SUBJECT: PIGGYBACK COUNTY OF VOLUSIA RFP#16-B-155JRD FOR PRISONER TRANSPORT SERVICES

BID #: PSC-0513-17 **OPEN DATE: 08/23/2016**

GENERAL GOVERNMENT AWARDS COMMITTEE

KIND AND BASIS OF CONTRACT: DATE OF EXECUTED CONTRACT THROUGH SEPTEMBER 25, 2019 WITH TWO (2) ONE (1) YEAR RENEWAL OPTIONS

AGENCY: JACKSONVILLE SHERIFF'S OFFICE

BASIS OF AWARD: PIGGYBACK CITY OF COUNTY OF VOLUSIA RFP#16-B-155JRD

NUMBER OF BIDS INVITED: ( ) NUMBER RECEIVED: ( ) OTHER ( )

SUMMARY OF BIDS AND RECOMMENDED ACTIONS:

Recommend approval to amend piggyback RFP#16-B-155JRD between the County of Volusia and Brevard Extraditions, LLC to change their name to US Corrections, LLC, due to a corporate restructuring.

Recommend approval to ratify the period of service from September 26, 2019 to date of award and utilize the first of two (2) one-year renewal options for the period from date of award through September 25, 2020. Recommend approval to increase the Base Rate to $1.25 per mile and to incorporate the attached sheet into the contract. The following sentence will also be added to the contract: "Charges for services that are not specifically mentioned in the contract will require pre-approval from the Department of Corrections." The not-to-exceed expenditure amount for this period is $170,606.00 for a revised total not-to-exceed expenditure amount of $625,106.00.

Funding for this award will be encumbered by account SHCO011JLPT-03410, to be executed by formal contract amendment through the Office of General Counsel.

ATTACHMENTS: Recommendation Memo, Amendment Sheet, Vendor Letter, W-9, Previous Awards

ANALYST: _____ Taryn Manser **RESPECTFULLY SUBMITTED** _____ For - GREGORY PEASE, CHIEF PROCUREMENT DIVISION

CONCURRENCE BY: Tammy Morris, Director of Department of Corrections

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(ALL AWARD ACTIONS SUBJECT TO LAWFULLY APPROPRIATED FUNDS)

ACTION OF GGAC COMMITTEE ON RECOMMENDATIONS ABOVE

MEMBERS APPROVING _____ MEMBERS DISAPPROVING _____ DATE: _____

_____ _____ OTHER: _____

_____ _____

_____ _____

ACTION OF AWARDING AUTHORITY DATE _____

APPROVED _____ DISAPPROVED _____

OTHER _____

SIGNATURE OF AUTHENTICATION _____

Jacksonville Sheriff's Office

Duval County, Florida

Mike Williams, Sheriff

501 E. Bay Street
Jacksonville, FL 32202

To: Gregory Pease
Chief of Procurement

Thru: Bill Clement, CPA
Chief of Budget

From: Tammy Morris
Director of Department of Corrections

Subject: PSC-0513-17 – Piggyback County of Volusia RFP#16-B-155JRD for Prisoner Transport Services - Contract 10340

Date: December 5, 2019

We are requesting approval to amend PSC-0513-17 Piggyback County of Volusia RFP#16-B-155JRD for Brevard Extraditions, LLC, to change their name to US Corrections, LLC. Attached you will find the US Prisoner Transport Contract Assignment and a W-9. We are requesting to utilize the first of two (2) renewal options for the period from September 26, 2019, through September 25, 2020. The not to exceed expenditure amount for the period is $170,606.00 from account code SHCO011JLPT – 03410. The revised total not to exceed expenditure amount is $ 625,106.00. We are requesting to increase the Base Rate to $1.25 per mile and to incorporate the attached sheet into the contract. We are also requesting to add the following language to the contract "Charges for services that are not specifically mentioned in the contact will require pre-approval from the Department of Corrections". A contract amendment will be executed by the Office of General Counsel.

Please let me know if you require any additional information. Thank you for your assistance.

U.S. CORRECTIONS
A PRISONER TRANSPORTATION SERVICES, LLC COMPANY

PO BOX 171078
NASHVILLE, TN 37217
PH: 615.352.9798
FAX: 615.352.9737
INFO@PRISONERTRANSPORT.NET

Jacksonville Sheriff's Office:

Date: 11/22/2019

Basic Transports:
Base Rate: **$1.25/mile**
Minimum Charge Interstate: **$500.00**
Minimum Charge Intrastate: **$300.00**

Special Requests*: **$300.00** per occurrence

Medical and Custom Transports:** case-by-case

Limited Service Areas*:** case-by-case

Medical Conditions that exclude persons from ground transport eligibility include, but are not limited to, the following:

1. Cardiovascular problems requiring medication or prescribed procedures;
2. Diabetics whereby prescribed medication must be injected and/or refrigerated;
3. Epilepsy whereby seizure activity is not adequately controlled;
4. Pregnancy;
5. Fractured bones requiring casts or braces designed to immobilize injured areas;
6. Critical wounds;
7. Communicable diseases or any other medical condition that may place the passenger, transport personnel and other passengers at risk;
8. HIV positive or AIDS;
9. Inmates in excess of 280lbs will require additional charge for transport;

***Special Requests** - Release Dates, Court Dates, Specific Pick-up/Drop-off, IAD

****Custom Transport:** Any non-standard transport that would require special concessions to be made to safely transport the offender.

*****Limited Service Areas** – Areas of the Country that are not within our normal routes and are transported by Flight only: WA, OR, NE, ND, SD, MT, ID, WY, HI, AK, ME (US Territories Included)

PRISONER TRANSPORTATION SERVICES, LLC

PO BOX 171078
NASHVILLE, TN 37217
PH: 615.352.9798
FAX: 615.352.9737
INFO@PRISONERTRANSPORT.NET

Re: US Prisoner Transport Contract Assignment

August 9th, 2019

This letter is to address the changes our company has made regarding US Prisoner Transports ground transportation operations and why we are assigning USPT's contracts to our sister company, US Corrections. In the past, US Prisoner Transport has primarily managed our bus transport operations and the maintaining of the applicable licenses and insurance for these vehicles. Recently, we have decided to cease all bus operations due to their excessive cost to our company, primarily stemming from the costly insurance required to insure and legally operate vehicles of this kind.

With this change, US Prisoner Transport will now assist and support the transport operations of our sister company, US Corrections. US Corrections has the same owners and management personnel as US Prisoner Transport and is fully licensed and insured to accommodate ground transport operations, like the one's US Prisoner Transport has provided for years.

Prior US Prisoner Transport customers will still utilize the same ordering system, the same points of contact, and can expect transport operations to remain unchanged, minus the name on the contract/invoice.

If you have any questions regarding our corporate structuring or joint operations that have been approved by the Federal Surface Transportation Board, please refer to the attached Merger Letter.

Best,

Semper Fidelis,

Dave Warden III
Sales & Marketing Manager
Prisoner Transportation Services, LLC
Phone: 615-352-9798 Ext:156
Fax: 615-352-9737
dwarden@prisonertransport.net

Form **W-9**
(Rev. October 2018)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

▶ Go to *www.irs.gov/FormW9* for instructions and the latest information.

Give Form to the requester. Do not send to the IRS.

Print or type. See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.
US CORRECTIONS, LLC

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.

☐ Individual/sole proprietor or single-member LLC ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate

☑ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ P

Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

☐ Other (see instructions) ▶

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) _____

Exemption from FATCA reporting code (if any) _____

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.
517 HICKORY HILLS BOULEVARD

Requester's name and address (optional)

6 City, state, and ZIP code
WHITES CREEK, TN 37189

7 List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number
☐☐☐ - ☐☐ - ☐☐☐☐

or

Employer identification number
8 2 - 3 2 0 1 2 6 4

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here Signature of U.S. person ▶ Susan M Binkley Date ▶ 9-13-19

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/FormW9*.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, *later.*

Previous name change
New Award

SUBJECT: PIGGYBACK COUNTY OF VOLUSIA RFP#16-B-155JRD FOR PRISONER TRANSPORT SERVICES

BID #: PSC-0513-17 **OPEN DATE: 08/23/2016**

GENERAL GOVERNMENT AWARDS COMMITTEE

KIND AND BASIS OF CONTRACT: DATE OF EXECUTED CONTRACT THROUGH SEPTEMBER 25, 2019 WITH TWO (2) ONE (1) YEAR RENEWAL OPTIONS

AGENCY: JACKSONVILLE SHERIFF'S OFFICE

BASIS OF AWARD: PIGGYBACK CITY OF COUNTY OF VOLUSIA RFP#16-B-155JRD 170502

NUMBER OF BIDS INVITED: ( ) NUMBER RECEIVED: ( ) OTHER ( )

SUMMARY OF BIDS AND RECOMMENDED ACTIONS:
Recommend approval to amend piggyback RFP#16-B-155JRD between the County of Volusia and Brevard Extraditions, Inc., dba U.S. Prisoner Transport to change their name to Brevard Extraditions, LLC. Attached you will find the Articles of Merger and a W-9. The total not to exceed expenditure amount for the initial period remains at $454,500.00, split $50,000.00 for FY17, $194,500.00 for FY-18 and $210,000.00 for FY-19.

Funding for this award will be encumbered by account SHCO011JLPT-03410, to be executed by formal contract through the Office of General Counsel.

ATTACHMENTS: Recommendation Memo; Previous Award

ANALYST: Marleen Doran
Marleen Doran

RESPECTFULLY SUBMITTED
GREGORY PEASE, CHIEF
PROCUREMENT DIVISION

CONCURRENCE BY: Tammy Morris, Director of Department of Corrections

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(ALL AWARD ACTIONS SUBJECT TO LAWFULLY APPROPRIATED FUNDS)
ACTION OF GGAC COMMITTEE ON RECOMMENDATIONS ABOVE
MEMBERS APPROVING 3 MEMBERS DISAPPROVING 0 DATE: 6/28/18

Teresa R Eilmer _____ OTHER: _____
_____ _____
_____ _____

ACTION OF AWARDING AUTHORITY DATE 6/30/18

APPROVED _____ DISAPPROVED _____

OTHER _____

SIGNATURE OF AUTHENTICATION _____
Sam E. Mousa
Chief Administrative Officer
For, Mayor Lenny Curry
Under Authority of:
Executive Order No. 2015-05

SUBJECT: PIGGYBACK COUNTY OF VOLUSIA RFP#16-B-155JRD FOR PRISONER TRANSPORT SERVICES

BID #: PSC-0513-17

OPEN DATE: 08/23/2016

GENERAL GOVERNMENT AWARDS COMMITTEE

KIND AND BASIS OF CONTRACT: DATE OF EXECUTED CONTRACT THROUGH SEPTEMBER 25, 2019 WITH TWO (2) ONE (1) YEAR RENEWAL OPTIONS

AGENCY: JACKSONVILLE SHERIFF'S OFFICE

BASIS OF AWARD: PIGGYBACK CITY OF COUNTY OF VOLUSIA RFP#16-B-155JRD

NUMBER OF BIDS INVITED: ( ) NUMBER RECEIVED: ( ) OTHER ( )

SUMMARY OF BIDS AND RECOMMENDED ACTIONS:
Recommend approval to amend piggyback RFP#16-B-155JRD between the County of Volusia and Brevard Extraditions, Inc., dba U.S. Prisoner Transport to increase the award in the amount of $154,500.00 for the period ending September 25, 2019. The amount will be split $84,500.00 in FY18 and $70,000.00 in FY19. The increase is needed to cover the actual expenditures incurred for prisoner transportation. The revised total not to exceed expenditure amount for the initial period is $454,500.00, split $50,000.00 for FY17, $194,500.00 for FY-18 and $210,000.00 for FY-19.

Funding for this award will be encumbered by account SHCO011JLPT-03410, to be executed by formal contract through the Office of General Counsel.

ATTACHMENTS: Recommendation Memo; Previous Award

ANALYST: Marleen Doran
Marleen Doran

RESPECTFULLY SUBMITTED
GREGORY PEASE, CHIEF
PROCUREMENT DIVISION

CONCURRENCE BY: Tammy Morris, Director of Department of Corrections

(ALL AWARD ACTIONS SUBJECT TO LAWFULLY APPROPRIATED FUNDS)
ACTION OF GGAC COMMITTEE ON RECOMMENDATIONS ABOVE
MEMBERS APPROVING 3 MEMBERS DISAPPROVING Ø DATE: 5/24/18

OTHER:

ACTION OF AWARDING AUTHORITY DATE 5/24/18

APPROVED DISAPPROVED

OTHER

SIGNATURE OF AUTHENTICATION

Sam E. Mousa
Chief Administrative Officer
For: Mayor Lenny Curry
Under Authority of:
Executive Order No. 2015-05

SUBJECT: PIGGYBACK COUNTY OF VOLUSIA RFP#16-B-155JRD FOR PRISONER TRANSPORT SERVICES

BID #: PSC-0513-17 **OPEN DATE: 08/23/2016**

GENERAL GOVERNMENT AWARDS COMMITTEE

KIND AND BASIS OF CONTRACT: DATE OF EXECUTED CONTRACT THROUGH SEPTEMBER 25, 2019 WITH TWO (2) ONE (1) YEAR RENEWAL OPTIONS

AGENCY: JACKSONVILLE SHERIFF'S OFFICE

BASIS OF AWARD: PIGGYBACK CITY OF COUNTY OF VOLUSIA RFP#16-B-155JRD

NUMBER OF BIDS INVITED: ( ) NUMBER RECEIVED: ( ) OTHER ( )

SUMMARY OF BIDS AND RECOMMENDED ACTIONS:
Recommend approval to piggyback RFP#16-B-155JRD between the County of Volusia and Brevard Extraditions, Inc., dba U.S. Prisoner Transport. The initial period of service is from date of contract execution through September 25, 2019 in the amount of $300,000.00 with two (2) one (1) year renewal options based on the County of Volusia's renewal. The not to exceed expenditure amount for the initial period is $50,000.00 in FY-17, $110,000.00 in FY-18 and $140,000.00 in FY-19.

Funding for this award will be encumbered by account SHPP011PR-05204, to be executed by formal contract through the Office of General Counsel.

ATTACHMENTS: Recommendation Memo; Liability Insurance; Risk Approval; Master Agreement

ANALYST: _____ STEVEN BURAKOWSKI **RESPECTFULLY SUBMITTED** _____ GREGORY PEASE, CHIEF PROCUREMENT DIVISION

CONCURRENCE BY: Bill Clement, Chief of Budget & Management Division

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(ALL AWARD ACTIONS SUBJECT TO LAWFULLY APPROPRIATED FUNDS)
ACTION OF GGAC COMMITTEE ON RECOMMENDATIONS ABOVE

MEMBERS APPROVING 3 MEMBERS DISAPPROVING 0 DATE: 6/5/17

Teresa R Eichner _____ OTHER: _____

_____ _____

_____ _____

ACTION OF AWARDING AUTHORITY DATE 6/05/17

APPROVED _____ DISAPPROVED _____

OTHER _____

SIGNATURE OF AUTHENTICATION _____ Sam E. Mousa, Chief Administrative Officer, For Mayor Lenny Curry, Under Authority of: Executive Order No. 2015-05

QWS3270X 12/12/2019 11:30 AM
FAML6350 V5.1 ** NW COJ FAMIS PRODUCTION ** 12/12/2019
LINK TO: ACCOUNT SUMMARY INQUIRY 11:29 AM

FISCAL MO/YEAR : 03 2020 CURRENCY CODE :
INDEX CODE : SHCO011JLPT JOHN GOODE PRETRIAL DETENTION FACILITY
SUBOBJECT : 03410 CONTRACTUAL SERVICES
PROJECT :
PROJECT DETAIL :
GRANT :
GRANT DETAIL :
USER CODE :

S	DEC 2019	ANNUAL BALANCE	ALL YEARS BALANCE
ESTIMATED REVENUES	.00	.00	.00
REVENUES	.00	.00	.00
UNREALIZED REVENUES	.00	.00	.00
BUDGET	.00	183,310.66	183,310.66
EXPENDITURES	.00	12,333.39	12,333.39
ENCUMBRANCES	.00	42.59	42.59
PRE-ENCUMBRANCES	.00	.00	.00
REMAINING BALANCE	.00	170,934.68	170,934.68

F1-HELP F2-SELECT F4-PRIOR F5-NEXT
F9-LINK F10-PRIOR-MO F11-NEXT-MO

G014 - RECORD FOUND