COMMONWEALTH OF MASSACHUSETTS ~ STANDARD CONTRACT FORM



This form is jointly issued and published by the Executive Office for Administration and Finance (ANF), the Office of the Comptroller (CTR) and the Operational Services Division (OSD) as the default contract for all Commonwealth Departments when another form is not prescribed by regulation or policy. Any changes to the official printed language of this form shall be void. Additional non-conflicting terms may be added by Attachment. Contractors may not require any additional agreements, engagement letters, contract forms or other additional terms as part of this Contract without prior Department approval. Click on hyperlinks for definitions, instructions and legal requirements that are incorporated by reference into this Contract. An electronic copy of this form is available at www.mass.gov/osc under Guidance For Vendors - Forms or www.mass.gov/osc under Guidance For Vendors - Forms or www.mass.gov/osc under Guidance For Vendors - Forms or www.mass.gov/osc under Guidance For Vendors - Forms or www.mass.gov/osc under Guidance For Vendors - Forms or www.mass.gov/osc under Guidance For Vendors - Forms or www.mass.gov/osc under Guidance For Vendors - Forms or www.mass.gov/osc under Guidance For Vendors - Forms or www.mass.gov/osc under Guidance For Vendors - Forms or www.mass.gov/osc under Guidance For Vendors - Forms or www.mass.gov/osc under Guidance For Vendors - Forms or www.mass.gov/osc under Guidance For Vendors - Forms or www.mass.gov/osc under Guidance For Vendors - Forms or w

CONTRACTOR LEGAL NAME: Inmate Calling Solutions LLC		COMMONWEALTH DEPARTMENT NAME: Sheriff's Department Hampden		
(and d/b/a):		MMARS Department Code: SDH		
Legal Address: (W-9, W-4, T&C): 1260 Andes Boulevard, St. Louis, MO 63132		Business Mailing Address: 627 Randall Road, Ludlow, MA 01056		
Contract Manager: Mike Kennedy		Billing Address (if different):		
The second se	-Mail: mkennedy@icsoultions.com		Contract Manager: Ann Speziali	
	ax:	E-Mail: ann.speziali@sdh.state.ma.us		
Contractor Vendor Code: VC		Phone: 413-858-0119	Fax:	
Vendor Code Address ID (e.g. "AD001"); AD		MMARS Doc ID(s):		
(Note: The Address id Must be set up for <u>EFT</u> payments.)		RFR/Procurement or Other ID Number: C08		
NEW CONTRACT		X CONTRACT AMENDMENT		
PROCUREMENT OR EXCEPTION TYPE: (Check one option only)		Enter Current Contract End Date Prior to Amendment: _9/30 _, 2022		
<u>Statewide Contract</u> (OSD or an OSD-designated Department)		Enter Amendment Amount: \$, (or "no change")		
<u>Collective Purchase</u> (Attach OSD approval, scope, budget) <u>Department Procurement</u> (includes State or Federal grants 815 CMR 2.00)		AMENDMENT TYPE: (Check one option only. Attach details of Amendment changes.)		
(Attach RFR and Response or other procurement supporting documentation)		<u>Amendment to Scope or Budget</u> (Attach updated scope and budget) <u>Interim Contract</u> (Attach justification for Interim Contract and updated scope/budget)		
Emergency Contract (Attach justification for emerg	ncy, scope, budget)			
<u>Contract Employee</u> (Attach Employment <u>Status Form</u> , scope, budget) <u>Legislative/Legal or Other</u> : (Attach authorizing language/justification, scope and				
budget)		scope and budget)		
The following COMMONWEALTH TERMS AND CONDITIONS (T&C) has been executed, filed with CTR and is incorporated by reference into this Contract.				
X Commonwealth Terms and Conditions Commonwealth Terms and Conditions For Human and Social Services				
COMPENSATION: (Check ONE option): The Department	t certifies that payments for au	thorized performance accepted in accordance w	the terms of this Contract will be supported	
in the state accounting system by sufficient appropriations or other non-appropriated funds, subject to intercept for Commonwealth owed debts under 815 CMR 9.00, <u>X</u> Rate Contract (No Maximum Obligation. Attach details of all rates, units, calculations, conditions or terms and any changes if rates or terms are being amended.)				
Maximum Obligation Contract Enter Total Maximu	m Obligation for total duration of	f this Contract (or new Total if Contract is being	amended). \$	
PROMPT PAYMENT DISCOUNTS (PPD): Commonwealth payments are issued through EFT 45 days from invoice receipt. Contractors requesting accelerated payments must identify a PPD as follows: Payment issued within 10 days% PPD; Payment issued within 15 days% PPD; Payment issued within 20 days% PPD; Payment issued within 30 days% PPD. If PPD percentages are left blank, identify reason:agree to standard 45 day cyclestatutory/legal or Ready Payments (G.L. c. 29, § 23A); only initial payment (subsequent payments scheduled to support standard EFT 45 day payment cycle. See Prompt Pay Discounts Policy.) BRIEF DESCRIPTION OF CONTRACT PERFORMANCE or REASON FOR AMENDMENT: (Enter the Contract title, purpose, fiscal year(s) and a detailed description of the scope of performance or what is being amended for a Contract Amendment. Attach all supporting documentation and justifications.) Inmate Telephone System. Provide, install, and maintain per RFR C08 and Bidder's response. Commission of 85%. Minimum annual guarantee of \$850,000 has been suspended until population size and/or special free calls are reflective of pre Covid19 days. Additionally the Department agrees to be involced for 12 10-minute free calls at \$.018 per minute with the understanding that ICS will work towards system changes to allow 10 free minutes of calling time per inmate per week in increments as small as 1 minute per cell and resetting each week. NEW Textbehind offsite scan mail services at a rate of \$1.59 per piece or a flat rate of \$5.25 per inmate per month based on average daily population. Start date to be determined.				
ANTICIPATED START DATE: (Complete ONE option only) The Department and Contractor certify for this Contract, or Contract Amendment, that Contract obligations:				
1. may be incurred as of the Effective Date (latest signature date below) and no obligations have been incurred prior to the Effective Date.				
2. may be incurred as of, 20, a date LATER than the Effective Date below and no obligations have been incurred prior to the Effective Date.				
X 3. were incurred as of 10/1, 2022, a date PRIOR to the Effective Date below, and the parties agree that payments for any obligations incurred prior to the Effective Date are				
authorized to be made either as settlement payments or as authorized reimbursement payments, and that the details and circumstances of all obligations under this Contract are attached and incorporated into this Contract. Acceptance of payments forever releases the Commonwealth from further claims related to these obligations.				
CONTRACT END DATE: Contract performance shall terminate as of <u>9/30</u> , 2023, with no new obligations being incurred after this date unless the Contract is properly amended, provided that the terms of this Contract and performance expectations and obligations shall survive its termination for the purpose of resolving any claim or dispute, for completing any negotiated terms and warranties, to allow any close out or transition performance, reporting, invoicing or final payments, or during any lapse between amendments.				
CERTIFICATIONS: Notwithstanding verbal or other representations by the parties, the "Effective Date" of this Contract or Amendment shall be the latest date that this Contract or Amendment has been executed by an authorized signatory of the Contractor, the Department, or a later Contract or Amendment Start Date specified above, subject to any required approvals. The Contractor makes all certifications required under the attached Contractor Certifications (incorporated by reference if not attached hereto) under the pains and penalties of perjury, agrees to provide any required documentation upon request to support compliance, and agrees that all terms governing performance of this Contract and doing business in Massachusetts are attached or incorporated by reference herein according to the following hierarchy of document precedence, the applicable Commonwealth Terms and Conditions, this Standard Contract Form including the Instructors and Contractor Certifications. the Request for Response (RFR) or other solicitation, the Contractor's Response, and additional negotiated terms will take precedence over the relevant terms in the RFR and the Contractor's Response only if made using the process outlined in 801 CMR 21 07, incorporated herein, provided that any amended RFR or Response terms result in best value, lower costs, or a more cost effective Contract. AUTHORIZING SIGNATURE FOR THE CONTRACTOR: X: Muthorizing Signature and Date Must Be Handwritten At Time of Signature) Print Name: Mike Kennedy Date: Yizz/riz Print Name: Mike Kennedy Date: Yizz/riz Print Title: Vice President Sales & Marketing Yizz/riz Note Signature)				

SHERIFF'S DEPARTMENT HAMPDEN INMATES COMMISSARY FUND LUDLOW, MA <u>AWARD</u> EXHIBIT A ADDENDUM NUMBER TWO

BID NUMBER C08 CONTRACT NUMBER C081 DEPARTMENT SDH

VENDOR: Inmate Calling Solutions LLC 1260 Andes Boulevard St. Louis, MO 63132

mkennedy@icsolutions.com

251-533-0046

VENDOR CONTACT: Mike Kennedy DEPARTMENT: Sheriff's Department Hampden Inmates Commissary Fund 627 Randall Road Ludlow, MA 01056

DEPARTMENT CONTACT: Ann Speziali 413-858-0119 ann.speziali@sdh.state.ma.us

INVOICES SHOULD BE MAILED TO THE DEPARTMENT ADDRESS, ATTN: ACCOUNTS PAYABLE DEPARTMENT !!!

CONTRACT IS MADE IN ACCORDANCE WITH ALL SPECIFICATIONS LISTED IN BID C08, VENDOR'S BID FORM SUBMISSION, AND THE COMMONWEALTH STANDARD CONTRACT. ALL DOCUMENTS MADE AN INTEGRAL PART OF THIS AGREEMENT. THE COMMONWEALTH TERMS & CONDITIONS PREVIOUSLY EXECUTED BY THE CONTRACTOR AND ON FILE WITH THE COMPTROLLERS OFFICE IS INCORPORATED INTO THIS CONTRACT. AWARD IS MADE FOR THE FOLLOWING ITEMS(S) OR SERVICE(S):

Inmate Telephone System. Provide, install, and maintain per RFR C08 and Bidder's response. Commission of 85%.. Minimum annual guarantee of \$850,000 has been suspended until population size and/or special free calls are reflective of pre Covid19 days. Additionally the Department agrees to be invoiced for 12 10-minute free calls at \$.018 per minute with the understanding that ICS will work towards system changes to allow 10 free minutes of calling time per inmate per week in increments as small as 1 minute per call and resetting each week. NEW Textbehind offsite scan mail services at a rate of \$1.59 per piece or a flat rate of \$5.25 per inmate per month based on average daily population. Start date to be determined.

AT ITS SOLE COST AND EXPENSE, CONTRACTOR SHALL, BEFORE ANY OF THE WORK IS COMMENCED, CAUSE TO BE ISSUED AND MAINTAINED DURING THE ENTIRE PROGRESS OF THE WORK, INSURANCE COVERAGE FOR ITSELF, AND FOR ANY OF ITS SUBCONTRACTORS.

X: Mine K-

(Signature) NAME: <u>Mike Kennedy</u> TITLE: <u>VP Sales & Marketing</u> DATE: <u>11/22/20222</u>

x: Ulu Yeryah	
(Signature)	
NAME: ANN SPEZIALI	
TITLE: BIR. M PURCHASING	
DATE: 11/2/2/2022	

THIS AGREEMENT WILL BE IN EFFECT FROM October 1, 2022 THROUGH AND INCLUDING September 30, 2023 AND MAY BE RENEWED FOR 2 ADDITIONAL 1-YEAR PERIODS SUBJECT TO THE SOLE DISCRETION OF HAMPDEN COUNTY PURCHASING. WHEN EXERCISING ONE-YEAR OPTIONS PRICING MAY BE ADJUSTED, INCREASED OR DECREASED, AT THE DEPARTMENT DISCRETION.

THIS AGREEMENT REFLECTS A ONE-TIME PURCHASE. SUBSEQUENT PURCHASES WILL NOT BE MADE.

Contract C08A1 Sheriff's Department Hampden Non-Coin Operated Inmate Telephone System Exhibit B Call and Commission Rates and Charges Effective November 29, 2018

Call CategoryEach
MinuteLocal\$0.12Intra LATA\$0.12Inter LATA\$0.12Inter State
Collect\$0.12InterState
Pre-Paid\$0.12

Rates and Charges for Collect, Pre-Paid Collect, and Debit

Plus applicable federal, state, & local taxes, and FUSF.

Pre-paid collect accounts may be assessed a fee of \$5.95 to fund via live operator. Pre-paid collect accounts may be assessed a fee of \$3.00 to fund via website or telephone IVR. Department Commission Rate 85% on billable calls