

Combined Public Communications, LLC Inmate Telecommunications General Service Agreement Addendum A

WHEREAS, this addendum relates to the Inmate Telephone Services Agreement originally entered into by the Hillsdale County Sheriff's Office (Customer) with its principal place of business at 165 W. Fayette Street, Hillsdale, MI 49242 and Combined Public Communications (Company), which originally commenced on July 11th, 2018.

WHEREAS, Hillsdale County Sheriff's Office and Combined Public Communications (CPC), wish to amend the agreement. NOW THEREFORE, the parties to this Agreement do agree as follows:

Agreement Term

The initial term of this Agreement, which began on July 11th, 2018, will remain in full force and effect until July 11th, 2021. This Addendum will serve as written notice that both parties agree to exercise the thirty-six (36) month renewal term that will automatically commence on July 11th, 2021.

Bonus

CPC will provide Customer seventy-eight thousand dollars (\$78,000.00) in the form of a refundable technology grant/signing bonus to be used at Customer's discretion for budget expenditures and will be available anytime over the renewal term beginning on July 11th, 2021.

The amount of the technology grant/signing bonus is based on: (a) the Customer's current average daily population (ADP) count of seventy (70); and (b) this Agreement being in effect for the full initial term. The technology grant/signing bonus will vest over the initial term in an amount equal to \$2,166.66 per month, commencing on the Commencement Date. In the event this Agreement is terminated prior to the expiration of the initial term, the remaining non-vested balance of the technology grant/signing bonus will be refunded to CPC within forty-five (45) days of termination notification. Further, in the event the ADP decreases fifteen percent (15%) or more over a three (3) month period, CPC reserves the right to renegotiate the amount of the technology grant/signing bonus upon thirty (30) days advance written notice to Customer.

CPC View System

See **Attachment A** for information related to CPC and Customer responsibilities regarding the CPC View System.



Call Rates

Prepaid calling within the U.S.

\$0.20 per minute

Prepaid International Calling

Begins @ \$1.00 per minute, a list of countries and costs will be

supplied to customer.

This written addendum shall constitute understanding of the parties and all prior agreements and understandings are merged herein. The Original Agreement and this Addendum shall not be modified, changed or altered in any respect except in writing signed by CPC and Customer.

The commencement date of this addendum will be 11th day of July, 2021.

HIllsdale County Sheriff's Office

Combined Public Communications

Signature: //www//fut

Print Title: Sheriff

Date: 4 - 20 - 2021

Signature:

Print Name:

Print Title:

Date:

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Service Level Agreement

Response time:

An individual phone outage: 24 hours Section of the building outage: 4 hours Complete system wide outage: 2 hours

A routine service failure with no impact on the administrative functions of the system such as an individual phone outage, repair time is 24 hours.



Combined Public Communications, LLC

Inmate Communications General Service Agreement
Attachment A – CPC View Responsibilities

WHEREAS, this Attachment relates to the Inmate Communications General Service Agreement originally entered into by Combined Public Communications, LLC ("CPC"), and Hillsdale County Sheriff's Office ("Customer").

Equipment

CPC will continue to provide and maintain the CPC View In-Pod Kiosk Solution. The equipment will always remain the property of CPC.

Video Visitation

Feature	Rate	Commission
Onsite Video Visitation	n/a	n/a
Remote Video Visitation	\$0.50/min	25%

Customer should initial one of the fo	ollowing options regarding Video Vis	sitation:
Option 1: Customer agree Visitation.	es to continue to utilize Remote Vide	o Visitation along with Onsite Video
Option 2: Customer is no	t interested in continuing to utilizing	Remote Video Visitation.
<u>Email</u>		
Feature	Rate	Commission
Email	\$0.50/email	20%
Customer should initial one of the formal customer agreed to the control of the formal customer agreed to the customer is not the customer is not customer in the customer is not customer in the customer in		
Fast Case Law Library CPC will provide the Customer accesservice is based on the average dail per month. The minimum cost being from the customer's monthly comm an annual basis. This service is sul annual basis. Customer should initiate Option 1: Customer agree	ly population (ADP) of seventy inma seventy-five \$75.00 per month. The ission. This Service is subject to a bject to an annual ADP adjustment al one of the following options regar	tes at one dollar (\$1.00) per inmate yearly Service fee will be deducted monthly commission deduction on and will automatically renew on an

Option 2: Customer is not interested in utilizing this Service.



CPC Responsibilities

CPC will provide and install the View units and associated operational hardware, provide ongoing service, support and maintenance throughout the term of the Agreement.

Customer Responsibilities:

It is the Customer's responsibility to stop, block, or reprimand behavior for videos, emails, email attachments, or any other communication passed on the View System that is considered to be inappropriate by the Customer.

Remote Video Visitation Storage

CPC will store remote video visits for ninety (90) days.

Hillsdale County Sheriff's Office	Combined Public Communications
Signature: MMB/HL	Signature:Casley_Rott
Print Name: OCOTT B. Hodohire	Print Name: CASCY Rote
Print Title: Sheviff	Print Title: Regional Sales Namager
Date: 4-20-2021	Date: 6 4 202 1
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CPC can issue commissions as an ACH (Automated Clearing House) transaction or by check. Please check the appropriate box and fill out the corresponding information. Issue ACH payments to the information below: **ACH Information:** Customer Name: ____ Remittance Address: Remittance City: _____ State: ____ Zip Code: ____ Phone #: _____ Contact Name: E-Mail Address: Banking Information: Customer's Bank Name: Bank Address: Zip Code: _____ Bank's City: _____ State: ___ Bank Contact Name: ______ Phone #: _____ ABA Routing #: _____ Account #: ____ Account Type (please check only one) Checking Savings Customer's Authorization: Please sign below to confirm that you are authorizing CPC to begin transferring payments for your invoices to the account mentioned above. Title Signature Date Phone Number X Issue commissions as a check to the address listed below: Commission check made out to: Customer Name: Remittance Address: State: __ Remittance City: Zip Code: Phone #: \S17 fiverson Contact Name: 4. Signature Title

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