HSCEDM-11-D-00003/P00039	2	2		

ITEM NO.	SUPPLIES/SERVICES		UNIT	UNIT PRICE	AMOUNT	
(A)	(B)	(C)	(D)	(E)	(F)	
(A)	Contracting Officer: (b)(6); (b)(7)(C) (202) 732(b)(6); Contract Specialist: (b)(6); (b)(7)(C) (313) 446-(b)(6) **************** The purpose of this modification to contract	(C)	(D)	(E)	(F)	
	HSCEDM-11-D-00003 is to extend the period of performance of CLIN 3011 for 432 surge beds an					
	additional twelve (12) months to April 20, 2020.					
(b)	The rate will be a flat monthly amount of (4) Funding will be provided via task					
(8)	(4) Funding will be provided via task order modification(s).					
	All other terms and conditions remain unchanged.					

	Discount Terms:					
	Net 30 Delivery Location Code: ICE/ERO/DETROIT Immigration Customs Enforcement 333 Mt. Elliott St. Detroit MI 48207					
	Period of Performance: 09/16/2011 to 09/15/2021					
	Add Item 3011A as follows:					
3011A	Surge Detention Beds (b)(4)	-	(b)(4)		
	(The number of beds is (b)(4) per month and the per bed rate is (b)(4) (b)(4) Obligated Amount: (b)(A) Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD ***********************************					
NSN 7540-01-152-					OPTIONAL FORM 336 (4-86)	

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT					CONTRACT ID CODE	PAGE OF PAGES		
2. AMENI	DMENT/MODIFICATION NO.	;	3. EFFECTIVE DATE	4. R	EQUISITION/PURCHASE REQ. NO.	5. PROJECT N	NO. (If applicable)	
P0004	10		See Block 16C					
6. ISSUE	D BY	CODE	ICE/DCR	7. A	DMINISTERED BY (If other than Item 6)	CODE		
Immig Offic 801 I	Detention Compliangration and Custon and Custon are of Acquisition Street, NW Suite CONTON DC 20536	ms Enfor M <u>anage</u> m	cement					
8. NAME	AND ADDRESS OF CONTRACTO	OR (No. street. o	punty. State and ZIP Code)		PA. AMENDMENT OF SOLICITATION NO.			
GEO GI	ROUP INC THE GEO GROUP INC THE			(x)	B. DATED (SEE ITEM 11)			
	W 53RD ST <mark>(b)(6); (b)(7)(</mark> RATON FL 33487824			x j	IOA MODIFICATION OF CONTRACT/ORDER NO HSCEDM-11-D-00003	0.		
					IAR DATER (OFF ITTIALIS)			
CODE	(b)(7)(E)	F	FACILITY CODE	-	OB. DATED (SEE ITEM 13) 09/15/2011			
			11. THIS ITEM ONLY APPLIES TO	AMENI				
virtue o	ACE DESIGNATED FOR THE RI of this amendment you desire to choose to the solicitation and this amen NUNTING AND APPROPRIATION Chedule	ECEIPT OF OF nange an offer a ndment, and is DATA (If requin	FERS PRIOR TO THE HOUR AND D Ilready submitted , such change may received prior to the opening hour an ed)	DATE Si be mad d date s		UR OFFER If by		
	13. THIS ITEM ONLY AP	PLIES TO MOD	DIFICATION OF CONTRACTS/ORDER	RS. IT	MODIFIES THE CONTRACT/ORDER NO. AS DES	SCRIBED IN ITE	M 14.	
CHECK O	A. THIS CHANGE ORDER ORDER NO. IN ITEM 10	IS ISSUED PU A.	RSUANT TO: (Specify authority) TH	E CHAI	NGES SET FORTH IN ITEM 14 ARE MADE IN TH	HE CONTRACT		
					DMINISTRATIVE CHANGES (such as changes in TY OF FAR 43.103(b).	n paying office,		
	C. THIS SUPPLEMENTAL	AGREEMENTI	S ENTERED INTO PURSUANT TO A	MIHO	RITY OF:			
-	D. OTHER (Specify type of	modification ar	d authority)					
X	FAR 52.243-1 (Changes	- Fixed-Price (AUG	198	7) - Alternate I (AUG 19	87)		
E. IMPOR	TANT: Contractor	☐ is not.	is required to sign this document a	nd retur	n 1 copies to the issuing	office.		
DUNS 1	RIPTION OF AMENDMENT/MOD Number: 61270646 acting Officer's	5		ncluding	g solicitation/contract subject matter where feasible	le.)		
ɔ)(6); (b)(7)(C)							
(720)	875 -(b)(6) ;							
	nate COR: (b)(7)(C)		7					
(303)	361 (b)(6);							
Conti	nued							
			document referenced in Item 9 A or 1		neretofore changed, remains unchanged and in fu A. NAME AND TITLE OF CONTRACTING OFFIC			
	(Type); (b)(7)(C) Executive	or print) ve Vice Pi	resident		(6); $(b)(7)(C)$	-⊏K (≀ype or pñi	n)	
15B. CON	TRACTORIOSSEROS	(b)(7)(C)	15C. DATE SIGNED		B. UNITED STATES OF AMERICA	1	6C. DATE SIGNED	
			4/12/2019		(b)(6); (b)(7)(C)			
NSN 7540	(Signature of person authorized to 0-01-152-8070	sign)		_	(Signature of Contracting Officer)	ANDARD FORM	130 (REV. 10-83)	
	edition unusable				Pre	escribed by GSA R (48 CFR) 53.2	, ,	

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	REFERENCE NO. OF DOCUMENT BEING CONTINUED	PAGE	OF
CONTINUATION SHEET	HSCEDM-11-D-00003/P00040	2	3

ITEM NO.	SUPPLIES/SERVICES	QUANTITY		UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	Contracting Officer:				
	(b)(6); (b)(7)(C)				
			H		
	(202) 732-(h)(6)				
	Contract Specialist:				
	(b)(6); (b)(7)(C)				
	(313) 446-(b)(6);				

	*********			1	
	The purpose of this modification to contract				
	HSCEDM-11-D-00003 is the following:				
	1. Extend CLIN 3011 for an additional sixty (60)				
	days through June 20, 2019 at the current price				
	of (b)(4) per month. In addition, add the following language, "CLIN 3011 is to be billed				
	for the 432 beds while the contractor's permanent				
	staffing level is less than 85%. Once the				
	permanent staffing level reaches 85%, the 432				
	beds will be billed under CLIN 3011A."				
	2. Add language on CLIN 3011A that says," Once				
	the contractor's permanent staffing level reaches 85%, CLIN 3011A will be billed in lieu of CLIN				
	3011 for the 432 beds."				
	All other terms and conditions remain unchanged.			1	
				1	

	Discount Terms:				
	Net 30				
	Period of Performance: 09/16/2011 to 09/15/2021				
	Change Than 2011 to wood on follows/pmount charm				
	Change Item 3011 to read as follows(amount shown is the total amount):				
	15 the total amount,.				
3011	Surge Detention Beds	(b)(4)		(b)(4)	
	432 Detention Beds for a Fixed Fee of (b)(4)				
	per month				
	The Period of Performance will be extended 60				
	additional days through June 20, 2019 for a total		H		
	of 150 days. Total value of CLIN 3011 is				
	(b)(4) (b)(4)				
	concinued			1	
			H		

	REFERENCE NO. OF DOCUMENT BEING CONTINUED	PAGE	OF
CONTINUATION SHEET	HSCEDM-11-D-00003/P00040	3	3

ITEM NO.	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	The CLIN is to be billed for the 432 beds while the contractor's permanent staffing level is less than 85%. Once the permanent staffing level reaches 85%, the 432 beds will be billed under CLIN 3011A. Obligated Amount: \$0.00				
	Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD				
	Delivery: 01/21/2019 Delivery Location Code: ICE/ERO ICE Enforcement & Removal Immigration and Customs Enforcement 801 I Street, NW (b)(6); (b)(7)(C) Washington DC 20536				
	Change Item 3011A to read as follows(amount shown is the total amount):				
3011A	Surge Detention Beds (The number of beds is 432 per month and the per bed rate is (b)(4) The monthly rate is (b)(4)	(b)(4)		(b)(4)	
	Once the contractor's permanent staffing level reaches 85%, CLIN 3011A will be billed in lieu of CLIN 3011 for the 432 beds. Obligated Amount: \$0.00 Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD				
	Delivery Location Code: ICE/ERO/DETROIT Immigration Customs Enforcement 333 Mt. Elliott St. Detroit MI 48207 ************************************				
	All other terms and conditions remain unchanged.				
