

**CONTRACT DMS-08/09-077  
BETWEEN  
FLORIDA DEPARTMENT OF MANAGEMENT SERVICES  
AND  
GEO CORRECTIONS AND DETENTION, LLC  
FOR THE  
SOUTH BAY CORRECTIONAL FACILITY**

**AMENDMENT NO.: 21**

THIS AMENDMENT to Contract No.: DMS-08/09-077 (the "Contract") is by and between the State of Florida acting through the Florida Department of Management Services (the "Department") Bureau of Private Prison Monitoring (the "Bureau") and GEO CORRECTIONS AND DETENTION, LLC, a wholly owned subsidiary of THE GEO GROUP, INC., ("GEO", "GEO Corrections" or the "Contractor") and collectively known as the "Parties".

**THEREFORE**, the Parties agree to amend the Contract as follows:

1. Subject to sufficient funds in the Privately Operated Institutions Inmate Welfare Trust Fund (POIIWTF) and budget authority, Exhibit 6 is amended as attached and incorporated herein by reference.

2. Sub-section 5.5.1. is amended to read:

By March 1 of each year, Contractor must submit an application for expenditures to be made from the POIIWTF for the next fiscal year to the Department for review. In accordance with section 944.72(1), Florida Statutes, planned expenditures must cover expenses for the benefit and welfare of inmates at the Facility.

3. Sub-section 5.5.5. is amended to read:

Expenditures for operational cost and fixed capital outlay made from the POIIWTF must meet the guidelines of section 945.215, Florida Statutes, and applicable terms of this Contract. Contractor is responsible for contracting and overseeing the construction of fixed capital outlay projects authorized by the Legislature. All operations and fixed capital outlay projects and expenditures must be approved by the Department.

4. Sub-section 5.2.1. is added to read:

The Contractor may utilize the Florida Department of Correction (FDC)'s established contracts for revenue generating services including, but not limited to, canteen/commissary, package programs, inmate telephone, vending, and multimedia kiosks/tablets. The Contractor may work with the FDC/Department to implement services from their existing contracts, in coordination with the Department of Management Services. All revenue generated from these services will continue to be deposited in the Privately Operated Institutions Inmate Welfare Trust Fund (POIIWTF). This coordination will help standardize services for inmates and their friends and family and help maximize contributions to the POIIWTF.

5. This Amendment and all of its Exhibits are hereby made a part of this Contract. All other terms and conditions of the Contract shall remain in full force and effect. Except as otherwise expressly set forth herein, the terms and conditions contained in the Contract and subsequent amendments are unchanged. This Amendment sets forth the entire understanding between the Parties with regard to the subject matter hereof.
6. This Amendment remains subject to section 287.0582, Florida Statutes.
7. This Amendment is effective on August 1, 2018 or the last date of execution.


**SO AGREED** by the Parties' authorized representatives on the dates noted below:

**FLORIDA DEPARTMENT OF MANAGEMENT SERVICES**

  
\_\_\_\_\_  
David Zeckman, Chief of Staff

July 31, 2018  
Date

**GEO CORRECTIONS AND DETENTION, LLC.**

  
\_\_\_\_\_  
Amber D. Martin, Executive Vice President

7-31-2018  
Date

**Department of Management Services**  
**Private Prison Monitoring**  
**Budget Summary**

Privately Operated Institutions Inmate Welfare Trust Fund (POIIWTF) Program Request

<b>Facility:</b>		<b>South Bay Correctional Facility</b>		<b>Fiscal Year: 2018-2019</b>	
Previous Year's Approved Budget:	\$ 102,063.90	Comments: 11 Months			
Previous Year's Total Expenditure:	\$ 70,529.26				
POIIWTF Allocated Budget:	\$ 238,835.00				
<b>POIIWTF Final Budget Approval:</b>	<b>\$ 218,333.88</b>				
Balance of Allocated Budget:	\$ 20,501.12				
		<b>For Department Use Only</b>			
<b>Summary</b>		<b>Approval</b>	<b>Final Budget Approval</b>		
Barbering - Salary & Benefits	\$ 48,629.17	Approved	\$ 48,629.17		
Barbering - Supplies	\$ 16,238.90	Approved	\$ 16,238.90		
Barbering - Equipment	\$ 8,683.57	Approved	\$ 8,683.57		
<b>Barbering - Program Total</b>	<b>\$ 73,551.64</b>		<b>\$ 73,551.64</b>		
Wastewater Management - Supplies	\$ 825.00	Approved	\$ 825.00		
Wastewater Management - Equipment	\$ 6,471.68	Approved	\$ 6,471.68		
<b>Wastewater Management - Program Total</b>	<b>\$ 7,296.68</b>		<b>\$ 7,296.68</b>		
<b>Recreation/Visitation Program</b>	<b>\$ 89,920.42</b>	Approved	<b>\$ 89,920.42</b>		
<b>Music Betterment Program</b>	<b>\$ 3,225.65</b>	Approved	<b>\$ 3,225.65</b>		
<b>Dayroom &amp; VP Equipment Upgrade</b>	<b>\$ 44,339.49</b>	Approved	<b>\$ 44,339.49</b>		
<b>Total POIIWTF Funds Requested:</b>	<b>\$ 218,333.88</b>				
		<b>Final Budget Approval</b>	<b>\$ 218,333.88</b>		

**Department of Management Services**  
**Private Prison Monitoring**  
**Attachment A: POIIWTF Program Request and Narrative**  
Privately Operated Institutions Inmate Welfare Trust Fund (POIIWTF)

<b>Facility: South Bay Correctional Facility</b>		<b>Fiscal Year:</b>	2018 - 2019
<b>Title of Program:</b>	Barbering/Cosmetology		
<b>Program Instructor's Name:</b>	A. Ross		
<b>Program Instructor's Title/Position:</b>	Life Work Experience Vocational Instructor (Barbering)		
<b>Total Hours of Program Participation Per Inmate Per Week:</b>	30 Hrs	<b>POIIWTF Funds Requested:</b>	\$ 73,551.62
<b>Target Inmate Population (Inmate Criteria):</b>	Total Inmate Population	<b>Previous Year's Approved Budget:</b>	\$ 77,291.93
<b>OBIS Course Code:</b>	V-08(83)		

<b>1. Program Narrative:</b>	
<p>Many of our inmates have experience in barbering but do not hold professional certification that will enable the assurance of gainful employment upon release. With this proposed barbering course, inmates will be able to earn professional certificates and gain the knowledge and skills necessary to pass the State Board Exams. Barbering is a Personal Services Industry and one of the top ten fastest growing industries in Florida with an expected growth rate of 4% between 2014 and 2018. This course follows a standard industry curriculum and will give the inmate verifiable credentials in the field of Barbering that will be the foundation for a successful career when he returns to the general population.</p>	
<b>2. Specific Activities:</b>	
(Include information about service delivery and timelines.)	
<p>Barbering is a 1200 hour course; 450 hours are instructor supervised on-the-job training as barbers on the compound and 750 hours Involves classroom instruction. Under the projected class schedule, the course will last 50 weeks with a combined 30 hours of practical and classroom participation per week. The necessary application and testing to achieve a state license will be facilitated upon completion of the course. The class size is designed at an optimum 20 to 1 ratio.</p>	
<b>3. How does this program have the potential to aid inmates' reintegration into society?</b>	
This program is structured to give an inmate the credentials and knowledge to support himself immediately upon release with a well paying trade.	
<b>4. What are the specific goals and objectives of this program?</b>	
(Describe the anticipated results of the program. Explain how the activities directly and/or indirectly address the issue or need and support achievement of these results.)	
<p>The goal of this program is to validate the practical experience in Barbering gained thus far and to have inmates to get the necessary education and credentials to earn a license to practice their trade in the State of Florida.</p>	
<b>5. Describe your evaluation plan for assessing how well the program met its goals and objectives.</b>	
The evaluation plan for assessing how well the program meet its goals and objectives will be based on how many enrollees successfully complete the course.	

**6. Staff Qualifications (Attach Job Description)**

(Include biographical information or required minimum qualifications for any staff and volunteers):

This position's focus is towards creating an academic environment which provides inmates the opportunity to successfully complete an industry standard curriculum in Barbering and Cosmetology and to help them master the skills necessary to work in the industry upon release. The instructor must be knowledgeable in the State of Florida licensing process and be able to assist the inmate in achieving the criteria necessary to become licensed.

**PRINCIPAL DUTIES/RESPONSIBILITIES:**

- Function as an occupational proctor for inmates in the Barbering and Cosmetology class.
- Evaluates and maintains records of inmates' progress through interaction with students.
- Follow directives of the Director of Education and administrative staff.
- Work directly with DOC/DOE in adhering to standards for certification of SBCF Vocational Programs.
- Provide tracking, inmate/student progress in all areas to the Director of Education.
- Develop productive relationships with departments outside the Education Department of South Bay; i.e., Maintenance, Business, and outside vendors.

**MINIMUM JOB REQUIREMENTS:**

- A licensed Barber or Cosmetologist
- 5 years vocational instructional experience or comparable work experience
- Work experience in managing a large number of adults working through vocational certification programs.
- Ability to coordinate with Direct Service Vocational Teachers.
- Experience in working in an institutional/facility preferred.
- Strong written and verbal skills.
- Ability to integrate existing "Best Practices" in Vocational Programs.
- Strong ability to multi-task, work with inmate/students, ability to complete projects with critical deadlines.
- Ability to understand the procurement, tracking and receiving process.

**EDUCATION & TRAINING:**

- Must have a current vocational certification or GED / High School Diploma with technical and instructional or work experience.

**SKILLS:**

Excellent oral and written skills.  
 Ability to motivate groups of people.  
 Ability to vary teaching style to meet the needs of the students.

**7. Attach Program Curriculum (e.g., Department of Education, Auburn University, etc.)**

The warden or designee certifies that this POI/WTF application is compliant with the DMS contract, DMS IWTF policy, and all laws and rules of the State of Florida.

CM

Electronic Signature

July 12, 2018

Date

**Department of Management Services**  
**Private Prison Monitoring**  
**Attachment B: Budget Instructions**

Privately Operated Institutions Inmate Welfare Trust Fund (POIIWTF)

The budget narrative provides a complete description of the costs associated with the program activities. As you prepare to assemble the budget, go back through the program narrative and make a list of all personnel and non-personnel items related to the operation of the program. The list of budget items and the calculations used to arrive at the dollar figures should be summarized below. All significant costs must be broken out within the subcategories and should include a detailed description. The following information will be used by the POIIWTF Committee to determine funding level. It should include the following areas:

**1. Personnel**

- a. **A. Ross:** Life Work Experience Vocational Instructor - Barbering
- b. **40 Hours per week**
- c. \$42,440.00 salary per annum (Hourly rate is \$20.4039) requested is under the Bureau of Labor Statistics average for vocational instructor
- d. Indicate which individuals (if any) are volunteers. **N/A**

**2. Fringe Benefits**

- a. **A. Ross:** Program Instructor is eligible for fringe benefits.
- b. Medical Insurance, Dental Insurance, Payroll Taxes, Workers Compensation Insurance, and 401K.
- c. These benefits are in the same proportion to all positions in the facility, regardless of funding source: 25% of Salary (\$42,400), with

**3. Travel N/A**

- a. The narrative must include a detailed breakdown of estimated travel costs.
- b. All travel costs must comply with state policies and procedures.
- c. Reimbursement requests for travel must include a state travel voucher.
- d. For each trip, indicate destination, estimated mileage, method of travel, cost per mile and duration, number of travelers, per diem rate for meals and lodging.
- e. Detail the purpose of the proposed travel.
- f. For each item, include an explanation of how these charges are necessary for the successful completion of the program.

**4. Supplies (See Attachment C: Budget Narrative)**

- a. Supplies must be itemized by type of material and nature of expense.
- b. For general office or business supplies, the total charge must provide support for the program activities.
- c. For specific items, include the number of units, cost per unit and total cost.
- d. Explain how these charges are necessary for the successful completion of the program.

**5. Equipment Rental/Purchase (See Attachment C: Budget Narrative)**

- a. List each item of equipment with an explanation of how this item is necessary for the successful completion of the program.
- b. If the purchase is more than \$5,000, provide a description of how it will be used and disposed of after it is no longer needed or replaced.
- c. For each item, include the number of units, cost per unit and total cost specified.
- d. For each item over \$5,000, a lease-versus-purchase analysis should be completed. **N/A**
- e. For each item over \$5,000, a competitive procurement method should be indicated. **N/A**

**6. Other N/A**

- a. Items should be listed by type of material.
- b. Each item should include an explanation of how this item is necessary for the successful completion of the program.
- c. Each item should be allowable, allocable and documented.
- d. All costs will be reasonable.

**Department of Management Services**

**Private Prison Monitoring**

**Attachment C: Budget Narrative**

Privately Operated Institutions Inmate Welfare Trust Fund (POIITWF)

<b>Facility: South Bay Correctional Facility</b>		<b>Fiscal Year:</b>	2018 - 2019
<b>Title of Program:</b>	Barbering	<b>Program Instructor's Name:</b>	A. Ross
Previous Year's Approved Budget for This Program:	\$ 77,291.93		
Previous Year's Expenditure for This Program:	\$ 61,433.74		
POIITWF Funds Requested for This Program:	\$ 73,551.62		

**Budget Summary** (Lines can be added as needed)

Item	Quantity	Amount Requested	Narrative
Staffing Salary	1	\$ 38,903.33	This Instructor will supervise a total of 40 hours per week. The requested salary for this position is \$ 42,440.00 per year
Staffing Fringe Benefits		\$ 9,725.82	All full time staff at SBCF are eligible for fringe. Fringe benefits are in the same proportion to all positions, regardless of funding source. The fringe for this position is \$10,610; 25% of staff salary.
Travel		N/A	
Supplies		\$ 16,238.90	
Equipment		\$ 8,683.57	
Other (Please Specify in Narrative)			
<b>Total</b>		<b>\$ 73,551.62</b>	

**Supplies & Materials Breakdown** (Lines can be added as needed)

Description	Number of Units	Cost Per Unit	Total Cost
Facial Cleanser - QH65384	4	\$ 3.99	\$ 14.63
Massage Cream -QH65387	4	\$ 3.99	\$ 14.63
Milady Student Book/ WKBK/ Test BK M6222	20	\$ 223.56	\$ 4,098.60
Mango Lotion C0IP-01050	4	\$ 8.00	\$ 29.33
End Papers 12PK FP10105	1	\$ 19.38	\$ 17.77
Cuticle Softner C01P-01038	4	\$ 8.00	\$ 29.33
Antibacterial Soap PN-01080	4	\$ 7.00	\$ 25.67
Neck Strips 43310-CS	5	\$ 38.51	\$ 176.50
Taper Combs DZ 1130	2	\$ 3.14	\$ 5.76
Working Combs DZ V10	2	\$ 1.26	\$ 2.31
Clipper Brush Black SC9033	200	\$ 0.39	\$ 71.50
Hair Pic 80108	6	\$ 0.55	\$ 3.03
XL Barber Jacket 4105	5	\$ 9.15	\$ 41.94
XXL Barber Jacket 4106	10	\$ 10.35	\$ 94.88
XXXL Barber Jacket 4107	5	\$ 10.35	\$ 47.44
Barber Apron 4139	4	\$ 7.96	\$ 29.19
Barber Cutting Capes 3017	5	\$ 7.80	\$ 35.75
Barber Wet Capes 4137	5	\$ 9.05	\$ 41.48
Barber Nylon Capes BD860BK	5	\$ 10.15	\$ 46.52
Disp Pump DZ FSC-Pump	1	\$ 12.35	\$ 11.32
Twist Top Bottle B72	10	\$ 0.56	\$ 5.13
Funnel SNSFUNL2	2	\$ 0.80	\$ 1.47
Class Licenses	20	\$ 325.00	\$ 5,958.33
Debra Mannequin D804	20	\$ 30.01	\$ 550.18
Dylan Mannequin 659	20	\$ 37.99	\$ 696.48
Liquid Shave Cream 24 PK Lather C	1	\$ 60.63	\$ 55.58
Small Cotton Rounds FSC 540	20	\$ 1.65	\$ 30.25
Gloves LG	15	\$ 4.79	\$ 65.86
Lexmark 521X Toner Cartridge 52S1X00	1	\$ 519.99	\$ 476.66

Bic Ball point Pens 897512 Model MAVP241-BLU	3	\$	6.99	\$	19.22
Bic Black Pens 442901	3	\$	6.49	\$	17.85
Bic Pens 395895	2	\$	2.79	\$	5.12
Multi Fold Towels SEB25384	8	\$	29.99	\$	219.93
Item 2411912 Garbage Bags	10	\$	14.49	\$	132.83
Stanley 10 Piece 600993	1	\$	10.99	\$	10.07
Staples Card Stock 490887	1	\$	14.99	\$	13.74
Expo Dry Erase 80001	2	\$	18.99	\$	34.82
Sharpie 30001	2	\$	11.79	\$	21.62
White Out 483018	2	\$	21.49	\$	39.40
Staples Pocket Folder 578490	2	\$	8.99	\$	16.48
Staples Notes 105809	2	\$	13.99	\$	25.65
Staples Pencils 323610	3	\$	8.49	\$	23.35
3 hole punch 937157	1	\$	27.99	\$	25.66
Staples Standard Staples 112276	1	\$	7.99	\$	7.32
Staples Paper Clips 472480	1	\$	4.79	\$	4.39
Staples Composition Book 919350	25	\$	3.29	\$	75.40
Staples Paper 513096	6	\$	57.99	\$	318.95
Folders 810351	3	\$	17.49	\$	48.10
Staples Highlighters 2072174	6	\$	6.29	\$	34.60
Staples College Ruled 849398	10	\$	5.99	\$	54.91
Shipping	1	\$	1,500.00	\$	1,375.00
Taxes	1	\$	1,131.29	\$	1,037.02
				\$	-
<b>Supplies &amp; Materials Total</b>				<b>\$</b>	<b>16,238.90</b>

**Equipment Breakdown (Lines can be added as needed)**

Description	Number of Units	Cost Per Unit	Total Cost
Mannequin Shears SC2040	10	\$ 16.17	\$ 148.23
Mannequin Shears SC2040LFT	5	\$ 17.29	\$ 79.25
Barber Pole Replacement Bulbs SC9011RB	1	\$ 11.23	\$ 10.29
Classroom Broom BBC-1	2	\$ 22.44	\$ 41.14
Classroom Clock SC-CLOCK	1	\$ 8.10	\$ 7.43
Smart Board with Lap Top	1	\$ 6,900.00	\$ 6,325.00
Straight Razor No Blade	5	\$ 6.34	\$ 29.06
Master Clippers A1557	5	\$ 86.71	\$ 397.42
T-Outliners A4710	5	\$ 49.17	\$ 225.36
5 Pk Clipper Guards A66345	8	\$ 16.19	\$ 118.73
Shipping	1	\$ 810.00	\$ 742.50
Taxes	1	\$ 610.00	\$ 559.17
<b>Equipment Total</b>			<b>\$ 8,683.57</b>



**Department of Management Services**  
**Private Prison Monitoring**  
**Attachment A: POIWTF Program Request and Narrative**  
Privately Operated Institutions Inmate Welfare Trust Fund (POIWTF)

<b>Facility: South Bay Correctional Facility</b>		<b>Fiscal Year:</b>	2018 - 2019
<b>Title of Program:</b>	Wastewater Management Betterment Program		
<b>Program Instructor's Name:</b>	Dr. Lopez		
<b>Program Instructor's Title/Position:</b>	Director of Education		
<b>Total Hours of Program Participation Per Inmate Per Week:</b>	15 hrs/ wk	<b>POIWTF Funds Requested:</b>	\$ 7,296.67
<b>Target Inmate Population (Inmate Criteria):</b>	Future employment in WW Mgmt	<b>Previous Year's Approved Budget:</b>	N/A
<b>OBIS Course Code: OTWASTE</b>			

<b>1. Program Narrative:</b>
Wastewater Management offers the opportunity for entry level employment at \$45,000.00 per year. There is a path to gain experience while in prison at the facilities that are inbedded in some prisons and offers inmates guaranteed employment upon release.
<b>2. Specific Activities:</b>
(Include information about service delivery and timelines.)
Betterment program meets 5 evenings a week in E- dorm Classroom. This course is a self and group study format utilizing books and videos to support learning. If this course is approved, it will be supervised by the Education Director and taught by inmate who are certified as inmate's assistant.
<b>3. How does this program have the potential to aid inmates' reintegration into society?</b>
Inmates will have the opportunity for high-paying entry level job.
<b>4. What are the specific goals and objectives of this program?</b>
(Describe the anticipated results of the program. Explain how the activities directly and/or indirectly address the issue or need and support achievement of these results.)
Excellent support for re-entry in to society.
<b>5. Describe your evaluation plan for assessing how well the program met its goals and objectives.</b>
The inmates from SBCF are transported for the day to Martin C.I. or Hardee C.I to take the state of Florida Certification exam. This exam is offered twice per year.
<b>6. Staff Qualifications (Attach Job Description)</b>
(Include biographical information or required minimum qualifications for any staff and volunteers):
N/A
<b>7. Attach Program Curriculum (e.g., Department of Education, Auburn Univerisity, etc.)</b>
See Attached

The warden or designee certifies that this POIWTF application is compliant with the DMS contract, DMS IWTF policy, and all laws and rules of the State of Florida.

CM  


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Electronic Signature

July 12, 2018  


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Date

**Department of Management Services**  
**Private Prison Monitoring**  
**Attachment B: Budget Instructions**

Privately Operated Institutions Inmate Welfare Trust Fund (POIIWTF)

The budget narrative provides a complete description of the costs associated with the program activities. As you prepare to assemble the budget, go back through the program narrative and make a list of all personnel and non-personnel items related to the operation of the program. The list of budget items and the calculations used to arrive at the dollar figures should be summarized below. All significant costs must be broken out within the subcategories and should include a detailed description. The following information will be used by the POIIWTF Committee to determine funding level. It should include the following areas:

- 1. Personnel N/A**
  - a. Each individual should be identified by name and position.
  - b. Time commitments should be included as hours or percentage of time stated for each position.
  - c. The total charges for each person listed includes an explanation of how the costs have been calculated.
  - d. Indicate which individuals (if any) are volunteers.
- 2. Fringe Benefits N/A**
  - a. Identify which individuals are eligible for fringe benefits.
  - b. Identify the elements that comprise the fringe benefits figures.
  - c. Indicate whether fringe benefits are in the same proportion to other salaries not funded by POIIWTF.
- 3. Travel N/A**
  - a. The narrative must include a detailed breakdown of estimated travel costs.
  - b. All travel costs must comply with state policies and procedures.
  - c. Reimbursement requests for travel must include a state travel voucher.
  - d. For each trip, indicate destination, estimated mileage, method of travel, cost per mile and duration, number of travelers, per diem rate for meals and lodging.
  - e. Detail the purpose of the proposed travel.
  - f. For each item, include an explanation of how these charges are necessary for the successful completion of the program.
- 4. Supplies - (See Attachment C: Budget Narrative)**
  - a. Supplies must be itemized by type of material and nature of expense.
  - b. For general office or business supplies, the total charge must provide support for the program activities.
  - c. For specific items, include the number of units, cost per unit and total cost.
  - d. Explain how these charges are necessary for the successful completion of the program.
- 5. Equipment Rental/Purchase - (See Attachment C: Budget Narrative)**
  - a. List each item of equipment with an explanation of how this item is necessary for the successful completion of the program.
  - b. If the purchase is more than \$5,000, provide a description of how it will be used and disposed of after it is no longer needed or used.
  - c. For each item, include the number of units, cost per unit and total cost specified.
  - d. For each item over \$5,000, a lease-versus-purchase analysis should be completed. N/A
  - e. For each item over \$5,000, a competitive procurement method should be indicated. N/A
- 6. Other N/A**
  - a. Items should be listed by type of material.
  - b. Each item should include an explanation of how this item is necessary for the successful completion of the program.
  - c. Each item should be allowable, allocable and documented.
  - d. All costs will be reasonable.

**Department of Management Services**

**Private Prison Monitoring**

**Attachment C: Budget Narrative**

Privately Operated Institutions Inmate Welfare Trust Fund (POIITWF)

<b>Facility: South Bay Correctional Facility</b>		<b>Fiscal Year:</b>	2018 -2019
<b>Title of Program: Wastewater Management</b>		<b>Program Instructor's Name:</b>	Self Study
Previous Year's Approved Budget for This Program:	N/A		
Previous Year's Expenditure for This Program:	N/A		
POIITWF Funds Requested for This Program:	\$ 7,296.67		
<b>Budget Summary</b> (Lines can be added as needed)			
<b>Item</b>	<b>Quantity</b>	<b>Amount Requested</b>	<b>Narrative</b>
Staffing Salary		N/A	
Staffing Fringe Benefits		N/A	
Travel		N/A	
Supplies		\$ 825.00	
Equipment		\$ 6,471.67	
Other (Please Specify in Narrative)			
<b>Total</b>		<b>\$ 7,296.67</b>	
<b>Supplies &amp; Materials Breakdown</b> (Lines can be added as needed)			
Description	Number of Units	Cost Per Unit	Total Cost
Exams for Wastewater Licensing	45	\$ 20.00	\$ 825.00
<b>Supplies &amp; Materials Total</b>			<b>\$ 825.00</b>
<b>Equipment Breakdown</b> (Lines can be added as needed)			
Description	Number of Units	Cost Per Unit	Total Cost
Operation of Wastewater Treatment Plants Vol 1	15	\$ 185.00	\$ 2,543.75
Operation of Wastewater Treatment Plants Vol 2	15	\$ 185.00	\$ 2,543.75
Wastewater Treatment Prelim and Prim CD	1	\$ 365.00	\$ 334.58
Wastewater Treatment Secondary CD	1	\$ 365.00	\$ 334.58
Denitrification in WW Treatment CD	1	\$ 190.00	\$ 174.17
Chlorine and The Disinfection Revolution	1	\$ 190.00	\$ 174.17
CD 601A Facilities and Pretreatment1	1	\$ 100.00	\$ 91.67
CD 601B Sedimentation and Flotation	1	\$ 100.00	\$ 91.67
CD 601D Suspended Growth Process	1	\$ 100.00	\$ 91.67
CD 601E Disinfection	1	\$ 100.00	\$ 91.67
<b>Equipment Total</b>			<b>\$ 6,471.67</b>

**Department of Management Services**  
**Private Prison Monitoring**  
**Attachment A: POIWTF Program Request and Narrative**  
Privately Operated Institutions Inmate Welfare Trust Fund (POIWTF)

<b>Facility: South Bay Correctional Facility</b>		<b>Fiscal Year:</b>	2018 - 2019
<b>Title of Program:</b>	Recreation / Visitation Program		
<b>Program Instructor's Name:</b>	Dr. Lopez		
<b>Program Instructor's Title/Position:</b>	Director of Education		
<b>Total Hours of Program Participation Per Inmate Per Week:</b>	15 hrs/wk	<b>POIWTF Funds Requested:</b>	\$ 89,920.42
<b>Target Inmate Population (Inmate Criteria):</b>	All inmates will benefit	<b>Previous Year's Approved Budget:</b>	
<b>OBIS Course Code: B-WELNES</b>			

<b>1. Program Narrative:</b>
The needs addressed in this proposal are for body curl exercise stations, outdoor total body gym machines, stationary bikes and handicap accessible exercise equipment for the inmate recreation areas; as well as picnic tables and sunshades for the visitation park. A comfortable area with adequate seating will create a good environment for the inmate during visitation with family members. The additional recreation yard work out stations will give more inmates access to fitness and address the need for our inmates in wheel chairs who need specialized fitness equipment to improve their fitness and health.
The equipment cited in this proposal would be available to the inmate population during all normal scheduled recreation and visitation times. The activities enabled will mitigate stress, enhance health and fitness. Inmates will be able to focus on developing healthful routines that can be foundational to healthy positive habits and structured routines when they re-enter society.
<b>3. How does this program have the potential to aid inmates' reintegration into society?</b>
This program will serve to reduce inmate stress and improve inmate health. They will be more capable of concentrating on the positive aspects of rehabilitation and better prepared to re-enter society having developed stress reducing exercise routines and habits
<b>4. What are the specific goals and objectives of this program?</b>
(Describe the anticipated results of the program. Explain how the activities directly and/or indirectly address the issue or need and support achievement of these results.)
The goals and objectives of this program are to help mitigate stressful conditions in the inmate population during visitation and create greater access to fitness equipment across the prison population.
<b>5. Describe your evaluation plan for assessing how well the program met its goals and objectives.</b>
Progress of this program could be reviewed through an inmate survey evaluating the better seating for visitation and increased access to fitness equipment on the recreation yards.
<b>6. Staff Qualifications (Attach Job Description)</b>
(Include biographical information or required minimum qualifications for any staff and volunteers):
N/A
<b>7. Attach Program Curriculum (e.g., Department of Education, Auburn University, etc.)</b>
N/A

The warden or designee certifies that this POIWTF application is compliant with the DMS contract, DMS IWTF policy, and all laws and rules of the State of Florida.

CM  


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**Electronic Signature**

July 12, 2018  


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**Date**

**Department of Management Services**  
**Private Prison Monitoring**  
**Attachment B: Budget Instructions**

Privately Operated Institutions Inmate Welfare Trust Fund (POIIWTF)

The budget narrative provides a complete description of the costs associated with the program activities. As you prepare to assemble the budget, go back through the program narrative and make a list of all personnel and non-personnel items related to the operation of the program. The list of budget items and the calculations used to arrive at the dollar figures should be summarized below. All significant costs must be broken out within the subcategories and should include a detailed description. The following information will be used by the POIIWTF Committee to determine funding level. It should include the following areas:

- 1. Personnel** **N/A**
  - a. Each individual should be identified by name and position.
  - b. Time commitments should be included as hours or percentage of time stated for each position.
  - c. The total charges for each person listed includes an explanation of how the costs have been calculated.
  - d. Indicate which individuals (if any) are volunteers.
- 2. Fringe Benefits** **N/A**
  - a. Identify which individuals are eligible for fringe benefits.
  - b. Identify the elements that comprise the fringe benefits figures.
  - c. Indicate whether fringe benefits are in the same proportion to other salaries not funded by POIIWTF.
- 3. Travel** **N/A**
  - a. The narrative must include a detailed breakdown of estimated travel costs.
  - b. All travel costs must comply with state policies and procedures.
  - c. Reimbursement requests for travel must include a state travel voucher.
  - d. For each trip, indicate destination, estimated mileage, method of travel, cost per mile and duration, number of travelers, per diem rate for meals and lodging.
  - e. Detail the purpose of the proposed travel.
  - f. For each item, include an explanation of how these charges are necessary for the successful completion of the program.
- 4. Supplies - (See Attachment C: Budget Narrative)**
  - a. Supplies must be itemized by type of material and nature of expense.
  - b. For general office or business supplies, the total charge must provide support for the program activities.
  - c. For specific items, include the number of units, cost per unit and total cost.
  - d. Explain how these charges are necessary for the successful completion of the program.
- 5. Equipment Rental/Purchase - (See Attachment C: Budget Narrative)**
  - a. List each item of equipment with an explanation of how this item is necessary for the successful completion of the program.
  - b. If the purchase is more than \$5,000, provide a description of how it will be used and disposed of after it is no longer needed or
  - c. For each item, include the number of units, cost per unit and total cost specified.
  - d. For each item over \$5,000, a lease-versus-purchase analysis should be completed. **N/A**
  - e. For each item over \$5,000, a competitive procurement method should be indicated. **N/A**
- 6. Other** **N/A**
  - a. Items should be listed by type of material.
  - b. Each item should include an explanation of how this item is necessary for the successful completion of the program.
  - c. Each item should be allowable, allocable and documented.
  - d. All costs will be reasonable.

**Department of Management Services**

**Private Prison Monitoring**

**Attachment C: Budget Narrative**

Privately Operated Institutions Inmate Welfare Trust Fund (POIIWTF)

<b>Facility: South Bay Correctional Facility</b>		<b>Fiscal Year: 2018 - 2019</b>	
<b>Title of Program:</b>		<b>Program Instructor's Name:</b> Dr. Lopez	
Previous Year's Approved Budget for This Program:	\$	22,771.97	
Previous Year's Expenditure for This Program:	\$	13,214.75	
POIIWTF Funds Requested for This Program:	\$	89,920.42	
<b>Budget Summary</b> (Lines can be added as needed)			
<b>Item</b>	<b>Quantity</b>	<b>Amount Requested</b>	<b>Narrative</b>
Staffing Salary		N/A	
Staffing Fringe Benefits		N/A	
Travel		N/A	
Supplies		\$ 4,610.83	
Equipment		\$ 85,309.58	
Other (Please Specify in Narrative)			
<b>Total</b>		<b>\$ 89,920.42</b>	
<b>Supplies &amp; Materials Breakdown</b> (Lines can be added as needed)			
Description	Number of Units	Cost Per Unit	Total Cost
concrete for footer and slabs (80 lb bags)	600	\$ 4.92	\$ 2,706.00
Rebar	200	\$ 5.89	\$ 1,079.83
Redoing surfacing lines on courts and fields	1	\$ 900.00	\$ 825.00
<b>Supplies &amp; Materials Total</b>			<b>\$ 4,610.83</b>
<b>Equipment Breakdown</b> (Lines can be added as needed)			
Description	Number of Units	Cost Per Unit	Total Cost
Total Body Gym (Recreation)Grainger #30PK76	3	\$ 11,239.20	\$ 30,907.80
Upright Stationary Bike Belson # 78000037 (Rec)	8	\$ 2,042.79	\$ 14,980.46
Body Curl Station Belson # UP262 (Recreation)	8	\$ 1,826.71	\$ 13,395.87
7 x 6.5 Sunshade Belson # STS765SM (Visitation)	9	\$ 1,108.61	\$ 9,146.03
8' Heavy Duty Perforated Table BSN# 1275384 (Vis)	3	\$ 1,348.69	\$ 3,708.90
Living Spinal Wheelchair Gym	2	\$ 3,315.00	\$ 6,077.50
Living Spinal Uppertone	2	\$ 3,868.92	\$ 7,093.02
<b>Equipment Total</b>			<b>\$ 85,309.58</b>

**Department of Management Services**  
**Private Prison Monitoring**  
**Attachment A: POIWTF Program Request and Narrative**  
Privately Operated Institutions Inmate Welfare Trust Fund (POIWTF)

<b>Facility: South Bay Correctional Facility</b>		<b>Fiscal Year:</b>	2018 -2019
<b>Title of Program:</b>	Music Betterment		
<b>Program Instructor's Name:</b>	Dr. Lopez		
<b>Program Instructor's Title/Position:</b>	Director of Education		
<b>Total Hours of Program Participation Per Inmate Per Week:</b>	24	<b>POIWTF Funds Requested:</b>	\$ 3,225.65
<b>Target Inmate Population (Inmate Criteria):</b>	Inmate musicians	<b>Previous Year's Approved Budget:</b>	
<b>OBIS Course Code:</b>			

<b>1. Program Narrative:</b>
Music is a universal language known all over the world. There are many inmates who are interested in learning to read, write and play music and a significant number who already have some skills but no place to practice or improve them. Learning to read and write music involves language, mathematical and creative skills while playing an instrument requires dedication, perseverance and self-discipline. All of these traits are essential to building a successful business and to transitioning back in to society. The music industry has grown significantly in the last decade especially since the advent of supportive computer technologies that make it easier and less expensive for the average person to write, play and produce their own music. A big advantage at South Bay is that we already have most of the equipment needed to support this program purchased under a previous budget. There are also many support roles available as business grows their use of social media and video production to market products and businesses. The benefits of this program are multi-faceted and exciting.
<b>2. Specific Activities:</b>
(Include information about service delivery and timelines.)
The participants practice and produce music in our music room 6 hours per day. Special events are scheduled throughout the year in either the VP or in our 2 Recreation Yards depending on the event.
<b>3. How does this program have the potential to aid inmates' reintegration into society?</b>
This program is structured to give an inmate the credentials and knowledge to support himself immediately upon release with a well paying trade.
<b>4. What are the specific goals and objectives of this program?</b>
(Describe the anticipated results of the program. Explain how the activities directly and/or indirectly address the issue or need and support achievement of these results.)
This program supports our scheduled holiday and graduation events at South Bay which inmates and in the case of graduation their families are able to participate in.
<b>5. Describe your evaluation plan for assessing how well the program met its goals and objectives.</b>
N/A
<b>6. Staff Qualifications (Attach Job Description)</b>
(Include biographical information or required minimum qualifications for any staff and volunteers):
N/A
<b>7. Attach Program Curriculum (e.g., Department of Education, Auburn University, etc.)</b>
N/A

The warden or designee certifies that this POIWTF application is compliant with the DMS contract, DMS IWTF policy, and all laws and rules of the State of Florida.

CM  


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**Electronic Signature**

July 12, 2018  


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**Date**

**Department of Management Services**  
**Private Prison Monitoring**  
**Attachment B: Budget Instructions**

Privately Operated Institutions Inmate Welfare Trust Fund (POIIWTF)

The budget narrative provides a complete description of the costs associated with the program activities. As you prepare to assemble the budget, go back through the program narrative and make a list of all personnel and non-personnel items related to the operation of the program. The list of budget items and the calculations used to arrive at the dollar figures should be summarized below. All significant costs must be broken out within the subcategories and should include a detailed description. The following information will be used by the POIIWTF Committee to determine funding level. It should include the following areas:

- 1. Personnel N/A**
  - a. Each individual should be identified by name and position.
  - b. Time commitments should be included as hours or percentage of time stated for each position.
  - c. The total charges for each person listed includes an explanation of how the costs have been calculated.
  - d. Indicate which individuals (if any) are volunteers.
- 2. Fringe Benefits N/A**
  - a. Identify which individuals are eligible for fringe benefits.
  - b. Identify the elements that comprise the fringe benefits figures.
  - c. Indicate whether fringe benefits are in the same proportion to other salaries not funded by POIIWTF.
- 3. Travel N/A**
  - a. The narrative must include a detailed breakdown of estimated travel costs.
  - b. All travel costs must comply with state policies and procedures.
  - c. Reimbursement requests for travel must include a state travel voucher.
  - d. For each trip, indicate destination, estimated mileage, method of travel, cost per mile and duration, number of travelers, per diem rate for meals and lodging.
  - e. Detail the purpose of the proposed travel.
  - f. For each item, include an explanation of how these charges are necessary for the successful completion of the program.
- 4. Supplies - (See Attachment C: Budget Narrative)**
  - a. Supplies must be itemized by type of material and nature of expense.
  - b. For general office or business supplies, the total charge must provide support for the program activities.
  - c. For specific items, include the number of units, cost per unit and total cost.
  - d. Explain how these charges are necessary for the successful completion of the program.
- 5. Equipment Rental/Purchase - (See Attachment C: Budget Narrative)**
  - a. List each item of equipment with an explanation of how this item is necessary for the successful completion of the program.
  - b. If the purchase is more than \$5,000, provide a description of how it will be used and disposed of after it is no longer needed or used.
  - c. For each item, include the number of units, cost per unit and total cost specified.
  - d. For each item over \$5,000, a lease-versus-purchase analysis should be completed. N/A
  - e. For each item over \$5,000, a competitive procurement method should be indicated. N/A
- 6. Other N/A**
  - a. Items should be listed by type of material.
  - b. Each item should include an explanation of how this item is necessary for the successful completion of the program.
  - c. Each item should be allowable, allocable and documented.
  - d. All costs will be reasonable.



**Department of Management Services**

**Private Prison Monitoring**

**Attachment C: Budget Narrative**

Privately Operated Institutions Inmate Welfare Trust Fund (POIIWTF)

<b>Facility: South Bay Correctional Facility</b>		<b>Fiscal Year:</b>	2018 -2019
<b>Title of Program: Music Betterment</b>		<b>Program Instructor's Name:</b>	Dr. Lopez
Previous Year's Approved Budget for This Program:	N/A		
Previous Year's Expenditure for This Program:	N/A		
POIIWTF Funds Requested for This Program:	\$	3,225.65	

**Budget Summary** (Lines can be added as needed)

Item	Quantity	Amount Requested	Narrative
Staffing Salary		N/A	
Staffing Fringe Benefits		N/A	
Travel		N/A	
Supplies		\$ 249.41	
Equipment		\$ 2,976.24	
Other (Please Specify in Narrative)			
<b>Total</b>		<b>\$ 3,225.65</b>	

**Supplies & Materials Breakdown** (Lines can be added as needed)

Description	Number of Units	Cost Per Unit	Total Cost
ADAddario Electric Strings H71080	1	\$ 42.79	\$ 39.22
ADAddario 4 Strings Base 100154	1	\$ 26.75	\$ 24.52
Martin Accoustic Strings 101788	1	\$ 32.10	\$ 29.43
5 String BASS Strings 100158	2	\$ 39.32	\$ 72.09
Tortex Picks 73MM 72 Pack H72002	1	\$ 21.40	\$ 19.62
Tortex Picks 60MM 72 Pack H72002	1	\$ 21.40	\$ 19.62
Roland Juno DS Keyboard with Adaptor J26978	1	\$ 44.00	\$ 40.33
Guitar Winder 712935	1	\$ 5.00	\$ 4.58
<b>Supplies &amp; Materials Total</b>			<b>\$ 249.41</b>

**Equipment Breakdown** (Lines can be added as needed)

Description	Number of Units	Cost Per Unit	Total Cost
Behringer Eurolive B215XL Speaker	4	\$ 219.99	\$ 806.63
Behringer Eurolive F1220D Pwred Floor Monitor	1	\$ 199.99	\$ 183.32
Behringer Eurolive Monitor H83833	2	\$ 352.00	\$ 645.33
Alesis Electric Drum Kit DM10 H73276	1	\$ 801.43	\$ 734.64
Nitro Drum Throne 442612	1	\$ 181.00	\$ 165.92
Vocopro Wireless Rechargeable Mic Set 476325	1	\$ 480.43	\$ 440.39
<b>Equipment Total</b>			<b>\$ 2,976.24</b>

**Department of Management Services**  
**Private Prison Monitoring**  
**Attachment A: POIITWF Program Request and Narrative**  
Privately Operated Institutions Inmate Welfare Trust Fund (POIITWF)

<b>Facility: South Bay Correctional Facility</b>		<b>Fiscal Year:</b>	2018 -2019
<b>Title of Program:</b>	Day Room & VP Equipment Upgrade		
<b>Program Instructor's Name:</b>	N/A		
<b>Program Instructor's Title/Position:</b>	N/A		
<b>Total Hours of Program Participation Per Inmate Per Week:</b>	95 hr /wk	<b>POIITWF Funds Requested:</b>	\$ 44,339.49
<b>Target Inmate Population (Inmate Criteria):</b>	All inmates will benefit	<b>Previous Year's Approved Budget:</b>	N/A
<b>OBIS Course Code: NA</b>			

<b>1. Program Narrative:</b>
We have old technology smaller television sets that cannot interface with new mediums and are not accessible to all inmates because they are too small to be viewed from seats throughout the day room (34). One TV set is also needed for multi-purpose reasons as a message board to communicate with inmate visitors in the VP and a source of entertainment for the visiting kids.
<b>2. Specific Activities:</b>
(Include information about service delivery and timelines.)
All times they are not involved in other programming and recreation.
<b>3. How does this program have the potential to aid inmates' reintegration into society?</b>
There is an array of programming available to support inmates reintegrating back in to society.
<b>4. What are the specific goals and objectives of this program?</b>
(Describe the anticipated results of the program. Explain how the activities directly and/or indirectly address the issue or need and support achievement of these results.)
N/A
<b>5. Describe your evaluation plan for assessing how well the program met its goals and objectives.</b>
N/A
<b>6. Staff Qualifications (Attach Job Description)</b>
(Include biographical information or required minimum qualifications for any staff and volunteers):
N/A
<b>7. Attach Program Curriculum (e.g., Department of Education, Auburn University, etc.)</b>
N/A

The warden or designee certifies that this POIITWF application is compliant with the DMS contract, DMS IWTF policy, and all laws and rules of the State of Florida.

CM  
\_\_\_\_\_  
Electronic Signature

July 12, 2018  
\_\_\_\_\_  
Date

**Department of Management Services**  
**Private Prison Monitoring**  
**Attachment B: Budget Instructions**

Privately Operated Institutions Inmate Welfare Trust Fund (POIIWTF)

The budget narrative provides a complete description of the costs associated with the program activities. As you prepare to assemble the budget, go back through the program narrative and make a list of all personnel and non-personnel items related to the operation of the program. The list of budget items and the calculations used to arrive at the dollar figures should be summarized below. All significant costs must be broken out within the subcategories and should include a detailed description. The following information will be used by the POIIWTF Committee to determine funding level. It should include the following areas:

- 1. Personnel N/A**
  - a. Each individual should be identified by name and position.
  - b. Time commitments should be included as hours or percentage of time stated for each position.
  - c. The total charges for each person listed includes an explanation of how the costs have been calculated.
  - d. Indicate which individuals (if any) are volunteers.
- 2. Fringe Benefits N/A**
  - a. Identify which individuals are eligible for fringe benefits.
  - b. Identify the elements that comprise the fringe benefits figures.
  - c. Indicate whether fringe benefits are in the same proportion to other salaries not funded by POIIWTF.
- 3. Travel N/A**
  - a. The narrative must include a detailed breakdown of estimated travel costs.
  - b. All travel costs must comply with state policies and procedures.
  - c. Reimbursement requests for travel must include a state travel voucher.
  - d. For each trip, indicate destination, estimated mileage, method of travel, cost per mile and duration, number of travelers, per diem rate for meals and lodging.
  - e. Detail the purpose of the proposed travel.
  - f. For each item, include an explanation of how these charges are necessary for the successful completion of the program.
- 4. Supplies N/A**
  - a. Supplies must be itemized by type of material and nature of expense.
  - b. For general office or business supplies, the total charge must provide support for the program activities.
  - c. For specific items, include the number of units, cost per unit and total cost.
  - d. Explain how these charges are necessary for the successful completion of the program.
- 5. Equipment Rental/Purchase - (See Attachment C: Budget Narrative)**
  - a. List each item of equipment with an explanation of how this item is necessary for the successful completion of the program.
  - b. If the purchase is more than \$5,000, provide a description of how it will be used and disposed of after it is no longer needed or
  - c. For each item, include the number of units, cost per unit and total cost specified.
  - d. For each item over \$5,000, a lease-versus-purchase analysis should be completed. N/A
  - e. For each item over \$5,000, a competitive procurement method should be indicated. N/A
- 6. Other N/A**
  - a. Items should be listed by type of material.
  - b. Each item should include an explanation of how this item is necessary for the successful completion of the program.
  - c. Each item should be allowable, allocable and documented.
  - d. All costs will be reasonable.

**Department of Management Services**

**Private Prison Monitoring**

**Attachment C: Budget Narrative**

Privately Operated Institutions Inmate Welfare Trust Fund (POIIWTF)

<b>Facility: South Bay Correctional Facility</b>		<b>Fiscal Year:</b>	2018 -2019
<b>Title of Program:</b>	Day Room & VP Equipment Upgrade	<b>Program Instructor's Name:</b>	Dr. F. Lopez
Previous Year's Approved Budget for This Program:	N/A		
Previous Year's Expenditure for This Program:	N/A		
POIIWTF Funds Requested for This Program:	\$ 44,339.49		
<b>Budget Summary (Lines can be added as needed)</b>			
<b>Item</b>	<b>Quantity</b>	<b>Amount Requested</b>	<b>Narrative</b>
Staffing Salary		N/A	
Staffing Fringe Benefits		N/A	
Travel		N/A	
Supplies		N/A	
Equipment		\$ 44,339.49	
Other (Please Specify in Narrative)			
<b>Total</b>		<b>\$ 44,339.49</b>	
<b>Supplies &amp; Materials Breakdown (Lines can be added as needed)</b>			
<b>Description</b>	<b>Number of Units</b>	<b>Cost Per Unit</b>	<b>Total Cost</b>
			\$ -
			\$ -
<b>Supplies &amp; Materials Total</b>			<b>\$ -</b>
<b>Equipment Breakdown (Lines can be added as needed)</b>			
<b>Description</b>	<b>Number of Units</b>	<b>Cost Per Unit</b>	<b>Total Cost</b>
65" Vizio E-Series LED 2160P	35	\$ 994.27	\$ 31,899.50
Fixed Wallmount Rocketfish 9881868	35	\$ 107.50	\$ 3,448.96
Cabling	35	\$ 150.00	\$ 4,812.50
Transmitter	35	\$ 55.00	\$ 1,764.58
Cables	35	\$ 75.24	\$ 2,413.95
<b>Equipment Total</b>			<b>\$ 44,339.49</b>