REQUEST FOR AGENDA PLACEMENT FORM

Submission Deadline - Tuesday, 12:00 PM before Court Dates

| SUBMITTED BY: | TODAY'S DATE: January 29, 2021 COMMISSIONERS COURT |
|---|--|
| SIGNATURE OF DEPARTMENT HEAD: REQUESTED AGENDA DATE: February 8, 2 | FEB - 8 2021 acknowledged |
| SPECIFIC AGENDA WORDING: | |
| Acknowledgement of Amendment of Sol | icitation/Modification of Contract |
| EROIGSA-17-0004, 70CDCR20FIGR00 | 0053, P00005 which adds Funding in the |
| Amount of \$42,600.00-Sheriff's Office | |
| | |
| PERSON(S) TO PRESENT ITEM: | |
| SUPPORT MATERIAL: (Must enclose suppo | orting documentation) |
| TIME: 5 min (Anticipated number of minutes needed to discuss item) | ACTION ITEM: WORKSHOP: CONSENT: EXECUTIVE: |
| STAFF NOTICE: | |
| COUNTY ATTORNEY: | IT DEPARTMENT: |
| AUDITOR: | PURCHASING DEPARTMENT: |
| PERSONNEL: | PUBLIC WORKS: |
| BUDGET COORDINATOR: | OTHER: |
| This Section to be comp | leted by County Judge's Office |
| | ASSIGNED AGENDA DATE: |
| REQUI | EST RECEIVED BY COUNTY JUDGE'S OFFICE: |
| COURT MEMBER APPROVAL: | DATE: |

| AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT | | | 1. CONTRACT ID CODE | i i | PAGE OF PAGES | | |
|---|---|---|--|---------------------|--------------------------|-----------------------------|--|
| 2. AMENDMENT/MODIFICATION NO. | 3. EFFECTIVE DATE | 4. REC | DUISITION/PURCHASE REQ. NO. | 5 000 | 1 | 3 | |
| P00005 | See Block 16C | i i | 4. REQUISITION/PURCHASE REQ. NO. 5. PROJECT NO. (# ap.) | | | . (п аррисарте) | |
| 6. ISSUED BY CODE | ICE/DCR | | MINISTERED BY (# other than Item 6) | CODE | ICE/ | DCD | |
| ICEDETENTION COMPLIANCE REN IMMIGRATION AND CUSTOMS ENFO OFFICE OF ACQUISITION MANAGE 801 I STREET NW SUITE 930 WASHINGTON DC 20536 | MOVALS DRCEMENT | IMM OFF 801 | DETENTION COMPLIANCE FIGRATION AND CUSTOMS EN ICE OF ACQUISITION MANA I STREET NW SUITE 930 HINGTON DC 20536 | | ALS EMENT | | |
| | | | | | | | |
| 8. NAME AND ADDRESS OF CONTRACTOR (No., street) JOHNSON COUNTY OF ATTN JUDGE ROGER HARMON 2 N MAIN COURTHOUSE CLEBURNE TX 760335500 | , county, State and ZIP Code) | 98 × 100 × EF | AMENDMENT OF SOLICITATION NO. DATED (SEE ITEM 11) A MODIFICATION OF CONTRACT/ORDER NO. 100 04, DCDCR20FIGR00053 DATED (SEE ITEM 13) | 1 0. | | | |
| CODE 0462867870000 | FACILITY CODE | | 1/09/2020 | | | | |
| | 11. THIS ITEM ONLY APPLIES | | | | | | |
| separate letter or telegram which includes a reference THE PLACE DESIGNATED FOR THE RECEIPT OF C virtue of this amendment you desire to change an offe reference to the solicitation and this amendment, and | ples of the amendment; (b) By ackno to the solicitation and amendment in DFFERS PRIOR TO THE HOUR ANU r already submitted, such change mi is received prior to the opening hour | owledging reconstructions. FA DIDATE SPE DIDATE SPE | eipt of this amendment on each copy of the of ILURE OF YOUR ACKNOWLEDGEMENT TO CIFIED MAY RESULT IN REJECTION OF YO by telegram or letter, provided each telegram o | fer submi BE REC | itted: or (d EIVED AT | c) By | |
| 12. ACCOUNTING AND APPROPRIATION DATA (If requise See Schedule | uired) N | Net Inc | rease: \$ | 42,60 | 0.00 | | |
| OKOLIVIVO. BY TIEM TOP | T/ORDER IS MODIFIED TO REFLE I IN ITEM 14, PURSUANT TO THE A | CT THE ADA | ES SET FORTH IN ITEM 14 ARE MADE IN T MINISTRATIVE CHANGES (such as changes of OF FAR 43.103(b). Y OF: | | | | |
| | | | | | | | |
| D. OTHER (Specify type of modification | and authority) | | | ····· | | | |
| X Funding Only Action | | | · · · · · · · · · · · · · · · · · · · | | | | |
| E. IMPORTANT: Contractor Sis not. | is required to sign this document | | · · · · · · · · · · · · · · · · · | | | | |
| 14. DESCRIPTION OF AMENDMENT MODIFICATION (DUNS Number: 046286787 Contracting Officer's Represer Richard Casillas, (214) 424-7 Richard D. Casillas@ice.dhs.go | entative (COR): 7833 | s, mauaing sa | Materiory contrad subjed matter where feasib | de.) | | | |
| Contracting Officer (CO): Deana Hicks, (202) 839-2039 | | | | | | | |
| deana.hicks@ice.dhs.gov | | | | | | | |
| Continued | | | | | | | |
| Except as provided herein, all terms and conditions of the | document referenced in Item 9 A or | 10A, as here | elofore changed, remains unchanged and in fu | ill force a | nd effect | | |
| 15A. NAME AND TITLE OF SIGNER (Type or print) | | 16A. N DE A | AME AND TITLE OF CONTRACTING OFFICE NA HICKS | ER (Type | or print) | ks@ice.dhs.gov | |
| ISB. CONTRACTOR/OFFEROR | 15C. DATE SIGNED |) 16B. U | NITED STATES OF AME! DAytally signed by ANA M HICKS HICKS Date: 2021.01.2913 | DEANA M | 16C | DATE SIGNED 9 JANUARY 2021 | |
| (Signature of person authorized to sign) NSN 7540-01-152-8070 | | | (Signature of . ontrate of Otticer) | ANDADD | <u>_</u> | | |

NSN 7540-01-152-8070 Previous edition unusable

STANDARD FORM 30 (REV. 10-83) Prescribed by GSA FAR (48 CFR) 53.243 CONTINUATION SHEET REFERENCE NO. OF DOCUMENT BEING CONTINUED PAGE OF EROIGSA-17-0004,/70CDCR20FIGR00053/P00005 2 3

NAME OF OFFEROR OR CONTRACTOR JOHNSON COUNTY OF

| ITEM NO. | SUPPLIES/SERVICES | QUANTITY | TINU | UNIT PRICE | AMOUNT |
|--------------|--|----------|------|------------|----------|
| (A) | (B) | (C) | (D) | (E) | (F) |
| | | | | | |
| | The purpose of this modification is to add | | | | |
| | funding to Contract Line Item Number (CLIN) 0002. | | | | |
| | The total obligated amount of this Task Order has increased: | | | | |
| | Increased. | | | | |
| | From: \$5,462,915.22 | | | | |
| | By: \$42,600.00 | | | | |
| | To: \$5,505,515.22 | | | 1 | |
| | The following requisition is associated to this | | | | |
| | action: 192121FDADAL00021.1 | i | | | |
| | | | | | |
| | | | | | |
| | The funding provided in this Task Order is the | | | | |
| | amount presently available for payment and | | | l | |
| | allotted to this Task Order. The service provider | | | | |
| | agrees to perform to the point that does not | | | į. | |
| | 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. | | | | |
| | Discount Terms: | 1 | | | |
| | Net 30 | | | | |
| | Accounting Info: | | | } | |
| | RMD10LT-000 E5 32-23-00-000 | | | | |
| | 18-62-0200-00-00-00-00 GE-21-31-00 | | | | |
| | 000000 | | | | |
| | Period of Performance: 02/01/2020 to 01/31/2021 | | | | |
| | Change Item 0002 to read as follows(amount shown | | 1 | | |
| | is the obligated amount): | | | Ì | |
| 1002 | | | | | |
| 1002 | TRANSPORTATION SERVICE | | | | 42,600.0 |
| : | JOHNSON COUNTY DETENTION FACILITY | | | | |
| | The total obligated funding on this CLIN has | | | | |
| | increased: | ļ | 1 | | |
| | From: \$2,251,300.00 | | | | |
| | By: \$42,600.00 | | | | |
| | To: \$2,293,900.00 | | | | |
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| 7540-01-152- | 8067 | | | L | |

| CONTINUATION OUTET | REFERENCE NO. OF DOCUMENT BEING CONTINUED | PAGE C | F |
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| CONTINUATION SHEET | EROIGSA-17-0004,/70CDCR20FIGR00053/P00005 | 2 | ء آ |
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NAME OF OFFEROR OR CONTRACTOR
JOHNSON COUNTY OF

| TEM NO. | SUPPLIES/SERVICES | QUANTITY | | UNIT PRICE | AMOUNT |
|-------------|--|----------|-----|------------|--------|
| (A) | (B) | | (D) | (E) | (F) |
| | All other terms and conditions remain unchanged. | † | | | |
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