

2. AMENDMENT/MODIFICATION NO. P00013	3. EFFECTIVE DATE See Block 16C	4. REQUISITION/PURCHASE REQ. NO.	5. PROJECT NO. (If applicable) 02/11/2022
6. ISSUED BY	CODE 70CDCR	7. ADMINISTERED BY (If other than Item 6)	CODE ICE/DCR

DETENTION COMPLIANCE AND REMOVALS U.S. Immigration and Customs Enforcement Office of Acquisition Management 500 12th St SW WASHINGTON DC 20024	ICE/Detention Compliance & Removals Immigration and Customs Enforcement Office of Acquisition Management 500 12th St SW Washington DC 20024
--	---

8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)  WEBB COUNTY OF WEBB CNTY SHERIFFS OFC ADMIN 902 VICTORIA ST LAREDO TX 780404456	(x) 9A. AMENDMENT OF SOLICITATION NO.  9B. DATED (SEE ITEM 11)  x 10A. MODIFICATION OF CONTRACT/ORDER NO. 70CDCR18DIG000004 70CDCR22FIGR00099 10B. DATED (SEE ITEM 13) 02/24/2022
CODE RGDEVLDDBFWD8      FACILITY CODE	

**11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS**

The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers  is extended.  is not extended. Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning \_\_\_\_\_ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By separate letter or telegram which includes a reference to the solicitation and amendment numbers. FAILURE OF YOUR ACKNOWLEDGEMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If by virtue of this amendment you desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified.

12. ACCOUNTING AND APPROPRIATION DATA (If required)      Net Decrease:      -\$889,427.40  
 See Schedule

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

CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.
	B. THE ABOVE NUMBERED CONTRACT/ORDER IS MODIFIED TO REFLECT THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation date, etc.) SET FORTH IN ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:
X	D. OTHER (Specify type of modification and authority) Contract Closeout

**E. IMPORTANT:** Contractor  is not.  is required to sign this document and return 1 copies to the issuing office.

**14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)**

UEI: RGDEVLDDBFWD8  
 ---  
 COR: Sandra Solis  
 Phone: 956-206-3760  
 Email: Sandra.A.Solis@ice.dhs.gov  
  
 ALTERNATE COR: Jose Garcia Longoria  
 Phone: 956-389-7806  
 Email: JoseGarcia.Longoria@ice.dhs.gov

ALTERNATE COR: Alfonso De Leon III  
 Continued ...

Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.

15A. NAME AND TITLE OF SIGNER (Type or print)	16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print) GENNA BRADEN TEL: 214-905-8309      EMAIL: GENNA.BRADEN@ICE.DHS.GOV
15B. CONTRACTOR/OFFEROR	15C. DATE SIGNED
16B. UNITED STATES OF AMERICA	16C. DATE SIGNED
_____ (Signature of person authorized to sign)	_____ (Signature of Contracting Officer)

**CONTINUATION SHEET**

REFERENCE NO. OF DOCUMENT BEING CONTINUED  
70CDCR18DIG000004/70CDCR22FIGR00099/P00013

PAGE OF  
2 4

NAME OF OFFEROR OR CONTRACTOR  
WEBB COUNTY OF

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0001	<p>Phone: 956-389-7187 Email: alfonso.a.de-leoniii@ice.dhs.gov</p> <p>ALTERNATE COR: Jose Torres Phone: 956-728-6683 Email: Jose.L.TorresJr@ice.dhs.gov</p> <p>ALTERNATE COR: Brittney Messelt Phone: 956-728-6684 Email: Brittney.A.Messelt@ice.dhs.gov</p> <p>Contracting Officer: Genna Braden Phone: 682-218-7283 Email: Genna.Braden@ice.dhs.gov</p> <p>Contractor POC: Stacey Cason Phone: 615-263-3027 Email: Stacey.Cason@corecivic.com ---</p> <p>The purpose of this modification is to de-obligate excess funds and closeout this contract. The parties agree as follows: 1) All services/supplies have been received, inspected and accepted by the Government 2) The Contactor releases the Government from any and all liability under this contract for further equitable and/or price adjustments including, but not limited to, claims and causes of action for the recovery of direct costs, indirect costs, delay costs, disruption costs, profit, interest, attorney's fees, damages, etc.) 3) The Government agrees that all obligations under this contract are concluded. 4) Line Item 0001 is decreased from \$6,264,601.74, by \$889,427.40 to \$5,375,174.34.</p> <p>The total obligated amount is decreased from \$6,314,585.35, by \$889,427.40 to \$5,425,157.95. The total contract value is decreased from \$6,314,585.35, by \$889,427.40 to \$5,425,157.95. This contract is closed. Discount Terms: Net 30 Period of Performance: 03/01/2022 to 02/28/2023</p> <p>Change Item 0001 to read as follows (amount shown is the obligated amount):</p> <p>Detention Services at Webb County Detention Center Bed Days (1-300) Continued ...</p>				-889,427.40

**CONTINUATION SHEET**

REFERENCE NO. OF DOCUMENT BEING CONTINUED  
70CDCR18DIG000004/70CDCR22FIGR00099/P00013

PAGE OF  
3 4

NAME OF OFFEROR OR CONTRACTOR  
WEBB COUNTY OF

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>As a result of the approved REA IAW EO 14026, effective 1 Mar 23 the bed/day rate increases:</p> <p>From: \$115.10 By: \$.18 To: \$115.28</p> <p>Tier 2: 301-400: \$68.69</p> <p>Deobligate \$12,482.35 from FFMS Item 1 MDL 1 Deobligate \$876,945.05 from FFMS Item 10 MDL 1</p> <p>The total obligated funding on this CLIN decreases:</p> <p>From: \$6,264,601.74 By: (\$889,427.40) To: \$5,375,174.34</p> <p>Accounting Info: ERODETN-000 E1 31-12-00-000 18-62-0900-00-00-00-00 GE-25-72-00- ----- 000000 Funded: -\$12,482.35</p> <p>Accounting Info: ERODETN-000 E1 31-12-00-000 18-62-0900-00-00-00-00 GE-25-72-00- ----- 000000 Funded: \$0.00</p> <p>Accounting Info: ERODETN-000 E1 31-12-00-000 18-62-0900-00-00-00-00 GE-25-72-00- ----- 000000 Funded: \$0.00</p> <p>Accounting Info: ERODETN-000 E1 31-12-00-000 18-62-0900-00-00-00-00 GE-25-72-00- ----- 000000 Funded: \$0.00</p> <p>Accounting Info: ERODETN-000 RP 31-12-00-000 18-62-0900-00-00-00-00 GE-25-72-00- ----- 000000 Funded: \$0.00</p> <p>Accounting Info: ERODETN-000 E1 31-12-00-000 18-62-0900-00-00-00-00 GE-25-72-00- ----- 000000 Funded: \$0.00</p> <p>Continued ...</p>				

**CONTINUATION SHEET**

REFERENCE NO. OF DOCUMENT BEING CONTINUED  
70CDCR18DIG000004/70CDCR22FIGR00099/P00013

PAGE OF  
4 4

NAME OF OFFEROR OR CONTRACTOR  
WEBB COUNTY OF

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	Accounting Info: ERODETN-000 E1 31-12-00-000 18-62-0900-00-00-00-00 GE-25-72-00- ----- --- 000000 Funded: \$0.00 Accounting Info: ERODETN-000 E1 31-12-00-000 18-62-0900-00-00-00-00 GE-25-72-00- ----- --- 000000 Funded: -\$876,945.05 Accounting Info: ERODETN-000 E1 31-12-00-000 18-62-0900-00-00-00-00 GE-25-72-00- ----- --- 000000 Funded: \$0.00				