

Exhibit A-1


SOLICITATION, OFFER AND AWARD

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|--|---|---|--------------------------------------|
| 1. CONTRACT NO. 696-PF-18-19-C160 | 2. SOLICITATION NO. 696-PF-16-P026 | 3. TYPE OF SOLICITATION <input type="checkbox"/> SEALED BID (IFB) <input type="checkbox"/> NEGOTIATED (RFO) <input checked="" type="checkbox"/> NEGOTIATED (RFP) | 4. DATE ISSUED April 13, 2017 |
|--|---|---|--------------------------------------|


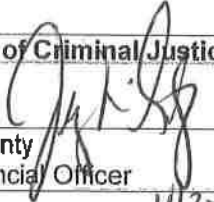
SOLICITATION

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| 5. Sealed offers will be received by the Department until 1:00 p.m. local time on May 2, 2017 , and submitted to: Texas Department of Criminal Justice Contracts and Procurement Department Client Services and Governmental Contracts Branch Two Financial Plaza, Suite 525 Huntsville, Texas 77340 Attention: 696-PF-16-P026 | 6. FOR INFORMATION CONTACT: Jodi Lawson, CTP, CTCM Contract Specialist PHONE: (936) 437-7130 FAX: (325) 223-0310 E-MAIL: jodi.lawson@tdcj.texas.gov |
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OFFER (Must be fully completed by Offeror)

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| 7. DISCOUNT FOR PROMPT PAYMENT:→ | 10 CALENDAR DAYS % | 20 CALENDAR DAYS % | 30 CALENDAR DAYS % | CALENDAR DAYS % |
| 8. ACKNOWLEDGMENT OF AMENDMENTS: <i>The Offeror acknowledges receipt of amendments to the SOLICITATION for Offerors and related documents numbered and dated:</i> | AMENDMENT NO. | DATE | AMENDMENT NO. | DATE |
| | A-001 | 4-14-17 | A-002 | 4-20-17 |
| | A-003 | 4-25-17 | | |
| 9. NAME AND ADDRESS OF OFFEROR:→ | Management & Training Corporation 500 N. Marketplace Drive Centerville, Utah 84014 | | 10. NAME AND TITLE OF PERSON AUTHORIZED TO SIGN OFFER (Type or Print) Scott Marquardt President | |
| 11. TELEPHONE NO. (Include area code) (801) 693-2800 | 12. SIGNATURE  | | 13. OFFER DATE May 2, 2017 | |

TO BE COMPLETED AT TIME OF AWARD

| | |
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| Document Type: 9 Statutory Cite: Texas Government Code, Section 501.0931 | |
| This award consummates the Contract which consists of the following documents: (a) the State's solicitation, and solicitation amendments, such provisions, representations, certifications, specifications, and negotiated changes as hereby incorporated and attached to this award; (b) the Contractor's offer, points of clarification, responses to clarification request and/or best and final offer, and negotiated changes as hereby incorporated and attached to this award; and (c) this award. In the event of a conflict between any terms and conditions of this Contract document with Contractor's offer, points of clarification and/or best and final offer, the terms which are more favorable to the Department shall prevail. | |
| The total amount for the Base Period (June 1, 2018 – August 31, 2019) shall not exceed \$513,572.60. | |
| Management & Training Corporation By:  Name: Scott Marquardt Title: President Date: 04/26/2018 | Texas Department of Criminal Justice By:  Name: Jerry McGinty Title: Chief Financial Officer Date: 4/30/18 |

The following items are mutually agreed to by Management & Training Corporation and the Department and are hereby incorporated into this Contract, including revisions realized by Amendment A-003.

1. The Solicitation, Offer and Award form has been revised to add the Contract number, add the Contractor name and title in the Contractor signature block, and add the total funding for the Base Period of this Contract.
2. All references to September 1, 2017 have been revised to read June 1, 2018.
3. All references to Contract Monitor have been revised to read TDCJ-PFCMOD Monitor.
4. Section A, Definitions, Contractor, has been revised to include the Contractor's name.
5. Section A, Definitions, Facility, has been revised to include the Facility name.
6. Section A, Definitions, Position Vacancy, has been revised to include updated language.
7. Section A, Definitions, Recovery Oriented Support Groups, has been revised to include updated language.
8. Section A, Definitions, has been revised to add TDLR.
9. Section A, Definitions, Upper Level Management, has been revised to include updated language.
10. Section A, Definitions, has been revised to add Working Day.
11. Section B.1.1, Services Being Acquired, has been revised to include updated language, and remove references to all locations except Gist State Jail.
12. Section B.1.2, Pricing Instructions, has been revised to include updated language.
13. Section B.2, Pricing Schedule, has been revised to include the Contractor's Per Diem Rates and remove references to all locations except for Gist State Jail.
14. Section C.1, Background, has been revised to remove references to all locations except for Gist State Jail.
15. Section C.3.1.B.1 and C.3.1.B.2, Specific Duties and Obligations, has been revised to remove reference to Section L.9.
16. Section C.3.1.D.12, Specific Duties and Obligations, has been revised to include updated language.
17. Section C.3.1.F, Specific Duties and Obligations, has been added.
18. Section C.4.A, Intake Requirements, has been revised to include updated language.
19. Section C.5, Staffing, has been revised to include updated language.
20. Section C.6.A, Training, has been revised to include updated language.
21. Section C.6.D, Training, has been revised to include updated language.
22. Section C.6.K, Training, has been revised to include updated language.

23. Section C.13, Employee Identification Cards, has been revised to include updated language.
24. Section C.15.D, Treatment Disciplinary Procedures, has been revised to include updated language.
25. Section, C.19.A, Prison Rape Elimination Act (PREA), has been revised to include updated language.
26. Section, C.20.A, Program Evaluation (Quality Assurance) and Self-Monitoring, has been revised to include updated language.
27. Section E.1.C, Inspection of Services, has been revised to change Section G.4.6 to Section G.4.3.
28. Section G.2.1, Authorized Representative, has been revised to include updated language.
29. Section G.2.3.C, TDCJ-PFCMOD Monitor, has been revised to include updated language.
30. Section G.4.B, Payments, has been revised to change the TDCJ website address.
31. Section H.1.1.H, Required Provisions, has been revised to include updated language.
32. Section, H.2.2.A, Historically Underutilized Business (HUB), has been revised to include updated language.
33. Section H.4, Approval of Employees, has been deleted in its entirety; and revise the title to read, Reserved for Future Use.
34. Section H.6, Criminal History Information Compliance, has been revised to include updated language.
35. Section I.11.A, Approval of Contract, has been revised to include updated language.
36. Section I.23, Rights to Data, Documents, and Computer Software (State Ownership), has been revised to include updated language.
37. Section I.25, Notices, has been revised to include updated language.
38. Section J, List of Exhibits, has been revised to reflect the correct number of pages for Exhibit J.1, Budget Justification Forms and Staffing Plans, Exhibit J.2, HUB Subcontracting Plan, Exhibit J.3, Compliance Standards and Average Daily Salary; and revise Exhibit J.5, title to read Reserved for Future Use.
39. Exhibit J.1, Budget Justification Forms and Staffing Plans, has been revised to include Contractor's completed forms.
40. Exhibit J.2, HUB Subcontracting Plan, has been revised to include Contractor's completed forms and replace Attachment A to add the Contract number; date of award; Contract Specialist; Contractor name; State of Texas VID#; point of contact; phone number; Subcontractor's name; Texas Certified HUB; Subcontractor's VID or HUB Certificate Number; and the Total Contract \$ Amount from HSP with Subcontractor.
41. Exhibit J.3, Compliance Standards and Average Daily Salary, has been revised to include updated language.
42. Exhibit J.9, TDCJ-PFCMOD Monthly Position Vacancy Instructions and Report, has been revised to include updated language.

43. Section K, Representations, Certifications, and Other Statements of Offerors, has been revised to include the Contractor's responses to subsections K.1.2, K.2, K.4, K.8, K.9, K.10, and K.11.
44. Section K.2.B, Child Support Representation, has been revised to include updated language.
45. Section K.6.6, No Litigation, has been revised to include updated language.
46. Section K.6.15, Limitation on Employment of Former State Officers, has been revised to include updated language.
47. Section K.6.18, Violation of Federal Law Relating To Reconstruction Efforts As A Result Of Hurricanes Rita, Katrina or Any Other Disaster after September 24, 2005 and Section K.6.19, Deceptive Trade Practices; Unfair Business Practices, have been renumbered and Clauses to incorporate language for Prohibition of a State Agency Contracting With Companies that Boycott Israel and Prohibition of a State Agency Contracting With Companies Engaged in Business with Iran, Sudan, or Foreign Terrorist Organizations have been added.
48. Sections L and M of this Contract are hereby deleted.

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SECTION A - CONTRACT DEFINITIONS

The following terms used in this Contract shall, unless the context indicates otherwise, have the meanings set forth below:

AA/NA means Alcoholics Anonymous/Narcotics Anonymous.

Additional Services means Additional Services required to be furnished by the Contractor pursuant to changes in the Department and the Texas Board of Criminal Justice (TBCJ) Policies from those in effect as of the date of this Contract, which changes are not required by changes in laws, government regulations, or Court Orders generally applicable to the Department and which changes cause an increase in the cost of operating and managing the program.

Assessments means Addiction Severity Index (ASI) and other approved evaluation instruments to determine treatment and mental health needs.

Authorized Representative means the Person designated in writing to act for and on behalf of a party of this Contract, which designation has been furnished to the other party hereto, as described in Section G.2.1.

Average Daily Salary shall be as set forth in Exhibit J.3, Compliance Standards, Attachment A, Average Daily Salary Schedule.

Biennium means any of the two (2) year periods beginning on September 1 and ending on August 31 of odd numbered years, which periods are used for budgetary purposes by the State of Texas.

Certified Criminal Justice Professional (CCJP) means a professional active in criminal justice and who also works in and around the field of substance abuse.

Certified Criminal Justice Professional-Applicant (CCJP-A) means an applicant status credential for those professionals active in criminal justice who are working toward obtaining the CCJP. A CCJP-A may be issued to an individual who has met the educational and practicum requirements for the CCJP, but has not yet passed the exam and may still be working on direct service/work experience hours. A CCJP-A is issued for a period of five (5) years in which time requirements must be met and a written exam must be passed.

Clinical Groups means groups that provide Offenders with the opportunity to express intense emotions, gain insight into their behavior and that of other Offenders; relate to other Offender's experiences and situations; receive healing affirmations from peers and staff; model appropriate group behavior and exhibit leadership.

Co-Occurring Disorders (COD) means co-occurring mental illness and substance abuse disorders.

Cognitive Intervention means a process whereby Offenders are taught to identify their habits of thinking that lead to problems and to restructure the core beliefs involved.

Community Supervision means the supervised release of a convicted defendant by a court with conditions imposed for a specific period during which the imposition of a sentence is suspended. Previously known as Adult Probation.

Community Supervision and Corrections Department (CSCD) means a county agency that oversees Offenders that are placed on Community Supervision by the court.

Community Supervision Officer (CSO) means an officer that oversees Offenders that are placed on Community Supervision by the court.

Compliance Standards means Contract requirements that have specific and clearly defined recoupment strategies to ensure that the Department does not pay for Services that are not received.

Contract Specialist means the Department employee responsible for non-technical administration of this Contract, and shall have the meaning as set forth in Section G.2.2.

Contract Term means the duration of this Contract as specified in Section F.1.

Contractor means Management & Training Corporation.

Counselor means a qualified and credentialed Person who renders chemical dependency counseling or chemical dependency counseling-related Services to an individual, group, organization, corporation, institution, or the general public for compensation.

Court Orders means any orders or judgments issued by a court of competent jurisdiction and any stipulations, agreements, conditions of Community Supervision, or plans entered into in connection with litigation that are applicable to the operation and management of the program and relate to the custodial care of Offenders. For purposes of this Contract, this term includes such orders, judgments, stipulations, plans, or agreements applicable to the Department.

Day(s) means calendar Days, unless otherwise specified.

Department means the Texas Department of Criminal Justice (TDCJ), an agency of the State of Texas.

Department Policy/Policies means all written policies, procedures, standards, guidelines, directives, and manuals of the Texas Board of Criminal Justice (TBCJ) and the Department applicable to providing the Services specified under this Contract.

Discharge Summary means the document developed for each Offender within thirty (30) Days prior to their scheduled discharge that includes the following: dates of admission and discharge; needs and problems identified at the time of admission, during treatment and at discharge; Services provided; Assessment of the Offender's progress towards goals; reason for discharge; and referrals and recommendations, including arrangements for recovery maintenance.

DSHS means the Texas Department of State Health Services.

DSM Manual means *Diagnostic and Statistical Manual of Mental Disorders* as presently constituted or hereafter amended, published by the American Psychiatric Association.

DWI means Driving While Intoxicated.

Educational Groups means groups that encourage personal growth and provide work-related skills training.

Event of Default means any of the events or circumstances described in Section I.3.

Ex-Offender means a Person who has received a conviction for a misdemeanor or felony offense or an equivalent offense who is not currently incarcerated.

Facility means the Gist State Jail where Services under this Contract are to be performed.

Filled Date means the first date on the job following the completion of all required pre-service; receipt of appropriate certification/license; and a satisfactory criminal background clearance or Department approval letter.

Fiscal Year means any of the one (1) year periods beginning September 1 and ending August 31, which periods are used for annual budgetary purposes by the State of Texas.

Individualized Treatment Plan (ITP) means a plan devised by the Contractor for each Offender that is based on the Intake Evaluation, screening and Assessment, identifying the goals and objectives to be accomplished by the Offender while in treatment.

Intake Evaluation means Comprehensive Assessment performed by the Contractor for each Offender upon his or her entry into the program to determine the level of Services to be provided.

LCDC means Licensed Chemical Dependency Counselor.

LCDC-CI means Licensed Chemical Dependency Counselor-Counselor Intern, a Person pursuing a course of study in chemical dependency counseling and who is authorized to provide chemical dependency counseling, under supervision of a Licensed Chemical Dependency Counselor (LCDC) or a Qualified Professional, at a clinical training institution.

Material Failure means the failure of a party to fulfill one or more obligations essential to achieving the purpose of this Contract.

Monthly Contractor Payment means the mathematical product of the Contractor Per Diem Rate times the number of Offenders for Services rendered at the Facility during the billing month.

Monthly Invoice means the Contractor's invoice based on the Contractor Per Diem Rate and yielding the Monthly Contractor Payment to be made by the Department.

NCIC means the National Crime Information Center operated under the authority of the Federal Bureau of Investigation.

Non-Appropriation means the failure by the Legislature of the State, as part of its budgetary process, to appropriate money to be used for the Payments due hereunder.

Offender means a Person assigned by the Department to reside at the Facility and to receive Services pursuant to this Contract.

Offender Treatment Record means records maintained by the treatment program staff on Offenders participating in the State Jail Substance Abuse Treatment Program, to include screening, Assessments, Individualized Treatment Plans (ITP), treatment progress notes, interventions, reentry plans and any documentation that refers to the Offender's treatment.

Operational Plan means those plans, policies and procedures which are consistent with Department standards and developed by the Contractor to meet the requirements of this Contract.

Payment(s) means the amount(s) agreed to be paid by the Department to the Contractor for Services under this Contract.

PCN means the Position Control Number.

PCN Listing means the Position Control Number (PCN) Listing that corresponds to the position titles and numbers of positions identified on the Contractor's approved Staffing Plan in Exhibit J.1.

PD means the Texas Department of Criminal Justice's (TDCJ's) Personnel Directives.

Peer Recovery Support Specialist (P-RSS) means the occupational title for a trained, self-identifying peer of the individual seeking support, who can engage with peers in a community based recovery center or outside it around any number of activities. The P-RSS works with individuals as they develop and implement a personal recovery plan which can also serve as a contract for engagement.

Per Diem Rate shall have the meaning as set forth in Section B.2.

Person means any individual, corporation, partnership, joint venture, association, joint-stock company, trust, unincorporated organization, court or other tribunal, or government or any agency or political subdivision thereof.

Phase/Stage means the concrete program Stages distinguished by the attainment of specific goals with the therapeutic approach.

Position Vacancy means a position in which there is no qualified, trained incumbent. A vacant position occurs when an employee resigns, has been terminated, is reassigned to another position and/or Facility, or is off the payroll after exhausting all accrued leave, with the exception of Family Medical Leave (FML) and Workers' Compensation and no other qualified, trained Person or employee is placed in that position. Similarly, positions are considered vacant if the individual in that position does not meet the criteria for employment as outlined in PD-17 (Drug-Free Workplace), PD-26 (Nepotism), PD-27 (Employment Status Pending Resolution of Criminal Charges or Protective Orders), PD-73 (Selection Criteria for Correctional Officer Applicants) and PD-75 (Applicants with Pending Criminal Charges or Prior Criminal Convictions). A position becomes vacant when the incumbent is removed from the payroll either temporarily or permanently, regardless of leave status, with the exception of Family Medical Leave (FML) and Workers' Compensation. Positions requiring certification, licensure, or registration are considered vacant if the Person in that position does not possess the appropriate certification, licensure or registration.

Position Vacancy Report (PVR) means a report providing detailed information as to when a position becomes vacant, filled, or out on temporary leave.

PREA means Prison Rape Elimination Act of 2003.

PRN means an "as needed" position identified on the Staffing Plan.

Program Budget means the budget that reflects all resources necessary to perform contracted activities.

Program Capacity means the maximum number of Offenders authorized by the Department to be placed in the program.

Program Director means the Person designated by the Contractor responsible for delivering Services to the Offenders.

Qualified Credentialed Counselor (QCC) means a Licensed Chemical Dependency Counselor (LCDC) or professional as defined in Texas Department of State Health Services (DSHS) Licensure Rules.

Qualified Professional means a Person who is a Licensed Chemical Dependency Counselor (LCDC), Counselor Intern (CI), Certified Criminal Justice Professional (CCJP), Certified Criminal Justice Professional-ApPLICANT (CCJP-A), Advanced Clinical Practitioner (ACP), Licensed Master Social Worker (LMSW), Licensed Professional Counselor (LPC), Licensed Marriage and Family Therapist (LMFT), licensed physician, licensed psychologist, and school counselor certified by the Texas Education Agency.

Recovery Oriented Support Groups means special groups of people who meet together to give and receive emotional and practical support, and to exchange information related to recovery from substance abuse or addiction. The Department recognized organizations include, but are not limited to, Winner's Circle, Secular Organizations for Sobriety (SOS), Twelve-Step groups and faith-based groups.

Reentry Services means Services that are designed to connect the Offender to community resources prior to release.

SAMPIMS means the software program known as the Substance Abuse Master Plan Information Management System that is available on the Department's mainframe.

Service Commencement Date means the date on which the Contractor shall begin providing Services at the Facility pursuant to this Contract. For the purpose of this Contract, that date is June 1, 2018.

Service(s) means delivery by the Contractor of requirements in accordance with the terms and conditions of this Contract.

SJSAPOM means State Jail Substance Abuse Program Operations Manual.

TBCJ means the Texas Board of Criminal Justice.

TCIC means the Texas Crime Information Center operated under the authority of the Texas Department of Public Safety (DPS).

TDCJ means the Texas Department of Criminal Justice, an agency of the State of Texas.

TDCJ-CID means the Texas Department of Criminal Justice-Correctional Institutions Division, a division of the Texas Department of Criminal Justice, an agency of the State of Texas.

TDCJ-CJAD means the Texas Department of Criminal Justice-Community Justice Assistance Division, a division of the Texas Department of Criminal Justice, an agency of the State of Texas.

TDCJ-PD means the Texas Department of Criminal Justice-Parole Division, a division of the Texas Department of Criminal Justice, an agency of the State of Texas.

TDCJ-PFCMOD means the Texas Department of Criminal Justice-Private Facility Contract Monitoring/Oversight Division, a division of the Texas Department of Criminal Justice, an agency of the State of Texas.

TDCJ-PFCMOD Monitor means the Department employee responsible for the technical details within the scope of this Contract, and shall have the meaning as set forth in Section G.2.3.

TDCJ-RPD means the Texas Department of Criminal Justice-Rehabilitation Programs Division, a division of the Texas Department of Criminal Justice, an agency of the State of Texas.

TDLR means the Texas Department of Licensing and Regulation.

Tier means a level of Service within a State Jail Substance Abuse Treatment Program.

Treatment Team means a team that primarily consists of the Offender, Qualified Professional(s), Counselor Intern(s), Department staff and the Offender's significant other, as well as other Persons with a vested interest in the Offender's recovery.

Upper Level Management (ULM) means those top two (2) individuals who are responsible for the administration of the Services provided under this Contract.

Working Day means Monday through Friday unless a nationally recognized holiday.

SECTION B - SUPPLIES OR SERVICES AND PRICES/COSTS**B.1 SERVICES AND PRICES/COSTS****B.1.1 Services Being Acquired**

The Contractor shall, in accordance with the terms of this Contract, provide all necessary personnel, equipment, materials, supplies and Services and otherwise do all things necessary for, or incidental to, the operation and management of a State Jail Substance Abuse Treatment Program, which may include the provision of Driving While Intoxicated (DWI) Services for those Offenders with an identified need, at the following Facility:

| <u>Facility</u> | <u>Location</u> | <u>Capacity</u> | <u>Offender Type</u> |
|-----------------|-----------------|-----------------|----------------------|
| Gist State Jail | Beaumont, Texas | 116 | Male |

The Contract Term will consist of a Base Period of fifteen months (June 1, 2018 through August 31, 2019) and three (3) additional two (2) year renewal Option Periods.

B.1.2 Pricing Instructions

- A. This is a firm fixed-price Contract for these Services.
- B. The Pricing Schedule (Section B.2) incorporates the rates established in the Budget Justification Forms and Staffing Plans (Exhibit J.1).
- C. A detailed budget is included that indicates specific costs involved to perform each function included in Section C. Operating costs are detailed annually using the Budget Justification Forms in Exhibit J.1.

B.2 PRICING SCHEDULE**Contract Line Item Numbers (CLIN) 001-008 Gist (116 Male)**

| | | |
|-----|---|-------------------------------------|
| 001 | Base Period, Year One (06/01/18 – 08/31/18) | \$ <u>9.60</u> Daily Per Diem Rate |
| 002 | Base Period, Year Two (09/01/18 – 08/31/19) | \$ <u>9.71</u> Daily Per Diem Rate |
| 003 | Option Period One, Year One (09/01/19 – 08/31/20) | \$ <u>9.99</u> Daily Per Diem Rate |
| 004 | Option Period One, Year Two (09/01/20 – 08/31/21) | \$ <u>10.12</u> Daily Per Diem Rate |
| 005 | Option Period Two, Year One (09/01/21 – 08/31/22) | \$ <u>10.23</u> Daily Per Diem Rate |
| 006 | Option Period Two, Year Two (09/01/22 – 08/31/23) | \$ <u>10.35</u> Daily Per Diem Rate |
| 007 | Option Period Three, Year One (09/01/23 – 08/31/24) | \$ <u>10.44</u> Daily Per Diem Rate |
| 008 | Option Period Three, Year Two (09/01/24 – 08/31/25) | \$ <u>10.58</u> Daily Per Diem Rate |

B.3 ALLOWABLE COSTS

The proposed budget shall include only costs that are reasonable, necessary and allowable under state statutes, Department Policy and federal cost standards. The Department shall make the final decision on the allowance or acceptability of a cost.

B.4 NON-ALLOWABLE COSTS

The proposed budget shall not include costs that are not allowed by the State or any authorized agency, statute, policy or procedure. Types of non-allowable costs may include, but are not limited to: alcoholic beverages; bad debts; fundraising; political lobbying; and tobacco products.

SECTION C - DESCRIPTION/SPECIFICATIONS/WORK STATEMENT**C.1 BACKGROUND**

The Department requires a Contractor for the operation and management of a State Jail Substance Abuse Treatment Program which may include the provision of DWI Services, hosted within a State Jail Facility, pursuant to Texas Government Code, Section 501.0931. The Department is responsible for the operation of the Facility. Eligible Offenders are provided substance abuse treatment at the following Facility based on the severity of their addiction and characteristics.

| <u>Facility</u> | <u>Location</u> | <u>Capacity</u> | <u>Offender Type</u> |
|-----------------|-----------------|-----------------|----------------------|
| Gist State Jail | Beaumont, Texas | 116 | Male |

C.2 COMPLIANCE WITH APPLICABLE RULES, REGULATIONS, POLICIES, PROCEDURES AND LAWS

The Contractor shall provide the Services at the Facility in compliance with applicable federal and state laws, including all constitutional, legal and Court Ordered requirements, whether now in effect or hereafter effected or implemented, and in accordance with the Operational Plan. The Contractor shall comply with the State Jail Substance Abuse Program Operations Manual (SJSAPOM) and Department Policy, and unless otherwise required by this Contract, shall be free to establish procedures such that the Services attain the goals established by Department Policy.

When differences between applicable standards exist, the higher standard, as defined by the Department, will prevail. The specified requirements and standards will serve as the benchmark for monitoring the Contractor's performance under this Contract.

The Contractor's written requests for deviations from said policy statements shall originate from the Authorized Representative of the Contractor and shall be forwarded to the Texas Department of Criminal Justice-Private Facility Contract Monitoring/Oversight Division (TDCJ-PFCMOD) Director. The Contractor's written requests for deviations shall specify the deviation, with justification, and reference the policy number/procedure, section, paragraph, etc.

C.3 GENERAL DUTIES AND OBLIGATIONS

The Contractor shall provide a treatment program that offers an integrated, systematic approach to Offenders with a broad range of substance abuse offenses.

The State Jail Substance Abuse Program shall contain a variety of educational modules and treatment activities to include group and individual therapy. An Individualized Treatment Plan (ITP) shall be developed for each Offender based on the results of the Assessment. A schedule of appropriate interventions will be included in the ITP. Also, a system of well-defined goals and procedures will be developed for each treatment protocol so efficacy measures can be obtained. The program will utilize evidence-based principles and will establish a system of rewards and sanctions for Offenders participating in the program within the current security system and rules of the Department.

The Contractor shall be responsible for all aspects of the treatment program.

C.3.1 Specific Duties and Obligations

A. The Contractor shall create a treatment environment suitable to support the goals of the State Jail Substance Abuse Treatment Program. The State Jail Substance Abuse Treatment Program shall be designed as a multimodal program to accommodate the diversity of characteristics and individual needs within this specific Offender population.

B. The Contractor shall utilize the curriculum below:

1. Orientation.

2. Core Programming.

Cognitive Intervention – A Program for Offenders Substance Abuse Treatment.

a. "Alcohol, Drugs and the Brain" with Dr. Carlton Erickson.

b. "Set Up for Relapse" with Michael Johnson.

c. "Commitment to Change Series Volume I Overcoming Errors in Thinking" with Dr. Stanton Samenow:

i. "Commitment to Change Part I";

ii. "Commitment to Change Part II"; and

iii. "Commitment to Change Part III".

d. *Clean and Sober* (1988) starring Michael Keaton.

3. "Good Intentions, Bad Choices Series" with Dr. Stanton Samenow.

4. Supplemental Curriculum.

a. "Anger Management for Substance Abuse and Mental Health Clients" by the Substance Abuse and Mental Health Services Administration (SAMHSA).

b. "Living in Balance Series" by Hazelden Publishing:

i. Core Program Sessions 1-12;

ii. Recovery Management Sessions 13-37; and

iii. Co-Occurring Sessions 38-47.

C. The Contractor shall provide a program structure as identified below:

1. Tier 1 (60 - 90 Day Tier)

A ninety (90) Day program with the option to complete the program in sixty (60) Days based on documented evidence of the Offender's Stage of readiness and progress. The program shall be designed to provide substance abuse treatment Services to Offenders who meet the criteria of substance abuse. As defined by the American Psychiatric

Association (as cited in SAMHSA, Tip 42), the substance abuse Offenders are those Offenders with clinically significant impairments to include but not limited to: recurrent substance use resulting in a failure to fulfill major role obligations at work, school or home; have recurrent substance-related legal problems; and demonstrate persistent or recurrent social or interpersonal problems caused or exacerbated by the effects of the substance. This Tier shall encompass fifteen (15) hours per week of treatment delivered through Clinical Groups and individual sessions.

2. Tier 2 (90 – 120 Day Tier)

A one hundred twenty (120) Day program with the option to complete the program in ninety (90) Days based on documented evidence of the Offender's Stage of readiness and progress. The program shall be designed to provide substance abuse treatment Services to Offenders that meet the criteria of substance dependence. As defined by the American Psychiatric Association (as cited in SAMHSA, Tip 42), the substance dependence Offenders are those Offenders with clinically significant impairments to include but are not limited to: an increased tolerance, resulting in the need for even greater amounts of the substance; persistent desire or unsuccessful efforts to cut down or control substance; and spending a great deal of time in activities necessary to obtain the substance. This Tier shall encompass twenty (20) hours per week of treatment delivered through Clinical Groups and individual sessions.

D. Program components shall consist of, but not be limited to, the following:

1. Skills training to facilitate assimilation into the community, to include an enhanced awareness into the relationship between thoughts and feelings, problem-solving, anger management, personal responsibility enhancement, impulse control, issues related to problem drinking and drug use, etc.
2. A program environment that will support professional oversight of program activities and maintain the physical safety of the Offenders.
3. A system of documentation and storage of data to ensure that relevant data is available to monitor Offender progress and program efficacy over time.
4. Reentry planning, coordination of community transitional Services to provide for a network of Services to ensure the Offenders' ongoing and unmet needs are addressed during Reentry Service delivery.
5. On-going interaction with the judiciary, probation, supervision, mental health, social service, and treatment communities to actively and forcefully intervene and break the cycle of substance abuse, addiction, and crime.
6. Quality assurance process shall identify strengths and weaknesses regarding documentation, course of treatment, and outcomes.
7. Employment Preparation - screening for vocational interest and personal objectives, writing resumes, preparing for job interviews, and planning for short and long-range career goals, assisting in completing identification and social security paperwork.
8. Relapse Prevention - encompasses several cognitive behavioral strategies that facilitate abstinence as well as provide help for people who experience relapse.

9. Clinical Groups to provide Offenders with the opportunity to express intense emotions, gain insight into their behavior and that of other Offenders; relate to other Offender's experience and situations; receive healing affirmations from peers and staff; model appropriate group behavior and exhibit leadership.
 10. Educational Groups to encourage personal growth, provide work-related skills training and teach the group process.
 11. The Contractor shall provide treatment planning as described in the SJSAPOM.
 12. Offenders identified as having a need for DWI Services shall be provided the following Additional Service in accordance with standards established by the Texas Department of Licensing and Regulation (TDLR):

DWI Intervention - programmatic activities to intervene in the alcohol/drug abusing lifestyles of the Offenders, as well as prevent further substance abuse related problems. This component of the program is recognized for drivers' license replacement and must be completed by a Certified Program Instructor.
- E. The Contractor shall be responsible for furnishing all required furniture and supplies as needed for Offenders to successfully complete the program.
- F. If the Contractor receives a deaf or hard of hearing Offender who requires an American Sign Language (ASL) interpreter, and the Contractor is unable to provide an interpreter, then the Contractor must immediately notify the TDCJ-PFCMOD Director.

C.3.2 Treatment Frequency Guidelines

- A. The Contractor shall provide a comprehensive treatment schedule that demonstrates at a minimum, a combination of staff-provided treatment hours per week as defined in Section C.3.1 (staff must be present and actively participate in each session of required treatment). All practices within the treatment environment shall be evidence-based and cognitive behavioral.
- B. The following shall be provided to all levels of Service in addition to the required hours of treatment and education:
1. Treatment planning - a minimum of one (1) time per month and as needed.
 2. Individual counseling - a minimum of one (1) time per month and as needed for crisis management.
 3. Family education and interactive sessions - a minimum of four (4) times per month with each session being at least one (1) hour in duration and facilitated by a licensed Counselor.
 4. Recovery Oriented Support Group - a minimum of two (2) times per month.
 5. Programming schedules shall include morning and afternoon sessions to coordinate with other Facility functions and to accommodate all Offenders.

6. A record of attendance in programming activities shall be documented on the Attendance Log or Activity Log.

C.3.3 Assessment

The Contractor shall assess Offenders using the Addiction Severity Index (ASI) and other Assessment instruments as determined/approved by the Department. The Assessment instruments shall be used to identify the most appropriate treatment and mental health Services to meet the Offenders' needs. All Assessments shall be completed within five (5) Working Days from date of entry into the program. ITP shall be developed reflecting the needs of the Offender as identified in the Assessment.

C.3.4 Recovery Oriented Support Groups

- A. The Contractor shall make available to all Offenders Recovery Oriented Support Groups, i.e., Winner's Circle, Secular Organizations for Sobriety (SOS) and Twelve-Step groups throughout all Stages of treatment. Staff will provide volunteer coordination, recovery literature libraries, time and space for open meetings, study groups and sponsorship sessions. Recovery Oriented Support Groups share basic dynamics such as interpersonal responsibility and can effectively complement each other. Staff will ensure that the traditions and principles of Alcoholics Anonymous/Narcotics Anonymous (AA/NA) are respected. Offender participation and attendance is mandatory.
- B. Offenders shall receive a minimum of ten (10) hours of training in the domains of Advocacy, Mentoring/Education, and Recovery Support prior to leading Recovery Oriented Support Groups.

C.4 INTAKE REQUIREMENTS

In performing the Intake Evaluation, the information the Contractor utilizes shall include, but not be limited to, information received from Offender interviews and all available documentation. The program Intake process shall include, but is not limited to:

- A. ITP within ten (10) Working Days from the date of entry. The ITP shall be completed and updated in accordance with SJSAPOM;
- B. The Treatment Grievance Procedures;
- C. The Treatment Disciplinary Procedures; and
- D. Human Immunodeficiency Virus (HIV)/Acquired Immune Deficiency Syndrome (AIDS) Education/Training.

C.5 STAFFING

- A. The Contractor shall maintain supervision caseload levels of one (1) Qualified Credentialed Counselor (QCC) to five (5) or less Licensed Chemical Dependency Counselor-Counselor Interns (LCDC-CI) and/or Certified Criminal Justice Professional-Applicants (CCJP-A).
- B. The Contractor shall provide an appropriate number of Certified Program Instructors to conduct the DWI Intervention components of the program in accordance with TDLR standards.

- C. The Contractor shall not hire any Upper Level Management (ULM) without prior written approval by the TDCJ-PFCMOD. Additionally, the Contractor shall have prior written approval from the TDCJ-PFCMOD for all ULM absences in excess of seventy-two (72) hours to include the designee in charge for the duration of the absence. Approvals by the TDCJ-PFCMOD will not be reasonably withheld.
- D. If the Contractor transfers any employees, regardless of rank, title, or position to another position, notification of this transfer must be made to the TDCJ-PFCMOD by so indicating on the Position Vacancy Report (PVR). In addition, at the Department's request, the Contractor shall provide the name of the employee and location of transfer, all pending investigations and disciplinary actions, and previous disciplinary actions.
- E. Staffing, based on Offender population, shall include specific provisions to maintain required caseloads and levels of Services during periods of vacation, sick leave and other absences.
- F. Positions requiring certification, licensure or registration are considered vacant if the Person occupying that position does not possess the appropriate certification, license or registration. Similarly, the position is considered vacant if the individual does not meet the criteria for employment outlined in PD-17 (Drug-Free Workplace), PD-26 (Nepotism), PD-27 (Employment Status Pending Resolution of Criminal Charges or Protective Orders) and PD-75 (Applicants with Pending Criminal Charges or Prior Criminal Convictions).
- G. The Contractor shall maintain accurate, current, complete and orderly personnel records on location on each employee.
- H. The Contractor's positions shall be staffed with qualified and trained employees in accordance with the Staffing Plan in Exhibit J.1.
- I. The Contractor shall provide a complete Staffing Plan in the required format provided in Exhibit J.1. The Staffing Plan shall include, at a minimum, the following information:
 - 1. Positions for administration, human resources, Counselors, and clerical/support staff;
 - 2. The number of staff by position;
 - 3. Identification of shift;
 - 4. Total Full Time Equivalents (FTE);
 - 5. The Department position equivalency;
 - 6. The training required by position; and
 - 7. Identification of any position on the Staffing Plan as "PRN" or "as needed" requires the Contractor to enter into a subcontract for the Services to be provided in accordance with Section H.2 of this Contract.
- J. The Contractor shall comply with the Staffing Plan in Exhibit J.1. Staffing Plan changes can only be obtained through an approved Contract modification.
- K. The Contractor shall provide job descriptions for each position identified in the Staffing Plan, Exhibit J.1. The Contractor job descriptions shall include minimum education and

experience qualifications, description of job duties, as described in Exhibit J.7, and full-time or part-time designation. Job descriptions must meet the same minimum qualifications as the Department's for like positions.

- L. The Contractor shall provide an organizational chart indicating the lines of supervision for all staff positions identified in the Staffing Plan in Exhibit J.1.
- M. Each applicant shall sign a release stating the employee's employment history may be released not only to the Department, but also to other contractors under contract with the Department.
 - 1. All prospective Contractor employees (including consultants, independent contractors and their employees and agents who work on a routine basis at the Facility) who currently work or previously worked for the Department must authorize the Department to release to the Contractor information concerning all disciplinary actions taken during their employment with the Department as well as their Department re-hire eligibility status. The Department shall determine employment eligibility for any prospective employee requiring Division Director approval prior to being rehired.
 - 2. Job applicants must authorize the Contractor to release to the Department or a Department contractor information concerning all disciplinary actions taken during their employment with the Contractor as well as their re-hire eligibility status as determined by the Contractor in the event the employee seeks employment with the Department or another contractor.
 - 3. Both types of releases shall be documented in a Public Information Act Request and filed in the employee's personnel folder. Results must be maintained in the personnel file.
 - a. The Contractor shall maintain all employment records for a period of seven (7) years after expiration or termination of this Contract.
 - b. Upon receipt of a written request from the Department or a Department contractor, the Contractor shall be required to release employment records for a period of seven (7) years after expiration or termination of this Contract.
- N. The Contractor may employ part-time Counselors in accordance with the following:
 - 1. Part-time Counselors shall work no less than twenty (20) hours per week.
 - 2. Part-time Counselor caseloads shall not exceed thirteen (13) cases.
 - 3. The number of part-time LCDC-CI and CCJP-A positions shall be limited to two (2).
 - 4. The number of part-time Licensed Chemical Dependency Counselors (LCDC) and Certified Criminal Justice Professionals (CCJP) shall be limited to one (1).
 - 5. Part-time Counselor positions shall be identified with a unique number or code which corresponds to the respective vacant position.
 - 6. Part-time LCDC-CIs and CCJP-As shall only be assigned to vacant LCDC-CI and CCJP-A positions.

7. Part-time Counselors shall meet minimum job requirements for the respective position and shall maintain employment eligibility requirements in accordance with Department Policy and DSHS standards.
 8. Part-time Counselors shall meet in-service training requirements as described in Section C.6, Training.
- O. All positions on the approved Staffing Plan shall be filled by a qualified employee having a verifiable employment date within ninety (90) Days of the vacancy occurring. If any position remains vacant for more than ninety (90) Days, the Monthly Contractor Payment shall be reduced by an Average Daily Salary as defined in Exhibit J.3, Attachment A, for each Day the position remains vacant.
- P. A vacancy does not occur when an employee is temporarily absent due to vacation, sick leave or other temporary leave conditions. Such other temporary leave conditions shall include employee participation in management and professional conferences or in-service training, so long as such other temporary leave does not exceed a period greater than two (2) weeks in duration.
- Q. The temporary reassignment of staff to other locations operated by the Contractor shall be subject to the following provisions:
1. Temporary reassignment of staff for any reason other than emergency situations shall have prior written approval from the TDCJ-PFCMOD Director or designee before reassignment. If the temporary reassignment does not benefit the Department, the Average Daily Salary for the reassigned employee will be withheld from the Monthly Contractor Payment.
 2. The Contractor shall provide the TDCJ-PFCMOD with a written description as to how the incumbent's duties will be performed during the period of the temporary reassignment.
- R. If it is determined by the Department monitoring staff that a Service has not been provided while the incumbent has been out on leave, to include but not limited to, Family Medical Leave (FML); Workers' Compensation; Military Leave; or Administrative Leave, the Average Daily Salary for that position will be deducted for the time period for which the Service was not provided.
1. Such a position is vacant, regardless of whether the Service is being provided, when:
 - a. The incumbent remains on FML or Workers' Compensation in excess of twelve (12) weeks.
 - b. The incumbent, on Military Leave, exhausts all paid leave and is placed in a leave without pay status or separated from employment.
 - c. The incumbent, on Administrative Leave, in excess of fourteen (14) Days.
 2. In the event the employee was terminated from the Contractor's payroll, a pre-employment criminal background check that meets employment eligibility criteria as outlined in PD-75 (Applicants with Pending Criminal Charges or Prior Criminal Convictions) is required prior to the incumbent returning to work.

- S. A pre-employment criminal background check shall be completed by the Department for each applicant (including consultants, independent contractors and their employees and agents and volunteer workers who work on a routine basis in the program) within thirty (30) Days prior to being assigned by the Contractor to the program.
- T. The Contractor shall employ or assign only those applicants that meet employment eligibility criteria outlined in PD-75 (Applicants with Pending Criminal Charges or Prior Criminal Convictions) to perform Department Contract duties. The results of the criminal background checks, to include supplemental documents that confirm the employee's eligibility, must be acceptable to the Department and shall be maintained in the employee's file at the Facility.
- U. Employees, to include those in On-the-Job Training (OJT), shall not be assigned to any Department Contract, or have contact with Offenders, until a current criminal background check that meets PD-75 (Applicants with Pending Criminal Charges or Prior Criminal Convictions) eligibility criteria is received.
- V. A nominal fee will be charged to the Contractor for criminal background checks. These fees shall be processed in accordance with the format and frequency as determined by the TDCJ-PFCMOD.
- W. The Contractor shall be responsible for any additional fee charged by the Texas Department of Public Safety (DPS) to the Department for any resubmission requests due to unreadable fingerprints.
- X. In addition to background investigation reports, the Contractor shall maintain in each personnel file a copy of the Department's Texas Crime Information Center (TCIC)/National Crime Information Center (NCIC) Pre-Employment Inquiry Results Letter, the Criminal History Record reflecting the fingerprint analysis, and the results of a pre-employment drug test on each employee in compliance with PD-17 (Drug-Free Workplace), that is acceptable to the Department.
- Y. The Contractor is responsible for the conduct and behavior of all Persons employed or assigned to perform Contract duties (including consultants, independent contractors and their employees and agents and volunteer workers) and shall ensure Department Policies regarding management and treatment of Offenders, including PD-29 (Sexual Misconduct with Offenders), are followed. Should a violation occur, the Contractor shall take immediate corrective action acceptable to the Department.
- Z. The Contractor shall immediately notify the TDCJ-PFCMOD, in writing, of employees who resign while under investigation for inappropriate conduct related to Offender management and for violations of policies related to Facility and program security.
- AA. The Contractor shall immediately notify the TDCJ-PFCMOD, in writing, of any employee who has been convicted, arrested, indicated or charged with a criminal offense. Such employee shall not be permitted to return to duty until authorized in writing by the TDCJ-PFCMOD. A copy of such written authorization shall be maintained in the employee's personnel file.
- BB. The Contractor shall comply with PD-26 (Nepotism) regarding the employment of relatives.

- CC. The Contractor shall provide an Affirmative Action Plan outlining Equal Employment Opportunity (EEO) compliance and strategies used to meet goals outlined in the Affirmative Action Plan.
 - DD. The Contractor shall submit the following reports accurately, with the required supporting documentation, by the fifth (5th) Working Day of the month to the TDCJ-PFCMOD Director or designee:
 - 1. PVR;
 - 2. Position Control Number (PCN); and
 - 3. Monthly Strength Report.
- NOTE:** The above reports must be submitted in signed format as well as electronically in Microsoft® Excel format.
- EE. The Contractor shall implement an employee random drug testing program that meets the minimum requirements of PD-17 (Drug-Free Workplace). The drug testing program policy and procedures shall be approved by the Department prior to implementation.

C.6 TRAINING

- A. The Contractor shall comply with DSHS and TDLR licensure for training requirements.
- B. The Contractor shall provide, at its own expense, training to program staff meeting the minimum requirements of their licensing/certification agency or association.
- C. The Contractor shall provide training within the first ninety (90) Days of employment, and each year thereafter, to all program staff in accordance with SJSAPOM. Training shall consist of, but not be limited to, the following:
 - 1. Equal Employment Opportunity (EEO), to include use of the Department video;
 - 2. Group Therapy and Peer Groups;
 - 3. Relapse Prevention;
 - 4. Crisis Intervention, Cognitive Intervention, Motivational Interviewing Techniques and Evidence-Based Practices;
 - 5. HIV, Hepatitis, Sexually Transmitted Diseases (STD's), and Tuberculosis (TB) Training;
 - 6. Ethics Training;
 - 7. Client Abuse or Neglect Training; and
 - 8. Continuing Education.
- D. The Contractor shall provide all employees with a new employee orientation program after being hired and prior to regular assignment.

- E. Staff shall be required to complete Correctional Awareness Training prior to contact with Offenders and sixteen (16) hours of Staff Survivor Training to be completed annually thereafter.
- F. Within ninety (90) Days of program staff date of hire and each year thereafter, the Contractor shall provide training on multiple needs of Offenders, to include the oversight and monitoring of Offenders who have a history of suicide/self-mutilation, mental/cognitive impairment, and intellectual impairment.
- G. On-the-Job Training (OJT) shall be required of program staff. This may include substance abuse, security, health, or computer-oriented training in order to perform duties as stated in the job description, orientation to working in a correctional environment, and identifying and redirecting tactics criminals use to avoid change.
- H. All program staff shall be trained in Cardiopulmonary Resuscitation (CPR) and First Aid within ninety (90) Days of hire. A minimum of one (1) Clinical Supervisor per shift must be certified in CPR and First Aid. Such certification shall remain current while employed at the Facility.
- I. All training hours an employee receives shall be documented in the employee's personnel file and/or personnel training records, to include course topic, number of hours, and date completed. Training documentation shall include an authorized signature validating such training. The Contractor shall maintain accurate, complete, current, and orderly training records on location on each employee.
- J. Annual training schedules listing all training for the upcoming year, and subsequent years, must be provided for approval and shall be submitted to the TDCJ-PFCMOD in writing and shall include the following:
 - 1. Proposed date(s) of training;
 - 2. Duration of training;
 - 3. Topic(s) of training;
 - 4. A brief synopsis of each topic; and
 - 5. Staff positions to be trained.

The TDCJ-PFCMOD shall approve, in writing, the Contractor's annual training schedule and any changes made to the approved annual training schedule. Requests to modify the schedule shall be submitted in writing to the TDCJ-PFCMOD at least ten (10) Days prior to the affected training and must cite the reason(s) for the modification. In situations that require training to be cancelled due to unexpected events, a notification shall be made to the TDCJ-PFCMOD, as soon as the new training date has been determined. These notifications must include the reason(s) for the modification.

- K. In the event staff delivered treatment programming is cancelled due to staff training, the Contractor shall submit an alternate treatment schedule for Offenders during such time and any such alternate treatment must be approved by the TDCJ-PFCMOD.

C.7 COUNSELOR/OFFENDER CASELOAD

- A. The Contractor shall maintain a Counselor-to-Offender caseload of less than or equal to twenty-five (25) Offenders per Counselor.
- B. Upper Level Management (ULM), Program Director and Assistant Director, shall not carry a caseload on a regular basis and will not be calculated in the number of counselors required. However, a caseload can be temporarily assigned with written approval from the TDCJ-PFCMOD for emergency situations or when a Counselor is out on sick leave, vacation, and other absences.
- C. The Contractor shall not exceed the Counselor-to-Offender caseload requirements.

C.8 REENTRY SERVICES

- A. Networking Services with appropriate Department personnel shall be provided to ensure the Offender's ongoing and unmet needs are addressed during Reentry Service delivery by connecting Offenders with a Peer Recovery Support Specialist (P-RSS) to assist them in their recovery efforts upon release.
- B. If requested by the court, the program staff shall provide a copy of the Individual Progress Summary to the sentencing judge every thirty (30) Days to facilitate the determination of release readiness and provide a means for establishing a Continuum of Care Service Plan.
- C. A copy of the Offender's Individual Progress Summary shall be made available to the sentencing judge, parole officer, and CSO, as appropriate, upon release of the individual to the community.
- D. The Contractor shall ensure that a release of information form is signed by each Offender.
- E. Should the Contractor identify an Offender participating in the State Jail Substance Abuse Treatment Program with an obvious need for medical or mental health assistance, but who has not previously been referred to the Texas Correctional Office on Offenders with Medical or Mental Impairments (TCOOMMI) by the Department, the Contractor shall make a referral to TCOOMMI for consideration. Referrals shall be conducted in accordance with TCOOMMI procedures. The Contractor shall keep a list of Offenders referred to TCOOMMI, to include date of referral, reason and outcome.

C.9 RECORD KEEPING

The Contractor shall establish and maintain written policies and procedures. The Contractor's policies and procedures shall be consistent with Department Policies and DSHS standards. The written policies and procedures shall address the method and process used in recording and disseminating the following:

- A. Intake and Assessment;
- B. Program participation;
- C. Accounting;
- D. Record keeping control and identification; and

- E. Other statistical records as may be required by law or as may be generally required in similar programs.

C.10 OFFENDER RECORDS

- A. The Contractor shall be responsible for maintaining accurate, complete, current and orderly case records, reports and statistics necessary for the evaluation of the program.
- B. These records shall not be disclosed to any Person other than authorized Contractor and Department employees who have a need to access such information.
- C. All Offender records shall be maintained in accordance with the following:
 - 1. All Offender records shall be locked in a file cabinet located in a locked room accessible only to the Contractor and Department representatives.
 - 2. All Offender records shall be maintained current and include the following information, as applicable, to the respective treatment program:
 - a. Identification data;
 - b. Parole Plans;
 - c. Case History (if available);
 - d. Comprehensive Treatment Plan;
 - e. Continuum of Care Service Plan;
 - f. Aftercare Plan;
 - g. Appropriate mental and physical information (Form HSM-18);
 - h. Screening/intake forms and assessment/diagnostic needs;
 - i. Correspondence regarding the case;
 - j. Signed release of information form to specific agencies, when applicable;
 - k. A copy of the Comprehensive Assessment Plan;
 - l. ITP;
 - m. Relapse Prevention Plan;
 - n. Programmatic intake, adjustment and activity reports;
 - o. Offender's daily adjustment and/or progress notes, documented weekly at the minimum;
 - p. Documentation of completion for HIV/AIDS education;

- q. Discharge Summary; and
 - r. All documentation required by SATOM and/or Department Operations Manual(s).
- D. Individualized case files for each Offender shall be retained for a period of seven (7) years after the Offender has been discharged. At the conclusion of the seven (7) year period, the files shall be destroyed in accordance with Department Policy.
- E. Files that have not reached retention periods upon expiration of the Contract shall remain the property of the Department.
- F. The Contractor shall maintain the confidentiality of Offender records and information including, but not limited to, compliance with federal regulations concerning alcohol and drug abuse treatment set forth in the Code of Federal Regulations, Title 42, Volume 2 and Texas Government Code, Section 508.313. No personal information of any Offender may be divulged or made known in any manner to any Person except as may be necessary to provide the Services. The Contractor shall immediately notify the Department, in writing, if any legal process requires disclosure of an Offender's records and shall obtain written authorization from the Department before disclosure or release of same.

C.11 INFORMATION TECHNOLOGY SERVICES

The Contractor shall provide, at its own expense, equipment and software that may be required to interface with current and future technology architecture requirements as directed by the Department.

- A. All computers for non-Department staff shall be purchased at the Contractor's expense.
- B. The Contractor will be responsible for any required software needed to access the Department mainframe.
- C. The Contractor must have current anti-virus software and Microsoft patches installed before connecting to the Department network.
- D. The Contractor shall purchase, install, maintain/repair and replace all cabling necessary for computers.
- E. All printers and scanners shall be purchased at the Contractor's expense and a support contract must be maintained in the event of failure and/or replacement.
- F. The Contractor shall report to the TDCJ-PFCMOD Monitor, any changes in the employment status or job duties of staff having access to mainframe applications.

C.12 OFFENDER MONITORING

The Contractor shall establish written policies and procedures, including format and frequency, for monitoring Offender's progress in the State Jail Substance Abuse Treatment Program. These policies and procedures shall include methods for reporting progress to Department staff, including any release of information forms, progress reports, telephone calls, etc.

C.13 EMPLOYEE IDENTIFICATION CARDS

The Contractor is responsible for expenses of employee identification cards and shall submit a prototype employee identification card for TDCJ-PFCMOD approval. The Contractor employee identification card shall incorporate security features that cannot readily be replicated in the program or commercially.

C.14 TREATMENT GRIEVANCE PROCEDURES

- A. The Contractor shall have written Offender treatment grievance policies and procedures, which are consistent with the Department's grievance policy and will provide a copy of these procedures to all Offenders at intake.
- B. The Contractor shall maintain a master file of all treatment grievances and pursuant actions taken.
- C. Treatment grievance records shall be retained on location in accordance with the Department's records retention schedule.
- D. The Contractor shall submit a monthly report listing all treatment grievances filed and pursuant action(s) taken to the TDCJ-PFCMOD.

C.15 TREATMENT DISCIPLINARY PROCEDURES

- A. The Contractor shall have written Offender treatment disciplinary policies and procedures, which are consistent with the Department's SJSAPOM and will provide a copy of these procedures to Offenders at intake.
- B. The Contractor shall maintain a master file of all treatment disciplinary cases issued and the pursuant actions taken.
- C. Treatment disciplinary records shall be retained on location in accordance with the Department's records retention schedule.
- D. The Contractor shall submit a monthly report listing all treatment disciplinary cases written and pursuant action(s) to the TDCJ-PFCMOD.
- E. The Contractor shall provide the Department's assigned Facility supervising officer a written report and recommended sanctions, within ten (10) Days of the notification, in the event an Offender commits a treatment violation.
- F. The Contractor shall maintain a master file of treatment violations on a Behavioral Intervention Log.

C.16 DSHS REGISTRATION AND COUNSELING STAFF LICENSURE

The Contractor shall maintain current DSHS Clinical Training Institute (CTI) registration and Counselor licensure for the duration of the Contract Term. In the event Department rules conflict with DSHS rules, DSHS rules will prevail. The Contractor shall provide the Department with updated DSHS license(s) immediately upon receipt.

C.17 TEXAS HEALTH AND SAFETY CODE, SECTIONS 85.112-114 (HIV/AIDS POLICIES AND EDUCATION)

The Contractor shall provide HIV-related Services in accordance with Texas Health and Safety Code, Sections 85.112, 85.113 and 85.114.

- A. The Contractor shall develop workplace guidelines that address HIV policies, confidentiality and employee/Offender education programs. The guidelines shall, at a minimum, incorporate the model workplace guidelines developed by DSHS, or mirror the guidelines adopted by the Department. The Contractor shall maintain the written policies and guidelines at the Facility site.
- B. The Contractor shall develop confidentiality guidelines regarding AIDS and HIV medical information for employees and Offenders. The policies shall be consistent with guidelines published by DSHS and with state and federal laws and regulations.
- C. Educational programs regarding HIV/AIDS shall be provided to all employees and Offenders on a routine basis. These programs shall be based on the model education program created by the DSHS. The education program developed by the Contractor shall be tailored to meet the needs of all employees and Offenders, including the use of Braille or telecommunication devices for the deaf. The HIV education and prevention programs shall also be tailored to address the needs of Persons with physical or mental disabilities.
- D. As part of the proposal submission and upon award of the Contract, the Contractor shall provide the TDCJ-PFCMOD with copies of the above stated policies/programs in the Contractor's Operational Plan.
- E. The Contractor shall maintain written documentation in each Offender and employee file of HIV/AIDS education/training completion.

C.18 RISK MANAGEMENT

- A. The Contractor shall report verbally, followed by e-mail notification, any serious and/or unusual incidents to the Department immediately and upon learning of the event.
- B. The Contractor shall complete injury and other types of reports in the format specified and within the time frames established by the Department.

C.19 PRISON RAPE ELIMINATION ACT (PREA)

- A. The Contractor shall comply with the Prison Rape Elimination Act (PREA) Standards for Adult Prisons and Jails and report any Offender sexual abuse to TDCJ-PFCMOD in accordance with Department Policy.
- B. The Department designated TDCJ-PFCMOD Monitor will monitor to ensure the Contractor is compliant with the PREA Standards for Adult Prisons and Jails.

C.20 PROGRAM EVALUATION (QUALITY ASSURANCE) AND SELF-MONITORING

- A. The Contractor shall continually conduct self-monitoring to include quarterly corporate self-monitoring, utilizing comprehensive self-monitoring plans approved by the TDCJ-Rehabilitation Programs Division (TDCJ-RPD).
1. The Contractor shall designate an employee as the staff member responsible for continuous self-monitoring of the program. The reporting procedures, which also include frequency and subject matter, shall be included in the Operational Plan.
 2. Any self-monitoring reports that are produced shall be provided to the designated Department staff in accordance with the self-monitoring plan approved by the TDCJ-RPD.
- B. The Contractor shall forward to the TDCJ-RPD copies of Monthly Operational Reports no later than the fifteenth (15th) of the month following the end of the preceding month. This internal administrative audit conducted by the Contractor shall exist apart from any audit conducted by the Department or another agency. These Operational Reports are as follows and shall be submitted in the format requested by the Department:
1. Offender List by Counselor (Caseload List);
 2. List of Staff Hires, Terminations, Resignations and Vacant Positions;
 3. Organizational Chart;
 4. Staff Leave Time Report;
 5. Ex-Offenders Employee Roster;
 6. Treatment Schedule;
 7. Copies of Treatment Grievances submitted by Offenders;
 8. New or revised policies and procedures;
 9. Number of Offenders that had an interruption of Service; and
 10. User ID for the personnel responsible for entering data into the SAMPIMS.
- C. The Contractor shall provide to the TDCJ-RPD a Monthly Status Report (Statistical Report) no later than the fifth (5th) of the month following the end of the preceding month, in the format requested by the Department.
- D. The Contractor shall provide to the TDCJ-RPD the *Clinical Training Institute – QCC Monthly Monitoring Report* no later than the fifth (5th) of the month following the end of the preceding month.

C.21 CONTRACTOR COMPLIANCE STANDARDS

As part of the comprehensive quality assurance plans described in Section C.20, the Contractor shall include a system of Compliance Standards designed to monitor and assess the success of the program. The Department has developed the minimum Compliance Standards listed in Exhibit J.3. The Contractor's plan must include additional standards along with criteria that define acceptable or unacceptable performance. The Contractor shall ensure that outcome measures indicate results achieved. In devising Compliance Standards, the Contractor shall:

- A. Develop clearly defined goals, outputs and measurable outcomes which directly relate to the program objectives;
- B. Develop a formalized system to record information relative to the outcome measures;
- C. Develop a method to track and evaluate the achievement of outcomes; and
- D. Submit on a quarterly basis, the first (1st) Working Day of the month following the end of the quarter, the Performance Measure Report to TDCJ-RPD staff.

C.22 OPERATIONAL PLAN

- A. As part of the proposal submission and upon award of the Contract, the Contractor shall provide one (1) copy of the Contractor's Operational Plan, for the TDCJ-PFCMOD's written approval. The Operational Plan shall detail the Contractor's written policies and procedures to govern the total operation and management of the program, including all job descriptions. Policies and procedures cannot conflict with Contractual obligations or the policies and procedures of the Department and shall comply with the requirements of Section C of this Contract. The Contractor shall comply with all procedures and guidelines as defined by the TDCJ-PFCMOD.
- B. The Contractor shall notify the TDCJ-PFCMOD in writing of proposed changes in, or additions to, the Operational Plan with regard to the Contractor's policies and procedures, and job descriptions prior to implementation. Any proposed changes must be submitted to the TDCJ-PFCMOD for written approval in electronic strikethrough version to include a summary of changes and replacement pages.
- C. The Contractor's policies and procedures shall reference the applicable Contract Section(s), Department Policy, DSHS standards, SJSAPOM and any other source document or citation deemed appropriate.
- D. The Contractor shall have an Affirmative Action Plan outlining EEO compliance and strategies used to meet goals outlined in the Affirmative Action Plan.
- E. The Contractor shall maintain current Department Policies as a minimum.

SECTION D - RESERVED FOR FUTURE USE

SECTION E - INSPECTION AND ACCEPTANCE**E.1 INSPECTION OF SERVICES**

- A. The Department and other government regulatory agencies have the right to inspect and test all Services called for by this Contract, to the extent practicable at all times and places during the Contract Term. The Department shall perform inspections in a manner that will not unduly interfere with the Contractor's operation and management of the program. The Contractor shall furnish, and shall require subcontractors to furnish, at no increase in the Contract price, all reasonable assistance for the safe and convenient performance of these duties.
- B. From time to time the Department shall, subject to limitations provided by law with respect to rights of privacy, have the right to reasonably prompt access and to examine all records of the Contractor related specifically to the program, including financial records, employee records (including time and attendance records), and Offender records generated by the Contractor and its subcontractors in connection with the performance of this Contract.
- C. If subject to the outcome of an audit or inspection, it is determined that the Contractor is in non-compliance with any provisions of this Contract, and/or that money is owed to the Department by the Contractor, then the Department may exercise its rights of recovery of money owed as authorized in Section G.4.3 of this Contract.
 - 1. If any of the Services are non-compliant with the Contract requirements, as identified by the Department, the Contractor shall be notified describing the specific areas of non-compliance. The Contractor shall have a twenty (20) Day period to file a written response detailing corrective action(s) taken to all items of non-compliance. The response must include supporting documentation which verifies execution of corrective action(s) taken. Unless otherwise specified, or previously agreed to by the Department, the submission of a corrective action plan shall not be accepted as corrective action. For all items of non-compliance satisfactorily resolved by agreement between the Contractor and the Department, no further action regarding such items shall be taken. Any areas of non-compliance shall be corrected within twenty (20) Days or by the date of the Department approved extension.
 - 2. If any of the Services are non-compliant with the Contract requirements, as identified by a government regulatory agency, the Contractor must resolve all items identified as non-compliant by the deadline established by the agency.

E.2 INSPECTION OF PROGRAM

- A. The Contractor shall provide and maintain an inspection system acceptable to the Department covering the programs and work called for by this Contract. Complete records of all inspection work performed by the Contractor shall be maintained and made available to the Department during Contract performance and for as long afterwards as the Contract requires.
- B. The Contractor shall provide entry at all times by the Texas Board of Criminal Justice (TBCJ) and the Department's authorized employees/agents for inspections and other official purposes. The Governor, members of the Legislature and all other members of the Executive and Judicial Departments of the State, as well as any other Persons designated by the Department, including the Office of the Inspector General, shall be allowed to monitor the delivery of Services.

E.3 MONITORING CRITERIA

- A. The Department shall devise its own procedures for monitoring the quality of the Contractor's performance under this Contract, all Court Orders and Department Policies.
- B. The Contractor shall cooperate fully with the Department in obtaining the requisite information needed to complete such audits and to assess the quality of the Contractor's performance.
- C. Monitoring may include, but is not limited to, document reviews and on-site audits conducted by Authorized Representatives of the Department. Such monitoring by the Department shall not relieve the Contractor of any of its obligations under this Contract.
- D. The TDCJ-PFCMOD Monitor and other Department staff shall provide written findings regarding non-compliant conditions, processes, procedures or operations implemented at the Facility, and observations that could, if not addressed by the Contractor, become an item of non-compliance as described in Section E.1.

E.4 AUTHORITY TO AUDIT

- A. The Contractor understands that acceptance of funds under this Contract acts as acceptance of the authority of the State Auditor's Office (SAO), or any successor agency, to conduct an audit or investigation in connection with those funds. The Contractor further agrees to cooperate fully with the SAO, or its successor, in the conduct of the audit or investigation, including providing all records requested.
- B. The Contractor shall ensure that this Clause concerning the authority to audit funds received indirectly by subcontractors through the Contractor and the requirement to cooperate is included in any subcontract it awards.
- C. The Contractor shall reimburse the State of Texas for all costs associated with enforcing this provision.
- D. See Section H.8, Books and Records, concerning record retention.

E.5 AUDITS BY OTHER AGENCIES

Upon receipt of audits or monitoring reports pertaining to the provision of Services under this Contract that are conducted by agencies or entities other than the Department, the Contractor shall provide copies thereof to the Department within thirty (30) Days. The Contractor shall provide to the Department copies of responses to audits and/or inspections within seven (7) Days of issuance. Audits or inspections may include allegations or complaints involving program operations or the Contractor and its employees (including consultants, independent contractors and their employees, agents, and volunteer workers).

E.6 FRAUD, WASTE OR ABUSE

- A. In accordance with Texas Government Code, Chapter 321, the SAO is authorized to investigate specific acts or allegations of impropriety, malfeasance or nonfeasance in the obligation, expenditure, receipt or use of State funds.

- B. If there is a reasonable cause to believe that fraud, waste or abuse has occurred at this agency, it can be reported to the SAO by calling 1-800-892-8348 or at the SAO's website at www.sao.texas.gov. It can also be reported to the TDCJ Office of the Inspector General at 1-866-372-8329, the TDCJ Internal Audit Division at 936-437-7100, or Crime Stoppers at 1-800-832-8477.

SECTION F - DELIVERIES OR PERFORMANCE**F.1 PERIOD OF PERFORMANCE**

The Contract will consist of a Base Period of fifteen (15) months (June 1, 2018 through August 31, 2019) and three (3) two (2) year renewal Option Periods (September 1, 2019 through August 31, 2021; September 1, 2021 through August 31, 2023; and September 1, 2023 through August 31, 2025).

SECTION G - CONTRACT ADMINISTRATION DATA**G.1 CLAUSES INCORPORATED BY REFERENCE**

This Contract incorporates one or more clauses by reference, with the same force and effect as if they were given in full text. Upon request, the Contract Specialist will make their full text available.

Texas Government Code, Chapter 2251, Payment for Goods and Services

G.2 AUTHORITY – AUTHORIZED REPRESENTATIVE, CONTRACT SPECIALIST, TDCJ-PFCMOD MONITOR AND PROGRAM DIRECTOR**G.2.1 Authorized Representative**

- A. In the case of the Contractor, its President or any Vice President, shall designate the Authorized Representative in writing. The designation of the Contractor's initial Authorized Representative shall be delivered to the Department no later than the effective date of this Contract. The Contractor's Authorized Representative may designate other Persons to assist such Authorized Representative in the performance of certain obligations required by this Contract.
- B. In the case of the Department, the Executive Director is hereby designated as its Authorized Representative. The Executive Director has designated the Chief Financial Officer to act in his/her behalf on matters requiring signature approval of the Authorized Representative. The TDCJ-PFCMOD Director has been designated as the Authorized Representative to act on behalf of the Chief Financial Officer on all matters pertaining to the daily operations and management of the program and in compliance with this Contract. The Department's Authorized Representatives may designate other Persons to assist such Authorized Representatives in the performance of certain obligations of this Contract.
- C. At any time, any party may designate any Person as its Authorized Representative by delivering to the other party a written designation signed, if on behalf of the Contractor, by its President or any Vice President, or if on behalf of the Department, by the Executive Director. Such designations shall remain effective until new written instruments are filed with or such notice is given to the other party that such designations have been revoked.
- D. The Department's Authorized Representative (the Executive Director) or his/her designated representative (Chief Financial Officer) is the only Person authorized to make or approve changes in any of the requirements of this Contract, and notwithstanding any clauses contained elsewhere in this Contract, the said authority remains solely with the Executive Director or his/her designated representative. In the event the Contractor makes any change at the direction of any Person other than the Executive Director or his/her designated representative, the change will be considered to have been made without authority and no adjustment will be made in the Contract price to cover any increase in cost incurred as a result thereof.

G.2.2 Contract Specialist

- A. The Contract Specialist for administration of this Contract is Jodi Lawson.
- B. The telephone number for the Contract Specialist is (936) 437-7130.

- C. The fax number for the Contract Specialist is (325) 223-0310.
- D. The e-mail address for the Contract Specialist is jodi.lawson@tdcj.texas.gov.
- E. The Contract Specialist is responsible for general administration of this Contract, negotiation of any changes and final issuance of written changes/modifications to this Contract. All requests by the Contractor, to modify the Contract, shall be made in writing to the TDCJ-PFCMOD and a copy submitted to the Contract Specialist.

G.2.3 TDCJ-PFCMOD Monitor

- A. The TDCJ-PFCMOD Monitor is not authorized to make any representations or commitments of any kind on behalf of the Executive Director of the Department or the State of Texas.
- B. The TDCJ-PFCMOD Monitor does not have the authority to alter the Contractor's obligations or to change the Contract specifications, prices, terms or conditions.
- C. If, as a result of technical discussions, it is desirable to modify Contract obligations or the statement of work, changes will be issued in writing and signed by the Executive Director of the Department or designee.

G.2.4 Program Director

The Contractor shall provide a Program Director for this Contract who shall be responsible for the overall management and coordination of this Contract and shall act as the central point of contact with the Department. The Program Director shall have full authority to act for the Contractor in the performance of the required Services. The Program Director, or a designated representative, shall meet with the TDCJ-PFCMOD Monitor to discuss problems as they occur.

G.3 INVOICE REQUIREMENTS

- A. The Contractor shall invoice the Department for each calendar month, one (1) calendar month in arrears for the amount due for Services, and the Department shall pay such invoice thirty (30) Days after receipt of an accurate Contractor's invoice and supporting documentation. The Contractor may offer a prompt payment discount, for example, one percent (1%), fifteen (15) Days (refer to page 1, block 7 of the Solicitation, Offer and Award form) if the Contractor desires expedited Payments. Prompt payment discounts and payment terms must be stated on each invoice.
- B. The Contractor's Monthly Invoice shall include the following information.
 - 1. Name of business, remittance address, and invoice date;
 - 2. Contract number;
 - 3. Descriptions, price, and quantity of Services rendered;
 - 4. Daily census; and
 - 5. Prompt payment discount.

- C. The Contractor's supporting documentation shall include the following information:
1. PVR;
 2. PCN Listing; and
 3. Monthly Strength Report.
- D. Monthly Invoices shall be submitted to the office designated below or electronically no later than the fifth (5th) Working Day after the end of the preceding month:
- TDCJ – Private Facility Contract Monitoring/Oversight Division
Attention: Business Operations
Two Financial Plaza, Suite 300
Huntsville, Texas 77340
- PF-BusinessMail2@tdcj.texas.gov
- E. The Contractor shall have thirty (30) Days from receipt of Payment to submit a request for consideration to review any discrepancies or inaccuracies.

G.4 PAYMENTS

- A. The payment schedule shall be based on occupancy level determined by current Offender accounting procedures.
- B. Regardless as to whether direct deposit is chosen, upon Contract award the Contractor shall submit a completed Vendor Maintenance Direct Deposit and Substitute W-9 Form to the following address:

Texas Department of Criminal Justice
Attention: Accounts Payable
P.O. Box 4018
Huntsville, Texas 77342-4018

If the Contractor has previously submitted a completed Vendor Maintenance Direct Deposit and Substitute W-9 Form to the Department for another separate contract, another form is not required to be submitted.

The form and instructions can be found at the following link on the TDCJ website:
www.tdcj.texas.gov/divisions/bfd/acct_accts_pay.html.

In the event the Contractor elects to decline direct deposit on the Vendor Maintenance Direct Deposit and Substitute W-9 Form, the Payment will be mailed to the following remittance address:

G.4.1 Compensation for Additional Services

- A. The Department recognizes that the Contractor has entered into this Contract and has offered to furnish the Services hereunder based upon Department Policies in effect as of the date of this Contract.
- B. If there are changes in such Department Policies which changes are not as a result of changes in laws, government regulations or Court Orders generally applicable to the Department and which necessitate a change in the scope of Services furnished by the Contractor so as to increase the cost of operating and managing the program or performing other Services contemplated in this Contract, then the Contractor may be provided extra compensation for the Additional Services required.
- C. The Contractor shall request in writing, together with such supporting documentation or information as the Department may reasonably request, the additional compensation the Contractor desires to offset the Contractor's increase in costs for furnishing the Additional Services because of such change in Department Policies.
- D. The parties shall make a good faith effort to mutually agree on the cost adjustment prior to the implementation of the new policy at the Facility, unless implementation of the new policy is required immediately due to security or public safety issues.
- E. If mutual agreement is not reached within thirty (30) Days, the Contractor shall implement the new policy, with both parties continuing negotiations until such time as a mutual agreement is reached or sixty (60) Days has lapsed as set forth in Section G.4.2 below. Cost adjustments will be retroactive to the date that the Contractor implemented said policy.
- F. In the event that such changes in Department Policy are the result of changes in laws or government regulations, the Contractor shall be financially responsible for incurring any additional cost to comply with the terms of such policies and this Contract.

G.4.2 Failure to Agree on Compensation for Additional Services

If the parties cannot agree on a per diem adjustment or compensation for Additional Services within sixty (60) Days of the date the Contractor's request is received by the Department, the Contractor may utilize the dispute resolution process as outlined in Section I.3.11.

G.4.3 Payment Adjustment

- A. The Department may elect to deduct from its Monthly Contractor Payment as specified in Section G.4.6, any amount specified in Section C.5, Exhibit J.3 or any money determined to be due as specified under Section E.1.C.
- B. If it is determined the amount of Monthly Contractor Payment is not adequate to cover the money due to the Department, then all of the Monthly Contractor Payments shall be withheld and an invoice issued to the Contractor for the amount due.
- C. The Contractor shall be responsible to pay the invoiced amount within thirty (30) Days of receipt, unless the Contractor and the Department mutually agree on an alternative Payment method.

G.4.4 Late Payment

Any amount owed to the Contractor more than one (1) Day beyond the date such amount is due as described in Section G.3 hereof shall accrue interest each Day that such amount is not paid at the rate specified by Texas Government Code, Section 2251.025, provided, however, that this provision shall not excuse failure by the Department to make Payment in strict accordance with this Contract.

G.4.5 Deductions for Unacceptable Compliance Standards

- A. Compliance Standards and deductions are listed in Exhibit J.3 of this Contract.
- B. The Contractor's failure to meet the listed Compliance Standards shall result in a deduction to the Monthly Contractor Payment.

G.4.6 Withholding of Payment

- A. The Department shall have the right to withhold the Monthly Contractor Payment until the failures described below have been corrected:
 - 1. Failure to submit reports as required in Section C;
 - 2. Failure to respond to audit reports as set forth in Section E.1.C; and
 - 3. Failure to correct identified areas of non-compliance to the satisfaction of the Department within twenty (20) Days upon receipt of written notification.
- B. The Contractor agrees that the Department shall not pay interest to the Contractor for monies so withheld.
- C. The Monthly Contractor Payment withheld shall be released upon the Department's satisfaction that compliance has been achieved for thirty (30) consecutive Days.
- D. With the exception of disputed issues, such withholding of final Payment by the Department shall not exceed one hundred twenty (120) Days from the date of Contract termination.

G.4.7 Payment of Debt Owed to the State of Texas

As required by Texas Government Code, Section 2252.903, the Contractor agrees that any Payments due under this Contract shall be directly applied towards eliminating any debt or delinquency including, but not limited to, delinquent taxes; delinquent student loan payments; and delinquent child support, until the debt is paid in full. The Contractor shall comply with the rules adopted by the Department under Texas Government Code, Sections 403.055, 403.0551, 2252.903 and other applicable laws and regulations regarding satisfaction of debts or delinquencies to the State of Texas.

G.4.8 Right to Offset

In the event the Department determines that the Contractor owes money to the Department under any contract or purchase order, the Department, upon providing the Contractor with written notice of its intent to offset, shall have the right to withhold monies due to the Contractor with respect to this Contract or purchase order or with respect to any contract or purchase order with the Department and apply such monies to the money due to the Department.

G.4.9 Annual Financial Disclosure Reports

- A. The Contractor shall have an annual audit performed by an independent Certified Public Accountant (CPA) and submit to the Contract Specialist the financial reports prepared according to Generally Accepted Accounting Principles and Auditing Standards (GAAP and GAAS) within one hundred twenty (120) Days after the end of the Contractor's fiscal year.
- B. In the disclosure of its financial affairs, the Contractor agrees to allow the Department or its representatives access to all its corporate books, to cooperate in any audits thereof and to provide the Department's Contract Specialist with 1 and 2 below:
 - 1. Consolidated financial statements such as are required by GAAP of the Contractor and its affiliates for such year, setting forth in each case in comparative form the corresponding figures for the preceding fiscal year, all in reasonable detail and certified by independent CPA's of recognized standing to the effect that said financial statements fairly present, except as specifically stated, the consolidated financial position and result of operations of the Contractor and its affiliates as of the end of the year for the year involved, and a statement signed by a senior accounting or financial officer of the Contractor that such officer has no knowledge, except as specifically stated, of the occurrence and continuance of any Event of Default or event which, with the time or the giving of notice, or both, would constitute an Event of Default (as defined in Section I.3.1) or, if such circumstance does exist, specifying the nature and extent thereof and the actions proposed to cure same; and
 - 2. Copies of any "management letters" (as that term is understood pursuant to GAAP and GAAS) received by the Contractor following any such audits.

SECTION H - SPECIAL CONTRACT REQUIREMENTS**H.1 INSURANCE REQUIREMENTS**

- A. Prior to the approval of this Contract by the Department, the Contractor shall procure, pay for and maintain the following insurance written by companies approved by the State of Texas and acceptable to the Department. It is recommended that coverage be with a company or companies having both, a Financial Strength Rating of "A" or better and Financial Size Category Class of "VII" or better from A.M. Best Company, Inc.
- B. The insurance shall be evidenced by delivery to the Department of certificates of insurance executed by the insurer or its authorized agent stating coverage, limits, expiration dates and compliance with all applicable required provisions.
- C. Upon request, the Department shall be entitled to receive without expense, copies of the policies and all endorsements. Copies and changes to the initial insurance policies, including extensions, renewals, cancellations and revisions shall be submitted to the Contract Specialist within thirty (30) Days of the effective date.
- D. Subject to the Contractor's right to maintain reasonable deductibles, the Contractor shall obtain and maintain in full force and effect for the duration of this Contract and any extension hereof, at the Contractor's sole expense, insurance coverage in the following type(s) and amounts:
 - 1. **Workers' Compensation** with statutory limits; **Employers Liability** with minimum limits for bodily injury:
 - a. By accident, \$1,000,000.00 per each accident; and
 - b. By disease, \$1,000,000.00 per employee with a per policy aggregate of \$1,000,000.00.
 - 2. **Commercial Automobile Liability Insurance** covering owned, hired, and non-owned vehicles, with a minimum combined bodily injury (including death) and property damage limit of \$1,000,000.00 per occurrence.
 - 3. **Commercial General Liability Insurance** including, but not limited to, Premises/Operations; Personal & Advertising Injury; Products/Completed Operations; Independent Contractors and Contractual Liability with minimum combined bodily injury (including death) and property damage limits of \$1,000,000.00 per occurrence, and \$2,000,000.00 general aggregate.
 - a. Civil Rights Liability must be provided with the same liability limits. It may be included with the General Liability Policy or written on a separate policy.
 - b. The Department shall be named as an additional insured by using endorsement CG2026 or broader.
 - 4. **Professional Liability** (including Errors and Omissions) including, coverage for the rendering of, or failure to render, professional services with minimum limits of \$1,000,000.00 per occurrence, \$3,000,000.00 annual aggregate.

5. **Commercial Crime Insurance** to cover losses from Employee Dishonesty with a minimum limit of \$1,000,000.00 each occurrence endorsed to cover third party property. The Department must be a joint loss payee.

NOTE: If the insurance described in 3 or 4 above is written on claims-made form, coverage shall be continuous (by renewal or extended reporting period) for not less than sixty (60) months following completion of the Contract and acceptance by the Department. Coverage, including any renewals, shall have the same retroactive date as the original policy applicable to this Contract.

H.1.1 Required Provisions

The Contractor agrees that with respect to the above required insurance, all insurance contracts and certificate(s) of insurance will contain and state, in writing, the following required provisions:

- A. Name the Department and its officers, employees and elected representatives as additional insured to all applicable coverages.
- B. Waive subrogation against the Department, its officers, employees, and elected representatives for bodily injury (including death), property damage or any other loss, to all applicable coverages.
- C. Provide that the Contractor's insurance is the primary insurance in regards to the Department, its officers, employees and elected representatives.
- D. Provide that all provisions of this Contract concerning liability, duty and standard of care, together with the indemnification provision, shall be underwritten by contractual liability coverage sufficient to include such obligations within applicable policies.
- E. Ensure that all certificates of insurance identify the Service or product being provided and the name of the responsible party.
- F. The Contractor, through an insurance agent licensed by the State of Texas, shall obtain all insurance coverage and an insurance company licensed to issue such coverage in this State shall provide such coverage. No "self-insurance" coverage shall be acceptable. All policies shall include a provision requiring at least thirty (30) Days prior written notice of cancellation to the Department.
- G. All insurance coverage obtained by the Contractor shall continue in full force and effect during the Contract Term. No contract shall be entered into between the Contractor and the Department unless insurance coverage binders are received by the date scheduled for the execution of the contract. Proof of insurance policies must be delivered prior to the Service Commencement Date.
- H. The Contractor may choose the amount of deductible for any other insurance coverage required (above) to be obtained by the Contractor. The deductible may exceed five percent (5%) of the required yearly aggregate limit of coverage for each occurrence. The Contractor is responsible for the first (1st) dollars to be paid for any such claim.
- I. The Contractor is responsible for the first (1st) dollar defense coverage. All general liability and professional liability policies shall provide defense in addition to the policy limits.

- J. The limits required herein are minimum acceptable. However, these limits are not to be construed as being the maximum any prospective contractor may wish to purchase for their own benefit.
- K. As respect to the total limits of liability required, any combination of primary and/or umbrella coverage may satisfy those totals. However, if an umbrella is used, coverage must be at least as broad as the primary coverage.

H.2 SUBCONTRACTORS

- A. The Contractor may subcontract for the performance of any of its responsibilities to provide Services pursuant to this Contract.
- B. No subcontract may be entered into unless the Department provides prior written approval, which approval may not be unreasonably withheld.
- C. If a subcontractor is deemed to be needed for an event of an emergency nature, verbal approval may be obtained through an Authorized Department Representative. The Contractor shall submit a written request with supporting documentation for approval, by the Department, as soon as possible.
- D. The Contractor shall furnish to the Department copies of all subcontracts, without regard to the amount of annual payments.
- E. Any arrangement by the Contractor with an affiliate or member company to provide Services for the Program shall be subject to the subcontractor provisions of this Section.
- F. No contractual relationship shall exist between the Department and any subcontractor and the Department shall accept no responsibility whatsoever for the conduct, actions, or omissions of any subcontractor selected by the Contractor.
- G. The Contractor shall be responsible for the management of the subcontractors in the performance of their work.
- H. A subcontractor may not work directly with the Department in any manner and shall not be included in Contract negotiations, renewals, audits or any other discussions except at the request of the Department.
- I. Unless waived in writing by the Department, the subcontract shall contain the following:
 - 1. An acknowledgement that the subcontract is subject to the Contract between the Department and the Contractor (the "Master Contract").
 - 2. The subcontractor shall agree to comply with the terms of the Master Contract to the extent applicable with respect to goods and Services being provided under the subcontract. It is the intention of the parties of the subcontract that the subcontractor shall "stand in the shoes" of the Contractor with respect to fulfilling the duties and obligations of the Contractor to the Department under the Master Contract.
 - 3. The Department's approval of a subcontract does not relieve the Contractor of its duty to perform under the Master Contract.
 - 4. The Department shall be deemed a "third party beneficiary" to the subcontract.

5. The subcontract shall contain the required Authority to Audit Clause referenced in Section E.4, and the required Non-Discrimination Clause referenced in Section I.12.

H.2.1 Insurance

The Contractor shall require all subcontractors to obtain, maintain, and keep in force insurance coverage in accordance with accepted industry standards and the Contract during the time they are engaged hereunder.

H.2.2 Historically Underutilized Business (HUB)

- A. The Contractor shall make a good faith effort to award necessary subcontracts to HUBs in accordance with Texas Government Code, Sections 2161.181, 2161.252(b), and Texas Administrative Code, Title 34, Part 1, Chapter 20, Subchapter D, Division 1, Rule 20.285. Pursuant to the Texas Statewide Support Services Division HUB Rules, Texas Administrative Code, Title 34, Part 1, Chapter 20, Subchapter D, Division 1, Rule 20.285, the Contractor shall submit a HUB Subcontracting Plan (HSP) as part of the proposal submission, as well as make a good faith effort to implement the HSP. The Contractor shall seek written approval from the Department prior to making any modifications to its HSP.
- B. A detailed description of the HSP and required forms to be submitted, with the proposal submission, are included in Exhibit J.2.
- C. The Contractor shall provide notice to all subcontractors of their selection as a subcontractor for this Contract. The notice must specify, at a minimum, this Department's name, the name of the Contract Specialist, this Contract's assigned Contract number, the subcontracting opportunity the subcontractor will perform, the approximate dollar value of the subcontract and the expected percentage of this Contract's total value that the subcontract represents. A copy of the notice shall be provided to the Contract Specialist no later than ten (10) Working Days after this Contract is awarded.
- D. The Contractor shall submit to the Contract Specialist on a monthly basis (by the fifth [5th] of the following month) the Prime Contractor Progress Assessment Report, which is included in Exhibit J.2.

H.3 TRANSITION

- A. Upon termination of this Contract, the Contractor agrees to work with the Department under the Department's management supervision for a period of sixty (60) Days, prior to the expiration of the Contract, to ensure the orderly transfer and efficient transition from current Contractor management to either the Department management or management by a third party of the program.
- B. During this transition period, the Contractor shall transfer all Offender records to the Department if requested to do so by the Department. In the event the Contractor requires copies of any records after Contract expiration and program management transition, the Department will furnish copies to the Contractor at the Contractor's expense.

H.4 RESERVED FOR FUTURE USE

H.5 UTILIZATION OF PRODUCTS AND MATERIALS PRODUCED IN TEXAS

- A. The Contractor shall comply with Texas Government Code, Section 2155.4441, relating to service contract use of products produced in the State of Texas.
- B. In performing Services under this Contract, the Contractor shall purchase products and materials produced in the State of Texas when they are available at a price and time comparable to products and materials produced outside of Texas.

H.6 CRIMINAL HISTORY INFORMATION COMPLIANCE

The parties hereto acknowledge and agree that in order for the Contractor to perform the Services contemplated herein, the Department may have to provide the Contractor with, or the Contractor may have access to, certain information regarding Offenders and former Offenders known as "criminal history information." Criminal history information means information collected about a Person by a criminal justice agency that consists of identifiable descriptions and notations of arrests, detentions, indictments, information and other formal criminal charges and their dispositions. The term does not include information as to convictions, fingerprint information, and driving records. In the event the Department provides the Contractor with criminal history information, the Contractor agrees to comply with the confidentiality requirements of all applicable federal and state laws including, Texas Government Code, Section 411.083; and the FBI Criminal Justice Information Services (CJIS) Security Policy. More specifically, the Contractor agrees and acknowledges as follows:

- A. The Department hereby specifically authorizes that the Contractor may have access to criminal justice history to the extent such access is necessary or appropriate to enable the Contractor to perform the Services contemplated herein.
- B. The Contractor agrees to limit the use of such criminal justice information for the purposes set to herein.
- C. The Contractor agrees to maintain the confidentiality and security of the criminal justice history information in compliance with federal and state statutes, rules and regulations, and return or destroy such information when it is no longer needed to perform the Services contemplated herein.
- D. In the event that the Contractor's employee(s) fails to comply with the terms hereof, the Contractor shall take corrective action with the employee(s). Such corrective action must be acceptable to the Department. An intentional or knowing violation may also result in civil and criminal violations under federal and state laws. Additionally, the Contractor shall submit for the Department's approval, the Contractor's corrective action plan to ensure full compliance with the terms hereof. Until such time as the corrective action plan is approved by the Department, the Contractor shall not be authorized to fill any vacant positions unless special authorization is granted in writing by the Department which authorization shall not be unreasonably withheld.

H.7 OTHER CONFIDENTIAL OR SENSITIVE INFORMATION

- A. The parties hereto acknowledge and agree that in order for the Contractor to perform the Services contemplated herein, the Department may have to provide the Contractor with, or the Contractor may have access to, certain information, other than criminal history information, that is confidential pursuant to federal or state laws, rules, or regulations, or that is personal information considered to be "sensitive." The Contractor agrees that such

confidential or sensitive information shall only be used for the purpose of performing Services contemplated herein. Such information shall not be disclosed, copied or transmitted for any purpose other than for the performance of Services contemplated herein.

- B. In the event that the Contractor's employee(s) fails to comply with the terms hereof, the Contractor shall take corrective action with the employee(s). Such corrective action must be acceptable to the Department. An intentional or knowing violation may also result in civil and criminal violations under federal and state laws. Additionally, the Contractor shall submit for the Department's approval, the Contractor's corrective action plan to ensure full compliance with the terms hereof. Until such time as the corrective action plan is approved by the Department, the Contractor shall not be authorized to fill any vacant positions unless special authorization is granted in writing by the Department which authorization shall not be unreasonably withheld.

H.8 BOOKS AND RECORDS

All records and documents pertinent to the Services contracted hereunder shall be kept for a minimum of seven (7) years after the expiration or termination hereof. If any litigation, claim, or audit involving these records begins before the retention period expires, the Contractor must continue to retain said records and documents until all litigation, claims, or audit findings are resolved, meaning that there is a final Court Order from which no further appeal may be made, or a written agreement is entered into between the Department and the Contractor.

H.9 ORGANIZATIONAL AND NAME CHANGE

The Contractor shall submit written notification to the Department, within thirty (30) Days, of any changes in the Contractor's name, address, telephone number, fax number and/or e-mail address with an effective date of such change. The Contractor shall submit to the Department a copy of any registration "to do business as," "DBA," or "also known as," "AKA," and any legal corporate name change filed with the Secretary of State.

H.10 FREE EXERCISE OF RELIGION

The Contractor is prohibited from substantially burdening an employee's or Offender's free exercise of religion.

H.11 DELAY OF SERVICES

The Contractor shall meet its obligations to commence Services at the Facility within the time frames defined by the Contract. In the event the Contractor fails to meet those time frames as defined by the Contract, absent extensions from the Department, the Department will have the right to obtain the Services from another source and charge the cost thereof to the Contractor for each Day that Services are not performed due to delays caused by the Contractor's nonperformance. The Department will provide written notification to the Contractor by certified mail, return receipt requested, of the charges which will include the date of imposition and the amount that has accrued daily as of the date of the notification.

H.12 UTILIZATION OF PROGRAM

The Department agrees that it will use its best efforts to assign appropriately classified Offenders to the program as provided by law; however, the Department does not covenant or represent to the Contractor that it will refer Offenders at one hundred percent (100%) capacity. The Department will not be liable to the Contractor for loss of profits or damages incurred by the Contractor in the event that the Department does not refer Offenders at one hundred percent (100%) capacity.

H.13 SECURITY

The Contractor's employees and representatives, vehicles and equipment must be under security surveillance at all times and are subject to inspection at any time while on state property. The Contractor agrees to abide by all Department Policies and unit rules and regulations on state property. These rules, in part, prohibit the introduction of alcohol, narcotics, weapons, gambling paraphernalia, pagers, and cellphones to any state property. This includes having these items in personal vehicles of on-site employees. The Contractor's employees may not carry more than \$25.00 in cash into any Department facility. Tobacco products are strictly prohibited on TDCJ units, but are allowed in the personal vehicles of on-site employees or in designated smoking areas. All vehicles must be kept locked when not in use and the Contractor's employees must stay with the vehicle when it is unlocked.

SECTION I - CONTRACT CLAUSES**I.1 AVAILABILITY OF FUNDS FOR NEXT FISCAL YEAR**

- A. Funds are not presently available for performance under this Contract beyond August 31, 2019.
- B. The Department's obligation for performance of this Contract beyond that date is contingent upon legislative approval and the availability of appropriated funds from which Payment for Contract purposes can be made.
- C. No legal liability on the part of the Department for any Payment may arise for performance under this Contract beyond August 31, 2019, until funds are made available to the Department for performance and until the Contractor receives notice of availability.
- D. Refer to Section I.3.4, Termination for Unavailability of Funds, for the Department's right to terminate this Contract in the event it is appropriated insufficient funds.

I.2 ADVERTISING OF AWARD

The Contractor agrees not to refer to awards in commercial advertising in such a manner as to state or imply that the product(s) or service(s) provided are endorsed or preferred by the Department or is considered by the Department to be superior to other product(s) or service(s).

I.3 DEFAULT AND TERMINATION**I.3.1 Default by the Contractor**

Each of the following shall constitute an Event of Default on the part of the Contractor:

- A. A Material Failure to keep, observe, perform, meet, or comply with any covenant, agreement, term, or provision of this Contract to be kept, observed, met, performed, or complied with by the Contractor hereunder, when such failure continues for a period of twenty (20) Days after the Contractor's receipt of written notice thereof;
- B. A Material Failure to meet or comply with Department Policy, federal or state requirement or law, when such failure continues for a period of twenty (20) Days after the Contractor's receipt of written notice thereof;
- C. The Contractor's Material Failure to comply with any Department Policy for which the Contractor has been expressly required to comply and for which the Contractor has not received a prior written waiver from the Department, when such failure continues for a period of twenty (20) Days after the Contractor's receipt of written notice thereof;
- D. Insolvency of the Contractor as evidenced by any of the following occurrences:
 - 1. Its inability to pay its debts;
 - 2. Any general assignment for the benefit of creditors;
 - 3. Any decree or order appointing a receiver or trustee for it or substantially all of its property to be entered and, if entered without its consent, not to be stayed or discharged within sixty (60) Days;

4. Any proceedings under any law relating to bankruptcy, insolvency, or the reorganization or relief of debtors to be instituted by or against it and, if contested by it, not to be dismissed or stayed within sixty (60) Days; or
 5. Any judgment, writ of attachment or execution, or any similar process to be issued or levied against a substantial part of its property which is not released, stayed, bonded, or vacated within sixty (60) Days after issue or levy.
- E. The discovery by the Department that any statement, representation or warranty in this Contract is false, misleading, or erroneous in any material respect; or
- F. A failure by the Contractor to comply with contractual terms and conditions, resulting in a breach of security or health and safety standards. This Event of Default may result in the immediate termination of this Contract.

I.3.2 Further Opportunity to Cure

- A. If an Event of Default of the type specified in Section I.3.1 occurs and the Contractor reasonably believes that such Event of Default cannot be cured within the twenty (20) Days allowed in Section I.3.1 but that such Event of Default can be cured through a diligent, ongoing, and conscientious effort on the part of the Contractor, within a reasonable period not to exceed three (3) months, then the Contractor may, within the twenty (20) Day cure period, submit a detailed plan for curing the Event of Default to the Department.
- B. Upon receipt of any such plan for curing an Event of Default, the Department shall promptly review such plan and at its discretion, which must be reasonable in the circumstances, may allow, or not allow, the Contractor to pursue such plan of cure.
- C. The decision of the Department will be communicated in writing to the Contractor.
- D. The Department agrees that it will not exercise its remedies thereunder with respect to such Event of Default for so long as the Contractor diligently, conscientiously, and timely undertakes to cure the Event of Default in accordance with the approved plan.
- E. If the Department does not allow the Contractor an extension of the cure period, the twenty (20) Day time period shall be tolled during the period of time the request is pending before the Department.

I.3.3 Remedy of the Department

When an Event of Default by the Contractor has been determined to exist, the Department's Authorized Representative will notify, in writing, the Contractor of such Event of Default, and subject to the provisions of Section I.3.2, the Department will have the right to pursue any remedy it may have by law or in equity including, but not limited to:

- A. Reducing its claim to a judgment;
- B. Taking action to cure the Event of Default, in which case the Department may offset against any Payments owed to the Contractor all reasonable costs incurred by the Department in connection with its efforts to cure such Event of Default;
- C. Withholding of funds as authorized in Section G.4.6; or

D. Exercising a Termination for Default.

1. In the event of Termination for Default the Department shall offset against Payments owed to the Contractor any reasonable amounts expended by the Department to cure the Event of Default.
2. The Department will have no further obligations to the Contractor after such termination and the Contractor shall comply with Section H.3 with respect to the transition to new management.
3. The Department may also acquire, in the manner the Department considers appropriate, Services similar to those terminated and the Contractor will be liable to the Department for any increase in costs for those Services.
4. The Contractor shall not be liable for any increase in costs if the failure to perform the Contract arises from and without the fault or negligence of the Contractor as follows:
 - a. Acts of God or of the public enemy;
 - b. Acts of the State in either its sovereign or contractual capacity;
 - c. Fires;
 - d. Floods;
 - e. Epidemics;
 - f. Quarantine restrictions;
 - g. Strikes;
 - h. Freight embargoes; and
 - i. Unusually severe weather.

In each instance the failure to perform must be beyond the control and without the fault or negligence of the Contractor.

I.3.4 Termination for Unavailability of Funds

- A. The Payment of money by the Department or the State under any provisions hereof is contingent upon the availability of funds appropriated by the Legislature to an agency or department of the State to cover the provisions hereof.
- B. Neither the State, the Department nor its elected officials, officers, employees, agents, attorneys or other individuals acting on behalf of the State, make any representations or warranty as to whether any appropriation will, from time to time during the Contract Term, be made by the Legislature of the State.
- C. In the event State funds for this Contract become unavailable due to Non-Appropriation, the Department will have the right to terminate the Contract without penalty.

- D. The Contractor acknowledges that the Department does not receive a "line item appropriation".
1. If the funds appropriated are not sufficient to pay for the Department's operating expenses, contractual obligations and other financial obligations, the Department, in its sole discretion, will determine what operating expenses, contractual obligations and other financial obligations it will pay.
 2. In the event the Department determines it was not appropriated sufficient money, the Department may terminate this Contract without paying the Contractor any additional money or penalty, provided that the Department will pay the Contractor for obligation that occurred up to the time of termination.

I.3.5 Non-Appropriation Effect and Remedy

An event of Non-Appropriation shall not cause the Department to be in default hereunder, but upon any such event of Non-Appropriation, this Contract shall automatically terminate as of the last day of the Biennium for which appropriations have been made.

I.3.6 Termination for Convenience

The Department may, in its sole discretion, terminate this Contract, with or without cause, by providing the Contractor with sixty (60) Days prior written notice of such termination.

I.3.7 Termination by Mutual Agreement

The parties may terminate this Contract by mutual agreement, the terms of which shall be set forth in writing.

I.3.8 Termination Procedures

- A. Upon Termination for Default, Termination for Convenience, Termination by Mutual Agreement or Termination for Unavailability of Funds as heretofore mentioned, the following procedures will be adhered to:
1. The Department will immediately notify the Contractor in writing specifying the effective termination date.
 2. After receipt of the Notice of Termination, the Contractor shall immediately proceed with the following obligations, regardless of any delay in determining or adjusting any amounts due at that point in the Contract:
 - a. Place no further subcontracts or orders in support of this Contract;
 - b. Terminate all subcontracts; and
 - c. Cancel all orders as applicable.
- B. Upon termination, the Contractor shall be entitled to receive from the Department, Payment for all Services satisfactorily furnished under this Contract up to and including the date of termination. Claims submitted after one hundred eighty (180) Days from the date of termination will not be considered.

I.3.9 Default by the Department

Each of the following shall constitute an Event of Default on the part of the Department:

- A. Failure by the Department to observe and perform any material covenant, condition, or agreement on its part to be observed or performed; or
- B. Its failure or refusal to substantially fulfill any of its material obligations hereunder, unless caused by the default of the Contractor; and
- C. Unless cured by the Department within twenty (20) Days after receiving written notice thereof.

I.3.10 Remedy of the Contractor

Upon an Event of Default by the Department, the Contractor's sole remedy shall be to follow the Dispute Resolution Process in Section I.3.11 below.

I.3.11 Dispute Resolution

- A. Any dispute arising under this Contract, which is not disposed of by mutual agreement between the Department and the Contractor shall be resolved as follows:
 - 1. The dispute resolution process provided for in Texas Government Code, Chapter 2260, shall be used, as further described herein, by the Department and the Contractor to attempt to resolve any claim for breach of Contract made by the Contractor.
 - 2. A Contractor's claims for breach of this Contract that the parties cannot resolve in the ordinary course of business shall be submitted to the negotiation process provided in Texas Government Code, Chapter 2260, Subchapter B.
 - 3. To initiate the process, the Contractor shall submit written notice, as required by Texas Government Code, Chapter 2260, Subchapter B, to the Contracts and Procurement Director or designee, at Two Financial Plaza, Suite 525, Huntsville, Texas 77340.
 - 4. Said notice shall specifically state the provisions of Texas Government Code, Chapter 2260, Subchapter B, are being invoked, and shall also be given to all other representatives of the Department and the Contractor otherwise entitled to notice under the parties' Contract.
 - 5. Compliance by the Contractor with Texas Government Code, Chapter 2260, Subchapter B, is a condition precedent to the filing of a contested case proceeding under Texas Government Code, Chapter 2260, Subchapter C.
 - 6. The contested case process provided in Texas Government Code, Chapter 2260, Subchapter C, is the Contractor's sole and exclusive process for seeking a remedy for an alleged breach of Contract by the Department if the parties are unable to resolve their disputes under subparagraph (A) of this paragraph.
 - 7. Compliance with the contested case process provided in Texas Government Code, Chapter 2260, Subchapter C, is a condition precedent to sue from the Legislature under Chapter 107 of the Civil Practices and Remedies Code.

8. Neither the execution of this Contract by the Department nor any other conduct of any representative of the Department related to the Contract shall be considered a waiver of sovereign immunity to suit.
- B. In addition to complying with Texas Government Code, Chapter 2260, the Department and the Contractor shall comply with the rule published in Texas Administrative Code, Title 37, Part 6, Chapter 155, Subchapter C, Rule 155.31.
- C. At all times during the course of the dispute resolution process, the Contractor shall continue with providing Services as directed, in a diligent manner and without delay, shall conform to the Department's directive, decision or order, and shall be governed by all applicable provisions of this Contract.
- D. Records of the Services performed shall be kept in sufficient detail to enable Payment in accordance with applicable provisions of this Contract, if this should become necessary.
- E. This provision shall not be construed to prohibit the Contractor from seeking any other legal or equitable remedy to which it is entitled.

I.4 NO WAIVER OF RIGHTS

- A. No failure on the part of any party to exercise, and no delay in exercising, and no course of dealing with respect to any right hereunder shall operate as a waiver thereof; nor shall any single or partial exercise of any right hereunder preclude any other or further exercise thereof or in the exercise of any other right.
- B. The remedies provided in this Contract are cumulative and non-exclusive of any remedies provided by law or in equity, except as expressly set forth herein.

I.5 INDEMNIFICATION OF THE DEPARTMENT

I.5.1 Acts or Omissions

The Contractor shall indemnify and hold harmless the State of Texas, the Department, the TBCJ, and/or their officers, agents, employees, representatives, contractors, assignees, and/or designees from any and all liability, actions, claims, demands, or suits, and all related costs, attorney fees, and expenses arising out of, or resulting from any acts or omissions of the Contractor or its agents, employees, subcontractors, order fulfillers, or suppliers of subcontractors in the execution or performance of the Contract and any purchase orders issued under the Contract. The defense shall be coordinated by the Contractor with the Office of the Attorney General when Texas State Agencies are named defendants in any lawsuit and the Contractor may not agree to any settlement without first obtaining the concurrence from the Office of the Attorney General. The Contractor and the Department agree to furnish timely written notice to each other of any such claim.

I.5.2 Infringements

- A. The Contractor shall indemnify and hold harmless the State of Texas, the Department, the TBCJ, and/or their employees, agents, representatives, contractors, assignees, and/or designees from any and all third party claims involving infringement of United States patents, copyrights, trade and service marks, and any other intellectual or intangible property rights in connection with the performances or actions of the Contractor pursuant to this Contract. The Contractor and the Department agree to furnish timely written notice to each other of

any such claim. The Contractor shall be liable to pay all costs of defense including attorneys' fees. The defense shall be coordinated by the Contractor with the Office of the Attorney General when Texas State Agencies are named defendants in any lawsuit and the Contractor may not agree to any settlement without first obtaining the concurrence from the Office of the Attorney General.

- B. The Contractor shall have no liability under this Section if the alleged infringement is caused in whole or in part by:
 - 1. Use of the product or Service for a purpose or in a manner for which the product or Service was not designed;
 - 2. Any modification made to the product without the Contractor's written approval;
 - 3. Any modifications made to the product by the Contractor pursuant to the Department's specific instructions;
 - 4. Any intellectual property right owned by or licensed to the Department; or
 - 5. Any use of the product or Service by the Department that is not in conformity with the terms of any applicable license agreement.
- C. If the Contractor becomes aware of an actual or potential claim, or the Department provides the Contractor with notice of an actual or potential claim, the Contractor may (or in the case of an injunction against the Department, shall), at the Contractor's sole option and expense:
 - 1. Procure for the Department the right to continue to use the affected portion of the product or Service; or
 - 2. Modify or replace the affected portion of the product or Service with functionally equivalent or superior product or Service so that the Department's use is non-infringing.

I.5.3 Taxes/Workers' Compensation/Unemployment Insurance – Including Indemnity

- A. The Contractor agrees and acknowledges that during the existence of this Contract, the Contractor shall be entirely responsible for the liability and payment of the Contractor's and the Contractor's employees' taxes of whatever kind, arising out of the performances in this Contract. The Contractor agrees to comply with all state and federal laws applicable to any such Persons, including laws regarding wages, taxes, insurance, and Workers' Compensation. The Department and/or the State shall not be liable to the Contractor, its employees, agents, or others for the payment of taxes or the provision of unemployment insurance and/or Workers' Compensation or any benefit available to a State employee or employee of another governmental entity customer.
- B. The Contractor agrees to indemnify and hold harmless the Department, the TBCJ, the State of Texas and/or their employees, agents, representatives, contractors, and/or assignees from any and all liability, actions, claims, demands, or suits, and all related costs, attorneys' fees, and expenses, relating to tax liability, unemployment insurance and/or Workers' Compensation in its performance under this Contract. The Contractor shall be liable to pay all costs of defense including attorneys' fees. The defense shall be coordinated by the Contractor with the Office of the Attorney General when Texas State Agencies are named defendants in any lawsuit and the Contractor may not agree to any settlement without first

obtaining the concurrence from the Office of the Attorney General. The Contractor and the Department agree to furnish timely written notice to each other of any such claim.

I.6 NO WAIVER OF DEFENSES

- A. Neither the Department nor the Contractor shall waive, release or otherwise forfeit any possible defense the Department or the Contractor may have regarding claims arising from or made in connection with the performance of the Services by the Contractor without the consent of the other party.
- B. The Department and the Contractor shall reserve all such available defenses and cooperate with each other to make such defenses available for each other's benefit to the maximum extent allowed by law, including any defenses the Department may have regarding litigation, losses and costs resulting from claims or litigation pending at the time the Contract becomes effective, or arising thereafter from occurrences prior to the effective date hereof.

I.7 INDEPENDENT CONTRACTOR

- A. The Contractor is associated with the Department only for the purposes and to the extent set forth herein, and with respect to the performance of Services hereunder, the Contractor is and shall be an independent contractor and shall have the sole right to supervise, manage, operate, control, and direct the performance of the details incident to its duties hereunder.
- B. Nothing contained herein shall be deemed or construed to create a partnership or joint venture, to create the relationships of an employer-employee or principal-agent, or to otherwise create any liability for the Department whatsoever with respect to the indebtedness, liabilities, and obligations of the Contractor or any other party.
- C. The Contractor shall be solely responsible for (and the Department shall have no obligation with respect to) payment of all Federal Income, FICA, and other taxes owed or claimed to be owed by the Contractor, arising out of the Contractor's association with the Department pursuant hereto, and the Contractor shall indemnify and hold the Department harmless from and against any and all liability from all losses, damages, claims, costs, penalties, liabilities, and expenses howsoever arising or incurred because of, incident to, or otherwise with respect to any such taxes.

I.8 LAWS OF TEXAS

This Contract shall be governed by and construed in accordance with the laws of the State of Texas. The venue of any suit arising under this Contract is fixed in any court of competent jurisdiction of Travis County, Texas.

I.9 ASSIGNMENT

- A. The Contractor may not assign any interest in this Contract without the prior written consent of the Department which consent the Department may withhold at its sole discretion.
- B. If the Department so elects in its sole discretion, this Contract will terminate upon the occurrence of any of the following:
 - 1. More than fifty percent (50%) of the assets of the Contractor are sold;

2. The Contractor is merged into, acquired by, or consolidated with another corporation or business entity, or is otherwise the subject of reorganization; or
 3. Any shareholder or owner of the Contractor who owns at least ten percent (10%) beneficial ownership of the Contractor fails to continue to own at least ten percent (10%).
- C. In the event that any sale, transfer, or assignment, as referenced in paragraphs A and B above, is consented to by the Department, the transferee or its legal representative shall agree in writing with the Department to assume, perform and be bound by the covenants, obligations and agreements contained herein.

I.10 MAINTENANCE OF CORPORATE EXISTENCE AND BUSINESS

- A. The Contractor, if incorporated, shall at all times maintain its corporate existence and authority to transact business and be in good standing in its jurisdiction of incorporation and the State of Texas.
- B. The Contractor shall maintain all licenses, permits and franchises necessary for its business where the failure to so maintain might have a material adverse effect on its ability to perform its obligations under this Contract.

I.11 APPROVAL OF CONTRACT

- A. This Contract is subject to written approval of the Executive Director of the Department or the Director's designated representative and shall not be binding until so approved.
- B. For Contracts valued over \$1,000,000.00 in the initial Contract Term, the Executive Director's approval shall be given only on the approval of the TBCJ.

I.12 NON-DISCRIMINATION

In the performance of this Contract, the Contractor warrants that it shall not discriminate against any employee, subcontractor, participant or provider on account of race, color, disability or perceived disability, religion, sex, national origin, genetic information or age, and in accordance with the following:

- A. The Contractor shall not discriminate against employees, subcontractors, participants or providers who have or are perceived to have a disability because AIDS/HIV infection, antibodies to HIV, or infection with any other probable causative agent of AIDS. The Contractor shall post notices setting forth the provisions of this Non-Discrimination Clause in conspicuous places, available to employees and applicants for employment.
- B. In all solicitations or advertisements for employees and/or the purchase of Services, the Contractor shall state that it is an equal opportunity employer; provided, however, that notices, advertisements and solicitations placed in accordance with federal law, rule or regulation shall be deemed sufficient for the purpose of meeting this requirement.
- C. The Contractor shall include the provisions of the foregoing paragraphs in every subcontract so that such provisions shall be binding upon each subcontractor or vendor.

I.13 CONFIDENTIALITY AND OPEN RECORDS**I.13.1 Confidentiality**

Any confidential information provided to or developed by the Contractor in the performance of the Contract shall be kept confidential unless otherwise provided by law and shall not be made available to any individual or organization by the Contractor or the Department without prior approval of the other party.

I.13.2 Open Records

In accordance with Texas Government Code, Section 2252.907, the Contractor acknowledges that this Contract and information created or maintained in connection with this Contract is public information and subject to disclosure as provided by Texas Government Code, Chapter 552 (Texas Public Information Act). The Texas Public Information Act may require the Contractor to make information related to this Contract available to the public pursuant to a request for public information. The Contractor agrees, upon request, to make information related to this Contract that is not otherwise excepted from release by the Texas Public Information Act, available to the public in hard copy, unless the requestor of the information consents to receive the information in another mutually agreeable format. The Contractor acknowledges that the Department shall not provide legal counsel related to the Contractor's compliance with the Texas Public Information Act.

I.14 CONTRACT CHANGES

- A. Changes/modifications to this Contract (except Contract extensions in accordance with Sections I.15 and I.16; administrative changes, such as changing the Contract Specialist designation or correcting typographical errors; or other unilateral changes discussed elsewhere in the Contract) shall be mutually agreed to by the parties and executed in writing with the authorized signatures.
- B. The Department, at its sole discretion, may revise funding during the course of this Contract by issuing a unilateral modification to the Contractor.

I.15 OPTION TO EXTEND THE TERM OF THE CONTRACT

- A. The Department may, at its sole discretion, extend the Contract Term by written notice to the Contractor within ten (10) Days of Contract expiration, provided that the Department shall give the Contractor a preliminary written notice of its intent to extend at least sixty (60) Days before the Contract expires.
- B. The preliminary notice does not commit the Department to an extension.
- C. If the Department exercises this option, the extended Contract shall be considered to include this option provision.

I.16 OPTION TO EXTEND SERVICES

- A. The Department may require continued performance of any Services within the limits and at the rates specified in this Contract.

- B. The Department reserves the right to extend this Contract for a ninety (90) Day period at the end of each Contract and/or extension period for the purpose of re-advertising the Service, awarding a new contract, and transitioning into a new contract.
- C. This option provision may be exercised more than once, but the total extension of performance hereunder shall not exceed six (6) months.
- D. The Department may exercise the option by written notice to the Contractor within the period specified in Section I.15.

I.17 SEVERABILITY

In the event that any provision of this Contract is later determined to be invalid, void, or unenforceable, then the remaining terms, provisions, covenants, and conditions of this Contract shall remain in full force and effect, and shall in no way be affected, impaired, or invalidated.

I.18 IMMIGRATION

The Contractor represents and warrants that it will comply with the requirements of the Immigration and Nationality Act (8 U.S.C. Section 1101 et seq.) and all subsequent immigration laws and amendments.

I.19 NO LIABILITY UPON TERMINATION

If this Contract is terminated for any reason, the Department and the State of Texas shall not be liable to the Contractor for any damages, claims, losses, or any other amounts arising from or related to any such termination. However, the Contractor may be entitled to the remedies established in Section I.3.11.

I.20 LIMITATION ON AUTHORITY

The Contractor shall have no authority to act for or on behalf of the Department or the State of Texas except as expressly provided for in this Contract; no other authority, power or use is granted or implied. The Contractor may not incur any debts, obligations, expenses, or liabilities of any kind on behalf of the State of Texas or the Department.

I.21 INTELLECTUAL PROPERTY INDEMNIFICATION

- A. The Contractor will indemnify, defend, and hold harmless the State of Texas and the Department against any action or claim brought against the State of Texas and/or the Department that is based on a claim that software infringes any patent rights, copyright rights or incorporated misappropriated trade secrets. The Contractor will pay any damages attributable to such claim that are awarded against the State of Texas and/or the Department in a judgment or settlement.
- B. If the Department's use of the software becomes subject to a claim, or is likely to become subject to a claim, in the sole opinion of the Department, the Contractor shall, at its sole expense (1) procure for the Department the right to continue using such software under the terms of this Contract; or (2) replace or modify the software so that it is non-infringing.

I.22 ELECTRONIC AND INFORMATION RESOURCES ACCESSIBILITY STANDARDS, AS REQUIRED BY TEXAS ADMINISTRATIVE CODE, TITLE 1, PART 10, CHAPTER 213

- A. Effective September 1, 2006 State Agencies and Institutions of Higher Education shall procure products which comply with the State of Texas Accessibility requirements for Electronic and Information Resources specified in Texas Administrative Code, Title 1, Part 10, Chapter 213, when such products are available in the commercial marketplace or when such products are developed in response to a procurement solicitation.
- B. The Contractor shall provide the Department with the URL to its Voluntary Product Accessibility Template (VPAT) for reviewing compliance with the State of Texas Accessibility requirements (based on the federal standards established under the Rehabilitation Act, Section 508), or indicate that the product/service accessibility information is available from the General Services Administration "Buy Accessible Wizard" (<http://www.buyaccessible.gov>). Contractors not listed with the "Buy Accessible Wizard" or supplying a URL to their VPAT must provide the Department with a report that addresses the same accessibility criteria in substantively the same format. Additional information regarding the "Buy Accessible Wizard" or obtaining a copy of the VPAT is located at <http://www.section508.gov/>.

I.23 RIGHTS TO DATA, DOCUMENTS AND COMPUTER SOFTWARE (STATE OWNERSHIP)

Any software, research, reports, studies, data, photographs, negatives or other documents, drawings or materials prepared by the Contractor in the performance of its obligations under this Contract shall be the exclusive property of the State of Texas and all such materials shall be delivered to the Department by the Contractor upon completion, termination, or cancellation of this Contract. The Contractor may, at its own expense, keep copies of all its writings for its personal files. The Contractor shall not use, willingly allow, or cause to have such materials used for any purpose other than the performance of the Contractor's obligations under this Contract without the prior written consent of the Department; provided, however, that the Contractor shall be allowed to use non-confidential materials for writing samples in pursuit of the work. The ownership rights described herein shall include, but not be limited to, the right to copy, publish, display, transfer, prepare derivative works, or otherwise use the works. Notwithstanding the foregoing, the Department will not own Contractor's source or reference materials, computer programs, documentation, and similar confidential or proprietary information that may be used to produce any item under this Contract.

I.24 FORCE MAJEURE

- A. Neither the Contractor nor the Department shall be liable to the other for any delay in, or failure of performance, of any requirement included in this Contract caused by force majeure. The existence of such causes of delay or failure shall extend the period of performance until after the causes of delay or failure have been removed provided the non-performing party exercises all reasonable due diligence to perform.
- B. Force majeure is defined as acts of God, war, fires, explosions, hurricanes, floods, failure of transportation, or other causes that are beyond the reasonable control of either party and that by exercise of due foresight such party could not reasonably have been expected to avoid, and which, by the exercise of all reasonable due diligence, such party is unable to overcome.
- C. Each party must inform the other in writing, with proof of receipt, within three (3) Working Days of the existence of such force majeure, or otherwise waive this right as a defense.

I.25 NOTICES

Any written notices required under this Contract will be delivered by carrier service to the Contractor's office address specified on Page 1 of this Contract, by U.S. mail, or e-mail.

Notices to the Department shall be sent to:

Jodi Lawson, Contract Specialist
Texas Department of Criminal Justice
Contracts and Procurement Department
Client Services and Governmental Contracts Branch
Two Financial Plaza, Suite 525
Huntsville, Texas 77340
E-mail: jodi.lawson@tdcj.texas.gov

Notice will be effective on receipt by the affected party. Either party may change the designated notice address in this Section by written notification to the other party. This change shall be incorporated with a unilateral modification.

I.26 SUBSTITUTIONS

Substitutions are not permitted without written approval of the Department.

I.27 U.S. DEPARTMENT OF HOMELAND SECURITY'S E-VERIFY SYSTEM

- A. By entering into this Contract, the Contractor certifies and ensures that it utilizes and will continue to utilize, for the term of this Contract, the U.S. Department of Homeland Security's E-Verify system to determine the eligibility of:
1. All Persons employed to perform duties within Texas, during the Contract Term; and
 2. All Persons (including subcontractors) assigned by the Contractor to perform work pursuant to the Contract, within the United States of America.
- B. The Contractor shall provide, upon request of the Department, an electronic or hardcopy screenshot of the confirmation or tentative non-confirmation screen containing the E-Verify case verification number for attachment to the Form I-9 for the three (3) most recent hires that match the criteria above, by the Contractor, and the Contractor's subcontractors, as proof that this provision is being followed.
- C. If this certification is falsely made, the Contract may be immediately terminated, at the discretion of the State and at no fault to the State, with no prior notification. The Contractor shall also be responsible for the costs of any re-solicitation that the State must undertake to replace the terminated Contract.

SECTION J - LIST OF EXHIBITS

| EXHIBIT NO. | TITLE | PAGES |
|--------------------|--|--------------|
| J.1 | Budget Justification Forms and Staffing Plans | 2 |
| J.2 | HUB Subcontracting Plan (HSP) | 7 |
| J.3 | Compliance Standards and Average Daily Salary | 4 |
| J.4 | TDCJ-PFCMOD Monthly Strength Report | 1 |
| J.5 | Reserved for Future Use | |
| J.6 | Reserved for Future Use | |
| J.7 | TDCJ Job Description Minimum Qualifications | 3 |
| J.8 | Reserved for Future Use | |
| J.9 | TDCJ-PFCMOD Monthly Position Vacancy Instructions and Report | 3 |
| J.10 | TDCJ-PFCMOD Monthly Position Control Number (PCN) Instructions and Listing | 2 |

BUDGET JUSTIFICATION FORMS AND STAFFING PLANS
REHABILITATION TREATMENT SERVICES
SUBSTANCE ABUSE BUDGET DETAIL

Facility Name: Gist - Substance Abuse Treatment Program

| ANNUAL TREATMENT COSTS - State Jail Substance Abuse | | | | | | | | | |
|--|-------------|----------------------|----------------------|------------------------|------------------------|------------------------|------------------------|------------------------|------------------------|
| COST CATEGORY / ITEM | FTEs | Base Period 1 | Base Period 2 | Option 1 Year 1 | Option 1 Year 2 | Option 2 Year 1 | Option 2 Year 2 | Option 3 Year 1 | Option 3 Year 2 |
| Staffing Salary Direct Costs: | | | | | | | | | |
| Substance Abuse Counselor I | | \$24,379 | \$97,687 | \$98,664 | \$99,651 | \$100,647 | \$101,654 | \$102,670 | \$103,697 |
| Substance Abuse Counselor II | | \$9,437 | \$37,814 | \$38,193 | \$38,574 | \$38,960 | \$39,350 | \$39,743 | \$40,141 |
| Substance Abuse Counselor III | | \$8,388 | \$33,613 | \$33,949 | \$34,288 | \$34,631 | \$34,978 | \$35,327 | \$35,681 |
| Fringe Benefits | | \$22,074 | \$88,890 | \$90,470 | \$91,577 | \$92,950 | \$94,344 | \$96,022 | \$97,196 |
| Sub-Total | | \$64,278 | \$258,004 | \$261,276 | \$264,090 | \$267,188 | \$270,326 | \$273,762 | \$276,715 |
| State Jail Substance Abuse Non-Labor Costs : | | | | | | | | | |
| Office/Printing/Computer Supplies | | \$694 | \$2,780 | \$2,816 | \$2,836 | \$2,864 | \$2,892 | \$2,929 | \$2,950 |
| Membership/License Fees | | \$756 | \$3,030 | \$3,068 | \$3,092 | \$3,123 | \$3,154 | \$3,194 | \$3,217 |
| Depreciation/Equipment | | \$1,921 | \$7,997 | \$7,795 | \$7,852 | \$7,931 | \$8,010 | \$8,112 | \$8,172 |
| Travel | | \$1,386 | \$5,565 | \$5,625 | \$5,666 | \$5,723 | \$5,781 | \$5,855 | \$5,897 |
| Preventative Maintenance | | \$374 | \$1,497 | \$1,516 | \$1,527 | \$1,542 | \$1,557 | \$1,577 | \$1,589 |
| Insurance | | \$1,067 | \$4,277 | \$4,331 | \$4,363 | \$4,407 | \$4,451 | \$4,507 | \$4,541 |
| Staff Recruiting | | \$480 | \$1,924 | \$1,949 | \$1,984 | \$1,983 | \$2,003 | \$2,029 | \$2,043 |
| Professional Services | | \$245 | \$983 | \$994 | \$1,003 | \$1,013 | \$1,023 | \$1,034 | \$1,043 |
| Communication - Other | | \$534 | \$2,138 | \$2,165 | \$2,181 | \$2,203 | \$2,226 | \$2,253 | \$2,270 |
| Supplies/Materials | | \$1,638 | \$6,565 | \$6,649 | \$6,698 | \$6,765 | \$6,833 | \$6,920 | \$6,970 |
| Sub-Total | | \$9,095 | \$38,446 | \$36,908 | \$37,182 | \$37,564 | \$37,929 | \$38,410 | \$38,692 |
| Other Direct Costs (Details Required): | | | | | | | | | |
| | | | | | | | | | |
| Sub-Total | | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 |
| Indirect Costs: | | | | | | | | | |
| Indirect Salaries | | \$22,020 | \$86,233 | \$89,116 | \$90,008 | \$90,907 | \$91,816 | \$92,735 | \$93,661 |
| Overhead | | \$5,056 | \$20,282 | \$20,527 | \$20,738 | \$20,969 | \$21,204 | \$21,460 | \$21,681 |
| Contractor's Profit Margin | | \$2,009 | \$8,059 | \$16,313 | \$16,481 | \$16,665 | \$16,851 | \$17,055 | \$17,230 |
| Sub-Total | | \$29,085 | \$116,574 | \$125,956 | \$127,227 | \$128,541 | \$129,871 | \$131,250 | \$132,572 |
| Grand Total | | \$102,458 | \$411,024 | \$424,140 | \$428,499 | \$433,283 | \$438,126 | \$443,422 | \$447,979 |

| | | | | | | | | | |
|--|----------------|----------------|----------------|-----------------|-----------------|-----------------|-----------------|-----------------|------------|
| Number of Beds | 116 | 116 | 116 | 116 | 116 | 116 | 116 | 116 | 116 |
| State Jail Substance Abuse Per Diem | \$ 9.60 | \$ 9.71 | \$ 9.99 | \$ 10.12 | \$ 10.23 | \$ 10.35 | \$ 10.44 | \$ 10.58 | |

**BUDGET JUSTIFICATION FORMS AND STAFFING PLANS
REHABILITATION TREATMENT SERVICES
SALARY PLAN AND STAFFING DETAIL**

Facility Name: Gist - Substance Abuse Treatment Program

Note: Additional rows are hidden and may be utilized as needed to list additional information.

| Position Title | TDCJ Position Equivalency* | 1st Shift | 2nd Shift | Total FTEs | Training |
|--|--|-----------|-----------|------------|-----------------------------------|
| INDIRECT ADMINISTRATION FTEs & SALARIES - State Jail Substance Abuse | | | | | |
| Program Director | Program Supervisor III Pre-Release or Inpatient Treatment | | | | CAT, SAC 3, or SAC 4 or QCC - ULM |
| Office Manager | | | | | CAT |
| TOTAL STATE JAIL SUBSTANCE ABUSE INDIRECT ADMINISTRATION | | | | | |
| DIRECT FTEs & SALARIES - State Jail Substance Abuse | | | | | |
| Substance Abuse Counselor I | Substance Abuse Counselor I - Substance Abuse Treatment Program (Counselor Intern) | | | | CAT, SAC 1 or SAC 2 |
| Substance Abuse Counselor II | Substance Abuse Counselor II - Substance Abuse Treatment Program (Counselor) | | | | CAT, SAC 3 or SAC 4 - ULM |
| Substance Abuse Counselor II | Substance Abuse Counselor II - Substance Abuse Treatment Program (Counselor) | | | | CAT, SAC 3 & SAC 7 |
| TOTAL STATE JAIL SUBSTANCE ABUSE DIRECT PROGRAM STAFF | | | | | |
| GRAND TOTAL | | | | | |

STAFFING NOTES

*Job Descriptions must be submitted for each position with minimum qualifications that match the TDCJ equivalent position if applicable.

ULM = Upper Level Management

CAT = 32 hours of Correctional Awareness Training

QCC = Qualified Credentialed Counselor

SAC 1 = Counselor Intern (CI)

SAC 2 = Certified Criminal Justice Professional - Applicant (CCJP-A)

SAC 3 = Licensed Chemical Dependency Counselor (LCDC)

SAC 4 = Certified Criminal Justice Professional (CCJP)

SAC 5 = Licensed Professional Counselor (LPC)

SAC 6 = Licensed Master Social Worker (LMSW)

SAC 7 = Certified Program Instructor - DWI (CPI-DWI)

SAC 8 = Licensed Chemical Dependency Counselor - Cognitive Intervention

Program Director & Substance Abuse Counselor II will be certified in CPR/First Aid



HUB Subcontracting Plan (HSP)

In accordance with Texas Gov't Code §2161.252, the contracting agency has determined that subcontracting opportunities are probable under this contract. Therefore, all respondents, including State of Texas certified Historically Underutilized Businesses (HUBs) must complete and submit this State of Texas HUB Subcontracting Plan (HSP) with their response to the bid requisition (solicitation).

NOTE: Responses that do not include a completed HSP shall be rejected pursuant to Texas Gov't Code §2161.252(b).

The HUB Program promotes equal business opportunities for economically disadvantaged persons to contract with the State of Texas in accordance with the goals specified in the 2009 State of Texas Disparity Study. The statewide HUB goals defined in 34 Texas Administrative Code (TAC) §20.13 are:

- 11.2 percent for heavy construction other than building contracts,
- 21.1 percent for all building construction, including general contractors and operative builders' contracts,
- 32.9 percent for all special trade construction contracts,
- 23.7 percent for professional services contracts,
- 26.0 percent for all other services contracts, and
- 21.1 percent for commodities contracts.

-- Agency Special Instructions/Additional Requirements --

In accordance with 34 TAC §20.14(d)(1)(D)(ii), a respondent (prime contractor) may demonstrate good faith effort to utilize Texas certified HUBs for its subcontracting opportunities if the total value of the respondent's subcontracts with Texas certified HUBs meets or exceeds the statewide HUB goal or the agency specific HUB goal, whichever is higher. When a respondent uses this method to demonstrate good faith effort, the respondent must identify the HUBs with which it will subcontract. If using existing contracts with Texas certified HUBs to satisfy this requirement, only the aggregate percentage of the contracts expected to be subcontracted to HUBs with which the respondent does not have a continuous contract in place for more than five (5) years shall qualify for meeting the HUB goal. This limitation is designed to encourage vendor rotation as recommended by the 2009 Texas Disparity Study.

The TDCJ HUB goals are defined as:

- 17.5 percent for heavy construction other than building contracts. This goal is higher than the statewide goal and therefore must be the utilized goal for this category,
- 36.9 percent for all building construction, including general contractors and operative builders' contracts. This goal is higher than the statewide goal and therefore must be the utilized goal for this category,
- 32.7 percent for all special trade construction contracts,
- 23.6 percent for professional services contracts,
- 24.6 percent for all other services contracts, and
- 21 percent for commodities contracts.

The TDCJ has determined that the HUB Category for this contract falls under the **Commodities Contract Category.**

The HUB Goal for this category is therefore identified as **21.1 %.**

For assistance in completing the HSP contact:

Sharon Schultz @ 938-437-7028

sharon.schultz@tdcj.texas.gov

SECTION 1: RESPONDENT AND REQUISITION INFORMATION

a. Respondent (Company) Name: Management & Training Corporation

State of Texas VID #: 87-0365322

Point of Contact: Angela Alteman

Phone #: 801-693-2797

Email Address: angela.alteman@mtctrains.com

Fax #: 801-693-2900

b. Is your company a State of Texas certified HUB? ☒ - Yes ☐ - No

c. Requisition #: 696-PF-18-P028 - Gist State Jail

Bid Open Date: 05/02/2017

(mtdp22)

Enter your company's name here: **Management & Training Corporation**Regulation #: **696-PF-18-P026****SECTION 2** **RESPONDENT'S SUBCONTRACTING INTENTIONS**

After dividing the contract work into reasonable lots or portions to the extent consistent with prudent industry practices, and taking into consideration the scope of work to be performed under the proposed contract, including all potential subcontracting opportunities, the respondent must determine what portions of work, including contracted staffing, goods, services will be subcontracted. Note: In accordance with 34 TAC §20.11, a "Subcontractor" means a person who contracts with a prime contractor to work, to supply commodities, or to contribute toward completing work for a governmental entity.

a. Check the appropriate box (Yes or No) that identifies your subcontracting intentions:

☒ - Yes, I will be subcontracting portions of the contract. (If Yes, complete item b of this SECTION and continue to item c of this SECTION.)

☐ - No, I will not be subcontracting any portion of the contract, and I will be fulfilling the entire contract with my own resources, including employees, goods, services, transportation and delivery. (If No, continue to SECTION 3 and SECTION 4.)

b. List all the portions of work (subcontracting opportunities) you will subcontract. Also, based on the total value of the contract, identify the percentages of the contract you expect to award to Texas certified HUBs, and the percentage of the contract you expect to award to vendors that are not a Texas certified HUB (i.e., Non-HUB).

| Item # | Subcontracting Opportunity Description | HUBs | | Non-HUBs |
|---|--|---|--|--|
| | | Percentage of the contract expected to be subcontracted to HUBs with which you do not have a continuous contract in place for more than five (5) years. | Percentage of the contract expected to be subcontracted to HUBs with which you have a continuous contract in place for more than five (5) years. | Percentage of the contract expected to be subcontracted to non-HUBs. |
| 1 | Office Supplies | 0.74 % | % | % |
| 2 | Printing Services | 0.09 % | % | % |
| 3 | Computer Supplies | 0.17 % | % | % |
| 4 | | % | % | % |
| 5 | | % | % | % |
| 6 | | % | % | % |
| 7 | | % | % | % |
| 8 | | % | % | % |
| 9 | | % | % | % |
| 10 | | % | % | % |
| 11 | | % | % | % |
| 12 | | % | % | % |
| 13 | | % | % | % |
| 14 | | % | % | % |
| 15 | | % | % | % |
| Aggregate percentages of the contract expected to be subcontracted: | | 1.0 % | % | % |

(Note: If you have more than fifteen subcontracting opportunities, a continuation sheet is available online at <http://www.texas.gov/procurement/contracting>.)

c. Check the appropriate box (Yes or No) that indicates whether you will be using only Texas certified HUBs to perform all of the subcontracting opportunities you listed in SECTION 2, item b.

☒ - Yes (If Yes, continue to SECTION 4 and complete an "HSP Good Faith Effort - Method A (Attachment A)" for each of the subcontracting opportunities you listed.)

☐ - No (If No, continue to item d, of this SECTION.)

d. Check the appropriate box (Yes or No) that indicates whether the aggregate expected percentage of the contract you will subcontract with Texas certified HUBs with which you do not have a continuous contract in place with for more than five (5) years, meets or exceeds the HUB goal the contracting agency identified on page 1 in the "Agency Special Instructions/Additional Requirements."

☐ - Yes (If Yes, continue to SECTION 4 and complete an "HSP Good Faith Effort - Method A (Attachment A)" for each of the subcontracting opportunities you listed.)

☐ - No (If No, continue to SECTION 4 and complete an "HSP Good Faith Effort - Method B (Attachment B)" for each of the subcontracting opportunities you listed.)

'Continuous Contract': Any existing written agreement (including any renewals that are exercised) between a prime contractor and a HUB vendor, where the HUB vendor provides the prime contractor with goods or service, to include transportation and delivery under the same contract for a specified period of time. The frequency the HUB vendor is utilized or paid during the term of the contract is not relevant to whether the contract is considered continuous. Two or more contracts that run concurrently or overlap one another for different periods of time are considered by CPA to be individual contracts rather than renewals or extensions to the original contract. In such situations the prime contractor and HUB vendor are entering (have entered) into "new" contracts.

Enter your company's name here: Management & Training CorporationRegulation #: 696-PF-16-P026**SECTION-3 SELF PERFORMING JUSTIFICATION** (If you responded "No" to SECTION 2, Item a, you must complete this SECTION and continue to SECTION 4)

If you responded "No" to SECTION 2, Item a, in the space provided below explain how your company will perform the entire contract with its own employees, supplies, materials and/or equipment to include transportation and delivery.

SECTION-4 AFFIRMATION

As evidenced by my signature below, I affirm that I am an authorized representative of the respondent listed in SECTION 1, and that the information and supporting documentation submitted with the HSP is true and correct. Respondent understands and agrees that, ~~(inserted by action of the respondent)~~

- The respondent will provide notice as soon as practical to all the subcontractors (HUBs and Non-HUBs) of their selection as a subcontractor for the awarded contract. The notice must specify at a minimum the contracting agency's name and its point of contact for the contract, the contract award number, the subcontracting opportunity they (the subcontractor) will perform, the approximate dollar value of the subcontracting opportunity and the expected percentage of the total contract that the subcontracting opportunity represents. A copy of the notice required by this section must also be provided to the contracting agency's point of contact for the contract no later than ten (10) working days after the contract is awarded.
- The respondent must submit monthly compliance reports (Prime Contractor Progress Assessment Report - PAR) to the contracting agency, verifying its compliance with the HSP, including the use of and expenditures made to its subcontractors (HUBs and Non-HUBs). (The PAR is available at <http://www.comptech.com/eng/education/submitting/submittingtocontractorprogressassessmentreportform.doc>).
- The respondent must seek approval from the contracting agency prior to making any modifications to its HSP, including the listing of additional or different subcontractors and the termination of a subcontractor listed in its HSP. If the HSP is modified without the contracting agency's prior approval, respondent may be subject to any and all enforcement remedies available under the contract or otherwise available by law, up to and including debarment from all state contracting.
- The respondent must, upon request, allow the contracting agency to perform on-site reviews of the company's headquarters and/or work-site where services are being performed and must provide documentation regarding staffing and other resources.


Signature

Angela A. [illegible]
Printed Name

SA, Buyer
Title

01/25/2017
Date
(mm/dd/yyyy)

Reminder:

- If you responded "Yes" to SECTION 2, Items c or d, you must complete an "HSP Good Faith Effort - Method A (Attachment A)" for each of the subcontracting opportunities you listed in SECTION 2, Item b.
- If you responded "No" SECTION 2, Items c and d, you must complete an "HSP Good Faith Effort - Method B (Attachment B)" for each of the subcontracting opportunities you listed in SECTION 2, Item b.

HSP Good Faith Effort - Method A (Attachment A)

Enter your company's name here: Management & Training Corporation Requirement #: 898-PF-10-P028

(IMPORTANT: If you responded "Yes" to SECTION 2, Item c or d of the completed HSP form, you must submit a completed "HSP Good Faith Effort - Method A (Anecdotal A)" for each of the subcontracting opportunities you listed in SECTION 2, Item b of the completed HSP form. You may print this page or download the form at <https://www.comptroller.hawaii.gov/economic-development/procurement/contracting-opportunities/contracting-opportunities-forms>

SECTION A-1: SUBCONTRACTING OPPORTUNITY

Enter the item number and description of the subcontracting opportunity you listed in SECTION 2, Item b, of the completed HSP form for which you are completing this attachment.

| | | | |
|--------------|---|--------------|-----------------|
| Item Number: | 1 | Description: | Office Supplies |
|--------------|---|--------------|-----------------|

SECTION A-2: SUBCONTRACTOR SELECTION

Let the subcontractor(s) you selected to perform the subcontracting opportunity you listed above in SECTION A-1. Also identify whether they are a Texas certified HUB and their Texas Vendor Identification (VID) Number or federal Employer Identification, the approximate dollar value of the work to be subcontracted, and the expected percentage of work to be subcontracted. When searching for Texas certified HUBs and verifying their HUB status, confirm that you use the State of Texas' Certified Master Builders List (CMBL) - Historically Underutilized Business (HUB) Directory Search located at <http://www.empirestatecontractors.com/hubsearch>. HUB status code "A" signifies that the company is a Texas certified HUB.

[illegible]

REMINDER: As specified in SECTION 4 of the completed HSP form, if you (insert name) are awarded any portion of the contract, you are required to provide notice as soon as practical to all the subcontractors (HUBs and Non-HUBs) of their selection as a subcontractor. This notice must specify at a minimum the contracting agency's name and the point of contact for the contract; the contract award number; the subcontracting opportunity they (the subcontractor) will perform; the specifically dollar value of the subcontracting opportunity and the expected percentage of the total contract that the subcontracting opportunity represents. A copy of the notice required by this section must also be provided to the contracting agency's point of contact for the contract on how often left (to) working days after their contract is awarded.

HSP Good Faith Effort - Method A (Attachment A)

Rev. 2117

Enter your company's name here: **Management & Training Corporation**

Requisition #: 696-PF-16-P026

IMPORTANT: If you responded "Yes" to SECTION 2, Items c or d of the completed HSP form, you must submit a completed "HSP Good Faith Effort - Method A (Attachment A)" for each of the subcontracting opportunities you listed in SECTION 2, Item b of the completed HSP form. You may photo-copy this page or download the form at <https://www.comptroller.texas.gov/purchasing/docs/hub-forms/hub-second-plan-gfe-or-hu-a.pdf>

SECTION A-1: SUBCONTRACTING OPPORTUNITY

Enter the Item number and description of the subcontracting opportunity you listed in SECTION 2, Item b, of the completed HSP form for which you are completing the attachment.

Item Number: 2 Description: Printing Services

SECTION A-2: SUBCONTRACTOR SELECTION

List the subcontractor(s) you selected to perform the subcontracting opportunity you listed above in SECTION A-1. Also identify whether they are a Texas certified HUB and their Texas Vendor Identification (VID) Number or Federal Employer Identification Number (EIN), the approximate dollar value of the work to be subcontracted, and the expected percentage of work to be subcontracted. When searching for Texas certified HUBs and verifying their HUB status, ensure that you use the State of Texas' Centralized Master Bidders List (CMBL) - Historically Underutilized Business (HUB) Directory Search located at <http://myproc.state.tx.us/compass/search/index.jsp>. HUB status code "A" signifies that the company is a Texas certified HUB.

[illegible]

REMINDER: As specified in SECTION 4 of the completed HSP form, if you (respondent) are awarded any portion of the responsibility, you are required to provide notice as soon as practical to all the subcontractors (HUBs and Non-HUBs) of their selection as a subcontractor. The notice must specify at a minimum the contracting agency's name and its point of contact for the contract, the contract award number, the subcontracting opportunity (i.e. the subcontracter) will perform, the approximate dollar value of the subcontracting opportunity and the expected percentage of the total contract that the subcontracting opportunity represents. A copy of the notice required by this section must also be provided to the contracting agency's point of contact for the contract no later than ten (10) working days after the contract is awarded.

HSP Good Faith Effort - Method A (Attachment A)

Rev. 2/17

Enter your company's name here: Management & Training Corporation

Regulation #: 696-PF-16-P026

IMPORTANT: If you responded "Yes" to SECTION 2, Items c or d of the completed HSP form, you must submit a completed "HSP Good Faith Effort - Method A (Attachment A)" for each of the subcontracting opportunities you listed in SECTION 2, Item b of the completed HSP form. You may photo-copy this page or download the form at <https://www.comptroller.texas.gov/purchasing/docs/hub-forms/hub-sbcont-plan-gfe-attach-a.pdf>

SECTION A-1: SUBCONTRACTING OPPORTUNITY

Enter the item number and description of the subcontracting opportunity you listed in SECTION 2, Item b, of the completed HSP form for which you are completing the attachment.

Item Number: 3 Description: Computer Supplies

SECTION A-2: SUBCONTRACTOR SELECTION

List the subcontractor(s) you selected to perform the subcontracting opportunity you listed above in SECTION A-1. Also identify whether they are a Texas certified HUB and their Texas Vendor Identification (VID) Number or federal Employer Identification Number (EIN), the approximate dollar value of the work to be subcontracted, and the expected percentage of work to be subcontracted. When searching for Texas certified HUBs and verifying their HUB status, ensure that you use the State of Texas' Centralized Master Bidders List (CMBL) - Historically Underutilized Business (HUB) Directory Search located at <http://mycga.cga.state.tx.us/passcomblsearch/index.jsp>. HUB status code "A" signifies that the company is a Texas certified HUB.

[illegible]

REMINDER: As specified in SECTION 4 of the completed HSP form, if you (respondent) are awarded any portion of the requisition, you are required to provide notice as soon as practical to all the subcontractors (HUBs and Non-HUBs) of their selection as a subcontractor. The notice must specify at a minimum the contracting agency's name and its point of contact for the contract, the contract award number, the subcontracting opportunity they (the subcontractor) will perform, the approximate dollar value of the subcontracting opportunity and the expected percentage of the total contract that the subcontracting opportunity represents. A copy of the notice required by this section must also be provided to the contracting agency's point of contact for the contract no later than ten (10) working days after the contract is awarded.



Rev. 07/27/15

HUB Subcontracting Plan (HSP) Prime Contractor Progress Assessment Report

This form must be completed and submitted to the contracting agency each month to document compliance with your HSP.

Contract/Requisition Number: 696-PF-18-19-C160

Date of Award: June 1, 2018

Object Code:

(mm/dd/yyyy)

(Agency Use Only)

Contracting Agency/University
Name:

Texas Department of Criminal Justice

Contract Specialist Name: Jodi Lawson

Contractor (Company) Name: Management & Training Corporation

State of Texas VID #: 18703653222

Point of Contact: Angela Alleman

Phone #: 801-693-2797

Reporting (Month) Period:

Total Amount Paid this Reporting Period to Contractor: \$

Report HUB and Non-HUB subcontractor information

**Note: Texas certified HUB status can be verified on line at: <https://mycpa.cpa.state.tx.us/tpasscnblsearch/index.jsp>*

| Subcontractor's Name | *Texas certified HUB? (Yes or No) | Subcontractor's VID or HUB Certificate Number (Required if Texas certified HUB) | Total Contract \$ Amount from HSP with Subcontractor | Total \$ Amount Paid This Reporting Period to Subcontractor | Total Contract \$ Amount Paid to Date to Subcontractor | Object Code (Agency Use Only) |
|-----------------------------|--------------------------------------|---|--|--|---|----------------------------------|
| Tejas Office Products, Inc. | Yes | 1760032427500 | \$4,868.90 | \$ | \$ | |
| | | | \$ | \$ | \$ | |
| | | | \$ | \$ | \$ | |
| | | | \$ | \$ | \$ | |
| | | | \$ | \$ | \$ | |
| | | | \$ | \$ | \$ | |
| | | | \$ | \$ | \$ | |
| | | | \$ | \$ | \$ | |
| | | | \$ | \$ | \$ | |
| | | | \$ | \$ | \$ | |
| | | | \$ | \$ | \$ | |
| | | | \$ | \$ | \$ | |
| | | | \$ | \$ | \$ | |
| TOTALS: | | | \$4,868.90 | \$ | \$ | |

Signature: _____

Title: _____

Date: _____

COMPLIANCE STANDARDS FOR ALL PROGRAMS*

| STANDARD | ACCEPTABLE | UNACCEPTABLE | PAYMENT ADJUSTMENT CALCULATION |
|---|----------------------------------|---|---|
| 1. The Contractor shall staff all positions with qualified employees, including special certifications and licenses where applicable. | 100% | Less than 100% | Reduce by the Average Daily Salary (Attachment A) for each Day a position remains vacant in excess of ninety (90) Days. |
| 2. The Contractor shall follow all requirements regarding initial employment and reemployment of employees (i.e. obtaining and maintaining a copy of satisfactory background checks, and obtaining and maintaining all Department approvals for employees with criminal convictions/pending charges). The requirements are mandatory prior to being assigned to a position and having contact with Offenders. | 100% | Less than 100% | Reduce by \$50.00 each Day. |
| 3. The Contractor shall obtain from the Department, and maintain a copy in employee files, prior written approval to hire all Upper Level Management staff as directed. | 100% | Less than 100% | Reduce by the Average Daily Salary (Attachment A) for each Day the position was filled with a non-approved individual. |
| 4. The Contractor shall maintain valid current insurance policies as directed. | Valid current insurance policies | Lapsed policy or policy not meeting Contract requirements | Reduce by \$1,000.00 per Day for which mandated insurance coverage was not in effect. The Contractor has twenty (20) Days to cure before this becomes an Event of Default. |
| 5. The Contractor shall submit a written response to the Department detailing the corrective action taken to address any items of non-compliance within twenty (20) Days of receiving written notice of the item from the Department. | 100% | Less than 100% | Reduce by the Average Daily Salary (Attachment A) of the Program Director for each Day past the acceptable response time. |
| 6. The Contractor shall correct all identified areas of non-compliance, as identified by the Department, within twenty (20) Days or by the date of a Department approved extension. | 100% | Less than 100% | Reduce by the Average Daily Salary (Attachment A) of the Program Director for each Day an issue of non-compliance is not corrected within twenty (20) Days or by the date of a Department approved extension. |
| 7. The Contractor shall document all programming hours (or the inability to provide said programming). | 100% | Less than 100% | Reduce by \$150.00 for each individual or group session not held in accordance with the Department's approved treatment schedule unless prior Department approval has been received regarding cancellation of sessions. |
| 8. The Contractor shall provide training within the first ninety (90) Days of employment in accordance with the respective position and program | 100% | Less than 100% | Reduce by the Average Daily Salary (Attachment A) for each Day each treatment staff is in excess of ninety (90) Days, beginning on the ninety-first (91st) Day. |

| | STANDARD | ACCEPTABLE | UNACCEPTABLE | PAYMENT ADJUSTMENT CALCULATION |
|----|--|--|--|---|
| 9 | The Contractor shall comply with treatment staff licensure standards set forth by the respective licensing agency. <i>*not applicable to ISF Cognitive Intervention Program</i> | 100% | Less than 100% | Reduce by the Average Daily Salary (Attachment A) for each Day staff is assigned to a treatment position without appropriate licenses/credentials. |
| 10 | An Assessment is administered to each Offender within five (5) Working Days of entry into the program. <i>*not applicable to ISF Cognitive Intervention Program</i> | 100% | Less than 100% | Reduce by the Contractor Per Diem Rate for each Day the Offender is without an appropriate Assessment beyond the required time frame. |
| 11 | Offenders shall be provided with an Individualized Treatment Plan (ITP) that addresses their specific needs within ten (10) Working Days of entry into the program. <i>*not applicable to ISF Cognitive Intervention Program</i> | 100% | Less than 100% | Reduce by the Contractor Per Diem Rate for each Day the Offender is without an appropriate Individualized Treatment Plan (ITP) beyond the required time frame. |
| 12 | Offenders shall have clinical progress notes documented weekly. | 100% | Less than 100% | Reduce by the Contractor Per Diem Rate for each Day treatment file not reflecting Offender's weekly progress notes. |
| 13 | Counselor-to-Offender caseload shall be less than or equal to sixteen (16) for Special Needs Offenders, or less than or equal to twenty-five (25) for Regular Needs Offenders. <i>*not applicable to ISF Cognitive Intervention Program</i> | Special Needs less than or equal to sixteen (16) caseloads Regular Needs less than or equal to twenty-five (25) caseloads | Special Needs greater than sixteen (16) caseloads Regular Needs greater than twenty-five (25) caseloads | Reduce by \$200.00 per caseload exceeding the requirement. |
| 14 | Complete Position Vacancy Report (PVR), Position Control Number Listing (PCN), Monthly Strength Report, and Contractor Monthly Invoice(s) or reports deemed applicable by the Department must be typed and submitted accurately by the fifth (5th) Working Day of the month. | 100% | Less than 100% | Reduce by the Average Daily Salary (Attachment A) of the Program Director for each Day past the acceptable response time. Reduce by \$100.00 per identified error. |
| 15 | The Contractor shall maintain organized, complete, and accurate Offender records and employee personnel files. | 100% | Less than 100% | Reduce by \$25.00 for each file that is non-compliant. |

| STANDARD | ACCEPTABLE | UNACCEPTABLE | PAYMENT ADJUSTMENT CALCULATION |
|---|------------|----------------|---|
| ADDITIONAL COMPLIANCE STANDARDS FOR DWI | | | |
| 16. DWI Program group sessions and classes shall not exceed the limits stated in the Department's DWI Recovery Program Operations Manual. | 100% | Less than 100% | Reduce by the Contractor Per Diem Rate for each Offender in excess of the mandated group/class size limit. |
| 17. DWI Intervention Program group sessions and classes shall not exceed the limits set by TDLR | 100% | Less than 100% | Reduce by the Contractor Per Diem Rate for each Offender in excess of the mandated group/class size limit. |
| 18. Offender will be provided with a Comprehensive Assessment Plan, to include a Discharge Summary, thirty (30) Days prior to completion of the program. | 100% | Less than 100% | Reduce by the Contractor Per Diem Rate for each Day an Offender's Comprehensive Assessment Plan and Discharge Summary is not completed thirty (30) Days prior to the Offender's scheduled discharge date. |
| ADDITIONAL COMPLIANCE STANDARDS FOR SAFPF AND IPTC | | | |
| 19. Offender will be provided with a Continuum of Care Plan within thirty (30) Days prior to the Offender's scheduled release date. | 100% | Less than 100% | Reduce by the Contractor Per Diem Rate for each Day the Offender's Continuum of Care Plan is not completed within thirty (30) Days prior to the Offender's scheduled release date. |
| 20. Offender will be provided with a Discharge Summary within thirty (30) Days prior to their scheduled release date. | 100% | Less than 100% | Reduce by the Contractor Per Diem Rate for each Day the Offender's Discharge Summary is not completed within thirty (30) Days prior to the Offender's scheduled release date. |
| 21. Offender will complete a Relapse Prevention Plan within forty-five (45) Days prior to the Offender's scheduled release date. | 100% | Less than 100% | Reduce by the Contractor Per Diem Rate for each Day the Offender's Relapse Prevention Plan is not completed within forty-five (45) Days prior to the Offender's scheduled release date. |
| 22. The Contractor shall staff all Counselor III positions with certified employees, including special certifications and licenses. <i>*SAFPF Special Needs Only</i> | 100% | Less than 100% | Reduce by the Average Daily Salary (Attachment A) for each Day the Counselor III remains vacant in excess of thirty (30) Days. |
| ADDITIONAL COMPLIANCE STANDARDS FOR STATE JAIL SUBSTANCE ABUSE | | | |
| 23. Offenders are placed in the appropriate program Tier based on Assessment results. | 100% | Less than 100% | Reduce by the Contractor Per Diem Rate for each Day an Offender remains in the program past the number of Tier Days as determined by the Assessment score. |
| 24. The Contractor shall provide DWI Services to all eligible Offenders. | 100% | Less than 100% | Reduce by \$100.00 for each identified Offender that the Contractor fails to provide DWI Services |

The Department has the right to withhold monthly Payment or temporarily suspend some or all of the Payment adjustments identified in the above table.

Decisions to suspend Payment adjustments will be made by the TDCJ-PFCMOD Director and will be conveyed to the Contractor by letter. Decisions and notifications to reinstate Payment adjustments will be handled in a similar manner.

*All programs include: Driving While Intoxicated (DWI); Substance Abuse Felony Punishment Facility (SAFPF); In-Prison Therapeutic Community (IPTC); State Jail Substance Abuse; Intermediate Sanction Facility (ISF).

Average Daily Salary Schedule

| Position Description | Base Year 1 FY2018 | Base Year 2 FY2019 | Option 1 Year 1 FY2020 | Option 1 Year 2 FY2021 | Option 2 Year 1 FY2022 | Option 2 Year 2 FY2023 | Option 3 Year 1 FY2024 | Option 3 Year 2 FY2025 |
|---|--------------------------|--------------------------|------------------------------|------------------------------|------------------------------|------------------------------|------------------------------|------------------------------|
| Program Supervisor/Program Director & Assistant Director | \$173 | \$177 | \$180 | \$184 | \$187 | \$191 | \$195 | \$199 |
| Substance Abuse Counselor III/Senior Counselor/Addiction Severity Index (ASI) Tester | \$134 | \$137 | \$139 | \$142 | \$145 | \$148 | \$151 | \$154 |
| Substance Abuse Counselor I & II/Counselor & Counselor Intern | \$119 | \$122 | \$124 | \$127 | \$129 | \$132 | \$135 | \$137 |
| Case Manager/Transitional Case Manager | \$101 | \$103 | \$105 | \$107 | \$109 | \$111 | \$114 | \$116 |
| Administrative Assistant/Coordinator/Treatment Specialist | \$76 | \$77 | \$79 | \$80 | \$82 | \$84 | \$85 | \$87 |

**Texas Department of Criminal Justice
Private Facility Contract Monitoring/Oversight Division
Monthly Strength Report**

Month:

Facility Name:

| Date | Daily Ending Count | Psychological or Medical | Clients in Ad. Seg. or Parole Mod |
|------|--------------------|--------------------------------|--------------------------------------|
| 1st | | | |
| 2nd | | | |
| 3rd | | | |
| 4th | | | |
| 5th | | | |
| 6th | | | |
| 7th | | | |
| 8th | | | |
| 9th | | | |
| 10th | | | |
| 11th | | | |
| 12th | | | |
| 13th | | | |
| 14th | | | |
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| 20th | | | |
| 21st | | | |
| 22nd | | | |
| 23rd | | | |
| 24th | | | |
| 25th | | | |
| 26th | | | |
| 27th | | | |
| 28th | | | |
| 29th | | | |
| 30th | | | |
| 31st | | | |

Classification Chief:

Printed Name

Signature

Warden:

Printed Name

Signature

Texas Department of Criminal Justice**Job Description Minimum Qualifications
(For TDCJ Positions Listed Below)**

**Program Supervisor III
Pre-Release or Inpatient
Treatment
(Program Director)**

Bachelor's degree from a college or university accredited by an organization recognized by the Council for Higher Education Accreditation (CHEA) or by the United States Department of Education (USDE). Major coursework in a Behavioral Science, Criminal Justice or a related field preferred. Each year of experience as described below in excess of the required five (5) years may be substituted for thirty (30) semester hours from an accredited college or university on a year-for-year basis.

Five (5) years full-time, wage-earning program administration or counseling experience.

Two (2) years full-time, wage-earning experience in the supervision of employees.

Current valid license as a Licensed Chemical Dependency Counselor (LCDC) by the Texas Department of State Health Services (DSHS) or current valid certification as a Certified Criminal Justice Professional (CCJP) by the Texas Certification Board of Addiction Professionals or current valid Qualified Credentialed Counselor (QCC) licensed to provide substance abuse treatment.

Must maintain valid license or certification for continued employment in position.

**Program Supervisor I
Treatment Coordinator
(Asst. Program Director)**

Bachelor's degree from a college or university accredited by an organization recognized by the Council for Higher Education Accreditation (CHEA) or by the United States Department of Education (USDE). Major coursework in a Behavioral Science, Criminal Justice or a related field preferred. Each year of experience as described below in excess of the required three (3) years may be substituted for thirty (30) semester hours from an accredited college or university on a year-for-year basis.

Three (3) years full-time, wage-earning program administration or counseling experience.

Current valid license as a Licensed Chemical Dependency Counselor (LCDC) by the Texas Department of State Health Services (DSHS) or current valid certification as a Certified Criminal Justice Professional (CCJP) by the Texas Certification Board of Addiction Professionals or current valid Qualified Credentialed Counselor (QCC) licensed to provide substance abuse treatment.

Must maintain valid license or certification for continued employment in position.

**Substance Abuse Counselor III
Senior Counselor**

Bachelor's degree from a college or university accredited by an organization recognized by the Council for Higher Education Accreditation (CHEA) or by the United States Department of Education (USDE). Major coursework in Criminal Justice, a Behavioral Science or a related field preferred. Each year of experience as described below in excess of the required four (4) years may be substituted for thirty (30) semester hours from an accredited college or university on a year-for-year basis.

Four (4) years full-time, wage-earning experience in substance abuse treatment.

Current valid license as a Licensed Chemical Dependency Counselor (LCDC) by the Texas Department of State Health Services (DSHS) or current valid Qualified Credentialed Counselor (QCC) identified by the Texas Department of State Health Services (DSHS).

Must maintain valid license for continued employment in position.

**Substance Abuse Counselor III
Addiction Severity Index Tester**

Bachelor's degree from a college or university accredited by an organization recognized by the Council for Higher Education Accreditation (CHEA) or by the United States Department of Education (USDE). Major coursework in Criminal Justice, a Behavioral Science, or a related field preferred. Each year of experience in excess of the required four (4) years may be substituted for thirty (30) semester hours from an accredited college or university on a year-for-year basis.

Four (4) years full-time, wage-earning experience in substance abuse treatment.

Current valid license as a Licensed Chemical Dependency Counselor (LCDC) by the Texas Department of State Health Services (DSHS) or current valid certification as a Certified Criminal Justice Professional (CCJP) by the Texas Certification Board of Addiction Professionals or current valid license as a Licensed Professional Counselor (LPC) by the Texas Commission of Professional Counselors or current valid license as a Licensed Psychological Associate (LPA) by the Texas Board of Psychological Examiners.

Must maintain valid license or certification for continued employment in position.

**Substance Abuse Counselor II
Substance Abuse Treatment
Program
(Counselor)**

Graduation from an accredited senior high school or equivalent or GED.

Two (2) years full-time, wage-earning experience in substance abuse treatment or substance abuse education.

Current valid license as a Licensed Chemical Dependency Counselor (LCDC) by the Texas Department of State Health Services (DSHS) or current valid certification as a Certified Criminal Justice Professional (CCJP) by the Texas Certification Board of Addiction Professionals or current qualifying credential to conduct counseling in a treatment environment.

Must maintain valid license or certification for continued employment in position.

**Substance Abuse Counselor I
Substance Abuse Treatment
Program
(Counselor Intern)**

Graduation from an accredited senior high school or equivalent or GED.

Must have a current letter of registration as a Counselor Intern from the Texas Department of State Health Services (DSHS) or current valid certification as a Certified Criminal Justice Professional Applicant Status (CCJP-A) as approved by the Texas Certification Board of Addiction Professionals.

Selected applicants must obtain the Licensed Chemical Dependency Counselor (LCDC) license or the Certified Criminal Justice Professional (CCJP) certification within five (5) years from the date of their registration as a Counselor Intern or CCJP-A.

Must sign a Credential Contingency Agreement that will remain in effect only until the initially established expiration date. Failure to comply with this contingency statement will result in separation from employment. Credential Contingency Agreements will not be extended or renewed as a result of an employee's separation from employment or acceptance of another position.

Must maintain valid Counselor Intern status or CCJP-A certification for continued employment in position.

**Case Manager III
Transitional Case Manager**

Bachelor's degree from a college or university accredited by an organization recognized by the Council for Higher Education Accreditation (CHEA) or by the United States Department of Education (USDE). Major coursework in Criminal Justice, Education, Social Work or a related field preferred. Each year of experience as described below in excess of the required one (1) year may be substituted for thirty (30) semester hours from an accredited college or university on a year-for-year basis.

One (1) year full-time, wage-earning case processing, counseling, offender case management or social work experience.

**Case Manager II
Transitional Case Manager**

Sixty (60) semester hours from a college or university accredited by an organization recognized by the Council for Higher Education Accreditation (CHEA) or by the United States Department of Education (USDE). Major coursework in a Behavioral Science or a related field preferred. Each year of experience as described below in excess of the required one (1) year may be substituted for thirty (30) semester hours from an accredited college or university on a year-for-year basis.

One (1) year full-time, wage-earning case processing, counseling, Offender case management, or social work experience.

**Administrative Assistant IV
Pre-Release Selection and
Intake Coordinator**

Bachelor's degree from a college or university accredited by an organization recognized by the Council for Higher Education Accreditation (CHEA) or by the United States Department of Education (USDE). Major coursework in Criminal Justice, Psychology, Social Work or a related field preferred. Each year of experience as described below in excess of the required two (2) years may be substituted for thirty (30) semester hours from an accredited college or university on a year-for-year basis.

Two (2) years full-time, wage-earning technical program support or Offender case management experience.

**Administrative Assistant IV
Quality Assurance Coordinator**

Bachelor's degree from a college or university accredited by an organization recognized by the Council for Higher Education Accreditation (CHEA) or by the United States Department of Education (USDE). Major coursework in Criminal Justice, Psychology, Social Work or a related field preferred. Each year of experience as described below in excess of the required two (2) years may be substituted for thirty (30) semester hours from an accredited college or university on a year-for-year basis.

Two (2) years full-time, wage-earning substance abuse treatment experience.

Current valid license as a Licensed Chemical Dependency Counselor (LCDC) by the Texas Department of State Health Services (DSHS) or current valid certification as a Certified Criminal Justice Professional (CCJP) by the Texas Certification Board of Addiction Professionals or current valid Qualified Credentialed Counselor (QCC) licensed to conduct counseling in a treatment environment.

Must maintain valid license or certification for continued employment in position.

Note: CCJP are not qualified to supervise LCDC – Counselor Interns, but may supervise a CCJP-A

**TEXAS DEPARTMENT OF CRIMINAL JUSTICE
PRIVATE FACILITY CONTRACT MONITORING / OVERSIGHT DIVISION
INSTRUCTIONS FOR MONTHLY POSITION VACANCY REPORT**

| | |
|--|---|
| | The permanent control number established by the Facility for each position on the current staffing plan defined in the Contract. |
| Position Control Number | This number should correspond with the Position Control Number (PCN) Listing. |
| Position Title | The position title on the current staffing plan that corresponds to the departing and replacing employee. |
| a. Departing Employee | Name of the employee assigned to the position control number that is being removed from the Position Control Number (PCN) Listing. This may be as a result of a termination or promotion. |
| b. Replacing Employee | Name of the employee being permanently assigned to the position control number. This may be as a result of a promotion or being newly hired. The assigned employee must meet the satisfactory completion of all requirements designated for the position. |
| 1. Date Vacated | <p>The departing employee's last day on the job in a paid status or the last day of any paid leave entitlements, such as vacation leave. This includes employees placed in military leave status upon exhausting all paid leave entitlements.</p> <p>Positions filled by employees that are in an Administrative Leave status will be considered vacant once the 14 day time period is exhausted. <u>However, these positions should be listed on the Position Vacancy Report immediately upon notification that Administrative Leave status begins, noting the specific leave status.</u></p> <p>Positions filled by employees that are in a Workers' Compensation or Family Medical Leave (FML) status will be considered vacant once the twelve (12) week time period is exhausted. <u>However, these positions should be listed on the Position Vacancy Report immediately upon notification that Workers' Compensation or FML status begins, noting the specific leave status.</u></p> |
| 2. Date Filled | Positions are to be reported filled on the day following the completion of all requirements for the specific position based on Contract requirements. |
| 3. Date of Pre-Service / Orientation Completed | <p>The date the replacing employee finishes pre-service training or orientation based on the requirements of the position.</p> <p><u>A copy of the pre-service training certificate must be attached to the Position Vacancy Report for newly hired employees.</u></p> |

| | |
|---|---|
| 4. Date of Background Check Received | <p>The date on the pre-employment criminal history inquiry or notification letter from the Department concerning the results of a criminal background check.</p> <p><u>A copy of the pre-employment criminal history inquiry and if applicable the notification letter must be attached to the Position Vacancy Report for newly hired employees.</u></p> |
| 5. Date of Pre-Employment Drug Test Received | <p>The date of notification that a satisfactory pre-employment drug test was received.</p> <p><u>A copy of the pre-employment drug test must be attached to the Position Vacancy Report for newly hired employees.</u></p> |
| 6. Date of Hire | The date the employee is hired with the Contractor. |
| 7. Required Certification Completed | <p>Positions requiring certification must be designated as to whether the appropriate certification has been completed by indicating YES or NO.</p> <p><u>A copy of the certification must be attached to the Position Vacancy Report.</u></p> |
| 8. Required Diploma or GED Date | Proof of basic education required, such as GED or diploma. Enter date listed on diploma. |
| 9. Date of Department Approval for Upper Level Management | <p>Upper Level Management positions require Department approval.</p> <p><u>A copy of the Department approval letter must be attached to the Position Vacancy Report.</u></p> |
| 10. Date of OJT Completed | The date on the job training is completed. This may occur after the position is filled. |
| 11. Number of Days Position Vacant | The calculation starts the day after the position has been vacated and ends on the day prior to the date filled. |

Position Vacancy Report

Facility Name: _____

Month Of: _____

| Category of Staff (Administration, Security, Support Ops & Programs, etc.): | | | | | | | | | | | | |
|---|----------------|-----------------------|--|-----------------|--|-------------------------------------|--------------------------------------|-----------------|--|--------------------------------------|---|-----------------------|
| Position Control Number | Position Title | a. Departing Employee | | 1. Date Vacated | | | | | | | | |
| | | b. Replacing Employee | | 2. Date Filled | * 3. Date Pre Service / Orient Completed | * 4. Date of Background Check Rec'd | * 5. Date of Pre Emp Drug Test Rec'd | 6. Date of Hire | * 7. Date Required Certification Completed | * 8. Date of Required Diploma or GED | * 9. Date of Department Approval for Upper Lvl Mgmt | 10. Date OJT Complete |
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I hereby confirm that the above information is accurate and correct. This report may be used in calculating fiscal sanctions regarding position vacancies.

Preparer: _____

Total Positions in Staffing Plan: _____

Total Vacant: _____

Total Filled: _____

Printed
Name_____
Facility Warden or AdministratorSignature &
Date_____
Facility Warden or Administrator

*Copies of Pre-Service Training Certificates, Background Checks, Pre-Employment Drug Tests, Required Education Proof and Required Certifications must be attached for all positions filled during the month.

Positions filled by promotion of current staff should be indicated by writing promotion through #3-6.

Copies of approval letters must be attached for all newly filled Upper Level Management positions.

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
PRIVATE FACILITY CONTRACT MONITORING/OVERSIGHT DIVISION
INSTRUCTIONS FOR MONTHLY POSITION CONTROL NUMBER LISTING

The permanent control number established by the Facility for each position on the current Staffing Plan as defined in the Contract.

Position Control Number (PCN): This number should correspond with the Position Control Number (PCN) Listing.

An employee can only fill one Position Control Number (PCN).

Position Title: The Position Title on the current Staffing Plan that corresponds to the departing and replacing employee.

FTE: The Full Time Equivalency (FTE), from the current Staffing Plan. Total FTEs from the PCN Listing should equal the Staffing Plan.

Employee Name: First and Last name of the incumbent in the respective PCN. If the position is vacant, indicate vacant and the name of the departing employee. Example: VACANT – Smith, Judy.

Social Security Number: The employee's nine (9) digit Social Security number.

Date of Birth: The employee's date of birth, including the month, day and year. (mm/dd/yy)

Date of Hire: The date the employee is hired with the Contractor.

Date Filled: Positions are to be reported filled on the day following the completion of all requirements for the respective position based on Contract requirements.

The departing employee's last day on the job in a paid status or the last day of any paid leave entitlements, such as vacation leave. This includes employees placed in Military Leave status upon exhausting all paid leave entitlements.

Date Vacated: Positions filled by employees that are in an Administrative Leave status will be considered vacant once the fourteen (14) Day time period is exhausted. However, these positions should be listed on the Position Vacancy Report (PVR) immediately upon notification that Administrative Leave status begins, notating the specific leave status.

Positions filled by employees that are in a Workers' Compensation or Family Medical Leave (FML) status will be considered vacant once the twelve (12) week time period is exhausted. However, these positions should be listed on the PVR immediately upon notification that Workers' Compensation or FML status begins, notating the specific leave status.

Requirements (Reference Exhibit 1 for example)

Filled, Current Reporting Month: Highlight Pink if the position was filled in the current reporting month.

Vacated, Current Reporting Month: Highlight Blue if position was vacated in the current reporting month.

Vacated, Previous Reporting Month: Highlight Yellow if the position was vacated in the previous month.

All other Positions: All other positions filled in previous months will not be highlighted.

NOTE: Please ensure highlighted rows remain clear and legible

Exhibit 1: EXAMPLE

| Position Control Number (PCN) Listing | | | | | | | | |
|---------------------------------------|----------------------|-----|---|------------------------|---------------|--------------|-------------|--------------|
| Facility Name: _____ | | | | | | | | |
| Month & Year: <u>Mar-18</u> | | | Note: Additional rows are hidden and may be utilized as needed to list additional information | | | | | |
| PCN | POSITION TITLE | FTE | EMPLOYEE NAME | SOCIAL SECURITY NUMBER | DATE OF BIRTH | DATE OF HIRE | DATE FILLED | DATE VACATED |
| SECURITY OFFICERS | | | | | | | | |
| AB01 | Correctional Officer | 1.0 | Mickey Mouse | 458-25-3140 | 11/05/83 | 02/16/18 | 03/02/18 | |
| AB02 | Correctional Officer | 1.0 | Sam Moon | 457-25-3121 | 11/29/83 | 04/25/14 | 05/25/14 | |
| AB03 | Correctional Officer | 1.0 | Simon Chlpunk | 456-25-3210 | 04/21/85 | 02/01/15 | 03/11/15 | |
| AB04 | Correctional Officer | 1.0 | Donald Duck | 458-73-6140 | 03/26/89 | 01/25/15 | 03/11/15 | |
| AB05 | Correctional Officer | 1.0 | Vacant - Daisy Duck | 458-25-2931 | 02/10/78 | 03/29/12 | 04/01/12 | 03/04/18 |
| AB06 | Correctional Officer | 1.0 | Vacant - Minnie Mouse | 453-21-2591 | 03/10/62 | 03/29/11 | 05/29/11 | 02/10/18 |
| AB07 | Correctional Officer | 1.0 | Daisy Duck | 458-75-2564 | 02/18/62 | 02/01/09 | 03/21/09 | |
| AB08 | Correctional Officer | 1.0 | Charlie Brown | 458-21-5689 | 01/26/88 | 10/16/15 | 11/21/15 | |
| AB09 | Correctional Officer | 1.0 | Bart Simpson | 458-96-2150 | 05/20/85 | 09/01/15 | 10/01/15 | |

Position Control Number (PCN) Listing

Facility Name: _____
 Month & Year: _____

Note: Additional rows are hidden and may be utilized as needed to list additional information.

| PCN | POSITION TITLE | FTE | EMPLOYEE NAME | SOCIAL SECURITY NUMBER | DATE OF BIRTH | DATE OF HIRE | DATE FILLED | DATE VACATED |
|--------------------------------|----------------|------------|---------------|------------------------|---------------|--------------|-------------|--------------|
| INDIRECT STAFFING | | | | | | | | |
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| TOTAL INDIRECT STAFFING | | 0.0 | | | | | | |
| DIRECT STAFFING | | | | | | | | |
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| TOTAL DIRECT STAFFING | | 0.0 | | | | | | |
| Grand Total | | 0.0 | | | | | | |

Printed Name _____
 Facility Warden or Administrator

Signature _____
 Facility Warden or Administrator

SECTION K - REPRESENTATIONS, CERTIFICATIONS, AND OTHER STATEMENTS OF OFFERORS

K.1 HISTORICALLY UNDERUTILIZED BUSINESS (HUB) REPRESENTATION

K.1.1 Definition

- A. "Historically Underutilized Business (HUB)" means an entity with its principal place of business in this State that is:
1. A corporation formed for the purpose of making a profit in which fifty-one percent (51%) or more of all classes of the shares of stock or other equitable securities are owned by one or more Economically Disadvantaged Persons who have a proportionate interest and actively participate in the corporation's control, operation and management;
 2. A sole proprietorship created for the purpose of making a profit that is completely owned, operated and controlled by an Economically Disadvantaged Person;
 3. A partnership formed for the purpose of making a profit in which fifty-one percent (51%) or more of the assets and interest in the partnership are owned by one or more Economically Disadvantaged Persons who have a proportionate interest and actively participate in the partnership's control, operation, and management;
 4. A joint venture in which each entity in the venture is a HUB, as determined under another paragraph of this subdivision; or
 5. A supplier contract between a HUB as determined under another paragraph of this subdivision, and a prime Offeror under which the HUB is directly involved in the manufacture or distribution of the goods or otherwise warehouses and ships the goods.
- B. "Economically Disadvantaged Person" means a Person who is economically disadvantaged because of the Person's identification as a member of a certain group including Black Americans, Hispanic Americans, Women, Asian Pacific Americans, Native Americans and Service-Disabled Veterans, who has suffered the effects of discriminatory practices or other similar insidious circumstances over which the Person has no control.

K.1.2 HUB Representation

The Offeror represents and certifies as part of its proposal that it [] is, or [X] is not, a HUB certified by the Texas Statewide Support Services Division.

K.2 CHILD SUPPORT REPRESENTATION

- A. Under Texas Family Code, Section 231.006, a child support obligor who is more than thirty (30) Days delinquent in paying child support and a business entity in which the obligor is a sole proprietor, partner, shareholder or owner with an ownership interest of at least twenty-five percent (25%) is not eligible to receive payments from State funds under a contract to provide property, materials or services.
- B. Governmental entities and any business entity, including a non-profit corporation, that does not have a majority shareholder who is a natural Person capable of being a child support obligor, are not subject to Texas Family Code, Section 231.006.

Check ONE:

☒ Offeror DOES NOT have a sole proprietor, majority stockholder or substantial owner who is a natural Person capable of being a child support obligor therefore IS NOT subject to Texas Family Code, Section 231.006.

☐ Offeror DOES have a sole proprietor, majority stockholder or substantial owner who is a natural Person capable of being a child support obligor therefore IS subject to Texas Family Code, Section 231.006.

FEDERAL PRIVACY ACT NOTICE: This notice is given pursuant to the Federal Privacy Act. Texas Family Code, Section 231.006 requires a bid or an application for a contract, grant, or loan paid from State funds to include the name and social security number of the individual or sole proprietor and each partner, shareholder, or owner with an ownership interest of at least twenty-five percent (25%) of the business entity submitting the bid or application. The Social Security number(s) will be kept confidential and only disclosed in accordance with Texas Family Code, Section 231.302.

Jane A. Marquardt

Print Name

SSN

Print Name

SSN

Print Name

SSN

Print Name

SSN

The Offeror certifies that the individual or business entity named in this proposal is not ineligible to receive the specified Payments and acknowledges that any resultant Contract may be terminated and Payment may be withheld if this certification is inaccurate.

K.3 FRANCHISE TAX REPRESENTATION

The Offeror represents and certifies, as part of its proposal that it is not currently delinquent in the payment of any franchise tax owed the State of Texas.

K.4 TYPE OF BUSINESS ORGANIZATION

The Offeror, by checking the applicable box, represents that:

- A. It operates as ☒ a corporation incorporated under the laws of the State of Delaware, ☐ an individual, ☐ a partnership, ☐ a nonprofit organization or ☐ a joint venture; or
- B. If the Offeror is a foreign entity, it operates as ☐ an individual, ☐ a partnership, ☐ a nonprofit organization, ☐ a joint venture, or ☐ a corporation, registered for business in _____ (country).

K.5 PREFERENCE CLAIM

In accordance with Texas Administrative Code, Title 34, Part 1, Chapter 20, Subchapter D, Division 2, Rule 20.306, the Offeror shall check below if claiming a preference. If the appropriate line is not marked, a preference will not be granted unless other documents included in the proposal show a right to the preference.

K.5.1 Source and Specification Preferences

- ☐ Products of Persons with mental or physical disabilities.
- ☐ Products made of recycled, remanufactured, or environmentally sensitive materials including recycled steel.
- ☐ Energy efficient products.
- ☐ Rubberized asphalt paving material.
- ☐ Recycled motor oil and lubricants.

K.5.2 Tie-Bid Preferences

- ☐ Goods produced or offered by a Texas bidder that is owned by a Texas Resident Service-Disabled Veteran.*
- ☐ Goods produced in Texas or offered by a Texas bidder that is not owned by a Texas Resident Service-Disabled Veteran.*
- ☐ Agricultural products produced or grown in Texas.
- ☐ Agricultural products or services offered by Texas bidders.*
- ☐ Services offered by a Texas bidder that is owned by a Texas Resident Service-Disabled Veteran.*
- ☐ Services offered by a Texas bidder that is not owned by a Texas Resident Service-Disabled Veteran.*
- ☐ Texas vegetation native to the region.
- ☐ USA produced supplies, materials, equipment or agricultural products.

K.5.3 Additional Preferences

- ☐ Products produced at facilities located on formerly contaminated property.
- ☐ Products and services from economically depressed or blighted areas.
- ☐ Vendors that meet or exceed air quality standards.
- ☐ Recycled or reused computer equipment of other manufacturers.
- ☐ Foods of higher nutritional value (for consumption in a public cafeteria only).

*By signing this proposal, the Offeror certifies that if a Texas address is shown as the address of the Contractor, the Contractor qualifies as a Texas Resident Bidder as defined in Texas Government Code, Section 2155.444(c).

K.6 REPRESENTATIONS OF OFFEROR

The Offeror represents and warrants to and for the benefit of the Department, with the intent that the Department will rely thereon for the purposes of entering into this Contract, as follows:

K.6.1 Organization and Qualification

If the Offeror operates as a corporation incorporated under the laws of any state outside Texas, it is duly qualified to do business as a foreign corporation in good standing in Texas.

K.6.2 Authorization

This Contract has been duly authorized, executed and delivered by the Offeror and, assuming due execution and delivery by the Department, constitutes a legal, valid and binding agreement enforceable against the Offeror in accordance with its terms.

K.6.3 No Violation of Agreements, Articles of Incorporation or Bylaws

The consummation of the transactions contemplated by this Contract and the fulfillment of the terms hereof will not conflict with, or result in a breach of any of the terms and provisions of, or constitute a default under any indenture, mortgage, deed of trust, lease, loan agreement, license, security agreement, contract, governmental license or permit or other agreement or instrument to which the Offeror is a party or by which its properties are bound, or any order, rule or regulation of any court or any regulatory body, administrative agency or other governmental body applicable to the Offeror or any of its properties, except any such conflict, breach, or default which would not materially and adversely affect the Offeror's ability to perform its obligations under this Contract, and will not conflict with, or result in a breach of any of the terms and provisions of, or constitute a default under, the Articles of Incorporation (or other corresponding charter document) or Bylaws of the Offeror.

K.6.4 No Defaults under Agreements

The Offeror is not in default, nor is there any event in existence which, with notice or the passage of time or both, would constitute a default by the Offeror under any indenture, mortgage, deed of trust, lease, loan agreement, license, security agreement, contract, governmental license or permit or other agreement or instrument to which it is a party or by which any of its properties are bound and which default would materially and adversely affect the Offeror's ability to perform its obligations under this Contract.

K.6.5 Compliance with Laws

Neither the Offeror nor its officers and directors purporting to act on its behalf have been advised or have reason to believe that the Offeror or such officers and directors have not been conducting business in compliance with all applicable laws, rules and regulations of the jurisdictions in which the Offeror is conducting business, including all safety laws and laws with respect to discrimination in hiring, promotion or pay of employees or other laws affecting employees generally, except where failure to be in compliance would not materially and adversely affect the Offeror's ability to perform its obligations under this Contract.

K.6.6 No Litigation

- A. The Offeror certifies that there is not now pending, or to its knowledge threatened, any action, suit or proceeding to which the Offeror, or any of its employees, are a party, before or by any court or governmental agency or body, which may result in any material adverse change in the Offeror's ability to perform its obligations under this Contract, or any such action, suit or proceeding related to environmental or civil rights matters.
- B. The Offeror further certifies that no labor disturbance by the employees of the Offeror exists or is imminent which may be expected to materially and adversely affect the Offeror's ability to perform its obligations under this Contract.
- C. Prior to the Department making an award of this Contract, the Department may require Offerors being considered for the award to recertify the representations set forth above. The Department, in its sole discretion, may disqualify any Offeror that in the opinion of the Department is a party, or who has any employees that are a party, to any action, suit or proceeding that may result in any material adverse change in the Offeror's ability to perform its obligations under this Contract.

- D. During the term of this Contract, to include extensions hereof, the Offeror shall notify the Department in writing within five (5) Days of the Offeror having received knowledge of any actions, suits or proceedings filed against the Offeror, or any of its employees, or to which the Offeror, or any of its employees, are a party, before or by any court or governmental agency or body, which:
1. May result in any material adverse change in the Offeror's ability to perform its obligations under this Contract;
 2. Filed in any federal court, state court, or federal or state administrative hearing within the State of Texas regardless as to any anticipated material adverse change in the Offeror's ability to perform its obligations under this Contract; and
 3. Is brought by or on behalf of a State of Texas Offender regardless as to any anticipated material adverse change in Offeror's ability to perform its obligations under this Contract.
- E. The Contractor shall provide in writing, to the Contract Specialist, a quarterly report listing litigation identified in the above requirements.

K.6.7 Taxes

- A. The Offeror has filed all necessary federal, state and foreign income and franchise tax returns and has paid all taxes as shown to be due thereon.
- B. The Offeror has no knowledge of any tax deficiency which has been or might be asserted against it and which would materially and adversely affect the Offeror's ability to perform its obligations under this Contract.
- C. The Contractor represents and warrants that it shall pay all taxes or similar amounts resulting from this Contract, including, but not limited to, any federal, state, or local income, sales or excise taxes of the Contractor or its employees.

K.6.8 Financial Statements

- A. The Offeror has delivered to the Department a copy of its most recent audited financial report. This report must include, as a minimum the following financial information:
1. Audited balance sheet;
 2. Statement of income; and
 3. Any changes in financial position of the company.
- B. This statement fairly presents the financial position of the Offeror at the date shown and the results of its operations for the period covered, and has been prepared in conformity with GAAP applied on a consistent basis, except as discussed in the notes to the financial statement.

K.6.9 No Adverse Change

Since the date of the Offeror's most recent balance sheet provided to the Department, there has not been any material adverse change in its business or condition nor has there been any change in the assets or liabilities or financial condition of the Offeror from that reflected in such

balance sheet which is material to the Offeror's ability to perform its obligations under this Contract.

K.6.10 Disclosure

There is no material fact which materially and adversely affects or in the future will (so far as the Offeror can now reasonably foresee) materially and adversely affect its ability to perform its obligations under this Contract which has not been accurately set forth in this Contract or otherwise accurately disclosed in writing to the Department by the Offeror prior to the date hereof.

K.6.11 No Collusion

- A. The Offeror represents and certifies its employees, agents and representatives have not and shall not discuss or disclose the terms of their proposal and its submission or response thereto with any third party other than Persons or entities, which the Offeror engaged to assist it with respect to such response or submission.
- B. Neither the Offeror nor the firm, corporation, partnership, or institution represented by the Offeror, or anyone acting for such firm, corporation or institution has violated the antitrust laws of this state, federal antitrust laws, nor communicated directly or indirectly the offer made to any competitor or any other Person engaged in such line of business.

K.6.12 Ethics

K.6.12.1 Conflict of Interest

Pursuant to Texas Government Code, Section 572.051, any individual who interacts with public purchasers in any capacity is required to adhere to the guidelines established. Texas Government Code, Section 572.051, outlines the ethical standards required of State officers and employees who interact with public purchasers in the conduct of State business.

Specifically, a Department employee may not have an interest in, or in any manner be connected with a contract or proposal for a purchase of goods or services by an agency of the State; or in any manner, including by rebate or gift, accept or receive from a Person to whom a contract may be awarded, directly or indirectly, anything of value or a promise, obligation, or contract for future reward or compensation. Entities who are interested in seeking business opportunities with the State must be mindful of these restrictions when interacting with public purchasers of the Department or purchasers of other State Agencies.

K.6.12.2 Disclosure of Interested Parties

In accordance with Texas Government Code, Section 2252.908, a governmental entity or State Agency may not enter into a contract valued at \$1,000,000.00 or greater with a business entity unless the business entity, in accordance with Texas Administrative Code, Title 1, Part 2, Chapter 46, Rules 46.1, 46.3 and 46.5, submits a disclosure of interested parties to the governmental entity or State Agency at the time the business entity submits the signed Contract to the governmental entity or State Agency.

The disclosure of interested parties must be submitted on a form, and in a manner, prescribed by the Texas Ethics Commission. The Disclosure of Interested Parties Form (Form 1295) and instructions may be found at: https://www.ethics.state.tx.us/whatsnew/elf_info_form1295.htm.

K.6.12.3 No Gratuities

The Offeror represents that it has not given, offered to give, nor intends to give at any time hereafter, any economic opportunity, future employment, gift, loan, gratuity, special discount, trip, favor, or service to a public servant in connection with the submitted proposal.

K.6.13 No Compensation

Pursuant to Texas Government Code, Section 2155.004, the Offeror has not received compensation for participation in the preparation of the specifications for this proposal. Under Texas Government Code, Section 2155.004, the Offeror certifies that the individual or business entity named in this proposal or Contract is not ineligible to receive the specified Contract and acknowledges that this Contract may be terminated and Payment withheld if this certification is inaccurate.

K.6.14 Contracting with Executive Head of State Agency

- A. The Offeror represents and certifies that they are in compliance with Texas Government Code, Section 669.003, relating to contracting with the executive head of a State Agency.
- B. If Texas Government Code, Section 669.003 applies, the Offeror shall complete the following information in order for the proposal to be evaluated:

Name of Former Executive: _____

Name of State Agency: _____

Date of Separation from State Agency: _____

Date of Employment with Offeror: _____

K.6.15 Limitation on Employment of Former State Officers

The Offeror represents that they are in compliance with Texas Government Code, Section 572.069 relating to employment of a former State officer or employee. A former State officer or employee of the Department who during the period of state service or employment participated on behalf of the Department on a procurement or contract negotiation involving a business entity may not accept employment from that business entity before the second anniversary of the date the Contract is signed or the procurement is terminated or withdrawn.

K.6.16 Notification

If any of the information provided in the above representations changes during the term of this Contract, the Contractor shall submit an updated representation as soon as is reasonably possible.

K.6.17 Suspension, Debarment and Terrorism

The Department is federally mandated to adhere to the directions provided in the President's Executive Order (EO) 13224, Executive Order Blocking Property and Prohibiting Transactions With Persons Who Commit, Threaten to Commit, or Support Terrorism, effective 9/24/2001 and any subsequent changes made to it via cross referencing respondents/vendors with the Federal General Services Administration's System for Award Management (SAM),

<https://www.sam.gov>, which is inclusive of the United States Treasury's Office of Foreign Assets Control (OFAC) Specially Designated National (SDN) list.

K.6.18 Prohibition of a State Agency Contracting With Companies that Boycott Israel

The Contractor certifies that they are in compliance with Texas Government Code, Chapter 2270 relating to the prohibition of a State Agency contracting with companies that boycott Israel or boycotts Israel during the term of the Contract. The Contractor certifies that the individual or business entity named in this proposal or Contract is not ineligible to receive the specified Contract and acknowledges that this Contract may be terminated and Payment withheld if this certification is inaccurate.

K.6.19 Prohibition of a State Agency Contracting With Companies Engaged in Business with Iran, Sudan, or Foreign Terrorist Organizations

The Contractor certifies that they are in compliance with Texas Government Code, Chapter 2252.152 relating to the prohibition of a State Agency contracting with companies that are engaged in business with Iran, Sudan, or foreign terrorist organizations. The Contractor certifies that the individual or business entity named in this proposal or Contract is not ineligible to receive the specified Contract and acknowledges that this Contract may be terminated and Payment withheld if this certification is inaccurate.

K.6.20 Violation of Federal Law Relating To Reconstruction Efforts As A Result Of Hurricanes Rita, Katrina or Any Other Disaster after September 24, 2005

Pursuant to Texas Government Code, Section 2261.053, a State Agency may not accept a proposal or award a contract, including a contract for which purchasing authority is delegated to a State Agency, that includes proposed financial participation by a Person who, during the five (5) year period preceding the date of the proposal or award, has been convicted of violating a federal law or assessed a penalty in a federal, civil or administrative enforcement action in connection with a contract awarded by the federal government for relief, recovery, or reconstruction efforts as a result of Hurricane Rita, Katrina or any other disaster occurring after September 24, 2005. Under Texas Government Code, Section 2261.053, the Contractor certifies that the individual or business entity named in this proposal or Contract is not ineligible to receive the specified Contract and acknowledges that this Contract may be terminated and Payment withheld if this certification is inaccurate.

K.6.21 Deceptive Trade Practices; Unfair Business Practices

The Contractor represents and warrants that it has not been the subject of allegations of Deceptive Trade Practices violations under Texas Business and Commerce Code, Chapter 17, or allegations of any unfair business practice in any administrative hearing or court suit and that the Contractor has not been found to be liable for such practices in such proceedings. The Contractor certifies that it has no officers who have served as officers of other entities who have been the subject of allegations of Deceptive Trade Practice violations or allegations of any unfair business practices in an administrative hearing or court suit and that such officers have not been found to be liable for such practices in such proceedings.

K.7 REPRESENTATIONS OF THE DEPARTMENT

The Department represents and warrants to and for the benefit of the Offeror with the intent that the Offeror will rely thereon for the purposes of entering into this Contract as follows:

K.7.1 Authorization

The Department has the requisite power to enter into this Contract and perform its obligations hereunder and by proper action has duly authorized the execution, delivery and performance hereof.

K.7.2 No Violation of Agreements

The consummation of the transactions contemplated by this Contract and the fulfillment of the terms hereof will not conflict with, or result in a breach of any of the terms and provisions of, or constitute a default under any indenture, mortgage, deed of trust, lease, loan agreement, security agreement, contract or other agreement or instrument to which the Department is a party or by which its properties are bound, or any order, rule or regulation of any court or any regulatory body, administrative agency or other governmental body applicable to the Department or any of its properties, except any such conflict, breach or default which would not materially and adversely affect the Department's ability to perform its obligations under this Contract.

K.7.3 Disclosure

There is no material fact which materially and adversely affects or in the future will (so far as the Department can now reasonably foresee) materially and adversely affect its ability to perform its obligations under this Contract or which might require changes in or additions to the Services required under this Contract that would increase the cost to the Offeror of providing such Services, which has not been accurately set forth in this Contract or otherwise accurately disclosed in writing to the Offeror by the Department prior to the date hereof.

K.8 AUTHORIZED NEGOTIATORS

The Offeror represents that the following Persons are authorized to negotiate on its behalf with the Department in connection with this Request for Proposal (RFP): (list names, titles and telephone numbers of the authorized negotiators).

Scott Marquardt, President – (801) 693-2800

Bernie Warner, SR. VP. Corrections – (801) 693-2850

Michael Bell, Vice President, Corrections Region III – (801) 693-2967

Sergio Molina, Sr. VP, Business Development & Administration – (801) 693-2804

K.9 PAYEE IDENTIFICATION NUMBER

The Payee Identification Number is the taxpayer number assigned and used by the Comptroller of Public Accounts of Texas. The Offeror shall provide its Payee Identification Number in the space provided below. If this number is not known, the Offeror shall provide the Federal Taxpayer Identification Number.

Payee Identification Number: _____ or

Federal Taxpayer Identification Number: 87-0365322

K.10 POINT OF CONTACT

The Offeror shall provide the name, title, phone number, fax number, address and e-mail address of a point of contact for questions concerning the submitted proposal.

Name: Scott Marquardt Title: President

Phone Number: (801) 693-2800 Fax Number: (801) 693-2900

Street Address: 500 N. Marketplace Drive

City: Centerville State: Utah Zip Code: 84014

E-mail Address: Marquardt@mtctrains.com

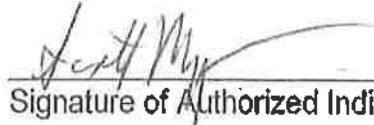
K.11 CERTIFICATION

To be completed by the Offeror: (The Offeror must check or complete all appropriate boxes or blanks in the Representations and Certifications, on the preceding pages). The Representations and Certifications must be executed below by an individual authorized to bind the Offeror.

The Offeror makes the foregoing Representations and Certifications as part of its proposal.

Management & Training Corporation
Name of Offeror

696-PF-16-P026
Solicitation No.


Signature of Authorized Individual

April 20, 2017
Date

Scott Marquardt
Typed Name of Authorized Individual

Note: The penalty for making false statements shall void the submitted proposal or any resulting Contracts, and the Offeror shall be removed from all bid lists.

CONTRACT APPENDIX

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Exhibit A-2



Management
& Training
Corporation

A Leader in Social Impact

Standard Operating Practices

Gist State Jail

Management & Training Corporation

STANDARD OPERATING PRACTICES

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STANDARD OPERATING PRACTICES

Policy #: 906ASI

Title: Addiction Severity Index

Effective Date: December 2018

Revision:

Reference(s): Contract: C.3.3 Assessment (p.20); SJSAPOM 02.03, 02.04, 02.05, 02.07; 03.01; TDSHS 448.803

Applicability: Gist – State Jail Substance Abuse Program (SJSAP)

Purpose: Gist – State Jail Substance Abuse Program (SJSAP) shall assess the client utilizing the Addiction Severity Index (ASI) within five (5) working days from the date of entry. The ASI identifies problems areas that shall be address during treatment.

Procedures:

- A. The assessment data shall be collected during a confidential interview between the client and the counseling staff or Qualified Credential Counselor (QCC).
- B. The Program Director (PD) or designee shall review and sign the assessment after completion and forward to Primary Counselor (PC).
- C. The Addiction Severity Index (ASI) shall be used to assess the seven dimensions: medical status, education and employment, alcohol use, drug use, legal status, family/social status, and psychiatric status. The assessment provides the basis for the Individualized Treatment Plan (ITP) that shall address the client's problems, needs and strengths as identified by the ASI. If the ASI identifies a potential mental health problem, the client shall receive a referral to Texas Department of Criminal Justice (TDCJ) Mental Health Provider. The ASI shall elicit enough information about the client's past and present status to provide a thorough understanding in the following areas:
 - 1. Presenting problems resulting in admission;
 - 2. Medical history and current health status;
 - 3. Education and vocational training/employment history;
 - 4. Drug Use and Alcohol;
 - 5. Legal Problems;
 - 6. Relationship with family members;
 - 7. Social and leisure activities;
 - 8. Psychological/emotional functioning;

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9. Psychiatric and chemical dependency treatment;
 10. Strengths and limitations; and
 11. Identified needs and recommendation.
- D. The following shall be identified:
1. The interviewer must understand the intent of the question.
 2. Questions asked during an assessment should be relevant to generating ITP.
 3. Answers must be documented including a comment when appropriate.
 4. The client's strength and weakness must be described and documented in the assessment.
- E. A severity rating on the ASI indicates the need for treatment for that specific dimension. If the assessment scores do not indicate a need for treatment, the counselor shall consult with the Program Director (PD) to determine if further assessment is necessary. If additional measures do not find the client appropriate for the program, the PD or designee shall contact the Rehabilitation Programs Division (RPD) Director of Intensive Services to make arrangements for transportation of the client.
- F. The ASI shall result in a comprehensive diagnostic impression which shall include all Diagnostic Statistical Manual (DSM).
- G. The Severity Index in the Assessment, a problem/goal shall be developed on the client's ITP. The counselor and the client shall work together to generate and implement this individualized and written treatment plan. The ITP must be provided within ten (10) days to the client.
- H. The counseling staff shall enter the appropriate assessment code in the first column on the Substance Abuse Master Plan Management System (SAMPIMS) tracking sheet with the date of assessment completion. The assessment completion date shall be entered by the clerical staff into the TDCJ Mainframe within three (3) days of completion of the ASI.
- I. Signatures and dates shall be completed by the PD or a QCC, if applicable.



Brandi Hornsby, Director, Programs
Region III Corrections



Michael Bell, Regional Vice President
Region III Corrections

REVIEWED AND APPROVED

BY: 

DATE: 2-7-19

Management & Training Corporation

STANDARD OPERATING PRACTICES

Policy #: 906AFRR

Title: Archive Files and Record Retention

Effective Date: December 2018

Revision:

Reference(s): Contract C.10 Offender Records (p.29); SJSAPOM 02.07-VII; TDSHS 448.508

Applicability: Gist – State Jail Substance Abuse Program (SJSAP)

Purpose: Gist – State Jail Substance Abuse Program (SJSAP) Client's Treatment Records (CTR) shall be archived and stored for a period of at least seven (7) years.

Procedures:

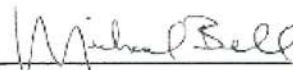
- A. The Discharge Roster shall be updated and provided daily to the Primary Counselors (PC) in order that the Client Treatment Record (CTR) is archived in a timely manner.
- B. The PC shall have the CTR ready to be archived within two (2) working days of the Client's discharge.
 - 1. Documents shall be filed in the CTR, and signed by the PC. Documentation, with the exception of the Weekly Progress Note (WPN), requires the signature of the Qualified Credentialed Counselor (QCC), if the PC is a Counselor Intern (CI), or Certified Criminal Justice Addiction Professional – Applicant (CCJP-A).
 - 2. Treatment Plans (TP) shall be closed with a Date of Discharge (DOD).
 - 3. Documents in the file shall be reviewed and placed in order according to the Chart Organization.
- C. The Program Director (PD), and/or QCC shall review the Client's discharged CTR, and if needed, return to the PC within two (2) working days for corrections.
- D. The PC shall have three (3) working days to make appropriate corrections before re-submitting the discharged CTR to the Program Director (PD) or designee for final review.
 - 1. The Substance Abuse Master Plan Information Management System (SAMPIMS) shall be completed by writing the discharge code and date in the removal box. The PC shall sign and date the final entry.

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2. A Clinician Note (CN) shall be placed in the CTR indicating completion of the program, DOD, and location of release.
- E. The PD or designee shall review the CTR to ensure it is complete within two (2) working days and approve the record for archive. The Program Director (PD) or designee shall review the Treatment History Screen on the SAMPIMS to ensure that the appropriate discharge code has been entered by clerical or designated staff.
- F. The CTR shall be transferred from the original compartmentalized chart to a manila folder. Chart Organization shall be maintained, and they shall be labeled in the same format as the original chart, with the addition of the destroy date (the month of January following seven (7) years).
- G. Stored CTRs shall be locked in filing cabinets located within the Substance Abuse Treatment Program (SATP). Quarterly, the CTRs shall be removed from the Records Room for more permanent storage. The CTRs shall then be placed in storage boxes and filed alphabetically by calendar year. The boxes shall be labeled and referenced to an inventory sheet that shall be kept by the unit's Office Manager or designee.
- H. Anytime an archived CTR is removed from the filing cabinet, a sign-out-card shall be utilized.
- I. Stored CTRs are to be maintained on file for a period of at least seven (7) years after the completion of the program.
- J. The Monthly Status Reports shall be retained on file for three (3) years.
- K. The Direct/In-Direct Attendance Rosters shall be retained on file for a period of at least six (6) years.



Brandi Hornsby, Director, Programs
Region III Corrections



Michael Bell, Regional Vice President
Region III Corrections

REVIEWED AND APPROVED

BY:

DATE:

2-7-19

Management & Training Corporation

STANDARD OPERATING PRACTICES

Policy #: 906AP

Title: Audit Process

Effective Date: December 2018

Revision:

Reference(s): Contract: C.20 (a 1-2) Program Evaluation (Quality Assurance) and Self-Monitoring (p33); SJSAPOM 02.07

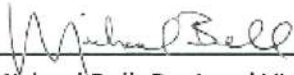
Applicability: Gist – State Jail Substance Abuse Program (SJSAP)

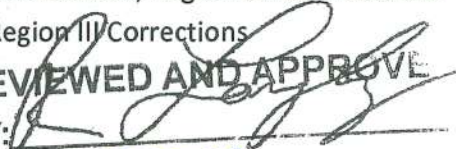
Purpose: Gist – State Jail Substance Abuse Program (SJSAP) shall audit Client Treatment Records (CTR) to meet performance measures and goals.

Procedures:

- A.** Fifty percent (50%) of active Client Treatment Records (CTR) shall be audited monthly by the Program Director (PD), Licensed Chemical Dependency Counselor (LCDC)/Certified Criminal Justice Addictions Professional (CCJP) or QCC Qualified Credentialed Counselor (QCC).
1. The Clinical Documentation Audit Form shall be utilized to determine compliance.
 2. A copy of the completed Clinical Documentation Audit Form shall be given to the Primary Counselor (PC).
 3. The PC shall have three (3) working days to complete any deficiencies in the CTR.
 4. The PC shall meet with the auditor and sign the Clinical Documentation Audit Form attesting that the deficiencies were corrected.
- B.** Discharged CTR shall be audited by PD, LCDC/CCJP, or QCC.
- C.** Copies of the Clinical Documentation Audit Form shall be retained by the PD or designee.


Brandi Hornsby, Director, Programs
Region III Corrections


Michael Bell, Regional Vice President
Region III Corrections

REVIEWED AND APPROVE
BY: 
DATE: 2.7.19

Management & Training Corporation

STANDARD OPERATING PRACTICES

Policy #: 906CS

Title: Caseload Sheets

Effective Date: December 2018

Revision:

Reference(s): Contract: C.7 Counselor/Offender Caseload; SJSAPOM
02.08

Applicability: Gist – State Jail Substance Abuse Program (SJSAP)

Purpose: Gist – State Jail Substance Abuse
Program (SJSAP) counselors shall maintain a monthly caseload sheet that
does not exceed the ratio 1:25.

Procedures:

- A. The Primary Counselor (PC) shall maintain an accurate account of the clients assigned to their caseload utilizing a caseload sheet. The counselor-to-client ratio shall be maintained at 1:25.
- B. Client shall be listed by Date of Entry, Last Name First, Full First Name, Texas Department of Criminal Justice number, Assessment Date, and Tier designation.
- C. The PC shall note the number of clients enrolled in programming as of every Friday of each week of the month.
- D. The PC shall receive a daily admissions and discharges sheet from the Office Manager daily with updates of arrivals, departures, and interruption of services (IOS). The PC shall check the caseload sheet to verify the listed clients correspond with the caseload received from the Office Manager. In the event of a discrepancy, the PC is responsible for communicating with the Office Manager to check and verify the list is correct. The caseload sheet shall be used as source documentation for monthly reports and shall be maintained by the Program Director or designee.



Brandi Hornsby, Director Programs
Region III Corrections



Michael Bell, Regional Vice President
Region III Corrections

Management & Training Corporation

STANDARD OPERATING PRACTICES

Policy #: 906CO

Title: Client Orientation

EFFECTIVE DATE: December 2018

Revision:

Reference(s): Contract: C.3.1 Specific Duties and Obligations (p.18); C.4 Intake Requirement (p.21); SJSAPOM 02.01,02.07

Applicability: Gist – State Jail Substance Abuse Program (SJSAP)

Purpose: Gist – State Jail Substance Abuse Program (SJSAP) shall implement a process by which clients are explained the policies and expectation of the program.


Procedure:

A. The Clinical Staff shall meet with the clients for Intake.

B. The client shall be informed of the following:

1. The program schedule and expectations;
2. The client will be informed of the Individual Treatment Plan (ITP) within ten (10) working days from the day of entry;
3. The limits of services provided;
4. The Treatment Grievance Procedures;
5. The Treatment Disciplinary Procedures;
6. Human Immunodeficiency Virus (HIV) Acquired Immune Deficiency Syndrome (AIDS) Education/Training;
7. The program philosophy, objectives, and disciplinary measures;
8. The opportunities for family involvement; and
9. Provide the Client with an Orientation Manual


Brandi Hornsby, Director Programs
Region III Corrections


Michael Bell, Regional Vice President
Region III Corrections

Management & Training Corporation

STANDARD OPERATING PRACTICES

Policy #: 906CPG

Title: Client Participation in Groups

Effective Date: December 2018

Revision:

Reference(s): Contract: C.3.1 Specific Duties and Obligations (p. 18); C.3.2 Treatment Frequency Guidelines (p.20); C.3.4 Recovery Oriented Support Groups (p. 21); C.10 Offender Records (p.29); SJSAPOM 02.01, 02.09

Applicability: Gist – State Jail Substance Abuse Program (SJSAP)

Purpose: Gist – State Jail Substance Abuse Program (SJSAP) shall facilitate Direct and In-Direct groups.

Procedures:

A. Clients enrolled in the program shall participate in the following groups:

1. Process Groups – provide client with opportunity to express emotions, gain insight into their behavior and that of other clients; relate to other clients' experience and situations; receive healing affirmation from peers and staff; model appropriate groups behavior and exhibit leadership. Process groups shall not exceed 1:25 ratio.
2. Direct Groups – which encourage personal growth, provide work-related skills training and teach the group process. Educational groups shall not exceed a Client-to-Counselor ratio of 30:1.
3. In-Direct Groups – shall strongly encourage clients to participate in meditation, personal improvement, recovery oriented support group, and Alternative Treatment.
4. Recovery Support Services (RSSs) – Client participating in RSSs shall receive a minimum of ten (10) hours, but not exceed a maximum of 20 hours, peer recovery training hours in the domains of Advocacy, Mentoring/Education and Recovery Support prior to program completion.

B. Groups shall be documented on Attendance Rosters and Weekly Progress Notes (WPN).

C. The Attendance Roster shall be kept on file for a period of seven (7) years.

Client Participation in Groups

REVIEWED AND APPROVED


BY: 

DATE: 2-7-19


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Brandi Hornsby, Director Programs
Region III Corrections



Michael Bell, Regional Vice President
Region III Corrections

REVIEWED AND APPROVED
BY: 
DATE: 2-7-79

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STANDARD OPERATING PRACTICES

Policy #: 906CTR

Title: Client Treatment Record

Effective Date: December 2018

Revision: N/A

Reference(s): Contract: C.10 Offender Records (p.28); SJSAPOM 01.07, 02.07; TDSHS 448.508

Applicability: Gist – State Jail Substance Abuse Program (SJSAP)

Purpose: Gist – State Jail Substance Abuse Program (SJSAP) shall establish procedures for maintaining the Client Treatment Record (CTR).

Procedures:

- A.** Client Treatment Record (CTR) shall be created no later than twenty-four (24) hours from a client's date of entry (DOE) into the program. The CTR shall be labeled with the following information:
1. Client's name;
 2. Client's Texas Department of Criminal Justice (TDCJ) Number;
 3. State Identification number (SID);
 4. Client's DOE into the program; and
 5. Client's Projected Release Date (PRD);
- B.** Documents to be maintained in the CTR are:
1. CTR Document Checklist;
 2. CTR Review Log;
 3. Consent for Release for Substance Abuse Treatment (SAT) Information and Records – Criminal Justice System;
 4. General Consent for Disclosure of SAT Information and Records (if applicable);
 5. Addiction Severity Index (ASI);
 6. Individualized Treatment Plan (ITP);
 7. Treatment Plan Reviews (TPR);
 8. Human Immunodeficiency Virus (HIV) Education Acknowledgement of Receipt;
 9. Weekly Progress Notes (WPN);
 10. Individual Progress Note (IPN)/Clinician Note (CN);
 11. Intake Note

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12. Sanctions
 13. Substance Abuse Master Plan Information Management System (SAMPIMS) Tracking Sheet;
 14. Program Removal Request (if applicable);
 15. Client Health Status form (if applicable);
 16. Individual Progress Summary
 17. Any legal information or other appropriate miscellaneous documentation;
 18. Discharge Summary;
 19. Relapse Prevention Plan;
 20. HSN-05 Uniform Health Status Update;
 21. HSM-04 Report of Physical (if applicable);
 22. HSM-18 Health Summary for Classification;
 23. Treatment Separation (attachment A and B), if applicable;
 24. Interruption of Service, if applicable;
 25. Program Completion Certificate.
- C. Documents not designated for placement in the CTR shall not be filed in the record (i.e. client homework).
- D. CTR shall be locked in a file cabinet located in a locked room accessible to authorized staff.
- E. A sign-out card shall be utilized and inserted in the file drawer.
- F. CTRs shall be retained on file for a period of seven (7) years after the client has been released from the facility.



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BY: 

DATE: 2-7-19

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STANDARD OPERATING PRACTICES

| | |
|------------------------|---|
| Policy #: | 906CI |
| Title: | Confidential Information |
| Effective Date: | December 2018 |
| Revision: | |
| Reference(s): | C.10 Offender Records (p.29); Contract: C.12 Offender Monitoring (p.30); TDSHS 448.210; 448.802 |
| Applicability: | Gist – State Jail Substance Abuse Program (SJSAP) |
| Purpose: | Gist – State Jail Substance Abuse Program (SJSAP) staff may disclose confidential information only as permitted by law or with a client's written authorization. As mandated by licensure standards, HIPAA Privacy Act, and state and federal statutes (CFR 42 pt.2). |

Procedure:

Clients participating in the Management & Training Corporation – State Jail Substance Abuse Program (SJSAP):

- A. Program will be asked to sign the Consent Form (attachment A and B), Consent for Release of Substance Abuse Treatment Information and Records-Public Information Act Manual Chapter 1.06. A client will not be forced to sign the Consent Form (attachment A and B). If a client refuses to sign, staff shall document the refusal on the Consent Form (attachment A and B). Staff shall sign and date the refusal, and the form shall be filed in the client's treatment file and retained for seven (7) years. Treatment staff shall ensure that the client has received the Confidentiality of Substance Abuse Treatment Patient Records document (Attachment C) prior to signing Attachment A and B. A copy of the Confidentiality of Substance Abuse Treatment Patient Records document (Attachment C) shall be maintained in the client file.
 1. The "or" in the Consent Form (Attachment B) refers to a condition or event that nullifies the client's consent. One (1) of the three (3) following conditions will terminate consent: a date, a condition, or an event.
 2. The client should select one (1) of the three (3) conditions for termination of consent.

A condition or event upon which consent is terminated include release from the Management & Training Corporation – State Jail Substance Abuse Program (SJSAP) discharge from Community Supervision, precluding medical condition, or a CPS Investigation.

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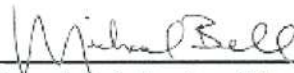
- B. Client participation in substance abuse treatment shall be recorded in the Substance Abuse Master Plan Information Management System (SAMPIMS) as appropriate. An client's refusal to sign the Consent Form (Attachments A and B) does not prohibit the documentation of internal records, such as, SAMPIMS, TP00, and client treatment files. When a client refuses to sign the Consent Form (Attachment A and B), appropriate staff, designated by the Program Director shall enter an "N" in SAMPIMS to indicate that no consent was signed.
- C. The restriction on the disclosure of information does not apply to communications of information between or among personnel having a need for the information in connection with their duties that arise out of the provision of diagnosis, treatment, or referral for treatment of substance abuse if the communications are within the TDCJ, between the treatment provider and the TDCJ, or from the TDCJ to the Governor, or members of the Texas Board of Criminal Justice. It shall be noted that the SAMPIMS and TP00 entries of client participation can be made without a signed Consent Form.
- D. Client substance abuse treatment information cannot be released to other state agencies or Law Enforcement authorities without a Consent Form or appropriate court order.
- E. The Substance Abuse Treatment Program (SATP) Administration – Public Information Coordinator shall be responsible for coordinating any Public Information request concerning client substance abuse treatment information.
- F. The required consent forms (Attachment A, B, and C) will be completed during the initial interview with the designated clinical staff.
- G. Clients may complete these forms with staff assistance and direction. Staff will explain the forms in the client's primary language to ensure understanding.
- H. Each item on the General Consent for Disclosure of Substance Abuse Treatment Information and Records must be initialed by the client to indicate understanding that this item will be disclosed to the identified person/organization.
- I. Clinical staff will explain to the client that no information can be released without his written consent, which acknowledges the purpose and defines to whom the information may be released.
- J. Clinical staff must ensure that the disclosure/consent is completely filled out with the client's signature and date. A single line will be drawn through any blanks on the form.

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- K. Clinical staff will explain to clients they may withdraw the General Consent at any time. It may be revoked by drawing a single line through the consent page, writing "revoked", then signed, and dated by the counselor and client.
- L. The Program Director (PD) or Qualified Credentialed Counselor (QCC) will review and approve consent from after completion to ensure accuracy.



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STANDARD OPERATING PRACTICES

Policy #: 906CS

Title: Compliance Standards

Effective Date: December 2018

Revision:

Reference(s): Contract C.21 Compliance Standards (p.34); SJSAPOM 02.02, 02.04, 02.05, 02.06, 02.07

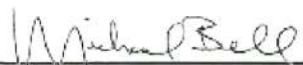
Applicability: Gist – State Jail Substance Abuse Program (SJSAP)

Purpose: Gist – State Jail Substance Abuse Program (SJSAP) shall ensure that compliance standards are maintained in an acceptable manner.

Procedures:

- A. Program Director (PD), or designee shall be responsible for self-monitoring of the program. The information received shall be utilized for Self-Monitoring and Quarterly Corporate Self-Monitoring, utilizing comprehensive evaluations to meet compliance standards.
- B. Programs will meet acceptable measures as outline the J.3 Exhibits.


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STANDARD OPERATING PRACTICES

Policy #: 906CE

Title: Continuing Education

Effective Date: December 2018

Revision:

Reference(s): Contract: C.16 DSHS Registration and Counseling Staff Licensure; SJAPOM 01.02; 01.03; TDSHS 140.418; 448.603

Applicability: Gist – State Jail Substance Abuse Program (SJSAP)

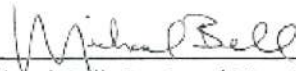
Purpose: Gist - State Jail Substance Abuse Program (SJSAP) shall ensure annual trainings shall be conducted in order to receive the continuing education hours (CEH) for the renewal of licensure every two years.

Procedures:

- A. Upon completion of each required and TDCJ PFCMOD approved annual training, the Program Director (PD) shall review the training roster to determine which staff members were not present.
- B. Staff members shall be required to "make up" a missed training upon returning to work within a two (2) week time frame or at the discretion of the Program Director.
- C. Staff members shall bring a copy of their training certificate to the PD upon receipt.



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STANDARD OPERATING PRACTICES

Policy #: 906DOR

Title: Destruction of Client Records

Effective Date: December 2018

Revision:

Reference(s): Contract: C. 10 Offender Records (p. 28); SJSAPOM 02.07

Applicability: Gist – State Jail Substance Abuse Program (SJSAP)

Purpose: Gist – State Jail Substance Abuse Program (SJSAP) Client clinical records shall be reviewed, closed and stored for a period of seven (7) years, after which time they shall be destroyed.

Procedures:

1. The Program Director shall ensure that all Official Records that have exceeded the retention date are destroyed.
2. The month of January shall be the official month that all appropriate records are destroyed. All records that have exceeded the retention date shall be destroyed on the following January.
3. Shredding the records is the acceptable method of destruction. The *Records Disposition Log* (TDCJ Administrative Directive – 02.09) **must** be completed and returned to the Records Management Officer – Executive Services through the Administrative Information Coordinator – SATP Administration for all records that are destroyed. If there are any questions, please contact the Administrative Information Coordinator.


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BY: 
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STANDARD OPERATING PRACTICES

Policy #: 906DS

Title: Discharge Summary

Effective Date: December 2018

Revision:

Reference(s): Contract: Reentry Services C.8 (p.27); C.10 Offender Records (p.28); SJSAPOM 02.07, 04.01

Applicability: Gist – State Jail Substance Abuse Program (SJSAP)

Purpose: Gist - State Jail Substance Abuse Program (SJSAP) shall complete a discharge summary for each client.


Procedures:

- A. The Primary Counselor (PC) shall complete a Discharge Summary (DS) for each client within 30 days prior to projected release date (PRD). The DS shall include: (1) dates of admission and discharge; (2) needs and problems identified at the time of admission, during treatment, and at discharge; (3) services provided; (4) assessment of the client's progress toward goals; (5) reason for discharge; and (6) referrals and recommendations, including arrangements for after care.
- B. The needs and problems at admission; during treatment; and at discharge shall be based on initial assessment and monthly treatment plan reviews (TPR) and Individual Counseling Sessions (ICS).
- C. The services provided shall include any groups or classes the substance abuse program offers during the treatment program, e.g. chemical dependency education, relapse prevention, cognitive intervention, life skills, process group, individual counseling, family education, anger management, GED classes and HIV/STD /HEP-C education. The client shall receive all appropriate services for supportive residential treatment.
- D. An assessment of client's progress toward goals shall be provided by the PC with information from client's Weekly Progress Notes (WPN), ICS, ITPR, Progress and Conduct Report (Judge's Report and the counselor's observation of the client's overall participation in the program. The PC shall check the box indicated with the level client's participation and shall write a brief summary in behavioral terms to support the assessment.
- E. The PC shall document the reason for the client's discharge. This could include status of completion of the substance abuse treatment program requirements, education

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requirements and/or requirements for parole release date. The PC shall check the box indicated with the quality of the completion and if the client was below expectations, explain why and if exceeded expectations, how.

- F. The arrangements for aftercare shall be determined in part by probation/parole stipulations (if applicable). Recommendations shall also be made by the PC and/or treatment team.



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REVIEWED AND APPROVED

BY:

DATE:


2-7-79

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STANDARD OPERATING PRACTICES

Policy #: 906EDLSRS

Title: Education/Didactic, Life Skills & Recovery Support Services

Effective Date: December 2018

Revision:

Reference(s): Contract: C.3.1. Specific Duties and Obligations (p.18), C.3.2 Treatment Frequency Guidelines (p.20), C.3.4 Recovery Oriented Support Groups (p.21); SJSAPOM 02.06; DSHS 441.101- (74)

Applicability: Gist – State Jail Substance Abuse Program (SJSAP)

Purpose: Gist – State Jail Substance Abuse Program (SJSAP) shall provide Direct Treatment utilizing evidence-based practice curriculum. The clients shall attend a minimum of no less than twenty (20) hours per week of direct treatment which includes Process Group. Client shall receive and participate in Recovery Support Services (RSSs) peer recovery training.

Procedures:

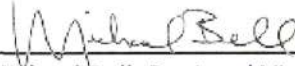
- A. Counselors shall provide Education/Didactic and Life Skills Training which encourage skills such as assertiveness, anger management, goal setting, managing criminality, and changing thinking errors. These groups shall not exceed a Client-to-Counselor ratio 30:1.
- B. Recovery Support Services (RSSs) – Client participating in RSSs shall receive a minimum of ten (10) hours, but not exceed a maximum of 20 hours, peer recovery training hours in the domains of Advocacy, Mentoring/Education and Recovery Support prior to program completion.
- C. Counselors shall only utilize the approved curriculum.
- D. Supplemental handouts shall be approved by the Program Director (PD) or designee prior to use during groups.
- E. Any deviation from the approved curriculum shall be submitted for approval to Private Facility Contract Monitoring Oversight Division Program Division (PFCMOD).

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- F. Before any commercial video is used, the Program Director (PD) or designee shall verify that a copyright waiver or licensing agreement has been obtained and is current for the material to be viewed.



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STANDARD OPERATING PRACTICES

Policy #: 906ERSJ

Title: Eligibility Requirements for State Jail Clients

EFFECTIVE DATE: December 2018

Revision:

Reference(s): Contract: C.3.1 Specific Duties and Obligations (p.18); SJSAPOM 02.01, 02.02, 02.04

Applicability: Gist – State Jail Substance Abuse Program (SJSAP)

Purpose: Gist – State Jail Substance Abuse Program (SJSAP) will follow standards by which clients are eligible to participate in the SJSAP and the appropriateness for Program Tier Placement.

Procedure:

A. Clients selected to participate in the SJSAP shall meet the following criteria:

- A. Clients may volunteer for the program.
- B. Clients may also be placed in the SJSAP program by the UCC process (with a SJSAP representative) or a screening process conducted by SJSAP staff.
- C. Clients may be eligible for the HB 2649, which allows a judge to award diligent participation credit that may not exceed 20% of the original sentence. Clients may be eligible for HB2649 credits if their offense is committed on or after September 1, 2011.
- D. J1 or J2 custody status.
- E. Once the client is enrolled in the SJSAP, program staff shall determine appropriate program Tier Placement.

B. An Addiction Severity Index (ASI) shall be administered to all clients prior to enrollment and SJSAP Program Tier Placement.

C. The score on the ASI shall determine the Tier to which a client may be assigned:

- A. 60-90-day Tier – An ASI score of 3-4.
- B. 90-120-day Tier – An ASI score of 5 or above.

D. Clients may successfully complete the program if the client discharges early at no fault of the client.

- A. Tier 1 – 60-90 days in program and the client meets successful completion guidelines as outlined in Section III of SJSAP 02.11.
- B. Tier 2 -90-120 days in program and the client meets successful completion guidelines as outlined in Section III of SJSAP 02.11.

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E. Clients with Less than 60 or 90 days:

1. Clients assessed as having a substance abuse need and do not have time to complete a full 60-90 or 90-120-day Tier, may be enrolled into the appropriate Tier level that meets their assessed needs.
2. Once the client has reached his or her maximum length of stay at the facility, the program staff shall close out the client's participation status with a DF completion code, specifying that the client was unable to complete at no fault of the client.
 - a. A client may successfully complete the program if the client has completed a substantial amount of programming (Tier 1- 45-59 days and Tier 2 -60-89 days). The client shall meet successful completion guidelines, as outlined in SJSAP 02.11, Section III.
 - b. A written justification shall be submitted to RPD Administration for approval prior to successfully completing the client.

F. The client's score on the ASI shall be entered into Substance Abuse Master Plan Information Management System (SAMPIMS) within three (3) working days of completion of the ASI assessment.



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REVIEWED AND APPROVED

BY: 

DATE: 2-7-19

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STANDARD OPERATING PRACTICES

Policy #: 906FEG

Title: Family Education Groups

Effective Date: December 2018

Revision:

Reference(s): C.3.2 Treatment Frequency Guidelines (p.19); SJSAPOM 02.06

Applicability: Gist – State Jail Substance Abuse Program (SJSAP)

Purpose: Gist - State Jail Substance Abuse Program (SJSAP) shall provide Family Education Groups to clients with approved contact visitation privileges and visiting family.

Procedures:

- A. The Licensed Chemical Dependency Counselor (LCDC) shall facilitate the Family Education Group. The sessions shall be held on Saturdays and/or Sundays. Visitation for participants shall begin after family programming; families shall receive one (1) additional hour of visitation.
- B. Staff, clients, and family members shall comply with visitation procedures.
- C. Family members shall report to the visitation officer for admittance to the Family Education Group. The designated officer shall call for the client to be sent to group when the family members arrive.
- D. The facilitator shall start group as scheduled. There shall be a ten (10) minute allowance past the required start time for family members.
- E. The facilitator shall utilize approved curriculum.
- F. Signing of the roster and reading of the group rules shall take place before the Family Group begins.
 - 1. The roster shall be turned in to the designated clerk for entry into the Client Data System (ODS). The participation of the Family Education Group shall then be recorded on the Weekly Progress Note.
 - 2. The LCDC shall email appropriate supervisors to report class participation and any incidents that may have occurred.

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REVIEWED AND APPROVED

BY: 

DATE: 2-7-18

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STANDARD OPERATING PRACTICES

Policy #: 906FD

Title: Flash Drives

Effective Date: December 2018

Revision:

Reference(s): Contract 1.23 (pg. 63); SJSAP 01.08; TDSHS 448.210

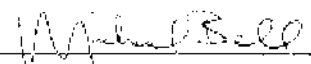
Applicability: Gist - State Jail Substance Abuse Program (SJSAP)

Purpose: Gist - State Jail Substance Abuse Program (SJSAP) USB Flash Drive is available as a means to store needed documentation. The USB Drive will have a secure vault where any Protected Health Information will be maintained.

Procedures:

1. The Office Manager will maintain a master list of company owned flash drives as they are issued to staff. The master list will include the number of the flash drive, the name of the staff member it is assigned to, and the password to the secure vault.
2. Flash drives cannot be taken off the unit.
3. Flash drives will be stored in a locked cabinet in the Administration Office Area. Each staff member is responsible daily to ensure the flash drive assigned to him/her is properly stored at the end of his/her work shift.
4. Supervisor will confirm daily that all flash drives are appropriately stored and the cabinet is locked. Any staff who fails to properly store their flash drive will receive progressive discipline and will forfeit the option of having a flash drive.
5. Each staff member be responsible on a monthly basis for deleting client data on clients who have discharged.
6. Staff shall take all reasonable precautions to ensure the safety of their flash drive. If lost it is to be reported immediately to their supervisor.


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BY: 

DATE: 2/7/19

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STANDARD OPERATING PRACTICES

Policy #: 906GP

Title: Grievance Procedure

Effective Date: December 2018

Revision:

Reference(s): C. 4 Intake Requirements (p.21), C.14 Treatment Grievance Procedures (p.31), C.20 Program Evaluation (Quality Assurance) Self-Monitoring (p.33); SJSAPOM 02.07, 03.02; TDSHS 448.217 (8,9), 448.506 (3), 448.603 (C.4), 702; 448.911 (m)

Applicability: Gist – State Jail Substance Abuse Program (SJSAP)

Purpose: Gist – State Jail Substance Abuse Program (SJSAP) shall establish procedures for Clients to be able to file a grievance when informal resolutions are exhausted.

Procedures:

- A. The treatment staff shall read and explain to the client the grievance process and provide the Client with a signed copy of the Grievance Form.
- B. The treatment staff shall post in the dorms instructions on how to write and submit grievances both in English and Spanish.
- C. The Grievance Form is available to the clients through the treatment staff assigned to the dorm. This Grievance Form is for the client to complete when informal resolutions are exhausted. The Program Director (PD) or designee shall record the grievance in the Grievance Log. Client grievances and resolutions shall be kept in a master file on the unit.
- D. The PD shall investigate the grievance and make an administrative decision on the issue grieved and allow the client to make comments at the conclusion of the investigation.
- E. A copy of the Grievance Form shall be sent to Rehabilitation Programs Division (RPD) with the Monthly Operational Reports.



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STANDARD OPERATING PRACTICES

Policy #: 906HIV

Title: Human Immunodeficiency Virus (HIV) and Acquired Immune Deficiency Syndrome (AIDS)

Effective Date: December 2018

Revision: N/A

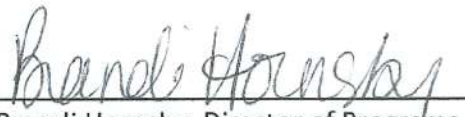
Reference(s): Contract: C.4.d; Texas Health and Safety Code, Section 85.112-114 (HIV/AIDS Policies and Education) (p.31); TDSHS 448.901 (d,e,); SJSAPOM 02.07

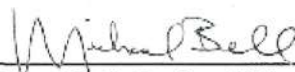
Applicability: Gist – State Jail Substance Abuse Program (SJSAP)


Purpose: Gist – State Jail Substance Abuse Program (SJSAP) offenders shall receive education on including Human Immunodeficiency Virus (HIV) and Acquired Immune Deficiency Syndrome (AIDS).

Procedure:

- A. The clients shall receive education on HIV and AIDS. This information will be provided during the intake process.
- B. During the intake process, the client will be provided with educational material regarding HIV/AIDS and will sign an Acknowledgement of Receipt Form.
- C. The Acknowledgement of Receipt Form will be placed in the client's clinical file.


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REVIEWED AND APPROVED
BY: 
DATE: 2-7-19

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STANDARD OPERATING PRACTICES

Policy #: 906ICS

Title: Individual Counseling Session

Effective Date: December 2018

Revision: N/A

Reference(s): Contract: C.3.2 Treatment Frequency Guidelines (p.19); SJSAPOM 02.05, 02.06; TDSHS 448.804

Applicability: Gist – State Jail Substance Abuse Program (SJSAP)

Purpose: Gist – State Jail Substance Abuse Program (SJSAP) shall provide an Individual Counseling Session (ICS) at a minimum of one (1) time monthly. The session shall be documented and placed in the Client Treatment Record (CTR) within seventy-two (72) hours.

Procedures:


- A. The Primary Counselor (PC) and client shall review and discuss the Individualized Treatment Plan (ITP) for overall progress and address new concerns. The client shall bring treatment assignments to the session to assess identified goals, objectives, and strategies. The PC shall have the Client Master Treatment Record (CTR) available for review and proper documentation.
- B. The PC shall note the client's attitude, demeanor, affect, and motivation for treatment. The PC shall document the client's stage of change with verbiage to support the stage. To close the Individual Counseling Session (ICS), client and PC shall determine specific goals, objectives, and strategies and identify the client's obligations to treatment episodes.
- C. The ICS shall be documented on the approved the Individual Progress Note (IPN) Form within seventy-two (72) hours and placed in the client's treatment file.
 - 1. The IPN shall be typed or written in black ink;
 - 2. The IPN shall be completed leaving no blank spaces;
 - 3. Documentation errors shall be corrected by drawing a single line through the error; writing initials, credentials and date legibly. Do not use correction fluid, white out tape, or scratch out with ink.
 - 4. Clinical documentation shall contain only those abbreviations included on the facility's approved list;

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5. The IPN shall include the date (e.g. mm/dd/yy), nature (e.g. individual), and time (e.g. 1:00pm-1:50pm);
6. The IPN shall be at least fifty (50) minutes in length;
7. The problem areas identified from the Addiction Severity Index (ASI) shall be addressed on the ITP according to the level of severity. In reference to the problem number on the ITP, it shall be written in 1, 2, 3 order;
8. Narrative entries shall follow the charting format of Data, Assessment and Plan (DAP).
9. Counseling staff shall sign their first and last name with credentials and date. The Qualified Credentialed Counselor (QCC) shall also sign as applicable.



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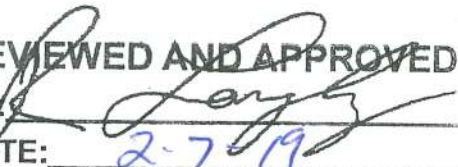


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BY:

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STANDARD OPERATING PRACTICES

Policy #: 906ITP

Title: Individualized Treatment Plan (ITP)

Effective Date: December 2018

Revision:

Reference(s): Contract C.3.3 Assessment (p.16), C.4 Intake Requirements (p.20); SJSAPOM 02.05, 2.07; TDSHS 448.804

Applicability: Gist State Jail – State Jail Substance Abuse Program (SJSAP)

Purpose: Gist State Jail – State Jail Substance Abuse Program (SJSAP) shall develop an Individualized Treatment Plan (ITP) to identify services and support needed to address problems and needs identified in the complete Addiction Severity Index (ASI) assessment. The ITP shall be established within ten (10) working days of the client's date of enrollment into the program.

Procedures:

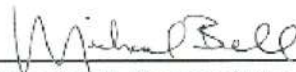
- A. Counselor and client shall work together to develop and implement the Individualized Treatment Plan (ITP) based on the severity and characteristics of the client as developed by the assessment.
- B. The ITP shall include goals, objectives, and strategies:
- C. Goals shall be based on the client's problems/needs, strengths, and preferences.
- D. Objectives shall be individualized, realistic, measurable, time specific, appropriate to the level of treatment, and clearly stated in behavioral terms.
- E. Strategies shall describe the type and frequency of the specific services and interventions needed to help the client achieve the identified goals, and they shall be appropriate to the level of intensity of the program in which the client is receiving treatment.
- F. The ITP shall identify the client's Primary Counselor, and it shall be dated and signed by the client and the Primary Counselor. (If the plan is completed by a Counselor Intern or Certified Criminal Justice Professional - Applicant (CCJP-A), a Qualified Credentialed Counselor (QCC) shall review and sign it.)

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- G. The ITP shall be established within ten (10) working days of the client's date of enrollment into the program.
- H. The ITP shall be evaluated on a regular basis and revised as needed to adequately reflect the continuous reassessment.
- I. The ITP shall be reviewed once per phase or more often as needed. The Treatment Plan Review (TPR) shall include the following:
 - A. An evaluation of the client's progress toward each goal and objective;
 - B. A revision of the goals and objectives; and
 - C. A justification of a continued length of stay.
- J. ITP and TPR shall be dated and signed by the client, the Primary Counselor, and the supervising QCC (if applicable).
- K. Program staff shall document all treatment services (counseling, chemical dependency education, and life skills training) in the client's record.



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STANDARD OPERATING PRACTICES

- Policy #:** 906ITPR
- Title:** Individualized Treatment Plan Review
- Effective Date:** December 2018
- Revision:**
- Reference(s):** Contract: C. 10 Offender Records (p.28); C. 3.2 Treatment Frequency Guideline (p.19); SJSAPOM 02.05, TDSHS 448.804
- Applicability:** Gist - State Jail Substance Abuse Program (SJSAP)
- Purpose:** Gist – State Jail Substance Abuse Program shall develop an Individualized Treatment Plan Review (ITPR) standard by which individualized Treatment Plan (ITP) shall be evaluated on a regular basis and revised as needed to adequately reflect continuous reassessment.
- Procedures:**
- A. The Individualized Treatment Plan (ITP) shall be evaluated on a recurrent basis and revised to reflect the ongoing reassessment of the client's problems, needs and response to treatment. The counselor and client shall meet to review the ITP at a minimum of one (1) time per month during an Individual Counseling Session (ICS). The Individualized Treatment Plan Review (ITPR) shall include the following:
 1. An evaluation of the client's progress toward each goal and objective;
 - a. The objectives stated with each goal are to be discussed to determine if they are still relevant to the client's condition and treatment needs and are measurable to ascertain the client's progress.
 2. A revision if needed of the goals/objectives;
 - b. When appropriate, there shall be revisions to the ITP which may include additional goals/objectives added or the referral and/or deferment of goals/objectives.
 - B. The efforts of the counselor and/or treatment team in helping the client meet the treatment goals are recorded in the Individual Progress Notes (IPN).
 - C. The ITPR shall be signed and dated by the client, counselor and the supervising Qualified Credentialed Counselor (QCC), if appropriate. An IPN shall be completed and placed in the Client Treatment Record (CTR) within seventy- two (72) hours.

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STANDARD OPERATING PRACTICES

Policy #: 906IN

Title: Intake

Effective Date: December 2018

Revision: N/A

Reference(s): Contract: C.4. Intake Requirements (p.20); C.9 Record Keeping (p.27); C.10 Offender Records (p.28); SJSAPOM 02.07; TDSHS 448.701; 448.702; 448.802

Applicability: Gist – State Jail Substance Abuse Program (SJSAP)

Purpose: Gist – State Jail Substance Abuse Program (SJSAP) shall provide uniform intake procedures for all arriving clients to complete required documentation for admission to the State Jail Substance Abuse Program (SJSAP)

Procedures:

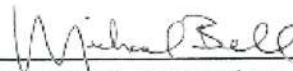
- A. Within twenty-four (24) hours of entry, MTC staff shall read and explain in simple, non-technical terms required documents in the offender's primary language.
- B. Required Documentation includes:
 - 1. *Identification Data;*
 - 2. *Consent to Treat;*
 - 3. *Consent for the Release of Substance Abuse Treatment Information and Records: Criminal Justice System (Attachment A);*
 - 4. *General Consent for Disclosure of Substance Abuse Treatment Information and Records (Attachment B);*
 - 5. *Confidentiality of Substance Abuse Treatment Patient Records (Attachment C);*
 - 6. *Client Bill of Rights;*
 - 7. *Client Grievance Procedure;*
 - 8. *HIV/AIDS education Acknowledgement of Receipt*
- C. The office manager or clerk shall assign a Primary Counselor (PC) within twenty-four (24) hours from Date of Entry (DOE), and documents shall be placed in the treatment file within seventy-two (72) hours.

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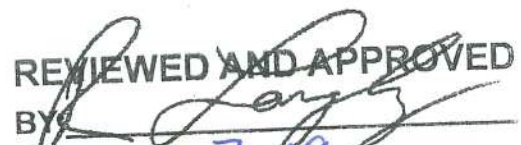
- D. The client shall receive a signed copy of the *Client Bill of Rights, Client Grievance Procedure, and Confidentiality of Substance Abuse Treatment Patient Records (Attachment C)*.
- E. The Program Director (PD) or designee shall review intake documents for completion and accuracy.



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DATE: 2-7-19

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STANDARD OPERATING PRACTICES

Policy #: 906MOR

Title: Monthly Operational Reports

Effective Date: December 2018

Revision: N/A

Reference(s): Contract: C.20 (b. 1-10) Program Evaluation (Quality Assurance) and Self-Monitoring (p.20); C.9 Record Keeping (p.27); SJSAPOM 01.05

Applicability: Gist – State Jail Substance Abuse Program (SJSAP)

Purpose: Gist – State Jail Substance Abuse Program (SJSAP) shall complete the Monthly Operational Reports and submit to Rehabilitation Program Division (RPD) for review by the 15th of the following month.

Procedures:


- A. The office manager shall type and prepare the caseload sheets for the monthly report.
- B. The Program Director (PD) or designee shall be responsible for completing the List of Staff Hires, Terminations, Resignations, and Vacant Positions. The Program Director (PD) shall manage the changes on the Organizational Chart, budgeted positions, name of staff members (including their credentials – Licensed Chemical Dependency Counselor (LCDC), Counselor Intern (CI), Certified Criminal Justice Addictions Professional (CCJP), and Certified Criminal Justice Addictions Professional Applicants (CCJP-A), positions held by staff members, vacant positions (including termination date) and any additional comments, as a source document.
- C. The Program Director or designee shall complete a spreadsheet of the Staff Leave Time Report. This report shall include the name and position of the staff taking leave from work for more than three (3) consecutive days. The dates the person is on leave and the name and position of the person assuming temporary responsibility of the duties shall be included on this report.
- D. The Program Director or designee shall complete the Ex-Offender Employee Roster. The information to include in this report shall be the name of the employee, position, title and credentials of the employee, date of employment and/or termination, date of release from confinement, and any information on whether staff is on annual reporting status with community supervision/parole.

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- E. The PD shall keep copies of Grievances submitted by clients; as well as, current Treatment Schedules to submit with the Monthly Operational Report.
- F. Revised policies and procedures shall be submitted with the Monthly Operational Report.
- G. Submit the number of clients that have had an Interruption of Service (IOS) within the reporting month, to include the type of interruption.
- H. Submit the User ID's for the personnel responsible for entering Substance Abuse Master Plan Information Management System (SAMPIMS) data for the reporting month.
- I. In the event that information is not applicable, "NONE" shall be written.
- J. The PD shall review for accuracy, errors, and sign the checklist.
- K. The Program Director shall complete a spreadsheet for Offender Eligibility. The spreadsheet shall include the client's Addiction Severity Index (ASI) score, Commitment History, Parole Vote Information if applicable, Disciplinary History, Medical/Mental Health Needs, and ensure the offender does not have an Immigration and Customs Enforcement (ICE) or felony detainer.


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STANDARD OPERATING PRACTICES

Policy #: 906MSR

Title: Monthly Status Reports

Effective Date: December 2018

Revision: N/A

Reference(s): Contract: C.20 (c) Program Evaluation (Quality Assurance) and Self-Monitoring (p.32); SJSAPOM 01.04; TDSHS 448.503

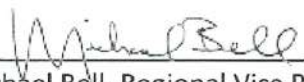
Applicability: Gist – State Jail Substance Abuse Program (SJSAP)

Purpose: Gist – State Jail Substance Abuse Program (SJSAP) shall complete the Monthly Status Reports and submit to Rehabilitation Programs Division (RPD) by the 5th day of the following month.

Procedures:

- A. By the 5th working day of each month, Program Director (PD) or designee shall submit to the Rehabilitation Programs Division (RPD) a copy of the monthly status report, completed with the required information and signatures for the previous calendar month.
- B. The Monthly Status Report shall consist of the following:
 - 1. Facility Count Room report;
 - 2. Status Report; and
 - 3. The Staff Status Report.
- C. The PD or designee shall coordinate with the Count Room. Source documents must be retained for a period of three (3) years from the time the report was submitted to RPD
- D. The PD or designee shall review the information on the report to verify accuracy and/or to determine if there are any errors prior to submission, and shall also sign the report before forwarding to RPD.
- E. The Assistant Warden shall review the information on the Monthly Status Report and sign and date.


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STANDARD OPERATING PRACTICES

Policy #: 906PS

Title: Privileges and Sanctions

EFFECTIVE DATE: December 2018

Revision:

Reference(s): Contract: C.3.1 Specific Duties and Obligations; SJSAPOM 02.12

Applicability: Gist – State Jail Substance Abuse Program (SJSAP)

Purpose: Gist – State Jail Substance Abuse Program (SJSAP) will provide guidelines on privileges and sanctions given to clients.

Procedure:

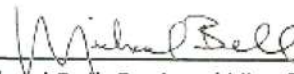
- A.** The primary counselor will be responsible for maintaining a record of approved and denied privileges in the Progress Notes. All privileges will receive prior Warden approval. Privileges may include but not limited to:
1. Certificates and awards
 2. Cookies, chips and another snacks
 3. Program member in good standing receive extra contact visit
 4. Extra phone calls
 5. Movie during graduation
 6. Supplemental Commissary privileges
 7. Increased responsibility in hierarchy
- B.** Sanctions shall be the result of repeated or serious, inappropriate behaviors, including violation of rules, inadequate participation, unsatisfactory work performance, and demonstrated negative behavior. All sanctions will be prior approved by Unit Warden. Possible sanctions may include:
1. 1st Offense: Loss of Dayroom privileges, Telephone privileges and recreation privileges. These can be all or selectively suspended and suspended for a period of time approved by Duty Warden per TDCJ policy.
 2. 2nd Offense: Loss of 1st offense privileges plus loss of visitation for a period determined and approved by Duty Warden.
 3. 3rd Offense: Loss of commissary privileges for a period of time as determined and approved by Duty Warden and TDCJ policy. Client may still receive hygiene items only.
 4. Continued Offenses: Other sanctions or counselor interventions as approved by Program Director or Supervisor.

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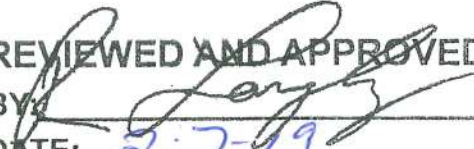
- C. Staff shall develop a graduated, systematic way in which inappropriate behaviors may be called to the attention of the client, his/her peers, and/or staff. The graduated method shall include:
1. Verbal Pull-up: an informal means of addressing an inappropriate behavior by verbally telling the client about his behavior given by peers or staff.
 2. Counselor Interventions: therapeutic counseling intervention skills used to get the client to think and work on inappropriate behaviors.
 3. Learning Experiences which may include essays/seminars that include client give a speech from a written essay that pertains to the proper behavior that should be exhibited in a particular instance.
 4. Formal Disciplinary: violations of rules and regulations which cannot be handled informally by the observing employee will be reported using the TDCJ formal disciplinary process.
- D. Extreme behavior problems will result in isolation to the Administrative Segregation upon order of the Warden or designee. Recommendations for removal will be teamed with the treatment team staff and the Rehabilitation Division (RPD) Administration.



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REVIEWED AND APPROVED
BY: 
DATE: 2-7-99

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STANDARD OPERATING PRACTICES

Policy #: 906PM

Title: Program Meetings

Effective Date: December 2018

Revision: N/A

Reference(s): Contract: C.20 Program Evaluation (Quality Assurance) and Self-Monitoring (p.31); TDSHS 448.504

Applicability: Gist – State Jail Substance Abuse Program (SJSAP)

Purpose: Gist – State Jail Substance Abuse Program (SJSAP) shall establish and adhere to a Weekly Program Meeting.

Procedures:

- A. Weekly Program Meetings shall be held with the exception of holidays. The Program Meetings shall include:
1. Counseling Techniques (Program Director or designee);
 2. Program Specific (Quality Assurance Coordinator) (QAC);
 3. Annual Trainings (Clinical Training Institute Coordinator (CTI)/Treatment Specialist); and
 4. Knowledge, Skills, and Attitudes (KSA)
- B. Counseling staff are required to attend meetings at designated time.
- C. A Training Roster shall be utilized to record attendance.


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BY: 

DATE: 2-7-19

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STANDARD OPERATING PRACTICES

Policy #: 906PRF

Title: Program Refusal

Effective Date: December 2018

Revision:

Reference(s): Contract: C.12 Offender Monitoring; SJSAPOM 02.13

Applicability: Gist – State Jail Substance Abuse Program (SJSAP)

Purpose: Gist – State Jail Substance Abuse Program (SJSAP) shall establish a policy regarding client program refusal.

Procedures:

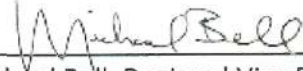
- A. The Program Director or designee shall initiate an intervention with the client who is refusing to participate in the program and to ensure the client understands the consequences.
- B. The first two (2) violations for refusing to participate in the assigned treatment programs (Disciplinary Offense Code 25.2) shall be addressed through the appropriate level of programming sanctions.
- C. Treatment staff shall complete the following:
 - 1. Write an offense report;
 - 2. Indicate that the incident was resolved informally; and
 - 3. Send the report to the Disciplinary Office for entry in the Disciplinary System (D100).
 - 4. Place a counselor note (CN) in the file reflecting refusal.
- D. Once the client has refused 3rd violation refusal of program code 25.2, a Treatment Team Meeting (TTM) shall be held with the Program Director, Counselor, Security designee to ensure the client understands the impact of refusing and the adverse effects on the client's status.

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- E. Once the client receives a major disciplinary; he/she shall be referred to the Unit Classification Committee (UCC).
- F. The Counseling staff shall follow established discharge procedures.



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DATE: 2-7-19

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STANDARD OPERATING PRACTICES

Policy #: 906PRT

Title: Program Removal or Transfer

EFFECTIVE DATE: December 2018

Revision:

Reference(s): Contract: C.15 Treatment Disciplinary Procedures; SJSAPOM 02.12

Applicability: Gist – State Jail Substance Abuse Program (SJSAP)

Purpose: Gist – State Jail Substance Abuse Program (SJSAP) offenders will be discharged from the program in accordance with the Substance State Jail Substance Abuse Operation Manual (SJSAPOM).

Procedure:

Offenders enrolled into the SJSAP may be released prior to successful completion for medical, psychological, or behavioral problems through the procedures outlined below:

I. Medical or Mental Health Removal -After eligibility criteria for program participation has been met and program placement has occurred, the need for additional medical/psychological evaluation may be identified. The Unit Health Services Staff shall be contacted to review medical records and/or transport offenders to the appropriate TDCJ medical/mental health facility for screening to determine the need for inpatient medical/psychological treatment or Axis I diagnosis. Unit Health Services Staff shall make the determination as to whether an offender can participate in the program, with or without an accommodation, or has a disqualifying condition.

- A. Unit Counselor shall submit, in writing, offender medical/psychological concerns to the Program Director or designee and Unit Health Services Staff.
- B. Offender removal shall be based upon medical assessment performed by Health Services Staff in conjunction with the records regarding the offender's program progress.
 - 1. Upon review of the medical and program history of the offender, the Program Director or designee and the Counselor shall assess the need for removal within 72 hours. The decision shall be documented and signed.

C. The Rehabilitation Programs Division (RPD) – Substance Abuse Treatment Program (SATP) Administration shall be notified within 24 hours of the decision and copies of the program Removal Notification Form (Attachment A) release packet shall be sent to that office within 24 hours.

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D. Documentation shall include, as appropriate, the following:

1. Program Removal Notification Form (Attachment A);
2. HSM-18 (if applicable);
3. Program Director or designee /Counselor documentation with results (if applicable);
4. Disciplinary Report (if applicable);
5. Incident Report (if applicable);
6. A signed copy of Rights at the Disciplinary Hearing (if applicable).
7. Offender Health Status Form (if applicable).

II. Behavioral Removal-Major Incident – Major incidents are violations of such magnitude that they present a danger to others or to the basic operation of the program. To remove an offender for a major behavioral incident, the following procedures shall be followed:

A. An offense/incident report shall be written.

B. The Program Director or designee and Counselor shall meet within 72 hours to address issues of inappropriate behavior and make appropriate recommendations. The recommendation shall be based on the severity of the offense or behavior and shall be in keeping with similar levels of offenses. The decision shall be documented and signed.

C. Documentation shall include, as appropriate, the following:

1. Program Removal Notification or Form (Attachment A);
2. Disciplinary Committee Hearing Report (if applicable);
3. Disciplinary Report (if applicable);
4. Incident Report (if applicable);
5. Signed copy of Rights at the Disciplinary Hearing (if applicable); and
6. Disciplinary Hearing Results Notification (if applicable).

III. Behavioral Removal-Multiple Minor Infractions – Multiple minor infractions are those in which offenders act inappropriately without creating a major incident, but which create disruptions to the program and interferes with the ability of others to participate. Offenders may be removed for multiple

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minor infractions when, in spite of graduated sanctions applied and opportunities given to participate, they continue to exhibit inappropriate behavior. To remove an offender for multiple minor infractions, the below listed procedures must be followed:

- A. The Counselor shall compile a chronological summary of infractions and sanctions applied. The summary shall document the interventions or sanctions used as responses to correct the behavioral infractions, including behavioral contracts.
- B. The Counselor shall notify the Program Director or designee that continuing problems are occurring.
- C. The Program Director or designee and Counselor shall meet within 72 hours to review the facts of the case and recommend sanctions (up to and including removal) to be applied. The decision shall be documented and signed.
- D. If removal from the program is recommended, the RPD – SATP Administration shall be issued a detailed report within 24 hours.
- E. Documentation shall include, as appropriate, the following:
 - 1. Program Removal Notification or Form (Attachment A);
 - 2. Disciplinary Committee Hearing Report (If applicable);
 - 3. Disciplinary Report (if applicable);
 - 4. Incident Report (if applicable);
 - 5. Signed copy of Rights at the Disciplinary Hearing (if applicable);
 - 6. Disciplinary Hearing Results Notification (if applicable);
 - 7. A summary that includes all rule violations, the progression of the violations, any progressive measures utilized (e.g., behavioral contracts, TDCJ disciplinary actions, etc.);
 - 8. Copy of the most recent Individual Treatment Plan (ITP);
 - 9. Copies of daily adjustments and/or progress notes.



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Michael Bell, Regional Vice President
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REVIEWED AND APPROVED

BY:

DATE:


2-7-19

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STANDARD OPERATING PRACTICES

Policy #: 906PSMS

Title: Program Services Monitoring System

EFFECTIVE DATE: December 2018

Revision:

Reference(s): Contract: C.3.2 Treatment Frequency Guidelines; SJSAPOM 02.06

Applicability: Gist – State Jail Substance Abuse Program (SJSAP)

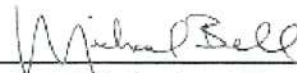
Purpose: Gist – State Jail Substance Abuse Program (SJSAP) shall monitor client's sign-in sheets to ensure they match the weekly progress notes of services delivered.

Procedures:

- A. The facilitator of each group/educational class will turn in the completed sign-in sheets immediately at the end of group to the Office Manager (OM) for data entry into the Offender Data System (ODS). OM will enter the data before the close of the following business day.



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REVIEWED AND APPROVED

BY

DATE:



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STANDARD OPERATING PRACTICES

Policy #: 906PCR

Title: Progress and Conduct Report

EFFECTIVE DATE: December 2018

Revision:

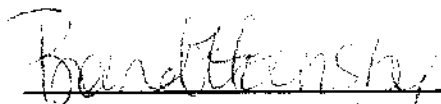
Reference(s): Contract: C.10 Client Records (p.29); SJSAPOM 02.05

Applicability: Gist – State Jail Substance Abuse Program (SJSAP)

Purpose: Gist – State Jail Substance Abuse Program (SJSAP) staff shall complete the Progress and Conduct Report to monitor client's participation and progress.

Procedure:

- A. During the client's last ITP Review, the State Jail Program Progress and Conduct Report form shall be completed for each client participating in the program.
- B. The Progress and Conduct Report shall be placed in the client's treatment record.
- C. The top section of the document should be completed in its entirety.
- D. The appropriate box under each section (Program Participation, Attitude, Compliance, Disciplinary, and Participation of Family) will be marked to indicate client's level/activity in the program (Below Average, Average, or Above Average.)
- E. Comments should articulate very specific, current and accurate information regarding the client's level of progress in the assigned area. Information should communicate a well-informed, professional assessment of the client's progress or lack of. These comments are a critical reflection of the client as well as the facility treatment process. The client has an opportunity to write a comment on the report to the Judge before signing the report.


Brandi Hornsby, Director of Programs
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REVIEWED AND APPROVED

Progress and Conduct Report

BY: 

DATE: 7-14-18

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STANDARD OPERATING PRACTICES

Policy #: 906QPMR

Title: Quarterly Performance Measures Report

Effective Date: December 2018

Revision:

Reference(s): Contract: C.20 Program Evaluation (Quality Assurance) and Self-Monitoring; C.21 Compliance Standards; SJSAPOM 01.06

Applicability: Gist – State Jail Substance Abuse Program (SJSAP)

Purpose: Gist – State Jail Substance Abuse Program (SJSAP) shall provide guidelines and procedures for the submission of Quarterly Performance Measures Reports (QPMR).

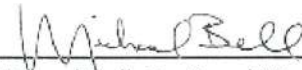
Procedures:


- A. Program Director (PD) shall be responsible for completing the Quarterly Performance Measures Reports (QPMR). The PD or designee shall submit reports to the Rehabilitation Programs Division (RPD) for review by January 2, April 1, July 1, and October 1.
- B. The PD shall complete required documents in the quarterly report. The PD shall utilize data from the following sources:
 - 1. Unit Monthly Status Report;
 - 2. Monthly Operational Report;
 - 3. Counselor Caseload sheets;
 - 4. Audit data;
 - 5. Offender Data System; and
 - 6. Program Removal Log.
- C. The Program Director (PD) or designee shall keep a calendar of educational groups schedule to ensure didactic groups are in compliance and to document alternative treatment scheduling.
- D. The PD shall compile the documents required according to the QPMR Checklist, sign, and submit to RPD.

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- E. In the case of any deficiencies in the performance measures, an explanation shall be included with the reporting forms.


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REVIEWED AND APPROVED
BY: 
DATE: 2-7-19

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STANDARD OPERATING PRACTICES

Policy #: 906RPP

Title: Relapse Prevention Plan

EFFECTIVE DATE: December 2018

Revision:

Reference(s): Contract: C.8 Reentry Services; C.10 Offender Records; SJSAPOM 04.01

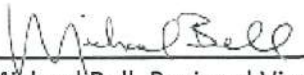
Applicability: Gist – State Jail Substance Abuse Program (SJSAP)


Purpose: Gist – State Jail Substance Abuse Program (SJSAP) will ensure that clients receive a Relapse Prevention Plan within 30 days of completing the program.

Procedure:

- A. Client will meet with primary counselor to complete a relapse Prevention Plan within 30 days prior to the client's projected Release Date.
- B. The complete Relapse Prevention Plan shall be dated and signed by the primary counselor and filed in the Client Treatment Record (CTR). Copy shall be given to client upon request.


Brandi Hornsby, Director Programs
Region III Corrections


Michael Bell, Regional Vice President
Region III Corrections

REVIEWED AND APPROVED
BY: 
DATE: 2-7-19

Management & Training Corporation

STANDARD OPERATING PRACTICES

Policy #: 906SAMP

Title: Substance Abuse Master Plan Information Management System (SAMPIMS)

EFFECTIVE DATE: December 2018

Revision: N/A

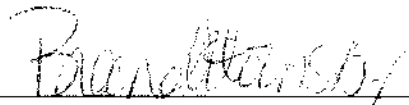
Reference(s): Contract: C.10 Offender Records (p.28) SJSAPOM 02.03, 03.01

Applicability: Gist – State Jail Substance Abuse Program (SJSAP)

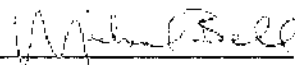
Purpose: Gist – State Jail Substance Abuse Program (SJSAP) shall provide the Texas Department of Criminal Justice (TDCJ) with data collection and data entry services for the SAMPIMS System.

Procedure:

- A. Each entry on the SAMPIMS shall be given to the Office Manager for entry into the SAMPIMS computer system, and entered within three (3) days of the date. The Office Manager will initial the SAMPIMS indicating the information has been entered into the system.
- B. During the assessment process, the SAMPIMS is completed with the client's information, and the entry phase date is noted on the appropriate tier column. The assessment score is noted on the SAMPIMS for to reflect the client's appropriate tier placement.
- C. The SAMPIMS will be filed in the client's treatment records.
- D. Each entry on the SAMPIMS is made on a separate line and given to the Office Manager for entry. The entries shall be made upon completion of program.
- E. When the client has been approved for Program Completion (PC), the date will be entered under the tier he/she has completed as PC.
- F. SAMPIMS data entry must be at least 95% accurate.



Brandi Hornsby, Director of Programs
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Michael Bell, Regional Vice President
Region III Corrections

REVIEWED AND APPROVED

BY: 

DATE: 2-7-19

Management & Training Corporation

STANDARD OPERATING PRACTICES

Policy #: 906TCMT

Title: Therapeutic Community Mastery Test

EFFECTIVE DATE: December 2018

Revision: N/A

Reference(s): Contract: C.10 Offender Records (p.28); SJSAPOM 01.06, 02.07

Applicability: Gist – State Jail Substance Abuse Program (SJSAP)


Purpose: Gist – State Jail Substance Abuse Program (SJSAP) clients will be tested to demonstrate knowledge of Therapeutic Community (TC) concepts.

Procedure:

- A. A Therapeutic Community Mastery Test will be given to clients 10 working days prior to Tier completion.
- B. Clients not achieving a passing grade of 70% will be tutored, as needed, on the Therapeutic Community Master Test and re-tested. The score will be clearly noted on the front of the test.
- C. Completed test will be filed in the client's treatment file. The statistical information will be submitted to the Program Director for monitoring of the minimum passing requirement of 95% of clients tested.



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REVIEWED AND APPROVED

BY: 

DATE: 2-7-19

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STANDARD OPERATING PRACTICES

Policy #: 906TSD

Title: Training and Staff Development

Effective Date: December 2018

Revision: N/A

Reference(s): Contract: C.6 Training (p. 25-26); SJSAPOM 01.02; TDSHS 140.409; 448.603; TCBAP Articles 1-25

Applicability: Gist – State Jail Substance Abuse Program (SJSAP)


Purpose: Gist – State Jail Substance Abuse Program (SJSAP) shall ensure that in that in-service and continuing education trainings meet requirements defined in the Texas Department of Criminal Justice (TDCJ) contract, Texas Department of State Health Services (TDSHS), and the Texas Certification Board of Addiction Professionals (TCBAP) Standards and Guidelines.

Procedures:

- A. The Program Director (PD) is responsible for staff development and continuing education by implementing a structured training program for the Facility.
- B. The Program Director or designee shall create and maintain a training file on each employee; a checklist consisting of the required initial orientation training, initial ninety (90) day training, and subsequent yearly training be maintained in the employee's training file.
- C. A spreadsheet with mandatory Continuing Education Hours (CEHs) and additional staff development trainings shall be maintained by the PD to obtain information for monthly and quarterly reports.
- D. A training calendar is developed for each fiscal year; this training schedule is submitted to Private Facilities Contract Monitoring Oversight Division (PFCMOD) for approval.
- E. The training and staff development consists of:
 1. New Employee Orientation;
 2. Initial Ninety (90) Day Training – including:
 - a. Texas Department of Health Services (TDSHS) Orientation;
 - b. Human Immunodeficiency Virus (HIV), Tuberculosis (TB), Hepatitis B and C, Nicotine, and Sexually Transmitted Infections (STI);
 - c. Non-Violent Crisis Intervention;

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- d. Abuse, Neglect, & Exploitation;
 - e. Screening & Intake;
 - f. Comprehensive Assessment/Addiction Severity Index (ASI);
 - g. Curriculum;
 - h. Multi-Needs;
 - i. Motivational Interviewing;
 - j. Relapse Prevention
 - k. Group Therapy & Peer Groups
- 3. Continuing Education Hours (CEH);
 - 4. Correctional Awareness Training (CAT), Annual In-Service and Professional Staff Developmental Trainings;
 - 5. Initial CPR & First Aid Certification (every 2 years);
 - 6. Intern training as required by TDSHS.
- F. Staff must attend trainings for the entire duration the training is offered.
- G. The training methods are:
- 1. Video;
 - 2. Curriculum Manual;
 - 3. Computer-based training; and
 - 4. Face to Face training.
- H. The new employees are provided with:
- 1. Checklist of initial training requirements;
 - 2. Orientation session with the Program Director (PD) within three (3) days; and
 - 3. A Staff Readiness Checklist for documenting the new employee's mentoring process (with a Qualified Credentialed Counselor (QCC).
- I. Continuing Education Hours (CEH) offered to staff to meet licensure shall be:
- 1. HIV, Hepatitis B and C, TB, Nicotine, and STIs;
 - 2. Ethics;
 - 3. Clinical Supervision;
 - 4. Non-Violent Crisis Intervention;
 - 5. Intake, Screening, Admission Authorization;
 - 6. Therapeutic Communities; and
 - 7. Additional trainings that are specific to the program are also conducted awarded CEH's.


Brandi Hornsby, Director of Programs
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Michael Bell, Regional Vice President
Region III Corrections

REVIEWED AND APPROVED

BY: 

DATE: 2-7-19

Management & Training Corporation

STANDARD OPERATING PRACTICES

Policy #: 906TDS

Title: Treatment Disruption and Separation

Effective Date: December 2018

Revision: N/A

Reference(s): Contract: C.12 Offender Monitoring (p.29); SJSAPOM 02.15

Applicability: Gist – State Jail Substance Abuse Program (SJSAP)

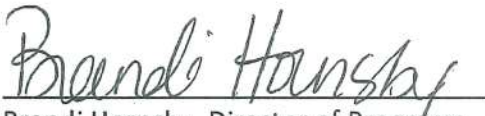
Purpose: Gist – State Jail Substance Abuse Program (SJSAP) shall provide guidelines relating to the suspension of therapeutic activities for an individual in the State Jail Substance Abuse Program (SJSAP)

Procedures:

- A. When a client is temporarily removed from treatment for a period in excess of 24 hours (i.e. treatment separation, solitary confinement, bench warrant, medical/ psychological removal), the Program Director (PD) shall notify TDCJ-RPD within a 72-hour period.
- B. The PD shall submit a completed *Interruption of Services (IOS) (Attachment A)* form via email to TDCJ-RPD, CSO and/or Parole Officer. Information on this form shall include: client's name and TDCJ number, Nature of offense/Reason for Service Interruption; Removal Date; Return/Discharge Date; Number of Days Out; and Transferred Off-Unit/Placed in General Population (GP).
- C. The client's bed shall be held for a period of ten (10) working days. If a client is temporarily removed for medical reasons, the bed shall be held for a period of 30 days.
- D. The PD shall notify TDCJ-RPD, CSO and/or Parole Officer of the client's return to the program via email.
- E. If the client is permanently removed and or extended, the Primary Counselor shall document the information on the Substance Abuse Master Plan Information Management System (SAMPIMS) Tracking Sheet and the appropriate removal code shall be entered by the Office Manager or clerk within three (3) working days into SAMPIMS in TDCJ mainframe system.
- F. When a client is separated from main treatment and placed in segregation:

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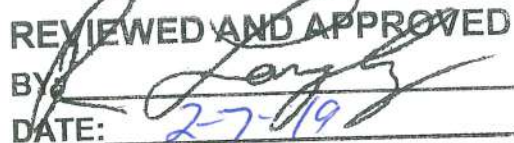
1. Treatment Staff shall conduct a daily visit to the client's cell and assess his progress on a progress note to be filed in the client's record.
2. Treatment Staff shall interview the client to determine if the client is ready to participate in the program.
3. Treatment Staff shall document progress in the treatment record on a daily basis during the client's separation.
4. The Program Director and appropriate staff shall meet after 72 hours of separation to recommend appropriate action: return offender to the program, remove client from the program, or to extend the separation of treatment.
5. Primary counselor shall ensure all proper documentation is filed in the Client Treatment Record (CTR).



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REVIEWED AND APPROVED
BY: 
DATE: 2-7-19

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STANDARD OPERATING PRACTICES

Policy #: 906WPN

Title: Weekly Progress Note

Effective Date: December 2018

Revision: N/A

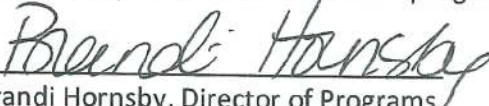
Reference(s): Contract: C.10 Offender Records (p.28); SJSAPOM 02.07; TDSHS: 448.507

Applicability: Gist - State Jail Substance Abuse Program (SJSAP)

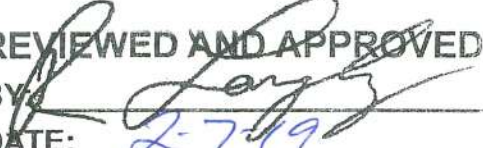
Purpose: Gist - State Jail Substance Abuse Program (SJSAP) shall provide a Weekly Progress Note (WPN) for a client; documenting Monday through Sunday the client's weekly participation and progress.

Procedures:

- A. The client shall document on the Weekly Progress Note (WPN) Direct, In-Direct groups, mail or visits and Thinking Reports written.
- B. The client's Primary Counselor (PC) shall document the his/her progress, check calculation of program hours, and check the box showing "Level of change/ participation."
- C. Clients shall attend 20 hours of Direct Groups. When an offender does not accrue 20 hours, the PC shall document the reason for the deficiency.
- D. The PC or designee shall sign and date each WPN within three (3) days and file chronologically in the Client Treatment Record (CTR) by close of business on Wednesday.
- E. Group hours and the client's progress shall not be pre-typed.


Brandi Hornsby, Director of Programs
Region III Corrections


Michael Bell, Regional Vice President
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REVIEWED AND APPROVED
BY: 
DATE: 2-7-19

Tier 1 (60-90 days) Treatment Schedule AM Programming

Gist

| 5:30am | Feet on the Floor | Feet on the Floor | Feet on the Floor | Feet on the Floor | Feet on the Floor | 5:00 | Chow | 5:00 | Chow |
|----------------|---|---|---|---|---|----------------|-------------------|----------------|-------------------|
| 5:30 6:00 | TV News Only | TV News Only | TV News Only | TV News Only | TV News Only | 7:00 | Feet on the Floor | 7:15 | Feet on the Floor |
| 6:00 6:30 | Living in Balance with Co-Occurring Disorders | Living in Balance with Co-Occurring Disorders | Living in Balance with Co-Occurring Disorders | Living in Balance with Co-Occurring Disorders | Living in Balance with Co-Occurring Disorders | 7:00 8:00 | Personal Hygiene | 7:00 8:00 | Personal Hygiene |
| 7:00 7:30 | Personal Improvement | Personal Improvement | Personal Improvement | Personal Improvement | Personal Improvement | 8:00 8:50 | Peer Support | 8:00 8:50 | Peer Support |
| 8:00 8:50 | Good Intentions, Bad Choices | Cognitive Intervention | Alcohol, Drugs & the Brain | Anger Management | Commitment to Change | 9:00 10:00 | GI Cleaning | 9:00 10:00 | GI Cleaning |
| 9:00 9:50 | Process Group | Process Group | Process Group | Process Group | Process Group | 10:00 11:00 | Family Education | 10:00 11:00 | Family Education |
| 10:00 10:30 | GI Cleaning | GI Cleaning | GI Cleaning | GI Cleaning | GI Cleaning | 10:00 4:00 | Free Time | 10:00 4:00 | Free Time |
| 10:30 12:00 | Free Time/Chow | Free Time/Chow | Free Time/Chow | Free Time/Chow | Free Time/Chow | | | | |
| 1:00 1:30 | Community Meeting | Community Meeting | Community Meeting | Community Meeting | Community Meeting | 4:00 6:00 | Chow | 4:00 6:00 | Chow |
| 2:00 2:50 | Peer Support | Treatment Plan Study Group | Peer Support | Treatment Plan Study Group | Peer Support | 4:00 10:30 | Free Time | 4:00 10:00 | Free Time |
| 3:00 10:00 | Free Time | Free Time | Free Time | Free Time | Free Time | | | | |
| 10:00 | Bed/Rack Up Time | Bed/Rack Up Time | Bed/Rack Up Time | Bed/Rack Up Time | Bed/Rack Up Time | 10:30 | Bed/Rack Up Time | 10:00 | Bed/Rack Up Time |

A. Roberts 12/01/20

Gift

Direct Service Hours: 15
Indirect Service Hours: 12

- Confront attitude and behavior that is not conducive to the welfare of the group or the community
- Take personal responsibility
- Be socially responsible

Tier 1 (60-90 days) Treatment Schedule AM Programming

Gist

Alcohol, Drugs and the Brain: "Alcohol, Drugs and the brain" is an overview of the effects of alcohol and other drugs to the brain. This book explains the difference between drug and alcohol dependence verses drug and alcohol abuse. It also gives insight of who is at risk as well as how someone struggles with addiction can get help.

Commitment to Change: Commitment to Change Volume 1 has three parts. These parts include: What are errors in thinking, two crucial errors and overcoming errors in thinking. This series shows how our own thinking effects daily lives as well as the consequences that are involved in faulty thinking. The goal of this series is to assist others in working toward correcting their thought patterns and living responsibly.

Good Intentions, Bad Choices: This series focuses on the top three problems that offenders have first year they are release back into society, which include: the pressure of not finding or not keeping a job, personal conflicts with family and others, and the temptation, or actual use, of alcohol or other drugs. Dr. Samenow explains how thought patterns that add to the problems and he shares insight on how to correct these thinking errors which will overall help in making better choices in the future.

Anger Management: The Anger Management Workbook is a 12-week cognitive behavioral group. Some sessions include Understanding and Reducing Angry Feelings includes the following lessons: Understanding Anger, Managing Anger in Relationships, and The Aggression Cycle.

Living in Balance: Lessons include: Definitions, Terms, and Self-Diagnosis, Alcohol and Other Drug Education, Triggers, Cravings, and Avoiding Relapse, Planning for Sobriety, Alcohol and Tobacco, Spirituality, Sex, Drugs and Alcohol, Stress and Emotional Well Being, Skills for Reducing Stress, Negative Emotions, Anger and Communication and Relapse Prevention.

Living in Balance with Co-Occurring Disorders: Lessons include: Effects of drug use on mental health, comprehensive treatment and medications, phases of dual recovery, twelve steps for Co-Occurring disorders, Mutual self-help group, Mental Health Medications, Relapse preventions, 1, Relapse prevention 2, and Seeking help of co-occurring disorders.

Process Group: During this group, the offenders have an opportunity to think through and problem solve, ask for help, share personal solutions and help redirect negative group members towards cooperation, compliance and commitment to community. Group members will identify verbally with each other by demonstrating listening and understanding.

Family Education: An education class where family members who have come to visit have an opportunity to sit in class with the offenders. The family education class includes the following lessons: Alcohol/Other Drugs and Recovery, Families in Recovery, Rebuilding Trust, Living with an Addiction, Communication Traps, Triggers and Cravings, Road Map for Recovery, Cognitive Intervention/Rational Thinking, Understanding the Temperaments within the Family, A Chance for a New Beginning, Breaking Destruction Cycles within the Family, and Reuniting a Family: Transitioning Back into Family Life.

Tier 1 (60-90 days) Treatment Schedule (PM Programming)

Gist

| | | | | | | | | | |
|--------|---|---|---|---|---|-------|-------------------|-------|-------------------|
| 5:30am | Feet on the Floor | Feet on the Floor | Feet on the Floor | Feet on the Floor | Feet on the Floor | 5:00 | Chow | 5:00 | Chow |
| 5:30 | TV News Only | TV News Only | TV News Only | TV News Only | TV News Only | 7:00 | Feet on the Floor | 7:00 | Feet on the Floor |
| 6:00 | | | | | | 7:00 | Personal Hygiene | 7:00 | Personal Hygiene |
| 7:30 | Community Meeting | Community Meeting | Community Meeting | Community Meeting | Community Meeting | 8:00 | Peer Support | 8:00 | Peer Support |
| 8:30 | Peer Support | Treatment Plan Study Group | Peer Support | Treatment Plan Study Group | Peer Support | 9:00 | GI Cleaning | 9:00 | GI Cleaning |
| 9:30 | GI Cleaning | GI Cleaning | GI Cleaning | GI Cleaning | GI Cleaning | 10:00 | Family Education | 10:00 | Family Education |
| 10:00 | Free Time/Chow | Free Time/Chow | Free Time/Chow | Free Time/Chow | Free Time/Chow | 10:00 | Free Time | 10:00 | Free Time |
| 11:00 | Living in Balance with Co-Occurring Disorders | Living in Balance with Co-Occurring Disorders | Living in Balance with Co-Occurring Disorders | Living in Balance with Co-Occurring Disorders | Living in Balance with Co-Occurring Disorders | 4:00 | Chow | 4:00 | Chow |
| 11:30 | Personal Improvement | Personal Improvement | Personal Improvement | Personal Improvement | Personal Improvement | | | | |
| 12:00 | Good Intentions, Bad Choices | Cognitive Intervention | Alcohol, Drugs & the Brain | Anger Management | Commitment to Change | 4:00 | | 4:00 | |
| 12:50 | Process Group | Process Group | Process Group | Process Group | Process Group | | | | |
| 1:00 | Free Time | Free Time | Free Time | Free Time | Free Time | 4:00 | Free Time | 4:00 | Free Time |
| 2:00 | | | | | | 10:30 | | 10:00 | |
| 2:50 | | | | | | | | | |
| 3:00 | | | | | | | | | |
| 10:00 | | | | | | | | | |

A Roberts 12/01/20

Tier 1 (60-90 days) Treatment Schedule (PM Programming)

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| | | | | | | | | | |
|-------|------------------|------------------|------------------|------------------|--|-------|------------------|-------|------------------|
| 10:00 | Bed/Rack Up Time | Bed/Rack Up Time | Bed/Rack Up Time | Bed/Rack Up Time | | | | | |
| 10:30 | | | | Bed/Rack Up Time | | 10:30 | Bed/Rack Up Time | 10:00 | Bed/Rack Up Time |

Direct Service Hours: 15
Indirect Service Hours: 12

Peer Support: Offenders use Alcoholic Anonymous and Narcotics Anonymous materials; Offenders use SOS Secular Organization for Sobriety materials; Offenders use Winners Circle material, Dual Recovery Anonymous (DRA), and Celebrate Recovery Inside. Offenders form circles for the group they wish to participate in. The primary goal is to focus on community skills by working together to:

- o Remain alcohol, other drug, and crime free
- o Confront attitude and behavior that is not conducive to the welfare of the group or the community
- o Take personal responsibility
- o Be socially responsible

Phone: 5p.m. to 10p.m. Monday through Thursday and Friday- Sunday 2p.m. to 10:30p.m.

Break Time: Offenders are allowed 5-minute break during indirect hours and 10-minute break time during direct hours.

Free Time: TV, Games, Letters, Reading, lying on bunks

Community Meeting: Offenders discuss dorm issues, needs, and do problem solving with each other. Offenders may select meditation materials to share from any treatment orientated materials, positive readings, or affirmations they use to mentally prepare themselves daily. Offenders sit in a large circle and take turns sharing. No one offender is allowed to monopolize. Group ends with the Serenity Affirmation.

Personal-Improvement: Offenders work on treatment plans, and read treatment related material. Offenders may select meditation materials to read from any treatment orientated materials, Big Book, 12 Step Books, Bible readings, SOS, or Winners Circle.

Treatment Plan Study Group: Offenders are to work as a group to discuss and work on treatment plan assignments

General Instructions (GI): Dorm Cleaning

Tier 1 (60-90 days) Treatment Schedule (PM Programming)

elist

Cognitive Intervention: Cognitive Intervention targets offender populations that have a substance use history and criminal background. The goal of this curriculum is to change their drug-seeking behaviors as well as the criminal involvement. Cognitive Intervention helps the offenders to identify their faulty thinking patterns and identify correctives to assist in making better decisions. The lessons also explain how to complete thinking reports and addiction offender cycles.

Alcohol, Drugs and the Brain: "Alcohol, Drugs and the Brain" is an overview of the effects of alcohol and other drugs to the brain. This book explains the difference between drug and alcohol dependence verses drug and alcohol abuse. It also gives insight of who is at risk as well as how someone struggles with addiction can get help.

Commitment to Change: Commitment to Change Volume 1 has three parts. These parts include: What are errors in thinking, two crucial errors and overcoming errors in thinking. This series shows how our own thinking effects daily lives as well as the consequences that are involved in faulty thinking. The goal of this series is to assist others in working toward correcting their thought patterns and living responsibly.

Good Intentions, Bad Choices: This series focuses on the top three problems that offenders have first year they are release back into society, which include: the pressure of not finding or not keeping a job, personal conflicts with family and others, and the temptation, or actual use, of alcohol or other drugs. Dr. Samenow explains how thought patterns that add to the problems and he shares insight on how to correct these thinking errors which will overall help in making better choices in the future.

Anger Management: The Anger Management Workbook is a 12-week cognitive behavioral group. Some sessions include Understanding and Reducing Angry Feelings includes the following lessons: Understanding Anger, Managing Anger in Relationships, and The Aggression Cycle.

Living in Balance: Lessons include: Definitions, Terms, and Self-Diagnosis, Alcohol and Other Drug Education, Triggers, Cravings, and Avoiding Relapse, Planning for Sobriety, Alcohol and Tobacco, Spirituality, Sex, Drugs and Alcohol, Stress and Emotional Well Being, Skills for Reducing Stress, Negative Emotions, Anger and Communication and Relapse Prevention.

Living in Balance with Co-Occurring Disorders: Lessons include: Effects of drug use on mental health, comprehensive treatment and medications, phases of dual recovery, twelve steps for Co-Occurring disorders, Mutual self-help group, Mental Health Medications, Relapse preventions 1, Relapse prevention 2, and Seeking help of co-occurring disorders.

Process Group: During this group, the offenders have an opportunity to think through and problem solve, ask for help, share personal solutions and help redirect negative group members towards cooperation, compliance and commitment to community. Group members will identify verbally with each other by demonstrating listening and understanding.

Family Education: An education class where family members who have come to visit have an opportunity to sit in class with the offenders. The family education class includes the following lessons: Alcohol/Other Drugs and Recovery, Families in Recovery, Rebuilding Trust, Living

Tier 1 (60-90 days) Treatment Schedule (PM Programming)

Gist

with an Addiction; Communication Traps; Triggers and Cravings; Road Map for Recovery; Cognitive Intervention/Rational Thinking; Understanding the Temperaments within the Family; A Chance for a New Beginning; Breaking Destruction Cycles within the Family; and Reuniting a Family; Transitioning Back into Family Life.

Tier 2 (90-120 days) Treatment Schedule AM Programming

Gist

| | | | | | | | | | |
|--------|---|---|---|---|---|-------|-------------------|-------|-------------------|
| 5:30am | Feet on the Floor | Feet on the Floor | Feet on the Floor | Feet on the Floor | Feet on the Floor | 5:00 | Chow | 5:00 | Chow |
| 5:30am | TV New Only | TV New Only | TV New Only | TV New Only | TV New Only | 7:00 | Feet on the Floor | 7:00 | Feet on the Floor |
| 6:00 | Living in Balance with Co-Occurring Disorders | Living in Balance with Co-Occurring Disorders | Living in Balance with Co-Occurring Disorders | Living in Balance with Co-Occurring Disorders | Living in Balance with Co-Occurring Disorders | 7:00 | Personal Hygiene | 7:00 | Personal Hygiene |
| 6:50 | Anger Management | Commitment to Change | Good Intentions, Bad Choices | Cognitive Intervention | Alcohol, Drugs & the Brain | 8:00 | Peer Support | 8:00 | Peer Support |
| 7:00 | Good Intentions, Bad Choices | Cognitive Intervention | Alcohol, Drugs & the Brain | Anger Management | Commitment to Change | 8:00 | GI Cleaning | 9:00 | GI Cleaning |
| 8:00 | Process Group | Process Group | Process Group | Process Group | Process Group | 9:00 | Family Education | 10:00 | Family Education |
| 8:50 | Free Time/Chow | Free Time/Chow | Free Time/Chow | Free Time/Chow | Free Time/Chow | 10:00 | Free Time | 10:00 | Free Time |
| 9:00 | GI Cleaning | GI Cleaning | GI Cleaning | GI Cleaning | GI Cleaning | 4:00 | | | |
| 10:00 | Community Meeting | Community Meeting | Community Meeting | Community Meeting | Community Meeting | 4:00 | Chow | 4:00 | Chow |
| 12:00 | Personal Improvement | Personal Improvement | Personal Improvement | Personal Improvement | Personal Improvement | 6:00 | Free Time | 4:00 | Free Time |
| 12:30 | Peer Support | Treatment Plan Study Group | Peer Support | Treatment Plan Study Group | Peer Support | 10:30 | | | |

A. Roberts 12/01/20

Tier 2 (90-120 days) Treatment Schedule AM Programming

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| | | | | | | | | | |
|-------|------------------|------------------|------------------|------------------|------------------|-------|------------------|--|--|
| 3:00 | Free Time | Free Time | Free Time | Free Time | Free Time | | | | |
| 10:00 | Free Time | Free Time | Free Time | Free Time | Free Time | | | | |
| 10:00 | Bed/Rack Up Time | Bed/Rack Up Time | Bed/Rack Up Time | Bed/Rack Up Time | Bed/Rack Up Time | | | | |
| 10:30 | | | | | Bed/Rack Up Time | 10:30 | Bed/Rack Up Time | | |

Direct Service Hours: 20

Indirect Service Hours: 12

Peer Support: Clients use Alcoholic Anonymous and Narcotics Anonymous materials; Offenders use SOS Secular Organization for Sobriety materials; Clients use Winners Circle material, Dual Recovery Anonymous (DRA), and Celebrate Recovery Inside. Clients form circles for the group they wish to participate in. The primary goal is to focus on community skills by working together to:

- o Remain alcohol, other drug, and crime free
- o Confront attitude and behavior that is not conducive to the welfare of the group or the community
- o Take personal responsibility
- o Be socially responsible

Phone: 5p.m. to 9:30p.m. Monday through Thursday, Friday -Sunday 2p.m. to 10:30p.m.

Break Time: Clients are allowed 5-minute break during indirect hours and 10-minute break time during direct hours.

Free Time: TV, Games, Letters, Reading, lying on bunks, phones

Community Meeting: Clients discuss dorm issues, needs, and do problem solving with each other. Offenders may select meditation materials to share from any treatment orientated materials, positive readings, or affirmations they use to mentally prepare themselves daily. Offenders sit in a large circle and take turns sharing. No one offender is allowed to monopolize. Group ends with the Serenity Affirmation.

Personal-Improvement: Clients work on treatment plans, and read treatment related material. Offenders may select meditation materials to read from any treatment orientated materials, Big Book, 12 Step Books, Bible readings, SOS, or Winners Circle.

Treatment Plan Study Group: Clients are to work as a group to discuss and work on treatment plan assignments

General Instructions (GI): Dorm Cleaning

Tier 2 (90-120 days) Treatment Schedule AM Programming

elist

Cognitive Intervention: Cognitive Intervention targets offender populations that have a substance use history and criminal background. The goal of this curriculum is to change their drug-seeking behaviors as well as the criminal involvement. Cognitive Intervention helps the clients to identify their faulty thinking patterns and identify correctives to assist in making better decisions. The lessons also explain how to complete thinking reports and addiction offender cycles.

Alcohol, Drugs and the Brain: "Alcohol, Drugs and the Brain" is an overview of the effects of alcohol and other drugs to the brain. This book explains the difference between drug and alcohol dependence versus drug and alcohol abuse. It also gives insight of who is at risk as well as how someone struggles with addiction can get help.

Commitment to Change: Commitment to Change Volume 1 has three parts. These parts include: What are errors in thinking, two crucial errors and overcoming errors in thinking. This series shows how our own thinking effects daily lives as well as the consequences that are involved in faulty thinking. The goal of this series is to assist others in working toward correcting their thought patterns and living responsibly.

Good Intentions, Bad Choices: This series focuses on the top three problems that offenders have first year they are release back into society; which include: the pressure of not finding or not keeping a job, personal conflicts with family and others, and the temptation, or actual use, of alcohol or other drugs. Dr. Samerow explains how thought patterns that add to the problems and he shares insight on how to correct these thinking errors which will overall help in making better choices in the future.

Anger Management: The Anger Management Workbook is a 12-week cognitive behavioral group. Some sessions include Understanding and Reducing Angry Feelings includes the following lessons: Understanding Anger, Managing Anger in Relationships, and The Aggression Cycle.

Living in Balance: Lessons include: Definitions, Terms, and Self-Diagnosis, Alcohol and Other Drug Education, Triggers, Cravings, and Avoiding Relapse, Planning for Sobriety, Alcohol and Tobacco, Spirituality, Sex, Drugs and Alcohol, Stress and Emotional Well Being, Skills for Reducing Stress, Negative Emotions, Anger and Communication and Relapse Prevention.

Living in Balance with Co-Occurring Disorders: Lessons include: Effects of drug use on mental health, comprehensive treatment and medications, phases of dual recovery, twelve steps for Co-Occurring disorders, Mutual self-help group, Mental Health Medications, Relapse preventions 1, Relapse prevention 2, and Seeking help of co-occurring disorders.

Process Group: During this group, the clients have an opportunity to think through and problem solve, ask for help, share personal solutions and help redirect negative group members towards cooperation, compliance and commitment to community. Group members will identify verbally with each other by demonstrating listening and understanding.

Family Education: An education class where family members who have come to visit have an opportunity to sit in class with the clients. The family education class includes the following lessons: Family Program, Alcohol/Other Drugs and Recovery Families in Recovery, Rebuilding

Tier 2 (90-120 days) Treatment Schedule AM Programming

Gist

Trust; Living with an Addiction; Communication Traps; Triggers and Cravings; Road Map for Recovery; Cognitive Intervention/Rational Thinking; Understanding the Temperaments within the Family; A Chance for a New Beginning; Breaking Destruction Cycles within the Family; and Reuniting a Family: Transitioning Back into Family Life.

Tier 2 (90-120 days) Treatment Schedule PM Programming

Gist

| | | | | | | | | | |
|--------|---|---|---|---|---|-------|-------------------|-------|-------------------|
| 5:30am | Feet on the Floor | Feet on the Floor | Feet on the Floor | Feet on the Floor | Feet on the Floor | 5:00 | Chow | 5:00 | Chow |
| 5:30 | TV News Only | TV News Only | TV News Only | TV News Only | TV News Only | 7:00 | Feet on the Floor | 7:00 | Feet on the Floor |
| 6:00 | Community Meeting | Community Meeting | Community Meeting | Community Meeting | Community Meeting | 7:00 | Personal Hygiene | 7:00 | Personal Hygiene |
| 6:30 | Personal Improvement | Personal Improvement | Personal Improvement | Personal Improvement | Personal Improvement | 8:00 | Peer Support | 8:00 | Peer Support |
| 7:00 | Peer Support | Treatment Plan Study Group | Peer Support | Treatment Plan Study Group | Peer Support | 9:00 | GI Cleaning | 9:00 | GI Cleaning |
| 8:00 | GI Cleaning | GI Cleaning | GI Cleaning | GI Cleaning | GI Cleaning | 10:00 | Family Education | 10:00 | Family Education |
| 8:30 | Free Time/Chow | Free Time/Chow | Free Time/Chow | Free Time/Chow | Free Time/Chow | 11:00 | Free Time | 10:00 | Free Time |
| 9:00 | Living in Balance with Co-Occurring Disorders | Living in Balance with Co-Occurring Disorders | Living in Balance with Co-Occurring Disorders | Living in Balance with Co-Occurring Disorders | Living in Balance with Co-Occurring Disorders | 4:00 | Chow | 4:00 | Chow |
| 11:00 | Anger Management | Commitment to Change | Good Intentions, Bad Choices | Cognitive Intervention | Alcohol, Drugs & the Brain | 6:00 | Free Time | 6:00 | Free Time |
| 12:00 | Good Intentions, Bad Choices | Process Group | Process Group | Process Group | Process Group | 6:00 | Free Time | 6:00 | Free Time |
| 12:50 | Process Group | Process Group | Process Group | Process Group | Process Group | 6:00 | Free Time | 6:00 | Free Time |
| 1:00 | Process Group | Process Group | Process Group | Process Group | Process Group | 6:00 | Free Time | 6:00 | Free Time |
| 1:50 | Process Group | Process Group | Process Group | Process Group | Process Group | 6:00 | Free Time | 6:00 | Free Time |
| 2:00 | Process Group | Process Group | Process Group | Process Group | Process Group | 6:00 | Free Time | 6:00 | Free Time |
| 2:50 | Process Group | Process Group | Process Group | Process Group | Process Group | 6:00 | Free Time | 6:00 | Free Time |

A. Roberts 12/01/20

Tier 2 (90-120 days) Treatment Schedule PM Programming

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| | | | | | | | | | |
|-------|------------------|------------------|------------------|------------------|------------------|-------|------------------|-------|------------------|
| 3:00 | Free Time | Free Time | Free Time | Free Time | Free Time | | | | |
| 10:00 | Free Time | Free Time | Free Time | Free Time | Free Time | 11:00 | Bed/Rack Up Time | 10:30 | Bed/Rack Up Time |
| 10:00 | Bed/Rack Up Time | Bed/Rack Up Time | Bed/Rack Up Time | Bed/Rack Up Time | Bed/Rack Up Time | | | | |
| 10:30 | | | | | Bed/Rack Up Time | | | | |

Direct Service Hours: 20

Indirect Service Hours: 12

Peer Support: Offenders use Alcoholic Anonymous and Narcotics Anonymous materials; Offenders use SOS Secular Organization for Sobriety materials; Offenders use Winners Circle material, Dual Recovery Anonymous (DRA), and Celebrate Recovery Inside. Offenders form circles for the group they wish to participate in. The primary goal is to focus on community skills by working together to:

- o Remain alcohol, other drugs, and crime free
- o Confront attitude and behavior that is not conducive to the welfare of the group or the community
- o Take personal responsibility
- o Be socially responsible

Personal-Improvement: Offenders work on treatment plans, and read treatment related material. Offenders may select meditation materials to read from any treatment orientated materials, Big Book, 12 Step Books, Bible readings, SOS, or Winners Circle.

Phone: 5p.m. to 10p.m. Monday through Thursday and Friday- Sunday 2p.m. to 10:30p.m.

Break Time: Offenders are allowed 5-minute break during indirect hours and 10-minute break time during direct hours.

Free Time: TV, Games, Letters, Reading, lying on bunks

Community Meetings: Offenders discuss down issues, needs, and do problem solving with each other. Offenders may select meditation materials to share from any treatment orientated materials, positive readings, or affirmations they use to mentally prepare themselves daily. Offenders sit in a large circle and take turns sharing. No one offender is allowed to monopolize. Group ends with the Serenity Affirmation.

Personal-Improvement: Offenders work on treatment plans, and read treatment related material. Offenders may select meditation materials to read from any treatment orientated materials, Big Book, 12 Step Books, Bible readings, SOS, or Winners Circle.

Tier 2 (90-120 days) Treatment Schedule PM Programming

Gist

Treatment Plan Study Group: Offenders are to work as a group to discuss and work on treatment plan assignments

General Instructions (GI): Dorm Cleaning

Cognitive Intervention: Cognitive Intervention targets offender populations that have a substance use history and criminal background. The goal of this curriculum is to change their drug-seeking behaviors as well as the criminal involvement. Cognitive Intervention helps the offenders to identify their faulty thinking patterns and identify correctives to assist in making better decisions. The lessons also explain how to complete thinking reports and addiction offender cycles.

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Tier 2 (90-120 days) Treatment Schedule PM Programming

elist

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Facility: MTC Gist State Jail

Facility: MTC Gist State Jail

| Class Title | Instructor | Proposed Dates and Times | Duration of Training | Staff Positions to be Trained | Synopsis of Topic |
|---|-----------------|---------------------------|----------------------|-------------------------------|--|
| Staff Survival/CPR/First Aid (included) | TBA | 11/15/21-11/16/21 8am-5pm | 16 Hours | All Staff | Security concerns, Officer Survival, Evacuation, Hoarding situations, Core parties, Riot & disturbances, Current approved fire techniques & basic knowledge of fire department (fire drill and presentation in the principles. This is a continuation course. |
| Orientation, Tier level system/ Evidence based Working in a correctional environment. | Harshall Garner | 11/22/21 8am-3pm | 8 Hours | Direct Care Staff | A review of the program as it relates to the Tier Level System of a State Jail as well as present including the effectiveness of the program, topics that are going to be discussed are staff roles on the different levels, the importance of staff being able to identify & address inmates, setting the correctional environment. |
| Intake/Screening and admission multiple reaction, DSM-V | Harshall Garner | 11/18/2022 8am-3pm | 8 Hours | Direct Care staff | Review program policies and State Jail intake procedures, including ASI and effective measurement of client care, Healthcare DSM-V criteria and review for assessment. |
| III/HEP A,B,C/STD/STB | Harshall Garner | 2/15/2023 6:30am-9:30am | 3 Hours | All Staff | Transmission, prevention, control, laws and regulations concerning rights of infected individuals, behaviors associated with HIV transmission |
| Staff Resiliency | Harshall Garner | 2/15/22 10am-12pm | 2 Hours | All Staff | Importance of self care and effective ways to manage stress and resources to avoid burnout (identifying signs of burnout) |
| Relapse Prevention | Erville Price | 3/22/22 6:15am-9:15am | 3 Hours | Direct Care staff | To learn skills and develop a plan to maintain positive changes in behavior (training for recovery) to support the recovery planning |
| Multiple needs populations | Erville Price | 3/22/22 11am-3pm | 4 Hours | Direct Care staff | Issues related to working with Multiple Needs populations, including substance risk and prevention, self regulation and mental/ cognitive impairments. |
| Policy and procedure/Contract Review/Corporate Compliance. | Harshall Garner | 4/19/22 6:30am-8:30am | 2 Hours | All Staff | Participation with review and discuss corporate compliance. This will aim understanding of the policy and audience manual. Participants will also review to ensure there are areas of contractual implications. |
| RECON/RE/Cyber security. | Harshall Garner | 4/19/22 9am-12pm | 3 Hours | All Staff | Participants will view the TDCJ videos: |
| Ethics/Abuse, Neglect & Exploitation. | Harshall Garner | 5/24/22 5:15am-9:15am | 3 Hours | All Staff | Applicable laws & Agency policies of prohibited behavior in Client Rights, Neglect & Exploitation, Types of Abuse and Neglect vs Agency policies for reporting. |
| Group Therapy & Peer Groups | Erville Price | 5/5/22 12pm-3pm | 3 Hours | Direct Care staff | Participants will learn effective group counseling styles which will assist them in identifying the curriculum and applying the themes to the group process. Examples of group/individual interviewing techniques to facilitate client involvement and change. |
| Motivational Interviewing Techniques/Evidence-Based Practices. | Harshall Garner | 6/21/22 8am-8am | 2 Hours | Direct Care staff | Participants of Motivational Interviewing Techniques to help the client progress and change. The evidence-based practices will be discussed during this training. |
| Cognitive Intervention | Harshall Garner | 6/21/22 8:15am-10:15am | 2 Hours | Direct Care Staff | To understand the effective roles of addition and the use of Thinking Beyond to change criminal thinking and patterns of repeated substance use. The participants will learn skills that will assist the client with recovery and reintegration into society. |
| Non-Violence crisis intervention | Erville Price | 6/21/22 11am-3pm | 4 Hours | Direct Care Staff | The participants will learn verbal and other non-physics methods of prevention early intervention, and crisis management techniques |
| Clinical Documentation | Harshall Garner | 7/19/22 6:30am-8:30am | 2 Hours | Direct Care Staff | Review of forms, including Narrative Notes & SOAP format, proper documentation, the requirements and ASI review |

James
D. A. V.

| | | | | | |
|---|-----------------|------------------------|---------|-------------------|--|
| Clinical Supervision | Hernball Ganser | 7/19/22 8:30am-11:45am | 3 Hours | Direct Care Staff | A review of the definition of clinical supervision, the differences between supervision and training, roles and criteria for supervision including, assessment and evaluation in clinical supervision, and potential for clinical supervision. |
| Correctional Training Program Specifics | Hershall Ganser | 8/23/22 9am-3pm | 8 Hours | Direct Care Staff | A study of the program curriculum to include: Constitution of Georgia, History of Georgia, Georgia Manuscriptal, signature documents, Good inmates and discipline, medical drugs and the team |

MANDATORY INITIAL TRAINING PLAN - FY 2022

Training Year: 09/01/2021 - 08/31/2022

Facility: MTC Gta State Jail

| Class Title | Instructor | Proposed Dates and Times | Duration of Training | Staff Positions to be Trained | Synopsis of Topic |
|-------------|------------|--------------------------|----------------------|-------------------------------|-------------------|
|-------------|------------|--------------------------|----------------------|-------------------------------|-------------------|

Signature
10-14-21

Exhibit A-3



Texas Department of Criminal Justice

Bryan Collier
Executive Director

April 22, 2019

Scott Marquardt, President
Management & Training Corporation
500 N. Marketplace Drive
Centerville, Utah 84014

Re: State Jail Substance Abuse Treatment Program
Contract Numbers:

| | | | |
|-------------------|-----------|-------------------|---------------|
| 696-PF-18-19-C158 | Lychner | 696-PF-18-19-C161 | Hutchins |
| 696-PF-18-19-C159 | Dominguez | 696-PF-18-19-C162 | Plane |
| 696-PF-18-19-C160 | Gist | 696-PF-18-19-C163 | Travis County |

Dear Mr. Marquardt:

In accordance with Section I.15 of the above referenced Contracts, the Department is providing you with the preliminary notice of our intent to extend the Period of Performance of these Contracts for Option Period One (September 1, 2019 through August 31, 2021) as described in Section F. If extended, a written Contract modification will be forthcoming to extend the Contracts, as well as provide the funding for Fiscal Year 2020 (September 1, 2019 through August 31, 2020) and Fiscal Year 2021 (September 1, 2020 through August 31, 2021).

If further assistance is needed, please feel free to contact me at 936-437-7043 or by e-mail at janice.wooley@tdcj.texas.gov.

Sincerely,

A handwritten signature in cursive script, reading "Amy McGlothlin, CTPM, CTCM".

Amy McGlothlin, CTPM, CTCM for Janice Wooley, CTPM, CTCM
Contract Specialist
TDCJ – Contracts and Procurement Department

cc: file

Our mission is to provide public safety, promote positive change in offender behavior, reintegrate offenders into society, and assist victims of crime.

P.O. Box 99
Huntsville, Texas 77342-0099
(936) 437-7015
www.tdcj.texas.gov

Lynne Piippo

From: Shantell Anderson <Shantell.Anderson@mtctrains.com>
Sent: Wednesday, May 12, 2021 3:24 PM
To: Lynne Piippo
Subject: RE: TDCJ Renewal Opportunity, State Jail Substance Abuse Treatment Services

CAUTION: This email was received from an EXTERNAL source, use caution when clicking links or opening attachments. If you believe this to be a malicious and/or phishing email, please contact the Information Security Office (ISO).

Scott Marquardt, President & CEO, Executive
Leann Bertsch, Sr. Vice President, Corrections
Sergio Molina, Sr. Vice President, Administrative Services

From: Lynne Piippo <Lynne.Piippo@tdcj.texas.gov>
Sent: Wednesday, May 12, 2021 2:19 PM
To: Shantell Anderson <Shantell.Anderson@mtctrains.com>
Subject: TDCJ Renewal Opportunity, State Jail Substance Abuse Treatment Services

EXTERNAL E-MAIL

Good afternoon,

Please review the attached document and respond no later than 5:00 PM CST, Friday, May 14, 2021.

Thank you,

Lynne Piippo

Contract Specialist, CTCD, CTCM
TDCJ Contracts & Procurement
Two Financial Plaza, Suite 525
Huntsville, TX 77340
PH. (936) 437-7130
FX. (325) 223-0310
Email: lynne.piippo@tdcj.texas.gov



Texas Department of Criminal Justice

Bryan Collier
Executive Director

May 12, 2021

Management & Training Corporation
Attn: Shantell Anderson
500 N. Marketplace Drive
Centerville, Utah 84014

Re: 696-PF-18-19-C158, Substance Abuse Treatment Services, Lychner State Jail
696-PF-18-19-C159, Substance Abuse Treatment Services, Dominguez State Jail
696-PF-18-19-C160, Substance Abuse Treatment Services, Gist State Jail
696-PF-18-19-C161, Substance Abuse Treatment Services, Hutchins State Jail
696-PF-18-19-C162, Substance Abuse Treatment Services, Plane State Jail
696-PF-18-19-C163, Substance Abuse Treatment Services, Travis County State Jail

In accordance with Section I.15 of the above referenced Contracts, the Department is providing you with the preliminary notice of our intent to extend the Period of Performance of these Contracts for Option Period Three (September 1, 2021 through August 31, 2023) as described in Section F.1. If extended, written Contract modifications for will be forthcoming to extend the Contracts, as well as provide the funding for Fiscal Years 2022 and 2023 (September 1, 2021 through August 31, 2023).

If your firm has changed Signature Authority or Point of Contact staff, including contact information as shown in Sections K.8 and K.10, please send me the updates so I can incorporate the changes in the Contract modifications. Should you have any questions, please contact me.

Thank you,



Lynne Piippo

Lynne Piippo, CTCD, CTCM
Contract Specialist
TDCJ Contracts & Procurement
Two Financial Plaza, Suite 525
Huntsville, Texas 77340
PH: (936) 437-7130
FX: (325) 223-0310
Email: lynne.piippo@tdcj.texas.gov

Cc: File

Our mission is to provide public safety, promote positive change in offender behavior, reintegrate offenders into society, and assist victims of crime.

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| MODIFICATION OF CONTRACT | | | Page of 1 | Pages 5 |
|--|---|---|---------------------------------------|----------------------------------|
| 1A. Contract No. 696-PF-18-19-C160 | 1B. Order No. (PO,JO,SA) PF190903 | 2. Modification No. M-001 | 3. Effective Date November 1, 2018 | |
| 4. Issued By: Texas Department of Criminal Justice Contracts and Procurement, Client Services and Governmental Contracts Branch Two Financial Plaza, Suite 525 Huntsville, Texas 77340 | | 5. Name and Address of Contractor (No., street, city, state & ZIP code) Management & Training Corporation 500 N. Marketplace Drive Centerville, Utah 84014 | | |
| 6. BILATERAL MODIFICATION ISSUED PURSUANT TO AUTHORITY UNDER: Section 1.14, Contract Changes. | | | | |
| 7. CONTRACTOR IS REQUIRED TO SIGN THIS DOCUMENT AND RETURN 3 ORIGINALS TO THE ISSUING OFFICE. | | | | |
| 8. PURPOSE OF MODIFICATION: Revise Sections C.6, E.5, G.2.2, and I.25; replace Sections C.10.D, C.10.E, H.8, and Exhibit I.9; and delete Section E.4.D. | | | | |
| 9. DESCRIPTION OF MODIFICATION: | | | | |
| <p>A. Revise Section C.6, Training, to add the following:</p> <p style="padding-left: 40px;">L. Cyber Security training (video provided by the Department) must be provided within thirty (30) Days after date of hire and annually thereafter.</p> <p>B. Replace Section C.10.D, Offender Records, to read as follows:</p> <p style="padding-left: 40px;">Individual case files for each Offender shall be maintained on a current basis and for a period consistent with the Department's Records Retention Schedule. Should an Event of Default or termination occur, the Department will secure and maintain custody of the Offender files.</p> <p>C. Replace Section C.10.E, Offender Records, to read as follows:</p> <p style="padding-left: 40px;">Offender files that have not reached retention periods upon expiration of the Contract are the property of the Department and must be physically transferred to the Department.</p> <p>D. Delete Section E.4.D, Authority to Audit.</p> <p>E. Revise Section E.5, Audits by Other Agencies, to add the following:</p> <p style="padding-left: 40px;">The Contractor is to retain all original audits and monitoring reports that are conducted by other agencies for a period of seven (7) years from close of audit. If those records are still in their retention period at the termination of the Contract, all originals must be physically transferred to the TDCJ-PFCMOD.</p> | | | | |
| Except as provided herein, all terms and conditions of the contract referenced above, as hereto changed, remain unchanged and in full force and effect. | | | | |
| 9A. Name and Title of Authorized Representative (Type or Print) Sergio Molina Sr. VP, Business Development & Administration | | 9B. Management & Training Corporation  (Signature of Authorized Representative) | | 9C. Date Signed 11-19-18 |
| 10A. Authorized Representative Jerry McGinty Chief Financial Officer | | 10B. Texas Department of Criminal Justice  (Signature of Authorized Representative) | | 10C. Date Signed 12/10/18 |

F. Revise Section G.2.2, Contract Specialist, to change the Contract Specialist's name to Janice Wooley, the telephone number to (936) 437-7043, and the e-mail address to janice.wooley@tdcj.texas.gov.

G. Replace Section H.8, Books and Records, to read as follows:

The Contractor must retain all financial records, including supporting documents, statistical records, and any other records or books, relating to the Contractor's performance under the Contract. These records must be maintained in accordance with the Department's Records Retention Schedule. The Contractor will grant access to all books, records, and documents pertinent to the Contract to the Department, SAO, and any federal governmental entity that has authority to review records due to federal funds being spent under the Contract.

H. Revise Section I.25, Notices, to change the Department representative's name to Janice Wooley and e-mail address to janice.wooley@tdcj.texas.gov.

I. Replace Exhibit J.9, TDCJ-PFCMOD Monthly Position Vacancy Instructions and Report, in its entirety.

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
PRIVATE FACILITY CONTRACT MONITORING/OVERSIGHT DIVISION
INSTRUCTIONS FOR MONTHLY POSITION VACANCY REPORT

| | |
|---|--|
| Position Control Number | <p>The permanent control number established by the Facility for each position on the current Staffing Plan defined in the Contract.</p> <p>This number should correspond with the Position Control Number (PCN) Listing.</p> |
| Position Title | <p>The Position Title on the current Staffing Plan that corresponds to the departing and replacing employee.</p> |
| a. Departing Employee | <p>Name of the employee assigned to the Position Control Number that is being removed from the Position Control Number Listing. This may be as a result of a termination or promotion.</p> |
| b. Replacing Employee | <p>Name of the employee being permanently assigned to the Position Control Number. This may be as a result of a promotion or being newly hired. The assigned employee must meet the satisfactory completion of all requirements designated for the position.</p> |
| 1. Date Vacated | <p>The departing employee's last Day on the job in a paid status or the last Day of any paid leave entitlements, such as vacation leave. This includes employees placed in Military Leave status upon exhausting all paid leave entitlements.</p> <p>Positions filled by employees that are in an Administrative Leave status will be considered vacant once the fourteen (14) Day time period is exhausted. <u>However, these positions should be listed on the Position Vacancy Report immediately upon notification that Administrative Leave status begins, notating the specific leave status.</u></p> <p>Positions filled by employees that are in a Workers' Compensation or Family Medical Leave (FML) status will be considered vacant once the twelve (12) week time period is exhausted. <u>However, these positions should be listed on the Position Vacancy Report immediately upon notification that Workers' Compensation or FML status begins, notating the specific leave status.</u></p> |
| 2. Date Filled | <p>Positions are to be reported filled on the Day following the completion of all requirements for the specific position based on Contract requirements.</p> |
| 3. Date Pre-Service / Orientation / Cyber Security Awareness Training Completed | <p>The date the replacing employee finishes pre-service training or orientation, and Cyber Security Awareness Training, based on the requirements of the position.</p> <p><u>A copy of the pre-service and Cyber Security Awareness training certificates must be attached to the Position Vacancy Report for newly hired employees.</u></p> |

Position Vacancy Reports (PVR), Position Control Number (PCN) Reports, and the new overtime documents must be submitted simultaneously and by the 5th working day of each month.

-
4. Date
Background
Check Received The date on the pre-employment criminal history inquiry or notification letter from the Department concerning the results of a criminal background check.
- A copy of the pre-employment criminal history inquiry and if applicable the notification letter must be attached to the Position Vacancy Report for newly hired employees.
-
5. Date
Pre-Employment
Drug Test Received The date of notification that a satisfactory pre-employment drug test was received.
- A copy of the pre-employment drug test must be attached to the Position Vacancy Report for newly hired employees.
-
6. Date of Hire The date the employee is hired with the Contractor.
-
7. Required
Certification
Completed Positions requiring certification must be designated as to whether the appropriate certification has been completed by indicating YES or NO.
- A copy of the certification must be attached to the Position Vacancy Report.
-
8. Required Diploma
or GED Date Proof of basic education required, such as a GED or diploma. Enter date listed on diploma.
-
9. Date of Department
Approval for Upper
Level Management Upper Level Management positions require Department approval.
- A copy of the Department approval letter must be attached to the Position Vacancy Report.
-
10. Date of
OJT Completed The date on the job training is completed. This may occur after the position is filled.
-
11. Number of
Days Position Vacant The calculation starts the Day after the position has been vacated and ends on the Day prior to the date filled.
-

Monthly Position Vacancy Report (PVR)

Facility Name: _____

Month Of: _____

| Category of Staff (Administration, Security, Support Ops & Programs, etc.): | | | | | | | | | | | | | | |
|---|----------------|-----------------------|--|-----------------|----------------|---|---------------------------------|----------------------------------|-----------------|--|--------------------------------------|--|-----------------------|------------------------------------|
| Position Control Number | Position Title | a. Departing Employee | | 1. Date Vacated | 2. Date Filled | * 3. Date Pre-Service / Orient / Cyber Security Completed | * 4. Date Background Check Rcvd | * 5. Date Pre Emp Drug Test Rcvd | 6. Date of Hire | * 7. Date Required Certification Completed | * 8. Date of Required Diploma or GED | * 9. Date of Department Approval for ULM | 10. Date OUT Complete | 11. Number of Days Position Vacant |
| | | | | | | | | | | | | | | |
| | | a. | | | | | | | | | | | | |
| | | b. | | | | | | | | | | | | |
| | | a. | | | | | | | | | | | | |
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I hereby confirm that the above information is accurate and correct. This report may be used in calculating fiscal sanctions regarding position vacancies.

Preparer: _____

Total Positions in Staffing Plan: _____

Total Vacant: _____

Total Filled: _____

Printed Name

Facility Warden or Administrator

Signature & Date

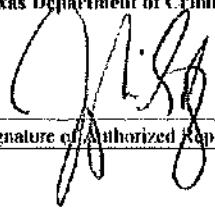
Facility Warden or Administrator

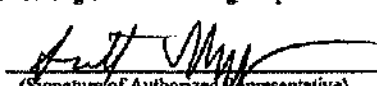
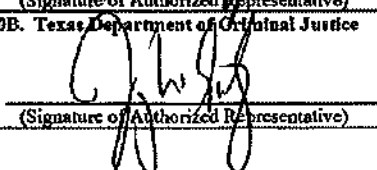
*Copies of Pre-Service Training Certificates, Cyber Security Awareness Training Certificates, Background Checks, Pre-Employment Drug Tests, Required Education Proof, and Required Certifications must be attached for all positions filled during the month.



Positions filled by promotion of current staff should be indicated by writing promotion through #3-6.


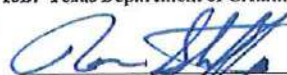
Copies of approval letters must be attached for all newly filled Upper Level Management positions.

Position Vacancy Reports (PVR), Position Control Number (PCN) Reports, and the new overtime documents must be submitted simultaneously and by the 5th working day of each month.

| MODIFICATION OF CONTRACT | | | Page of 1 | Pages 1 |
|--|---|--|--|--------------------------------|
| 1A. Contract No. 696-PF-18-19-C160 | 1B. Order No. (PO,JO,SA) PF190235 | 2. Modification No. M-002 | 3. Effective Date September 1, 2019 | |
| 4. Issued By: Texas Department of Criminal Justice Contracts and Procurement, Client Services and Governmental Contracts Branch Two Financial Plaza, Suite 525 Huntsville, Texas 77340 | | 5. Name and Address of Contractor (No., street, city, state & ZIP code) Management & Training Corporation 500 N. Marketplace Drive Centerville, Utah 84014 | | |
| 6. UNILATERAL MODIFICATION ISSUED PURSUANT TO AUTHORITY UNDER: Section I.14, Contract Changes and Section I.15, Option to Extend the Term of the Contract. | | | | |
| 7. CONTRACTOR IS NOT REQUIRED TO SIGN THIS DOCUMENT. | | | | |
| 8. PURPOSE OF MODIFICATION: Extend Contract and provide Option Period One Funding. | | | | |
| 9. DESCRIPTION OF MODIFICATION: | | | | |
| <p>A. Extend Contract for Option Period One (September 1, 2019 through August 31, 2021).</p> <p>B. The total amount of this Contract for Option Period One (September 1, 2019 through August 31, 2021) shall not exceed \$852,616.24. In the event the Contractor performs services in excess of the funded amount, the Contractor is at risk for not receiving payment for said services.</p> | | | | |
| Except as provided herein, all terms and conditions of the contract referenced above, as hereto changed, remain unchanged and in full force and effect. | | | | |
| 9A. Authorized Representative Jerry McGinty Chief Financial Officer | | 9B. Texas Department of Criminal Justice  (Signature of Authorized Representative) | | 9C. Date Signed 6/10/19 |

| MODIFICATION OF CONTRACT | | | Page of 1 | Pages 1 |
|--|---|---|---------------------------------------|----------------------------------|
| 1A. Contract No. 696-PF-18-19-C160 | 1B. Order No. (FO,JO,SA) PF190802 | 2. Modification No. M-003 | 3. Effective Date November 1, 2019 | |
| 4. Issued By: Texas Department of Criminal Justice Contracts and Procurement, Client Services and Governmental Contracts Branch Two Financial Plaza, Suite 525 Huntsville, Texas 77340 | | 5. Name and Address of Contractor (No., street, city, state & ZIP code) Management & Training Corporation 500 N. Marketplace Drive Centerville, Utah 84014 | | |
| 6. BILATERAL MODIFICATION ISSUED PURSUANT TO AUTHORITY UNDER: Section I.14, Contract Changes. | | | | |
| 7. CONTRACTOR IS REQUIRED TO SIGN THIS DOCUMENT AND RETURN <u>3</u> ORIGINALS TO THE ISSUING OFFICE. | | | | |
| 8. PURPOSE OF MODIFICATION: Replace Sections C.14 and C.15. | | | | |
| 9. DESCRIPTION OF MODIFICATION: | | | | |
| <p>A. Replace Section C.14, Treatment Grievance Procedures, to read as follows:</p> <p>A. The Contractor shall have written Offender treatment grievance policies and procedures, which are consistent with the Department's grievance policy, and will provide a copy of these procedures to all Offenders at intake.</p> <p>B. The Contractor shall maintain a master file of all treatment grievances and pursuant action(s) taken.</p> <p>C. Treatment grievance records shall be retained on location in accordance with the Department's Records Retention Schedule.</p> <p>D. The Contractor shall submit a monthly report listing all treatment grievances filed and pursuant action(s) taken to the TDCJ-RPD.</p> <p>B. Replace Section C.15, Treatment Disciplinary Procedures, to read as follows:</p> <p>A. The Contractor shall have written Offender treatment disciplinary policies and procedures, which are consistent with the Department's SJSAPOM, and will provide a copy of these procedures to Offenders at intake.</p> <p>B. Treatment disciplinary records shall be retained on location in accordance with the Department's Records Retention Schedule.</p> <p>C. The Contractor shall submit a monthly report listing all treatment disciplinary cases written and pursuant action(s) taken to the TDCJ-RPD.</p> <p>D. The Contractor shall maintain both a master file of treatment violations on a Behavioral Intervention Log and a master file of all treatment disciplinary cases issued and the pursuant action(s) taken.</p> | | | | |
| Except as provided herein, all terms and conditions of the contract referenced above, as hereto changed, remain unchanged and in full force and effect. | | | | |
| 9A. Name and Title of Authorized Representative (Type or Print) Scott Marquardt President | | 9B. Management & Training Corporation  (Signature of Authorized Representative) | | 9C. Date Signed 12/3/19 |
| 10A. Authorized Representative Jerry McGinty Chief Financial Officer | | 10B. Texas Department of Criminal Justice  (Signature of Authorized Representative) | | 10C. Date Signed 12/21/19 |

| MODIFICATION OF CONTRACT | | | Page of | Pages |
|---|--|--|--|-----------------------------------|
| | | | 1 | 1 |
| 1A. Contract No. 696-PF-18-19-C160 | 1B. Order No. (FOJO,SA) PF210249 | 2. Modification No. M-004 | 3. Effective Date September 1, 2021 | |
| 4. Issued By: Texas Department of Criminal Justice Contracts and Procurement, Client Services and Governmental Contracts Branch Two Financial Plaza, Suite 525 Huntsville, Texas 77340 | | 5. Name and Address of Contractor (No., street, city, state & ZIP code) Management & Training Corporation 500 N. Marketplace Drive Centerville, Utah 84014 | | |
| 6. BILATERAL MODIFICATION ISSUED PURSUANT TO AUTHORITY UNDER: Section I.14, Contract Changes; and Section I.15, Option to Extend the Term of the Contract. | | | | |
| 7. CONTRACTOR IS REQUIRED TO SIGN THIS DOCUMENT AND RETURN <u>1</u> ORIGINAL TO THE ISSUING OFFICE. | | | | |
| 8. PURPOSE OF MODIFICATION: Extend Contract and provide funding for FY22 and FY23; revise Section G.2.2; and replace Section I.25. | | | | |
| 9. DESCRIPTION OF MODIFICATION: | | | | |
| <p>A. Extend Contract for Option Period Two (September 1, 2021 through August 31, 2023).</p> <p>B. The total amount of this Contract for Option Period Two (September 1, 2021 through August 31, 2023) shall not exceed \$871,357.20. In the event the Contractor performs services in excess of the funded amount, the Contractor is at risk for not receiving payment for said services.</p> <p>C. Revise Section G.2.2, Contract Specialist, to reflect the name, phone number and email address of the new Contract Specialist. The new Contract Specialist is Lynne Piippo, phone number 936-437-7130, and email address lynne.piippo@tdcj.texas.gov.</p> <p>D. Replace Section I.25, Notices, as follows:</p> <p>Any written notices required under this Contract will be delivered by carrier service to the Contractor's office address specified on Page 1 of this Contract by U.S. Mail or by email.</p> <p>Notices to the Department shall be sent to the Department's Contract Specialist as defined in Section G.2.2.</p> <p>Notice will be effective upon receipt by the affected party. Either party may change the designated notice address in this Section by written notification to the other party. This change shall be incorporated with a unilateral modification.</p> | | | | |
| Except as provided herein, all terms and conditions of the contract referenced above, as hereto changed, remain unchanged and in full force and effect. | | | | |
| 9A. Name and Title of Authorized Representative (Type or Print) Leann Bertsch Sr. Vice President, Corrections | | 9B. Management & Training Corporation  Leann Bertsch (Jun 10, 2021 17:22 CDT) (Signature of Authorized Representative) | | 9C. Date Signed 06/10/2021 |
| 10A. Authorized Representative Ron Steffa Chief Financial Officer | | 10B. Texas Department of Criminal Justice  (Signature of Authorized Representative) | | 10C. Date Signed 7-7-21 |

| MODIFICATION OF CONTRACT | | | Page of 1 | Pages 9 |
|---|---|---|--|------------------------------------|
| 1A. Contract No. 696-PF-18-19-C160 | 1B. Order No. (PO,JO,SA) PF210509 | 2. Modification No. M-005 | 3. Effective Date September 1, 2021 | |
| 4. Issued By: Texas Department of Criminal Justice Contracts and Procurement, Client Services and Governmental Contracts Branch Two Financial Plaza, Suite 525 Huntsville, Texas 77340 | | 5. Name and Address of Contractor (No., street, city, state & ZIP code) Management & Training Corporation 500 N. Marketplace Drive Centerville, Utah 84014 | | |
| 6. BILATERAL MODIFICATION ISSUED PURSUANT TO AUTHORITY UNDER: Section I.14, Contract Changes. | | | | |
| 7. CONTRACTOR IS REQUIRED TO SIGN THIS DOCUMENT AND RETURN <u>1</u> ORIGINAL TO THE ISSUING OFFICE. | | | | |
| 8. PURPOSE OF MODIFICATION: Replace Section J, Exhibits J.3 and J.9. | | | | |
| 9. DESCRIPTION OF MODIFICATION: | | | | |
| <p>A. Replace Section J, List of Exhibits, in its entirety.</p> <p>B. Replace Exhibit J.3, Compliance Standards and Average Daily Salary, in its entirety to include IPSUTP program.</p> <p>C. Replace Exhibit J.9, TDCJ-PFCMOD Monthly Position Vacancy Instructions and Report, with Exhibit J.9, Monthly Position Vacancy Report (PVR) Instructions and Form, in its entirety.</p> | | | | |
| Except as provided herein, all terms and conditions of the contract referenced above, as hereto changed, remain unchanged and in full force and effect. | | | | |
| 9A. Name and Title of Authorized Representative (Type or Print) Leann Bertsch Sr. Vice President, Corrections | | 9B. Management & Training Corporation  Leann Bertsch (Oct 6, 2021 09:05 MDT) (Signature of Authorized Representative) | | 9C. Date Signed 10/06/2021 |
| 10A. Authorized Representative Ron Steffa Chief Financial Officer | | 10B. Texas Department of Criminal Justice  (Signature of Authorized Representative) | | 10C. Date Signed 10/06/2021 |

SECTION J - LIST OF EXHIBITS

| EXHIBIT NO. | TITLE | PAGES |
|-------------|--|-------|
| J.1 | Budget Justification Forms and Staffing Plans | 2 |
| J.2 | HUB Subcontracting Plan (HSP) | 7 |
| J.3 | Compliance Standards and Average Daily Salary | 4 |
| J.4 | TDCJ-PFCMOD Monthly Strength Report | 1 |
| J.5 | Reserved for Future Use | |
| J.6 | Reserved for Future Use | |
| J.7 | TDCJ Job Description Minimum Qualifications | 3 |
| J.8 | Reserved for Future Use | |
| J.9 | Monthly Position Vacancy Report (PVR) Instructions and Form | 3 |
| J.10 | TDCJ-PFCMOD Monthly Position Control Number (PCN) Instructions and Listing | 2 |

COMPLIANCE STANDARDS

| COMPLIANCE STANDARDS FOR ALL PROGRAMS* | | | | |
|--|--|---|--|--|
| STANDARD | ACCEPTABLE | UNACCEPTABLE | PAYMENT ADJUSTMENT CALCULATION | |
| 1. The Contractor shall staff all positions with qualified employees, including special certifications and licenses as applicable. | Less than or equal to ninety (90) Days | Greater than ninety (90) Days | Reduce by the Average Daily Salary (Attachment A) for each Day a position remains vacant in excess of ninety (90) Days. | |
| 2. The Contractor shall follow all requirements regarding initial employment and re-employment of employees (i.e., obtaining and maintaining a copy of satisfactory background checks and obtaining and maintaining all Department approvals for employees with criminal convictions/pending charges). The requirements are mandatory prior to being assigned to a position and having contact with Offenders. | 100% | Less than 100% | Reduce by \$50 for each Day the position was filled with a non-approved individual. | |
| 3. The Contractor shall obtain from the Department, and maintain a copy in employee files, prior written approval to hire all ULM staff as directed. | 100% | Less than 100% | Reduce by the Average Daily Salary (Attachment A) for each Day the position was filled with a non-approved individual. | |
| 4. The Contractor shall maintain valid current insurance policies as directed. | Valid current insurance policies | Lapsed policy or policy not meeting Contract requirements | Reduce by \$1,000 per Day for which mandated insurance coverage was not in effect. The Contractor has twenty (20) Days to cure before this becomes an Event of Default. | |
| 5. The Contractor shall submit a written response to the Department detailing the corrective action(s) taken to address any items of non-compliance within twenty (20) Days of receiving written notice of the item(s) from the Department. | Less than or equal to twenty (20) Days from the first response | Greater than twenty (20) Days from the first response | Reduce by the Average Daily Salary (Attachment A) of the Program Director for each Day past the acceptable response time. | |
| 6. The Contractor shall correct all identified areas of non-compliance, as identified by the Department, within twenty (20) Days or by the date of a Department approved extension. | Less than or equal to twenty (20) Days from the first response | Greater than twenty (20) Days from the first response | Reduce by the Average Daily Salary (Attachment A) of the Program Director for each Day an issue of non-compliance is not corrected within twenty (20) Days or by the date of a Department approved extension. | |
| 7. The Contractor shall provide and document all programming hours (or the inability to provide programming) weekly. | 100% | Less than 100% | Reduce by \$150 for each individual or group session not provided or documented in accordance with the Department's approved treatment schedule unless prior Department approval has been received regarding cancellation of session(s). | |
| 8. The Contractor shall ensure staff trainings are completed as outlined and within the required time frames in accordance with the respective position. | 100% | Less than 100% | Reduce by the Average Daily Salary (Attachment A) for each Day staff is in excess of the required time frames. | |

| STANDARD | ACCEPTABLE | UNACCEPTABLE | PAYMENT ADJUSTMENT CALCULATION |
|--|--|---|--|
| 9. The Contractor shall comply with treatment staff licensure standards as set forth by the respective licensing agency. <i>*not applicable to ISF CIP</i> | 100% | Less than 100% | Reduce by the Average Daily Salary (Attachment A) for each Day staff is assigned to a treatment position without appropriate licensure. |
| 10. The Contractor shall ensure an Assessment is administered to each Offender within five (5) Working Days of entry into the program. <i>*not applicable to ISF CIP</i> | Less than or equal to five (5) Working Days from entry | Greater than five (5) Working Days from entry | Reduce by the Contractor Per Diem Rate for each Day an Offender is without an appropriate Assessment beyond the required time frame. |
| 11. The Contractor shall provide each Offender with an Individual Treatment Plan (ITP) that addresses their specific needs within ten (10) Working Days of entry into the program. <i>*not applicable to ISF CIP</i> | Less than or equal to ten (10) Working Days from entry | Greater than ten (10) Working Days from entry | Reduce by the Contractor Per Diem Rate for each Day an Offender is without an appropriate ITP beyond the required time frame. |
| 12. The Contractor shall document Offender adjustment and/or progress notes, as well as programming activity, weekly. | 100% | Less than 100% | Reduce by the Contractor Per Diem Rate for each Day an Offender record does not reflect weekly progress notes. |
| 13. Counselor-to-Offender caseload ratios shall be less than or equal to sixteen (16) for Special Needs Offenders or less than or equal to thirty (30) for Regular Needs Offenders. ISF CIP Specialist-to-Offender caseload ratios shall be less than or equal to thirty (30). <i>*not applicable to DWI or FCPRP</i> | Special Needs less than or equal to sixteen (16) caseloads Regular Needs less than or equal to thirty (30) caseloads ISF CIP less than or equal to thirty (30) caseloads | Special Needs greater than sixteen (16) caseloads Regular Needs greater than thirty (30) caseloads ISF CIP greater than thirty (30) caseloads | Reduce by \$200 per caseload exceeding the requirement. |
| 14. The Contractor shall complete the Monthly Position Vacancy Report (PVR), Monthly Position Control Number (PCN) Listing, Monthly Strength Report, Monthly Human Resources Report, and Contractor Monthly Invoices or reports deemed applicable by the Department; all reports must be typed and submitted accurately by the fifth (5th) Working Day of the month. | 100% | Less than 100% | Reduce by the Average Daily Salary (Attachment A) of the Program Director for each Day past the acceptable response time. Reduce by \$100 per identified error. |
| 15. The Contractor shall maintain organized, complete, and accurate Offender records and employee personnel files. | 100% | Less than 100% | Reduce by \$25 for each file if any of the required documents are missing from the file at the time of the audit. |
| ADDITIONAL COMPLIANCE STANDARDS FOR DWI | | | |
| 16. DWI group sessions and classes shall not exceed the size limits stated in the Department's DWI Recovery Program Operations Manual. | 100% | Less than 100% | Reduce by the Contractor Per Diem Rate for each Offender in excess of the mandated group session/class size limit. |
| 17. DWI group sessions and classes shall not exceed the size limits set by the Texas Department of Licensing and Regulation (TDLR). | 100% | Less than 100% | Reduce by the Contractor Per Diem Rate for each Offender in excess of the mandated group session/class size limit. |

| STANDARD | ACCEPTABLE | UNACCEPTABLE | PAYMENT ADJUSTMENT CALCULATION |
|---|------------|----------------|--|
| 18. The Contractor shall ensure a Comprehensive Assessment Plan, to include a Discharge Summary, is provided to each Offender within thirty (30) Days prior to completion of the program. | 100% | Less than 100% | Reduce by the Contractor Per Diem Rate for each Day the Comprehensive Assessment Plan is not completed within thirty (30) Days prior to the Offender's scheduled discharge date. |
| ADDITIONAL COMPLIANCE STANDARDS FOR SAFPF, IPTC, AND IPSUTP | | | |
| 19. The Contractor shall provide each Offender with a Continuum of Care Plan within thirty (30) Days prior to completion of the program. <i>*not applicable to IPSUTP</i> | 100% | Less than 100% | Reduce by the Contractor Per Diem Rate for each Day the Continuum of Care Plan is not completed within thirty (30) Days prior to the Offender's scheduled discharge date. |
| 20. The Contractor shall provide each Offender with a Discharge Summary within thirty (30) Days prior to completion of the program. | 100% | Less than 100% | Reduce by the Contractor Per Diem Rate for each Day the Discharge Summary is not completed within thirty (30) Days prior to the Offender's scheduled discharge date. |
| 21. The Contractor shall ensure each Offender completes a Relapse Prevention Plan within forty-five (45) Days prior to completion of the program. | 100% | Less than 100% | Reduce by the Contractor Per Diem Rate for each Day the Relapse Prevention Plan is not completed within forty-five (45) Days prior to the Offender's scheduled discharge date. |
| 22. The Contractor shall staff all Counselor III positions with certified employees, including special certifications and licenses where applicable. <i>*SAFPF Special Needs Only</i> | 100% | Less than 100% | Reduce by the Average Daily Salary (Attachment A) for each Day the Counselor III position remains vacant in excess of thirty (30) Days. |
| ADDITIONAL COMPLIANCE STANDARDS FOR SJSAP | | | |
| 23. The Contractor shall ensure Offenders are placed in the appropriate program tier based on Assessment results. | 100% | Less than 100% | Reduce by the Contractor Per Diem Rate for each Day an Offender remains in the program past the number of Tier Days as determined by the Assessment score. |
| 24. The Contractor shall provide DWI Services to all eligible Offenders. | 100% | Less than 100% | Reduce by \$100 for each identified Offender for whom the Contractor fails to provide DWI Services. |

The Department has the right to withhold monthly Payment or temporarily suspend some or all of the Payment adjustments identified in the above table.

Decisions to suspend Payment adjustments will be made by the TDCJ-PFCMOD Director and will be conveyed to the Contractor by letter. Decisions and notifications to reinstate Payment adjustments will be handled in a similar manner.

*All programs include: Driving While Intoxicated (DWI); Substance Abuse Felony Punishment Facility (SAFPF); In-Prison Therapeutic Community (IPTC); State Jail Substance Abuse Program (SJSAP); Female Cognitive Pre-Release Program (FCPRP); Intermediate Sanction Facility (ISF) Cognitive Intervention Program (CIP); and In-Prison Substance Use Treatment Program (IPSUTP).

Average Daily Salary Schedule

| Position Description | Option 1 | | Option 2 | | Option 2 | | Option 3 | | Option 3 | |
|--|----------|--------|----------|--------|----------|--------|----------|--------|----------|--------|
| | Year 2 | FY2021 | Year 1 | FY2022 | Year 2 | FY2023 | Year 1 | FY2024 | Year 2 | FY2025 |
| Program Supervisor / Program Director / Assistant Director | \$ | 184 | \$ | 187 | \$ | 191 | \$ | 195 | \$ | 199 |
| Substance Abuse Counselor III / Senior Counselor / Addiction Severity Index (ASI) Tester | \$ | 142 | \$ | 145 | \$ | 148 | \$ | 151 | \$ | 154 |
| Substance Abuse Counselor I & II / Counselor / Counselor Intern | \$ | 127 | \$ | 129 | \$ | 132 | \$ | 135 | \$ | 137 |
| Case Manager / Transitional Case Manager | \$ | 107 | \$ | 109 | \$ | 111 | \$ | 114 | \$ | 116 |
| Administrative Assistant / Coordinator / Treatment Specialist | \$ | 80 | \$ | 82 | \$ | 84 | \$ | 85 | \$ | 87 |

Instructions for Monthly Position Vacancy Report (PVR)

Position Control Number (PCN): The permanent control number established by the Facility for each position on the current Staffing Plan defined in the Contract.
This number should correspond with the PCN Listing.

Position Title: The Position Title on the current Staffing Plan that corresponds to the departing and replacing employee.

a. Departing Employee: Name of the employee assigned to the PCN that is being removed from the PCN Listing. This may be as a result of a termination or promotion.

b. Replacing Employee: Name of the employee being permanently assigned to the PCN. This may be as a result of a promotion or being newly hired. The assigned employee must meet the satisfactory completion of all requirements designated for the position.

1. Date Vacated: The departing employee's last Day on the job in a paid status or the last Day of any paid leave entitlements, such as vacation leave. This includes employees placed in Military Leave status upon exhausting all paid leave entitlements.

Positions filled by employees that are in an Administrative Leave status will be considered vacant once the fourteen (14) Day time period is exhausted. However, these positions should be listed on the PVR immediately upon notification that Administrative Leave status begins, noting the specific leave status.

Positions filled by employees that are in a Workers' Compensation or Family Medical Leave (FML) status will be considered vacant once the twelve (12) week time period is exhausted. However, these positions should be listed on the PVR immediately upon notification that Workers' Compensation or FML status begins, noting the specific leave status.

2. Date Filled: Positions are to be reported filled on the Day following the completion of all requirements for the specific position based on Contract requirements.

3. Date Cyber Security Awareness Training, PD-04 Training, and Pre-Service Training / Orientation Completed: The date the replacing employee finishes Cyber Security Awareness Training, PD-04 Training, and Pre-Service Training / Orientation based on the requirements of the position. If the three (3) items are completed on three (3) separate dates, report the later date.

A copy of the Cyber Security Awareness Training certificate, PD-04 form, and Pre-Service Training / Orientation certificate must be attached to the PVR for newly hired employees.

4. Date Background Check Received: The date on the pre-employment criminal history inquiry or notification letter from the Department concerning the results of a criminal background check.
A copy of the pre-employment criminal history inquiry and, if applicable, the notification letter, must be attached to the PVR for newly hired employees.
5. Date Pre-Employment Drug Test Received: The date of notification that a satisfactory pre-employment drug test was received.
A copy of the pre-employment drug test must be attached to the PVR for newly hired employees.
6. Date of Hire: The date the employee is hired with the Contractor.
7. Date Required Certification Completed: Positions requiring certification must be designated as to whether the appropriate certification has been completed by indicating the date of completion on the certification.
A copy of the certification must be attached to the PVR.
8. Date of Required Diploma or GED: Proof of basic education required, such as GED or diploma. Enter the date listed on the diploma.
9. Date of Department Approval for Upper Level Management: Upper Level Management positions, as indicated on Exhibit J.1, Staffing Plan, require Department approval.
A copy of the Department approval letter must be attached to the PVR.
10. Date OJT Completed: The date on-the-job-training (OJT) is completed. This may occur after the position is filled.
11. Number of Days Position Vacant: The calculation starts the Day after the position has been vacated and ends on the Day prior to the date filled.

Monthly Position Vacancy Report (PVR)

Facility Name: _____

Month Of: _____

| Position Control Number (PCN) | Position Title | Departing Employee | | 1. Date Vacated | * 3. Date Cyber Security, PD-04, & Pre-Service / Orientation Completed | * 4. Date Background Check Rcvd | * 5. Date Pre-Employment Drug Test Rcvd | * 6. Date of Hire | * 7. Date Required Certification Completed | * 8. Date of Required Diploma or GED | * 9. Date of Department Approval for ULM | 10. Date OJT Completed | 11. Number of Days Position Vacant |
|-------------------------------|----------------|--------------------|--------------------|-----------------|--|---------------------------------|---|-------------------|--|--------------------------------------|--|------------------------|------------------------------------|
| | | a. | b. | | | | | | | | | | |
| | | a. | Replacing Employee | | | | | | | | | | |
| | | b. | | | | | | | | | | | |
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| | | b. | | | | | | | | | | | |

I hereby confirm that the above information is accurate and correct. This report may be used in calculating fiscal sanctions regarding position vacancies.

Preparer: _____

Total Positions in Staffing Plan: _____

Total Vacant: _____

Total Filled: _____

Printed Name _____

Administrator

Signature & Date _____

Administrator

*Copies of Cyber Security Awareness Training certificates, PD-04 forms, Pre-Service / Orientation certificates, Background Checks, Pre-Employment Drug Tests, Required Education proof, and Required Certifications must be attached for all positions filled during the month.

Positions filled by promotion of current staff should be indicated by writing promotion through #3-6.

Copies of approval letters must be attached for all newly filled Upper Level Management positions.

Amy McGlothlin

From: RS Marquardt <Marquardt@mtctrains.com>
Sent: Monday, April 22, 2019 6:36 PM
To: Amy McGlothlin
Cc: michael.bell@mtctrains.com; Bernie Warner; Virleen Ferre; Connie Cruz
Subject: Fwd: MTC Contracts - Contract Renewal Notices
Attachments: 7BE711D4-9530-462D-81DD-BAE6D4622CB9.png; ATT00001.htm; FA08C7EA-D7F4-4CD9-BFFA-E50EA5159756.png; ATT00002.htm; 8A27B0DB-05A3-4D12-BF95-A173868CBE17.png; ATT00003.htm; 19D5AD9A-D86D-472E-89E4-28251B57B4D6.png; ATT00004.htm; MTC C097 - Preliminary Notice Option Period Two.pdf; ATT00005.htm; MTC - C101, Preliminary Notice, Option Period 2.pdf; ATT00006.htm; MTC - C109, Preliminary Notice, Option Period 2.pdf; ATT00007.htm; MTC - SAFPF.IPTC C076 - C085, Preliminary Notice, Option Period 1.pdf; ATT00008.htm; MTC - SJSA C158 - C163, Preliminary Notice, Option Period 1.pdf; ATT00009.htm

Importance: High

CAUTION: This email was received from an EXTERNAL source, use caution when clicking links or opening attachments. If you believe this to be a malicious and/or phishing email, please contact the Information Security Office (ISO).

Thank you. We are in receipt of the notice letters.

Scott

Scott Marquardt
President
PO Box 10, Centerville, UT 84014
Office: (801) 693-2800
www.mtctrains.com

Amy McGlothlin

From: Amy McGlothlin
Sent: Monday, April 22, 2019 4:58 PM
To: Marquardt@mtctrains.com
Subject: MTC Contracts - Contract Renewal Notices
Attachments: MTC C097 - Preliminary Notice Option Period Two.pdf; MTC - C101, Preliminary Notice, Option Period 2.pdf; MTC - C109, Preliminary Notice, Option Period 2.pdf; MTC - SAFPF, IPTC C076 - C085, Preliminary Notice, Option Period 1.pdf; MTC - SJSA C158 - C163, Preliminary Notice, Option Period 1.pdf

Importance: High

Please see the attached preliminary notice letter regarding the upcoming renewals of your Contracts listed below with TDCJ.

Please respond to this message in order to verify that you have received the notification. Please send your response by close of business on Friday, April 26, 2019.

Contracts being renewed:

| | | |
|-------------------|---------------|--|
| 696-PF-16-17-C097 | Baten ISF | Cognitive Intervention Program |
| 696-PF-16-17-C101 | Hamilton | DWI Recovery Program |
| 696-PF-16-17-C109 | Lockhart | DWI Recovery Program & SAFPF/IPTC |
| 696-PF-18-19-C076 | Estelle | SAFPF/IPTC |
| 696-PF-18-19-C077 | Glossbrenner | SAFPF/IPTC |
| 696-PF-18-19-C078 | Crain | SAFPF/IPTC |
| 696-PF-18-19-C079 | Halbert | SAFPF/IPTC |
| 696-PF-18-19-C080 | Havins | SAFPF/IPTC |
| 696-PF-18-19-C081 | Henley | SAFPF/IPTC |
| 696-PF-18-19-C082 | Jester I | SAFPF/IPTC |
| 696-PF-18-19-C083 | Kyle | SAFPF/IPTC |
| 696-PF-18-19-C084 | Ney | SAFPF/IPTC |
| 696-PF-18-19-C085 | Sayle | SAFPF/IPTC |
| 696-PF-18-19-C158 | Lychner | State Jail Substance Abuse Treatment Program |
| 696-PF-18-19-C159 | Dominguez | State Jail Substance Abuse Treatment Program |
| 696-PF-18-19-C160 | Gist | State Jail Substance Abuse Treatment Program |
| 696-PF-18-19-C161 | Hutchins | State Jail Substance Abuse Treatment Program |
| 696-PF-18-19-C162 | Plane | State Jail Substance Abuse Treatment Program |
| 696-PF-18-19-C163 | Travis County | State Jail Substance Abuse Treatment Program |

Thank you,
Amy McGlothlin, CTPM, CTCM
Texas Department of Criminal Justice
Contracts and Procurement Department
Two Financial Plaza, Suite 525
Huntsville, Texas 77340
Phone #: 936-437-7064
Fax #: 325-223-0310

STATE OF TEXAS PURCHASE VOUCHER

Page 001 of 001

| | | | | | | | | | | |
|--|----------------------------------|--|-----------------------------|-----------------------------|--|-------------------------------------|--|----------------|------------------|---|
| ARCHIVE REFERENCE NO. | | AGENCY 696 - HUNTSVILLE ACCOUNTS PAYABLE | | | | | CURRENT DOCUMENT 98050806 | | | |
| | | EFF DATE 07/26/18 | DOC DATE 06/01/18 | DUE DATE 08/02/18 | DOC AGY 696 | DOCUMENT AMOUNT 24,921.60 | | | | |
| VENDOR NO / MC | | REQUESTED PAYMENT DATE | | | POT | PCC | REQUISITION NO 696-8-PF1819C160- | | | |
| VENDOR NAME / ADDRESS MANAGEMENT & TRAINING CORP P O BOX 10 ****DIRECT DEPOSIT**** CENTERVILLE, UT 84014 | | | | | AGENCY USE TEXAS DEPARTMENT OF CRIMINAL JUST P.O. BOX 4018 HUNTSVILLE, TX 77342 | | | | | |
| SFX | REF DOC - SFX | M | TC | INDEX | PCA | AY | COBJ | AOBJ | AMOUNT | R |
| | APPN | FUND | INVOICE NUMBER | | DESCRIPTION | | | AGENCY USE | | |
| 001 | | | | | | | | | 24,921.60 | |
| 13052 0014 GIST-0618-01 GIST FACILITY | | | | | | | | | | |
| | | | | | | | | | | |
| DATE | DESCRIPTION OF GOODS OR SERVICES | | | | | QTY | UNIT COST | AMOUNT | | |
| 06/30/18 TX GOVT CODE 493.009 AND 501.0931 | | | | | | | | | | |
| | | | | | | | | | | |
| CONTACT NAME | | INVOICE SERVICES | | | | (936) 437-6929 | | PA00029 | | |
| NAME | | PHONE | | | | ENT BY | | | | |
| I approve this voucher for payment. The above goods or services correspond in every particular with the contract under which they were purchased. The invoice for the goods or services is correct. The payment complies with the General Appropriations Act. | | | | | | | | | | |
| APPROVED: NAME | | TITLE | | | | DATE | | | | |
| APPROVED: NAME | | TITLE | | | | DATE | | | | |

95050804

R-713 ✓

S 4130 ✓

D 8/2

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Private Facility Contract Monitoring / Oversight Division

TO: Amanda Alvarado
 Accounts Payable

DATE: July 17, 2018

FROM: Kandy Dorey
 Private Facilities
 Accountant II - Business Operations

SUBJECT: June 2018
 Management & Training Corp.
 Contract No: PF-18-19-C160 ✓
 Invoice Received: 7/3/2018
 Payment Due: 8/2/2018

Enclosed is the invoice per diem payment for *Gist Facility*.

| Invoice # ✓ | Vendor ✓ | Man Days | Rate | Total |
|--------------|-----------------------------|----------|---------|--------------|
| Gist-0618-01 | Management & Training Corp. | 2,596 | \$ 9.60 | \$ 24,921.60 |

The following adjustments have been made:

| Sanction | Date | Amount Withheld |
|----------|------|-----------------|
|----------|------|-----------------|

Total Withholdings: \$

| Total amount to be paid: | | | | \$ 24,921.60 ✓ |
|---------------------------------|---------|---------|--------|-----------------------|
| Lonestar Coding | Index | PCA | AOBJ | Amount |
| | 76970 ✓ | 63300 ✓ | 8483 ✓ | \$ 24,921.60 ✓ |

Attachments
File

cc: Michael Bell, Management & Training Corp. Jared Howes, Management & Training Corp.
 Jason Diehl, Budget Michelle Greenalch, Management & Training Corp.

I certify that the attached invoices have been audited for compliance with the currently approved contract prices, are free of mathematical errors, the services / goods were received and correspond in every particular way with the contract under which they were procured, and the invoices are true and unpaid.

Kandy Dorey 7/19/18
 Signature & Date

REFUSE INTEREST *MM* ✓

Gist State Jail

3295 Farm to Market 3514
Beaumont, TX 77705
PHONE (409) 727-8400

ATTN: TDCJ - Private Facility Contract Monitoring /
Oversight Division
Two Financial Plaza Suite 310
Huntsville, TX 77340

REMT TO: MANAGEMENT & TRAINING CORP.
500 N. Marketplace Dr.
P.O. Box 10
Centerville UT 84014

Inv. No. GIST-0618-01 ✓
Date: July 03, 2018

Contract 696-PF-18-19-C160 ✓

| DESCRIPTION | | AMOUNT |
|---|-----------|----------------|
| GIST MANDAYS PER ATTACHED COUNT FOR JUNE 2018 | | |
| ✓2,596 INMATES | \$ 9.60 ✓ | \$ 24,921.60 ✓ |
| Total | | \$ 24,921.60 |

Remittance Requested by Direct Deposit to:
Management & Training Corporation
ID# 87-0365322
Account# 032-00638-60
Wells Fargo Bank
ABA Routing# 121000248

Michael Bell
Michael Bell, Vice President
Region III



WORKING PAPERS

① 7-10-18

Gist State Jail
 MONTHLY BILLING
 Inv. No. GIST-0618-01
 Date: July 03, 2018

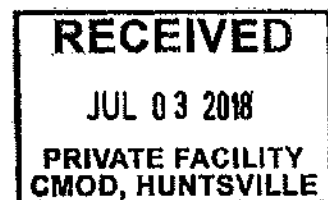
| DAY | INMATE HEAD COUNT | HOSPITAL COUNT | RATE | TOTAL |
|-----------|----------------------|-------------------|---------|--------------|
| 6/1/2018 | 104 | | \$ 9.60 | \$ 998.40 |
| 6/2/2018 | 104 | | \$ 9.60 | \$ 998.40 |
| 6/3/2018 | 104 | | \$ 9.60 | \$ 998.40 |
| 6/4/2018 | 100 | | \$ 9.60 | \$ 960.00 |
| 6/5/2018 | 99 | | \$ 9.60 | \$ 950.40 |
| 6/6/2018 | 98 | | \$ 9.60 | \$ 940.80 |
| 6/7/2018 | 98 | | \$ 9.60 | \$ 940.80 |
| 6/8/2018 | 93 | | \$ 9.60 | \$ 892.80 |
| 6/9/2018 | 93 | | \$ 9.60 | \$ 892.80 |
| 6/10/2018 | 93 | | \$ 9.60 | \$ 892.80 |
| 6/11/2018 | 93 | | \$ 9.60 | \$ 892.80 |
| 6/12/2018 | 90 | | \$ 9.60 | \$ 864.00 |
| 6/13/2018 | 87 | | \$ 9.60 | \$ 835.20 |
| 6/14/2018 | 87 | | \$ 9.60 | \$ 835.20 |
| 6/15/2018 | 85 | | \$ 9.60 | \$ 816.00 |
| 6/16/2018 | 85 | | \$ 9.60 | \$ 816.00 |
| 6/17/2018 | 85 | | \$ 9.60 | \$ 816.00 |
| 6/18/2018 | 85 | | \$ 9.60 | \$ 816.00 |
| 6/19/2018 | 81 | | \$ 9.60 | \$ 777.60 |
| 6/20/2018 | 80 | | \$ 9.60 | \$ 768.00 |
| 6/21/2018 | 78 | | \$ 9.60 | \$ 748.80 |
| 6/22/2018 | 78 | | \$ 9.60 | \$ 729.60 |
| 6/23/2018 | 76 | | \$ 9.60 | \$ 729.60 |
| 6/24/2018 | 76 | | \$ 9.60 | \$ 729.60 |
| 6/25/2018 | 76 | | \$ 9.60 | \$ 729.60 |
| 6/26/2018 | 76 | | \$ 9.60 | \$ 729.60 |
| 6/27/2018 | 75 | | \$ 9.60 | \$ 720.00 |
| 6/28/2018 | 75 | | \$ 9.60 | \$ 720.00 |
| 6/29/2018 | 72 | | \$ 9.60 | \$ 691.20 |
| 6/30/2018 | 72 | | \$ 9.60 | \$ 691.20 |
| | 2,596✓ | 0 | 9.60 | \$ 24,921.60 |

AVG.

87

TOTAL MONTHLY BILLING

\$ 24,921.60



WORKING PAPERS

Page 001 of 001

LYSTB-DD8-TE(2/23)

98052434 R-8/15 ✓
S 7/31 ✓
D 9/14 ✓

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Private Facility Contract Monitoring / Oversight Division

TO: Amanda Alvarado
Accounts Payable

DATE: August 16, 2018

FROM: Kandy Dorey
Private Facilities
Accountant II - Business Operations

SUBJECT: July 2018 ✓
Management & Training Corp.
Contract No: PF-18-19-C160
Invoice Received: 8/15/2018 ✓
Payment Due: 9/14/2018 ✓

Enclosed is the invoice per diem payment for *Gist Facility*,

| Invoice # | Vendor | Man Days | Rate | Total |
|--------------|-----------------------------|----------|---------|--------------|
| Gist-0718-01 | Management & Training Corp. | 2,305 | \$ 9.60 | \$ 22,128.00 |

The following adjustments have been made:

| Sanction | Date | Amount Withheld |
|----------|------|-----------------|
|----------|------|-----------------|

Total Withholdings: \$

| | | | | |
|---------------------------------|-------|-------|------|---------------------|
| Total amount to be paid: | | | | \$ 22,128.00 |
| Lonestar Coding | Index | PCA | AOBJ | Amount |
| | 76970 | 63300 | 8483 | \$ 22,128.00 |

Attachments
File

cc: Michael Bell, Management & Training Corp. Jared Howes, Management & Training Corp.
Jason Diehl, Budget Michelle Greenalch, Management & Training Corp.

I certify that the attached invoices have been audited for compliance with the currently approved contract prices, are free of mathematical errors, the services / goods were received and correspond in every particular way with the contract under which they were procured, and the invoices are true and unpaid.

Kandy Dorey 8/16/18 ✓
Signature & Date

Gist State Jail

3295 Farm to Market 3514

Beaumont, TX 77706

PHONE (409) 727-8400

ATTN: TDCJ - Private Facility Contract Monitoring /
Oversight Division
Two Financial Plaza Suite 310
Huntsville, TX 77340

REMT TO: MANAGEMENT & TRAINING CORP.
500 N. Marketplace Dr.
P.O. Box 10
Centerville UT 84014

Inv. No. GIST-0718-01 ✓
Date: August 15, 2018

Contract 896-PF-18-19-C160 ✓

| DESCRIPTION | | AMOUNT |
|--|--|----------------|
| GIST MANDAYS PER ATTACHED COUNT FOR JULY 2018 ✓ 2,305 INMATES | | \$ 22,128.00 ✓ |
| Total | | \$ 22,128.00 |

Remittance Requested by Direct Deposit to:
Management & Training Corporation
ID# 87-0386322
Account# 032-00638-60
Wells Fargo Bank
ABA Routing# 121000248

Michael Ball ✓
Michael Ball, Vice President
Region III

CORRECTED COPY
AUG 15 2018
PRIVATE FACILITY CMOD
HUNTSVILLE

WORKING PAPERS

Audit by (A) 8/16/18

Gist State Jail
MONTHLY BILLING
 Inv. No. GIST-0718-01
 Date: August 15, 2018

| DAY | INMATE HEAD COUNT | HOSPITAL COUNT | RATE | TOTAL |
|-----------|----------------------|-------------------|---------|--------------|
| 7/1/2018 | 72 | | \$ 9.60 | \$ 691.20 |
| 7/2/2018 | 70 | | \$ 9.60 | \$ 672.00 |
| 7/3/2018 | 70 | | \$ 9.60 | \$ 672.00 |
| 7/4/2018 | 70 | | \$ 9.60 | \$ 672.00 |
| 7/5/2018 | 69 | | \$ 9.60 | \$ 662.40 |
| 7/6/2018 | 63 | | \$ 9.60 | \$ 604.80 |
| 7/7/2018 | 63 | | \$ 9.60 | \$ 604.80 |
| 7/8/2018 | 63 | | \$ 9.60 | \$ 604.80 |
| 7/9/2018 | 77 | | \$ 9.60 | \$ 739.20 |
| 7/10/2018 | 81 | | \$ 9.60 | \$ 777.60 |
| 7/11/2018 | 77 | | \$ 9.60 | \$ 739.20 |
| 7/12/2018 | 79 | | \$ 9.60 | \$ 758.40 |
| 7/13/2018 | 76 | | \$ 9.60 | \$ 729.60 |
| 7/14/2018 | 76 | | \$ 9.60 | \$ 729.60 |
| 7/15/2018 | 76 | | \$ 9.60 | \$ 729.60 |
| 7/16/2018 | 75 | | \$ 9.60 | \$ 720.00 |
| 7/17/2018 | 77 | | \$ 9.60 | \$ 739.20 |
| 7/18/2018 | 77 | | \$ 9.60 | \$ 739.20 |
| 7/19/2018 | 79 | | \$ 9.60 | \$ 758.40 |
| 7/20/2018 | 78 | | \$ 9.60 | \$ 748.80 |
| 7/21/2018 | 78 | | \$ 9.60 | \$ 748.80 |
| 7/22/2018 | 78 | | \$ 9.60 | \$ 748.80 |
| 7/23/2018 | 76 | | \$ 9.60 | \$ 729.60 |
| 7/24/2018 | 75 | | \$ 9.60 | \$ 720.00 |
| 7/25/2018 | 82 | | \$ 9.60 | \$ 787.20 |
| 7/26/2018 | 74 | | \$ 9.60 | \$ 710.40 |
| 7/27/2018 | 75 | | \$ 9.60 | \$ 720.00 |
| 7/28/2018 | 75 | | \$ 9.60 | \$ 720.00 |
| 7/29/2018 | 75 | | \$ 9.60 | \$ 720.00 |
| 7/30/2018 | 75 | | \$ 9.60 | \$ 720.00 |
| 7/31/2018 | 74 | | \$ 9.60 | \$ 710.40 |
| 2,305 | | 0 | \$ 9.60 | \$ 22,128.00 |

AVG: 74

TOTAL MONTHLY BILLING

\$ 22,128.00

CORRECTED COPY

AUG 15 2018

**PRIVATE FACILITY CMOD
 HUNTSVILLE**

WORKING PAPERS

STATE OF TEXAS PURCHASE VOUCHER

Page 001 of 001

| ARCHIVE REFERENCE NO | | AGENCY 696 - HUNTSVILLE ACCOUNTS PAYABLE | | | | | | CURRENT DOCUMENT 99034934 | | | | | | | | | | | | |
|--|-----------------------------------|---|----------------|------------------------------|-----|--|------|-------------------------------------|------------|---|------|----------------------------------|-----|-----------|--------|----------|-----------------------------------|--|--|--|
| EFF DATE 09/27/18 | | DOC DATE 06/01/18 | | DUE DATE 10/05/18 | | DOC AGY 696 | | DOCUMENT AMOUNT 22,284.30 | | | | | | | | | | | | |
| VENDOR NO / MC | | REQUESTED PAYMENT DATE | | | | PDT | PCC | REQUISITION NO 696-8-PF1819C160- | | | | | | | | | | | | |
| VENDOR NAME / ADDRESS MANAGEMENT & TRAINING CORP P O BOX 10 ****DIRECT DEPOSIT**** CENTERVILLE, UT 84014 | | | | | | AGENCY USE TEXAS DEPARTMENT OF CRIMINAL JUST P.O. BOX 4018 HUNTSVILLE, TX 77342 | | | | | | | | | | | | | | |
| SFX | REF DOC - SFX | M | TC | INDEX | PCA | AY | COBJ | ADBJ | AMOUNT | R | | | | | | | | | | |
| | APPN | FUND | INVOICE NUMBER | | | DESCRIPTION | | | AGENCY USE | | | | | | | | | | | |
| 001 | | | | 225 76970 63300 18 7325 8483 | | | | | 22,284.30 | | | | | | | | | | | |
| 13052 | 0014 | GIST-0818-01 | GIST FACILITY | | | | | | | | | | | | | | | | | |
| <table border="1"> <thead> <tr> <th>DATE</th> <th>DESCRIPTION OF GOODS OR SERVICES</th> <th>QTY</th> <th>UNIT COST</th> <th>AMOUNT</th> </tr> </thead> <tbody> <tr> <td>08/31/18</td> <td>TX GOVT CODE 493.009 AND 501.0931</td> <td></td> <td></td> <td></td> </tr> </tbody> </table> | | | | | | | | | | | DATE | DESCRIPTION OF GOODS OR SERVICES | QTY | UNIT COST | AMOUNT | 08/31/18 | TX GOVT CODE 493.009 AND 501.0931 | | | |
| DATE | DESCRIPTION OF GOODS OR SERVICES | QTY | UNIT COST | AMOUNT | | | | | | | | | | | | | | | | |
| 08/31/18 | TX GOVT CODE 493.009 AND 501.0931 | | | | | | | | | | | | | | | | | | | |
| CONTACT NAME | | INVOICE SERVICES | | | | (936) 437-6929 | | LA00092 | | | | | | | | | | | | |
| PHONE | | ENT BY | | | | | | | | | | | | | | | | | | |
| <p>I approve this voucher for payment. The above goods or services correspond in every particular with the contract under which they were purchased. The invoice for the goods or services is correct.</p> <p>The payment complies with the General Appropriations Act.</p> | | | | | | | | | | | | | | | | | | | | |
| APPROVED: NAME | | TITLE | | | | DATE | | | | | | | | | | | | | | |
| APPROVED: NAME | | TITLE | | | | DATE | | | | | | | | | | | | | | |

19034934

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Private Facility Contract Monitoring / Oversight Division

TO: Amanda Alvarado
 Accounts Payable

DATE: September 14, 2018

FROM: Kandy Dorey
 Private Facilities
 Accountant II - Business Operations

SUBJECT: August 2018
 Management & Training Corp.
 Contract No/ PF-18-19-C160
 Invoice Received: 9/5/2018
 Payment Due: 10/5/2018

Enclosed is the invoice per diem payment for *Gist Facility*.

| Invoice # | Vendor | Man Days | Rate | Total |
|--------------|-----------------------------|----------|---------|--------------|
| Gist-0818-01 | Management & Training Corp. | 2,323 | \$ 9.60 | \$ 22,300.80 |

The following adjustments have been made:

| Sanction | Date | Amount Withheld |
|-----------------------------------|--------|-----------------|
| Pre-employment Back-ground Checks | Jun-18 | \$ 16.50 |

Total Withholdings: \$ 16.50

| Total amount to be paid: | | | | \$ 22,284.30 |
|---------------------------------|-------|-------|------|---------------------|
| Lonestar Coding | Index | PCA | AOBJ | Amount |
| | 76970 | 63300 | 8483 | \$ 22,284.30 |

Attachments
File

cc: Michael Bell, Management & Training Corp. Jared Howes, Management & Training Corp.
 Jason Diehl, Budget Michelle Greenalch, Management & Training Corp.

I certify that the attached invoices have been audited for compliance with the currently approved contract prices, are free of mathematical errors, the services / goods were received and correspond in every particular way with the contract under which they were procured, and the invoices are true and unpaid.

Kandy Dorey 9/14/18
 Signature & Date

REFUSE INTEREST *mi*

9-5
 8-31
 10-5

Gist State Jail
3296 Farm to Market 3514
Beaumont, TX 77705
PHONE (409) 727-8400

ATTN: TDCJ - Private Facility Contract Monitoring /
Oversight Division
Two Financial Plaza Suite 310
Huntsville, TX 77340

RENT TO: MANAGEMENT & TRAINING CORP.
500 N. Marketplace Dr.
P.O. Box 10
Centerville UT 84014

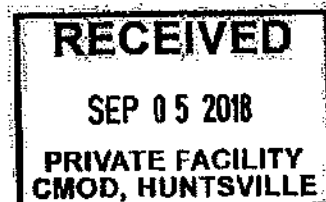
Inv. No. GIST-0818-01 ✓
Date: September 05, 2018

Contract 896-PF-18-19-C160 ✓

| DESCRIPTION | AMOUNT |
|---|----------------|
| GIST MANDAYS PER ATTACHED COUNT FOR AUGUST 2018 ✓ ✓2,323 INMATES \$ 9.60 ✓ | \$ 22,300.80 ✓ |
| Total | \$ 22,300.80 ✓ |

Remittance Requested by Direct Deposit to:
Management & Training Corporation
ID# 87-0385322
Account# 032-00638-60
Wells Fargo Bank
ABA Routing# 121000248

Michael Bell ✓
Michael Bell, Vice President
Region III



WORKING PAPERS

Audit by *(Signature)* 9/12/18

Gist State Jail

MONTHLY BILLING

Inv. No. GIST-0818-01

Date: September 05, 2018

| DAY | INMATE HEAD COUNT | HOSPITAL COUNT | RATE | TOTAL |
|-----------|----------------------|-------------------|---------|--------------|
| 8/1/2018 | 74 | | \$ 9.60 | \$ 710.40 |
| 8/2/2018 | 73 | | \$ 9.60 | \$ 700.80 |
| 8/3/2018 | 74 | | \$ 9.60 | \$ 710.40 |
| 8/4/2018 | 74 | | \$ 9.60 | \$ 710.40 |
| 8/5/2018 | 74 | | \$ 9.60 | \$ 710.40 |
| 8/6/2018 | 74 | | \$ 9.60 | \$ 710.40 |
| 8/7/2018 | 75 | | \$ 9.60 | \$ 720.00 |
| 8/8/2018 | 75 | | \$ 9.60 | \$ 720.00 |
| 8/9/2018 | 78 | | \$ 9.60 | \$ 748.80 |
| 8/10/2018 | 80 | | \$ 9.60 | \$ 768.00 |
| 8/11/2018 | 78 | | \$ 9.60 | \$ 748.80 |
| 8/12/2018 | 80 | | \$ 9.60 | \$ 768.00 |
| 8/13/2018 | 78 | | \$ 9.60 | \$ 748.80 |
| 8/14/2018 | 76 | | \$ 9.60 | \$ 729.60 |
| 8/15/2018 | 79 | | \$ 9.60 | \$ 758.40 |
| 8/16/2018 | 80 | | \$ 9.60 | \$ 768.00 |
| 8/17/2018 | 74 | | \$ 9.60 | \$ 710.40 |
| 8/18/2018 | 74 | | \$ 9.60 | \$ 710.40 |
| 8/19/2018 | 74 | | \$ 9.60 | \$ 710.40 |
| 8/20/2018 | 74 | | \$ 9.60 | \$ 710.40 |
| 8/21/2018 | 75 | | \$ 9.60 | \$ 720.00 |
| 8/22/2018 | 74 | | \$ 9.60 | \$ 710.40 |
| 8/23/2018 | 72 | | \$ 9.60 | \$ 691.20 |
| 8/24/2018 | 73 | | \$ 9.60 | \$ 700.80 |
| 8/25/2018 | 73 | | \$ 9.60 | \$ 700.80 |
| 8/26/2018 | 73 | | \$ 9.60 | \$ 700.80 |
| 8/27/2018 | 73 | | \$ 9.60 | \$ 700.80 |
| 8/28/2018 | 73 | | \$ 9.60 | \$ 700.80 |
| 8/29/2018 | 73 | | \$ 9.60 | \$ 700.80 |
| 8/30/2018 | 73 | | \$ 9.60 | \$ 700.80 |
| 8/31/2018 | 73 | | \$ 9.60 | \$ 700.80 |
| | 2,323 | 0 | 9.60 | \$ 22,300.80 |

AVG

75

TOTAL MONTHLY BILLING

\$ 22,300.80

RECEIVED

SEP 05 2018

PRIVATE FACILITY
CMOD, HUNTSVILLE

WORKING PAPERS

Texas Department of Criminal Justice
DPS Invoices Received
Gist SJ - June 2018

| Applicant's Name | Facility | DPS Month | DPS |
|-----------------------------|------------------------------------|------------------|-----------------|
| HENNIGAN, MICHELLE N | MTC GIST JAIL PF-18-19-0160 | 6/1/2018 | \$ 16.50 |
| Total: | | | \$ 16.50 |

STATE OF TEXAS PURCHASE VOUCHER

Page 001 of 001

| | | | | | | | | | |
|---|--|--|-------------------------------------|-----------------------------|--|-------------------------------------|--|-------------------------------------|--------|
| ARCHIVE REFERENCE NO | | AGENCY 696 - HUNTSVILLE ACCOUNTS PAYABLE | | | | | | CURRENT DOCUMENT 99036291 | |
| | | EFF DATE 10/25/18 | DOC DATE 06/01/18 | DUE DATE 11/04/18 | DOC AGY 696 | DOCUMENT AMOUNT 21,665.25 | | | |
| VENDOR NO / MC | | REQUESTED PAYMENT DATE | | | PDT | PCC | REQUISITION NO 696-9-PF1819C160- | | |
| VENDOR NAME / ADDRESS MANAGEMENT & TRAINING CORP P O BOX 10 ****DIRECT DEPOSIT**** CENTERVILLE, UT 84014 | | | | | AGENCY USE TEXAS DEPARTMENT OF CRIMINAL JUST P.O. BOX 4018 HUNTSVILLE, TX 77342 | | | | |
| SFX | REF DOC - SFX | M | TC | INDEX | PCA | AY | COBJ | AOBJ | AMOUNT |
| | APPN | FUND | INVOICE NUMBER | | DESCRIPTION | | | AGENCY USE | |
| 001 | | | 225 76970 63300 19 7325 8483 | | | | | 21,665.25 | |
| | 13052 | 0014 | GIST-0918-01 | | GIST FACILITY | | | | |
| | | | | | | | | | |
| DATE | DESCRIPTION OF GOODS OR SERVICES | | | | | QTY | UNIT COST | AMOUNT | |
| 09/30/18 | TX GOVT CODE 493.009 AND 501.0931 | | | | | | | | |
| | | | | | | | | | |
| CONTACT NAME | | INVOICE SERVICES | | | (936) 437-6929 | | LA00092 | | |
| PHONE | | | | | ENT BY | | | | |
| <p>I approve this voucher for payment. The above goods or services correspond in every particular with the contract under which they were purchased. The invoice for the goods or services is correct.</p> <p>The payment complies with the General Appropriations Act.</p> | | | | | | | | | |
| APPROVED: NAME | | TITLE | | | DATE | | | | |
| APPROVED: NAME | | TITLE | | | DATE | | | | |

99030291 ✓

10-5 ✓
9-30 ✓
11-4 ✓

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Private Facility Contract Monitoring / Oversight Division

TO: Alison Lago
Accounts Payable

DATE: October 12, 2018

FROM: Kandy Dorey
Private Facilities
Accountant II - Business Operations

SUBJECT: September 2018
Management & Training Corp.
Contract No: PF-18-19-C160 ✓
Invoice Received: 10/5/2018 ✓
Payment Due: 11/4/2018 ✓

Enclosed is the invoice per diem payment for Gist Facility.

| Invoice # | Vendor | Man Days | Rate | Total |
|--------------|-----------------------------|----------|---------|--------------|
| Gist-0918-01 | Management & Training Corp. | 2,675 | \$ 9.71 | \$ 25,974.25 |

The following adjustments have been made:

| Sanction | Date | Amount Withheld |
|----------------------------------|--------|-----------------|
| Position Vacancy - Other | Sep-18 | \$ 616.00 |
| Position Vacancy - SAC II/DWI | Sep-18 | \$ 3,660.00 |
| Pre-employment Background Checks | Jul-18 | \$ 33.00 |

Total Withholdings: \$ 4,309.00

| Total amount to be paid: | | | | \$ 21,665.25 |
|---------------------------------|-------|-------|------|---------------------|
| Lonestar Coding | Index | PCA | AOBJ | Amount |
| | 76970 | 63300 | 8483 | \$ 21,665.25 |

Attachments
File

cc: Michael Bell, Management & Training Corp.
Jason Diehl, Budget

Jared Howes, Management & Training Corp.
Michelle Greenalch, Management & Training Corp.

I certify that the attached invoices have been audited for compliance with the currently approved contract prices, are free of mathematical errors, the services / goods were received and correspond in every particular way with the contract under which they were procured, and the invoices are true and unpaid.

Kandy Dorey 10/12/18
Signature & Date

REFUSE INTEREST *M-1*

Received
OCT 24 2018
Accounts Payable

Gist State Jail
3295 Farm to Market 3514
Beaumont, TX 77705
PHONE (409) 727-8400

ATTN: TDCJ - Private Facility Contract Monitoring /
Oversight Division
Two Financial Plaza Suite 310
Huntsville, TX 77340

REMT TO: MANAGEMENT & TRAINING CORP.
500 N. Marketplace Dr.
P.O. Box 10
Centerville UT 84014

Inv. No. GIST-0018-01✓
Date: October 04, 2018

Contract 896-PF-18-19-C160✓

| DESCRIPTION | AMOUNT |
|--|---------------|
| GIST MANDAYS PER ATTACHED COUNT FOR SEPTEMBER 2018✓ ✓ 2,675 INMATES | \$ 25,974.25✓ |
| Total | \$ 25,974.25✓ |

Remittance Requested by Direct Deposit to:
Management & Training Corporation
ID# 87-0365322
Account# 032-00838-60
Wells Fargo Bank
ABA Routing# 121000248

Michael Bell
Michael Bell, Vice President
Region III

CORRECTED COPY
OCT 05 2018
PRIVATE FACILITY CMOD
HUNTSVILLE

WORKING PAPERS

Audit by *De* 10/9/18

Gist State Jail
 MONTHLY BILLING
 Inv. No. GIST-0918-01
 Date: October 04, 2018

| DAY | INMATE HEAD COUNT | HOSPITAL COUNT | RATE | TOTAL |
|-----------|----------------------|-------------------|---------|--------------|
| 9/1/2018 | 73 | | \$ 9.71 | \$ 708.83 |
| 9/2/2018 | 73 | | \$ 9.71 | \$ 708.83 |
| 9/3/2018 | 73 | | \$ 9.71 | \$ 708.83 |
| 9/4/2018 | 73 | | \$ 9.71 | \$ 708.83 |
| 9/5/2018 | 76 | | \$ 9.71 | \$ 737.96 |
| 9/6/2018 | 82 | | \$ 9.71 | \$ 796.22 |
| 9/7/2018 | 77 | 1 | \$ 9.71 | \$ 757.38 |
| 9/8/2018 | 77 | 1 | \$ 9.71 | \$ 757.38 |
| 9/9/2018 | 77 | 1 | \$ 9.71 | \$ 757.38 |
| 9/10/2018 | 75 | 1 | \$ 9.71 | \$ 737.96 |
| 9/11/2018 | 75 | 1 | \$ 9.71 | \$ 737.96 |
| 9/12/2018 | 74 | 2 | \$ 9.71 | \$ 776.80 |
| 9/13/2018 | 78 | 2 | \$ 9.71 | \$ 861.29 |
| 9/14/2018 | 97 | 2 | \$ 9.71 | \$ 961.29 |
| 9/15/2018 | 97 | 2 | \$ 9.71 | \$ 961.29 |
| 9/16/2018 | 97 | 2 | \$ 9.71 | \$ 961.29 |
| 9/17/2018 | 95 | 2 | \$ 9.71 | \$ 941.87 |
| 9/18/2018 | 97 | 2 | \$ 9.71 | \$ 961.29 |
| 9/19/2018 | 99 | | \$ 9.71 | \$ 971.00 |
| 9/20/2018 | 100 | | \$ 9.71 | \$ 941.87 |
| 9/21/2018 | 97 | | \$ 9.71 | \$ 941.87 |
| 9/22/2018 | 97 | | \$ 9.71 | \$ 941.87 |
| 9/23/2018 | 97 | | \$ 9.71 | \$ 932.16 |
| 9/24/2018 | 98 | | \$ 9.71 | \$ 961.29 |
| 9/25/2018 | 99 | | \$ 9.71 | \$ 1,029.26 |
| 9/26/2018 | 108 | | \$ 9.71 | \$ 1,009.84 |
| 9/27/2018 | 103 | 1 | \$ 9.71 | \$ 1,029.26 |
| 9/28/2018 | 105 | 1 | \$ 9.71 | \$ 1,029.26 |
| 9/29/2018 | 105 | 1 | \$ 9.71 | \$ 1,029.26 |
| 9/30/2018 | 105 | 1 | \$ 9.71 | \$ 1,029.26 |
| | √2,675 | 23 | 9.71 | \$ 26,197.58 |

AVG. 89

TOTAL MONTHLY BILLING

\$ 26,197.58

CORRECTED COPY

OCT 05 2018

PRIVATE FACILITY CMOD
HUNTSVILLE

WORKING PAPERS

Compliance Sanction 1
Position Vacancy - Counselors
Gist SJ - September 2018

| PCN # | Position Title | Date Vacated | Sanctions Began | Date Filled | 90 Day Pay | \$122.00 Avg Daily Salary | Sep-18 Days Vacant | Amount Withheld |
|--------------|----------------------------------|--------------|-----------------|-------------|------------|---------------------------|-----------------------|-----------------|
| 582002030001 | Substance Abuse Counselor II-DWI | 08/01/18 | 08/31/18 | | 90 | \$122.00 | 30 | \$ 3,660.00 |
| TOTAL | | | | | | | 30 | \$ 3,660.00 |
| | | | | | | | 30 | \$ 3,660.00 |

**Compliance Sanction 1
Position Vacancy - Others
Gist SJ - September 2018**

| PCN # | Position Title | Date Vacated | Sanctions Began | Date Filled | 90 Day Pos | Avg Daily Salary | Sep-18 Days Vacant | Amount Withheld |
|--------------|----------------|--------------|-----------------|-------------|------------|------------------|--------------------|-----------------|
| 582001020001 | Office Manager | 08/01/18 | 08/31/18 | 09/09/18 | 90 | \$ 77.00 | 8 | \$ 616.00 |
| TOTAL | | | | | | | 8 | \$ 616.00 |

TOTAL SANCTION

8 \$ 616.00

Texas Department of Criminal Justice
DPS Invoices Received
Gist SJ - July 2018

| <u>Applicant's Name</u> | <u>Facility</u> | <u>DPS Month</u> | <u>DPS</u> |
|-------------------------|-----------------------------|------------------|-----------------|
| LANDRY, AARON L | MTC GIST JAIL PF-18-19-C160 | 7/1/2018 | \$ 16.50 |
| GARNER, HERSHELL E | MTC GIST JAIL PF-18-19-C160 | 7/1/2018 | \$ 16.50 |
| Total: | | | \$ 33.00 |

Page 001 of 001LNSTR-008-TE(2/93)

99038149

11-2

10-31

12-2

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Private Facility Contract Monitoring / Oversight Division

TO: Alison Lago
Accounts Payable

DATE: November 16, 2018

FROM: Kandy Dorey
Private Facilities
Accountant II - Business Operations

SUBJECT: October 2018
Management & Training Corp.
Contract No: PF-18-19-C160
Invoice Received: 11/2/2018
Payment Due: 12/2/2018

Enclosed is the invoice per diem payment for *Gist Facility*.

| Invoice # | Vendor | Man Days | Rate | Total |
|--------------|-----------------------------|----------|---------|--------------|
| Gist-1018-01 | Management & Training Corp. | 3,262 | \$ 9.71 | \$ 31,674.02 |

The following adjustments have been made:

| Sanction | Date | Amount Withheld |
|-------------------------------|--------|-----------------|
| Position Vacancy - SAC II | Oct-18 | \$ 3,782.00 |
| Position Vacancy - SAC II/DWI | Oct-18 | \$ 3,782.00 |

Total Withholdings: \$ 7,564.00

| | | | | |
|---------------------------------|-------|-------|------|---------------------|
| Total amount to be paid: | | | | \$ 24,110.02 |
| Lonestar Coding | Index | PCA | AOBJ | Amount |
| | 76970 | 63300 | 8483 | \$ 24,110.02 |

Attachments
File

cc: Michael Bell, Management & Training Corp.
Jason Diehl, Budget

Jared Howes, Management & Training Corp.
Michelle Greenalch, Management & Training Corp.

I certify that the attached invoices have been audited for compliance with the currently approved contract prices, are free of mathematical errors, the services / goods were received and correspond in every particular way with the contract under which they were procured, and the invoices are true and unpaid.

Kandy Dorey 11/16/18
Signature & Date

REFUSE INTEREST

mi-1

Received

NOV 19 2018

Accounts Payable

Gist State Jail

3295 Farm to Market 3514

Beaumont, TX 77705

PHONE (409) 727-8400

ATTN: TDCJ - Private Facility Contract Monitoring /
Oversight Division
Two Financial Plaza Suite 310
Huntsville, TX 77340

REMT TO: MANAGEMENT & TRAINING CORP.
500 N. Marketplace Dr.
P.O. Box 10
Centerville UT 84014

Inv. No. GIST-1018-01 ✓
Date: November 02, 2018

Contract 696-PF-18-19-C160 ✓

| DESCRIPTION | | AMOUNT |
|--|-----------|----------------|
| GIST MANDAYS PER ATTACHED COUNT FOR OCTOBER 2018 ✓ | | |
| 3,282 ✓ INMATES | \$ 9.71 ✓ | \$ 31,674.02 ✓ |
| Total | | \$ 31,674.02 ✓ |

Remittance Requested by Direct Deposit to:
Management & Training Corporation
ID# 87-0365322
Account# 032-00638-80
Wells Fargo Bank
ABA Routing# 121000248

Michael Bell ✓
Michael Bell, Vice President
Region III

WORKING PAPERS**RECEIVED**

NOV 02 2018

PRIVATE FACILITY
CMOD, HUNTSVILLE

11/02/18

Gist State Jail
 MONTHLY BILLING
 Inv. No. GIST-1018-01
 Date: November 02, 2018

| DAY | INMATE HEAD COUNT | HOSPITAL COUNT | RATE | TOTAL |
|------------|----------------------|-------------------|---------|--------------|
| 10/1/2018 | 104 | | \$ 9.71 | \$ 1,009.84 |
| 10/2/2018 | 103 | | \$ 9.71 | \$ 1,000.13 |
| 10/3/2018 | 103 | | \$ 9.71 | \$ 1,000.13 |
| 10/4/2018 | 106 | | \$ 9.71 | \$ 1,029.26 |
| 10/5/2018 | 106 | | \$ 9.71 | \$ 1,029.26 |
| 10/6/2018 | 106 | | \$ 9.71 | \$ 1,029.26 |
| 10/7/2018 | 106 | | \$ 9.71 | \$ 1,029.26 |
| 10/8/2018 | 104 | | \$ 9.71 | \$ 1,009.84 |
| 10/9/2018 | 104 | | \$ 9.71 | \$ 1,009.84 |
| 10/10/2018 | 104 | | \$ 9.71 | \$ 1,009.84 |
| 10/11/2018 | 109 | | \$ 9.71 | \$ 1,058.39 |
| 10/12/2018 | 109 | | \$ 9.71 | \$ 1,058.39 |
| 10/13/2018 | 109 | | \$ 9.71 | \$ 1,058.39 |
| 10/14/2018 | 109 | | \$ 9.71 | \$ 1,058.39 |
| 10/15/2018 | 105 | | \$ 9.71 | \$ 1,019.55 |
| 10/16/2018 | 106 | | \$ 9.71 | \$ 1,029.26 |
| 10/17/2018 | 106 | | \$ 9.71 | \$ 1,029.26 |
| 10/18/2018 | 106 | | \$ 9.71 | \$ 1,029.26 |
| 10/19/2018 | 107 | | \$ 9.71 | \$ 1,038.97 |
| 10/20/2018 | 107 | | \$ 9.71 | \$ 1,038.97 |
| 10/21/2018 | 107 | | \$ 9.71 | \$ 1,038.97 |
| 10/22/2018 | 104 | | \$ 9.71 | \$ 1,009.84 |
| 10/23/2018 | 106 | | \$ 9.71 | \$ 1,029.26 |
| 10/24/2018 | 106 | | \$ 9.71 | \$ 1,029.26 |
| 10/25/2018 | 106 | | \$ 9.71 | \$ 1,029.26 |
| 10/26/2018 | 103 | | \$ 9.71 | \$ 1,000.13 |
| 10/27/2018 | 102 | | \$ 9.71 | \$ 990.42 |
| 10/28/2018 | 102 | | \$ 9.71 | \$ 990.42 |
| 10/29/2018 | 102 | | \$ 9.71 | \$ 990.42 |
| 10/30/2018 | 102 | | \$ 9.71 | \$ 990.42 |
| 10/31/2018 | 103 | | \$ 9.71 | \$ 1,000.13 |
| | 3,282 | 0 | 9.71 | \$ 31,674.02 |

AVG. 105

TOTAL MONTHLY BILLING

\$ 31,674.02

WORKING PAPERS

RECEIVED

NOV 02 2018

PRIVATE FACILITY
 CMOD, HUNTSVILLE

**Compliance Sanction 1
Position Vacancy - Counselors
Gist SJ - October 2018**

| PCN # | Position Title | Date Vacated | Sanctions Began | Date Filled | 90 Day Pos | \$122.00 Avg Daily Salary | Oct-18 Days Vacant | Amount Withheld |
|--------------|----------------------------------|--------------|-----------------|-------------|------------|------------------------------|-----------------------|-----------------|
| 582002020001 | Substance Abuse Counselor II | 06/01/18 | 06/31/18 | | 90 | \$122.00 | 31 | \$ 3,782.00 ✓ |
| 582002030001 | Substance Abuse Counselor II-DWI | 06/01/18 | 06/31/18 | | 90 | \$122.00 | 31 | \$ 3,782.00 ✓ |
| 2 | TOTAL | | | | | | 62 | \$ 7,564.00 |

TOTAL SANCTION

62 \$ 7,564.00 ✓

STATE OF TEXAS PURCHASE VOUCHER

Page 001 of 001

| | | | | | | | | | | |
|--|---------------|--|-----------------------------|-----------------------------|--|-------------------------------------|--|---------|------------|---|
| ARCHIVE REFERENCE NO | | AGENCY 696 - HUNTSVILLE ACCOUNTS PAYABLE | | | | | CURRENT DOCUMENT 99040017 | | | |
| | | EFF DATE 01/03/19 | DOC DATE 06/01/18 | DUE DATE 01/10/19 | DOC AGY 696 | DOCUMENT AMOUNT 24,806.84 | | | | |
| VENDOR NO / MC | | REQUESTED PAYMENT DATE | | | PDT | PCC | REQUISITION NO 696-9-PF1819C160- | | | |
| VENDOR NAME / ADDRESS MANAGEMENT & TRAINING CORP P O BOX 10 ****DIRECT DEPOSIT**** CENTERVILLE, UT 84014 | | | | | AGENCY USE TEXAS DEPARTMENT OF CRIMINAL JUST P.O. BOX 4018 HUNTSVILLE, TX 77342 | | | | | |
| SFX | REF DOC - SFX | M | TC | INDEX | PCA | AV | COBJ | AOBJ | AMOUNT | R |
| | APPN | FUND | INVOICE NUMBER | | | DESCRIPTION | | | AGENCY USE | |
| <div style="display: flex; justify-content: space-between;"> 001 225 76970 63300 19 7325 8483 24,806.84 </div> <div style="display: flex; justify-content: space-between;"> 13052 0014 GIST-1118-01 GIST FACILITY </div> | | | | | | | | | | |
| DATE | | DESCRIPTION OF GOODS OR SERVICES | | | | QTY | UNIT COST | | AMOUNT | |
| 11/30/18 | | TX GOVT CODE 493.009 AND 501.0931 | | | | | | | | |
| CONTACT NAME | | INVOICE SERVICES | | | | (936) 437-6929 | | LA00092 | | |
| NAME | | PHONE | | | | ENT BY | | | | |
| <p>I approve this voucher for payment. The above goods or services correspond in every particular with the contract under which they were purchased. The invoice for the goods or services is correct.</p> <p>The payment complies with the General Appropriations Act.</p> | | | | | | | | | | |
| APPROVED: NAME | | TITLE | | | | DATE | | | | |
| APPROVED: NAME | | TITLE | | | | DATE | | | | |

99040017 ✓
12-11
11-30
1-10

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Private Facility Contract Monitoring / Oversight Division

TO: Alison Lago
Accounts Payable

DATE: December 19, 2018

FROM: Kandy Dorey
Private Facilities
Accountant II - Business Operations

SUBJECT: ✓ November 2018
Management & Training Corp.
Contract No: PF-18-19-C160 ✓
Invoice Received: 12/11/2018
Payment Due: 1/10/2019

Enclosed is the invoice per diem payment for *Gist Facility*.

| Invoice # | Vendor | Man Days | Rate | Total |
|----------------|-----------------------------|----------|---------|----------------|
| ✓ Gist-1118-01 | Management & Training Corp. | 2,946 | \$ 9.71 | \$ 28,605.66 ✓ |

The following adjustments have been made:

| Sanction | Date | Amount Withheld |
|----------------------------------|--------|-----------------|
| Position Vacancy - SAC II/DWI | Nov-18 | \$ 3,660.00 ✓ |
| Pre-employment Background Checks | Aug-18 | \$ 33.00 ✓ |
| Contract Review Finding | Nov-18 | \$ 105.82 ✓ |

Total Withholdings: \$ 3,798.82 ✓

| | | | | |
|---------------------------------|---------|---------|--------|------------------|
| Total amount to be paid: | | | | \$ ✓ 24,806.84 ✓ |
| Lonestar Coding | Index | PCA | AOBJ | Amount |
| | ✓ 76970 | ✓ 63300 | ✓ 8483 | \$ 24,806.84 |

Attachments
File

cc: Michael Bell, Management & Training Corp.
Jason Diehl, Budget

Jared Howes, Management & Training Corp.
Michelle Greenalch, Management & Training Corp.

REFUSE INTEREST *mi-1*

I certify that the attached invoices have been audited for compliance with the currently approved contract prices, are free of mathematical errors, the services / goods were received and correspond in every particular way with the contract under which they were procured, and the invoices are true and unpaid.

Kandy Dorey 12/19/18
Signature & Date

Received
DEC 19 2018
Accounts Payable

Please contact Rebecca Jones, Accountant VI, at Rebecca.Jones@tdej.texas.gov or 936-437-7083 for any errors, questions or concerns regarding payment and/or contracts.

Gist State Jail

3295 Farm to Market 3514
Beaumont, TX 77705
PHONE (409) 727-8400

ATTN: TDCJ - Private Facility Contract Monitoring /
Oversight Division
Two Financial Plaza Suite 310
Huntsville, TX 77340

REMT TO: MANAGEMENT & TRAINING CORP.
500 N. Marketplace Dr.
P.O. Box 10
Centerville UT 84014

Inv. No. GIST-1118-01 ✓
Date: December 11, 2018

Contract 696-PF-18-19-C160 ✓

| DESCRIPTION | AMOUNT |
|--|----------------|
| GIST MANDAYS PER ATTACHED COUNT FOR NOVEMBER 2018 ✓ 2,946 ✓ INMATES \$ 9.71 ✓ | \$ 28,605.66 ✓ |
| Total | \$ 28,605.66 ✓ |

Remittance Requested by Direct Deposit to:
Management & Training Corporation
ID# 87-0365322
Account# 032-00638-60
Wells Fargo Bank
ABA Routing# 121000248

Michael Bell ✓
Michael Bell, Vice President
Region III

CORRECTED COP
DEC 11 2018
PRIVATE FACILITY CT
HUNTSVILLE

④
12-11-18

Gist State Jail
MONTHLY BILLING
Inv. No. GIST-111B-01
Date: December 11, 2018

| DAY | INMATE HEAD COUNT | HOSPITAL COUNT | RATE | TOTAL |
|-----------------------|----------------------|-------------------|---------|------------------|
| 11/1/2018 | 103 | | \$ 9.71 | \$ 1,000.13 |
| 11/2/2018 | 103 | | \$ 9.71 | \$ 1,000.13 |
| 11/3/2018 | 103 | | \$ 9.71 | \$ 1,000.13 |
| 11/4/2018 | 103 | | \$ 9.71 | \$ 1,000.13 |
| 11/5/2018 | 101 | | \$ 9.71 | \$ 980.71 |
| 11/6/2018 | 105 | | \$ 9.71 | \$ 1,019.55 |
| 11/7/2018 | 107 | | \$ 9.71 | \$ 1,038.97 |
| 11/8/2018 | 109 | | \$ 9.71 | \$ 1,058.39 |
| 11/9/2018 | 111 | | \$ 9.71 | \$ 1,077.81 |
| 11/10/2018 | 111 | | \$ 9.71 | \$ 1,077.81 |
| 11/11/2018 | 111 | | \$ 9.71 | \$ 1,077.81 |
| 11/12/2018 | 100 | | \$ 9.71 | \$ 971.00 |
| 11/13/2018 | 103 | | \$ 9.71 | \$ 1,000.13 |
| 11/14/2018 | 102 | | \$ 9.71 | \$ 990.42 |
| 11/15/2018 | 102 | | \$ 9.71 | \$ 990.42 |
| 11/16/2018 | 98 | | \$ 9.71 | \$ 951.58 |
| 11/17/2018 | 98 | | \$ 9.71 | \$ 951.58 |
| 11/18/2018 | 98 | | \$ 9.71 | \$ 951.58 |
| 11/19/2018 | 97 | | \$ 9.71 | \$ 941.87 |
| 11/20/2018 | 97 | | \$ 9.71 | \$ 941.87 |
| 11/21/2018 | 89 | | \$ 9.71 | \$ 864.19 |
| 11/22/2018 | 89 | | \$ 9.71 | \$ 864.19 |
| 11/23/2018 | 89 | | \$ 9.71 | \$ 864.19 |
| 11/24/2018 | 89 | | \$ 9.71 | \$ 864.19 |
| 11/25/2018 | 89 | | \$ 9.71 | \$ 864.19 |
| 11/26/2018 | 88 | | \$ 9.71 | \$ 854.48 |
| 11/27/2018 | 85 | | \$ 9.71 | \$ 825.35 |
| 11/28/2018 | 86 | | \$ 9.71 | \$ 835.06 |
| 11/29/2018 | 90 | | \$ 9.71 | \$ 873.90 |
| 11/30/2018 | 90 | | \$ 9.71 | \$ 873.90 |
| | 2,946✓ | 0 | 9.71 \$ | 28,605.66 |
| AVG. | 98 | | | |
| TOTAL MONTHLY BILLING | | | \$ | <u>28,605.66</u> |

CORRECTED COPY
DEC 11 2018
PRIVATE FACILITY CMOB
HUNTSVILLE

| PCN # | Position Title | Date Vacated | Sanctions Began | Date Filled | 90 Day Pos | Avg Daily Salary | Nov-18 Days Vacant | Amount Withheld |
|-----------------------|----------------------------------|--------------|-----------------|-------------|------------|------------------|--------------------|--------------------|
| 582002030001 | Substance Abuse Counselor II-DWI | 06/01/18 | 08/31/18 | | 90 | \$122.00 | 30 | \$ 3,660.00 |
| TOTAL | | | | | | | 30 | \$ 3,660.00 |
| TOTAL SANCTION | | | | | | | 30 | \$ 3,660.00 |

Texas Department of Criminal Justice
DPS Invoices Received
Gist SJ - August 2018

| Applicant's Name | | Facility | DPS Month | DPS |
|-------------------|--|----------|---------------|-----------------|
| TANTON, DEDRIA K | | Gist SJ | 8/1/2018 \$ | 16.50 |
| BRENNAN, RHONDA K | | Gist SJ | 8/1/2018 \$ | 16.50 |
| | | | Total: | \$ 33.00 |

Compliance Standard #10
Contract Review
Gist SJ - November 2018

| Contract Review # | Finding | Total Days Past Due | Per Diem | Total Sanction |
|--------------------------|---|----------------------------|-----------------|-----------------------|
| 2019-11-003 | Offender Assessment not completed within 5 days of entry - FY18 | 9 | \$9.60 | \$86.40 |
| 2019-11-003 | Offender Assessment not completed within 5 days of entry - FY19 | 2 | \$9.71 | \$19.42 |

| | |
|-------------------------------|-----------------|
| Total Withholding: | \$105.82 |
|-------------------------------|-----------------|

 ✓

STATE OF TEXAS PURCHASE VOUCHER

Page 001 of 001

| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|---------------|--|-----------------------------|-----------------------------|--|-------------------------------------|--|-----------|------------|--------|-----------|-----|--|-----|-------|-------|----|------|------|--|--|--|-----------|---------------------------------------|--|--|--|--|--|--|--|--|--|--|--|
| ARCHIVE REFERENCE NO | | AGENCY 696 - HUNTSVILLE ACCOUNTS PAYABLE | | | | | CURRENT DOCUMENT 99041329 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | EFF DATE 01/24/19 | DOC DATE 06/01/18 | DUE DATE 02/07/19 | DOC AGY 696 | DOCUMENT AMOUNT 25,755.82 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| VENDOR NO / MC | | REQUESTED PAYMENT DATE | | | PDT | PCC | REQUISITION NO 696-9-PF1819C160- | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| VENDOR NAME / ADDRESS MANAGEMENT & TRAINING CORP P O BOX 10 ****DIRECT DEPOSIT**** CENTERVILLE, UT 84014 | | | | | AGENCY USE TEXAS DEPARTMENT OF CRIMINAL JUST P.O. BOX 4018 HUNTSVILLE, TX 77342 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SFX | REF DOC - SFX | | M | TC | INDEX | PCA | AY | COBJ | AOBJ | AMOUNT | R | | | | | | | | | | | | | | | | | | | | | | | | |
| | APPN | FUND | INVOICE NUMBER | | | DESCRIPTION | | | AGENCY USE | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table style="width:100%; border: none;"> <tr> <td style="width:10%;">001</td> <td style="width:10%;"></td> <td style="width:10%;">225</td> <td style="width:10%;">76970</td> <td style="width:10%;">63300</td> <td style="width:10%;">19</td> <td style="width:10%;">7325</td> <td style="width:10%;">8483</td> <td style="width:10%;"></td> <td style="width:10%;"></td> <td style="width:10%;"></td> <td style="width:10%; text-align: right;">25,755.82</td> </tr> <tr> <td colspan="12">13052 0014 GIST-1218-01 GIST FACILITY</td> </tr> </table> | | | | | | | | | | | | 001 | | 225 | 76970 | 63300 | 19 | 7325 | 8483 | | | | 25,755.82 | 13052 0014 GIST-1218-01 GIST FACILITY | | | | | | | | | | | |
| 001 | | 225 | 76970 | 63300 | 19 | 7325 | 8483 | | | | 25,755.82 | | | | | | | | | | | | | | | | | | | | | | | | |
| 13052 0014 GIST-1218-01 GIST FACILITY | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DATE | | DESCRIPTION OF GOODS OR SERVICES | | | | | QTY | UNIT COST | | AMOUNT | | | | | | | | | | | | | | | | | | | | | | | | | |
| 12/31/18 | | TX GOVT CODE 493.009 AND 501.0931 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CONTACT | | INVOICE SERVICES | | | | | (936) 437-6929 | | LA00092 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NAME | | PHONE | | | | | ENT BY | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>I approve this voucher for payment. The above goods or services correspond in every particular with the contract under which they were purchased. The invoice for the goods or services is correct.</p> <p>The payment complies with the General Appropriations Act.</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| APPROVED: | | NAME | | | | | TITLE | | DATE | | | | | | | | | | | | | | | | | | | | | | | | | | |
| APPROVED: | | NAME | | | | | TITLE | | DATE | | | | | | | | | | | | | | | | | | | | | | | | | | |

99041329 ✓
1-8
12-31
2-7

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Private Facility Contract Monitoring / Oversight Division

TO: Alison Lago
Accounts Payable

DATE: January 22, 2019

FROM: Kandy Dorey
Private Facilities
Accountant II - Business Operations

SUBJECT: December 2018 ✓
Management & Training Corp.
Contract No: PF-18-19-C160 ✓
Invoice Received: 1/8/2019 ✓
Payment Due: 2/7/2019

Enclosed is the invoice per diem payment for *Gist Facility*.

| Invoice # | Vendor | Man Days | Rate | Total |
|--------------|-----------------------------|----------|---------|--------------|
| Gist-1218-01 | Management & Training Corp. | 3,042 | \$ 9.71 | \$ 29,537.82 |

The following adjustments have been made:

| Sanction | Date | Amount Withheld |
|-------------------------------|--------|-----------------|
| Position Vacancy - SAC II/DWI | Dec-18 | \$ 3,782.00 |

Total Withholdings: \$ 3,782.00

| Total amount to be paid: | | | | \$ 25,755.82 |
|---------------------------------|-------|-------|------|---------------------|
| Lonestar Coding | Index | PCA | AOBJ | Amount |
| | 76970 | 63300 | 8483 | \$ 25,755.82 |

Attachments
File

cc: Michael Bell, Management & Training Corp.
Jason Diehl, Budget

Jared Howes, Management & Training Corp.
Michelle Greenalch, Management & Training Corp.

I certify that the attached invoices have been audited for compliance with the currently approved contract prices, are free of mathematical errors, the services / goods were received and correspond in every particular way with the contract under which they were procured, and the invoices are true and unpaid.

Kandy Dorey 1/22/19
Signature & Date

Received

JAN 22 2019

Accounts Payable

Please contact Rebecca Jones, Accountant VI, at Rebecca.Jones@tdcj.texas.gov or 936-437-7083 for any errors, questions or concerns regarding payment and/or contracts.

REFUSE INTEREST *mi-1*

Gist State Jail

3295 Farm to Market 3514

Beaumont, TX 77705

PHONE (409) 727-8400

ATTN: TDCJ - Private Facility Contract Monitoring /
Oversight Division
Two Financial Plaza Suite 310
Huntsville, TX 77340

REMT TO: MANAGEMENT & TRAINING CORP.
500 N. Marketplace Dr.
P.O. Box 10
Centerville UT 84014

Inv. No. GIST-1218-01 ✓
Date: January 08, 2019

Contract 696-PF-18-19-C160 ✓

| DESCRIPTION | | AMOUNT |
|---|--|----------------|
| GIST MANDAYS PER ATTACHED COUNT FOR DECEMBER 2018 ✓ ✓3,042 INMATES \$ 9.71 ✓ | | \$ 29,537.82 ✓ |
| Total | | \$ 29,537.82 ✓ |

Remittance Requested by Direct Deposit to:
Management & Training Corporation
ID# 87-0365322
Account# 032-00638-60
Wells Fargo Bank
ABA Routing# 121000248

Michael Bell ✓
Michael Bell, Vice President
Region III

CORRECTED COPY

JAN 08 2019

**PRIVATE FACILITY CMOD
HUNTSVILLE**

WORKING PAPERS

1-8-19 (12)

Gist State Jail
 MONTHLY BILLING
 Inv. No. GIST-1218-01
 Date: January 08, 2019

| DAY | INMATE HEAD COUNT | HOSPITAL COUNT | RATE | TOTAL |
|------------|----------------------|-------------------|---------|--------------|
| 12/1/2018 | 90 | | \$ 9.71 | \$ 873.90 |
| 12/2/2018 | 90 | | \$ 9.71 | \$ 873.90 |
| 12/3/2018 | 88 | | \$ 9.71 | \$ 854.48 |
| 12/4/2018 | 85 | | \$ 9.71 | \$ 825.35 |
| 12/5/2018 | 88 | | \$ 9.71 | \$ 854.48 |
| 12/6/2018 | 92 | | \$ 9.71 | \$ 893.32 |
| 12/7/2018 | 89 | | \$ 9.71 | \$ 864.19 |
| 12/8/2018 | 89 | | \$ 9.71 | \$ 864.19 |
| 12/9/2018 | 89 | | \$ 9.71 | \$ 864.19 |
| 12/10/2018 | 98 | | \$ 9.71 | \$ 951.58 |
| 12/11/2018 | 97 | | \$ 9.71 | \$ 941.87 |
| 12/12/2018 | 98 | | \$ 9.71 | \$ 951.58 |
| 12/13/2018 | 99 | | \$ 9.71 | \$ 961.29 |
| 12/14/2018 | 98 | | \$ 9.71 | \$ 951.58 |
| 12/15/2018 | 98 | | \$ 9.71 | \$ 951.58 |
| 12/16/2018 | 98 | | \$ 9.71 | \$ 951.58 |
| 12/17/2018 | 107 | | \$ 9.71 | \$ 1,038.97 |
| 12/18/2018 | 110 | | \$ 9.71 | \$ 1,068.10 |
| 12/19/2018 | 109 | | \$ 9.71 | \$ 1,058.39 |
| 12/20/2018 | 108 | | \$ 9.71 | \$ 1,048.68 |
| 12/21/2018 | 104 | | \$ 9.71 | \$ 1,009.84 |
| 12/22/2018 | 104 | | \$ 9.71 | \$ 1,009.84 |
| 12/23/2018 | 104 | | \$ 8.71 | \$ 1,009.84 |
| 12/24/2018 | 104 | | \$ 9.71 | \$ 1,009.84 |
| 12/25/2018 | 104 | | \$ 8.71 | \$ 1,008.84 |
| 12/26/2018 | 104 | | \$ 9.71 | \$ 1,009.84 |
| 12/27/2018 | 102 | | \$ 9.71 | \$ 990.42 |
| 12/28/2018 | 99 | | \$ 9.71 | \$ 961.29 |
| 12/29/2018 | 99 | | \$ 9.71 | \$ 961.29 |
| 12/30/2018 | 99 | | \$ 9.71 | \$ 961.29 |
| 12/31/2018 | 99 | | \$ 9.71 | \$ 961.29 |
| | 3,042 | 0 | 9.71 | \$ 29,537.82 |

AVG. 98

TOTAL MONTHLY BILLING

\$ 29,537.82

WORKING PAPERS

CORRECTED COPY
 JAN 08 2019
 PRIVATE FACILITY CMOB
 HUNTSVILLE

| PCN # | Position Title | Date Vacated | Sanctions Began | Date Filled | 90 Day Pos | Avg Daily Salary | Days Vacant | Amount Withheld |
|----------------|----------------------------------|--------------|-----------------|-------------|------------|------------------|-------------|-----------------|
| 582002030001 | Substance Abuse Counselor II-DWI | 06/01/18 | 08/31/18 | | 90 | \$122.00 | 31 | \$ 3,782.00 |
| 1 | TOTAL | | | | | | 31 | \$ 3,782.00 |
| TOTAL SANCTION | | | | | | | 31 | \$ 3,782.00 |

STATE OF TEXAS PURCHASE VOUCHER

Page 001 of 001

| | | | | | | | | | | |
|--|---------------|--|-----------------------------|-----------------------------|--|-------------------------------------|--|------|-------------------------------------|------------------|
| ARCHIVE REFERENCE NO | | AGENCY 696 - HUNTSVILLE ACCOUNTS PAYABLE | | | | | CURRENT DOCUMENT 99043940 | | | |
| | | EFF DATE 03/05/19 | DOC DATE 06/01/18 | DUE DATE 03/21/19 | DOC AGY 696 | DOCUMENT AMOUNT 23,441.94 | | | | |
| VENDOR NO / MC | | REQUESTED PAYMENT DATE | | | PDT | PCC | REQUISITION NO 696-9-PF1819C160- | | | |
| VENDOR NAME / ADDRESS MANAGEMENT & TRAINING CORP P O BOX 10 ****DIRECT DEPOSIT**** CENTERVILLE, UT 84014 | | | | | AGENCY USE TEXAS DEPARTMENT OF CRIMINAL JUST P.O. BOX 4018 HUNTSVILLE, TX 77342 | | | | | |
| SFX | REF DOC - SFX | M | TC | INDEX | PCA | AY | COBJ | AOBJ | AMOUNT | R |
| | APPN | FUND | INVOICE NUMBER | | | DESCRIPTION | | | AGENCY USE | |
| 001 | | | | | | | | | 225 76970 63300 19 7325 8483 | 23,441.94 |
| | 13052 | 0014 | GIST-0119-01 | | | GIST FACILITY | | | | |

| DATE | DESCRIPTION OF GOODS OR SERVICES | QTY | UNIT COST | AMOUNT |
|----------|-----------------------------------|-----|-----------|--------|
| 01/31/19 | TX GOVT CODE 493.009 AND 501.0931 | | | |

| | | | | | |
|--------------|-------------------------|-------|-----------------------|--------|----------------|
| CONTACT NAME | INVOICE SERVICES | PHONE | (936) 437-6929 | ENT BY | PA00029 |
|--------------|-------------------------|-------|-----------------------|--------|----------------|

I approve this voucher for payment. The above goods or services correspond in every particular with the contract under which they were purchased. The invoice for the goods or services is correct.
The payment complies with the General Appropriations Act.

| | | | |
|-----------|------|-------|------|
| APPROVED: | NAME | TITLE | DATE |
| APPROVED: | NAME | TITLE | DATE |

99 043940

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Private Facility Contract Monitoring / Oversight Division

TO: Alison Lago
Accounts Payable

DATE: February 22, 2019

FROM: Kandy Dorey
Private Facilities
Accountant IV - Business Operations

SUBJECT: January 2019
Management & Training Corp.
Contract No: PF-18-19-C160 ✓
Invoice Received: 2/19/2019
Payment Due: 3/21/2019

Enclosed is the invoice per diem payment for Gist Facility.

| Invoice # ✓ | Vendor | Man Days | Rate | Total |
|--------------|-----------------------------|----------|---------|--------------|
| Gist-0119-01 | Management & Training Corp. | 2,814 | \$ 9.71 | \$ 27,323.94 |

The following adjustments have been made:

| Sanction | Date | Amount Withheld |
|-------------------------------|--------|-----------------|
| Position Vacancy - SAC II/DWI | Jan-19 | \$ 3,782.00 |
| Required Report - Error | Jan-19 | \$ 100.00 |

Total Withholdings: \$ 3,882.00

| | | | | |
|---------------------------------|---------|-------|--------|-----------------------|
| Total amount to be paid: | | | | \$ 23,441.94 ✓ |
| Lonestar Coding | Index ✓ | PCA ✓ | AOBJ ✓ | Amount |
| | 76970 | 63300 | 8483 | \$ 23,441.94 ✓ |

Attachments
File

cc: Michael Bell, Management & Training Corp.
Jason Diehl, Budget

Jared Howes, Management & Training Corp.
Michelle Greenalch, Management & Training Corp.

I certify that the attached invoices have been audited for compliance with the currently approved contract prices, are free of mathematical errors, the services / goods were received and correspond in every particular way with the contract under which they were procured, and the invoices are true and unpaid.

Kandy Dorey 2/22/19
Signature & Date

Received

FEB 25 2019

Accounts Payable

Please contact Rebecca Jones, Accountant VI, at Rebecca.Jones@tdcj.texas.gov or 936-437-7083 for any errors, questions or concerns regarding payment and/or contracts.

REFUSE INTEREST *ML*

Gist State Jail

3285 Farm to Market 3514
Beaumont, TX 77705
PHONE (409) 727-8400

ATTN: TDCJ - Private Facility Contract Monitoring /
Oversight Division
Two Financial Plaza Suite 310
Huntsville, TX 77340

REMT TO: MANAGEMENT & TRAINING CORP.
500 N. Marketplace Dr.
P.O. Box 10
Centerville UT 84014

Inv. No. GIST-0119-01 ✓
Date: February 19, 2019

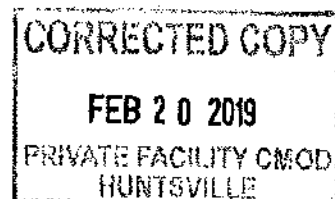
Contract 696-PF-18-19-C160 ✓

| DESCRIPTION | | AMOUNT |
|--|-----------|----------------|
| GIST MANDAYS PER ATTACHED COUNT FOR JANUARY 2019 ✓ | | |
| ✓ 2,814 INMATES | \$ 9.71 ✓ | \$ 27,323.94 ✓ |
| Total | | \$ 27,323.94 |

Remittance Requested by Direct Deposit to:
Management & Training Corporation
ID# 87-0365322
Account# 032-00638-60
Wells Fargo Bank
ABA Routing# 121000248

Michael Bell
Michael Bell, Vice President
Region III

WORKING PAPERS



2/20/19

Gist State Jail

MONTHLY BILLING

Inv. No. GIST-0119-01

Date: February 19, 2019

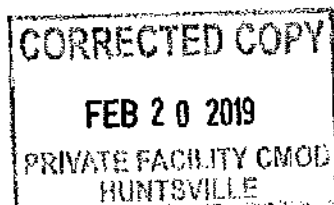
| DAY | INMATE HEAD COUNT | HOSPITAL COUNT | RATE | TOTAL |
|-----------|----------------------|-------------------|---------|--------------|
| 1/1/2019 | 99 | | \$ 9.71 | \$ 961.29 |
| 1/2/2019 | 98 | | \$ 9.71 | \$ 951.58 |
| 1/3/2019 | 98 | | \$ 9.71 | \$ 951.58 |
| 1/4/2019 | 90 | | \$ 9.71 | \$ 873.90 |
| 1/5/2019 | 90 | | \$ 9.71 | \$ 873.90 |
| 1/6/2019 | 90 | | \$ 9.71 | \$ 873.90 |
| 1/7/2019 | 90 | | \$ 9.71 | \$ 873.90 |
| 1/8/2019 | 92 | | \$ 9.71 | \$ 893.32 |
| 1/9/2019 | 91 | | \$ 9.71 | \$ 883.61 |
| 1/10/2019 | 95 | | \$ 9.71 | \$ 922.45 |
| 1/11/2019 | 97 | | \$ 9.71 | \$ 941.87 |
| 1/12/2019 | 97 | | \$ 9.71 | \$ 941.87 |
| 1/13/2019 | 97 | | \$ 9.71 | \$ 941.87 |
| 1/14/2019 | 94 | | \$ 9.71 | \$ 912.74 |
| 1/15/2019 | 95 | | \$ 9.71 | \$ 922.45 |
| 1/16/2019 | 95 | | \$ 9.71 | \$ 922.45 |
| 1/17/2019 | 94 | | \$ 9.71 | \$ 912.74 |
| 1/18/2019 | 85 | | \$ 9.71 | \$ 825.35 |
| 1/19/2019 | 85 | | \$ 9.71 | \$ 825.35 |
| 1/20/2019 | 85 | | \$ 9.71 | \$ 825.35 |
| 1/21/2019 | 85 | | \$ 9.71 | \$ 825.35 |
| 1/22/2019 | 86 | | \$ 9.71 | \$ 826.36 |
| 1/23/2019 | 87 | | \$ 9.71 | \$ 844.77 |
| 1/24/2019 | 86 | | \$ 9.71 | \$ 854.48 |
| 1/25/2019 | 84 | | \$ 9.71 | \$ 815.64 |
| 1/26/2019 | 84 | | \$ 9.71 | \$ 815.64 |
| 1/27/2019 | 84 | | \$ 9.71 | \$ 815.64 |
| 1/28/2019 | 88 | | \$ 9.71 | \$ 854.48 |
| 1/29/2019 | 90 | | \$ 9.71 | \$ 873.90 |
| 1/30/2019 | 92 | | \$ 9.71 | \$ 893.32 |
| 1/31/2019 | 90 | | \$ 9.71 | \$ 873.90 |
| | 2,814 | 0 | 9.71 | \$ 27,323.94 |

AVG. 91

TOTAL MONTHLY BILLING

\$ 27,323.94

WORKING PAPERS



| PCN # | Position Title | Date Vacated | Sanctions Began | Date Filled | 90 Day Pos | Avg Daily Salary | Jan-19 Days Vacant | Amount Withheld |
|----------------|----------------------------------|--------------|-----------------|-------------|------------|------------------|--------------------|-----------------|
| 582002030001 | Substance Abuse Counselor II-DWI | 06/01/18 | 08/31/18 | | 90 | \$122.00 | 31 | \$ 3,782.00 |
| 1 | TOTAL | | | | | | 31 | \$ 3,782.00 |
| TOTAL SANCTION | | | | | | | 31 | \$ 3,782.00 |

Compliance Standard 14
Required Reports (Accurate and Complete)
Gist SJ - January 2019

A.

| Report | Error | Total Number of Errors | Adjustment Amount | Total Adjustment |
|-------------------------|--------------|------------------------|-------------------|------------------|
| Monthly Strength Report | Count Errors | 1 | \$100.00 | \$100.00 |

Sub-Total: \$100.00

B.

| Report | Due Date | Date submitted | Days past Due Date | Adjustment Amount | Total Adjustment |
|--------|----------|----------------|--------------------|-------------------|------------------|
|--------|----------|----------------|--------------------|-------------------|------------------|

Sub-Total: \$0.00

**Total
Withholding: \$100.00**

STATE OF TEXAS PURCHASE VOUCHER

Page 001 of 001

| | | | | | | | | | | |
|--|---------------|--|-----------------------------|-----------------------------|---|-------------------------------------|--|------------|--------|---|
| ARCHIVE REFERENCE NO | | AGENCY 696 - HUNTSVILLE ACCOUNTS PAYABLE | | | | | CURRENT DOCUMENT 99045289 | | | |
| | | EFF DATE 03/26/19 | DOC DATE 06/01/18 | DUE DATE 04/03/19 | DOC AGY 696 | DOCUMENT AMOUNT 23,024.33 | | | | |
| VENDOR NO / MC | | REQUESTED PAYMENT DATE | | | PDT | PCC | REQUISITION NO 696-9-PF1819C160- | | | |
| VENDOR NAME / ADDRESS MANAGEMENT & TRAINING CORP P O BOX 10 ****DIRECT DEPOSIT**** CENTERVILLE, UT 84014 | | | | | AGENCY USE TEXAS DEPARTMENT OF CRIMINAL JUST P.O. BOX 4018 HUNTSVILLE, TX 77342 | | | | | |
| SFX | REF DOC - SFX | M | TC | INDEX | PCA | AY | COBJ | AOBJ | AMOUNT | R |
| | APPN | FUND | INVOICE NUMBER | | DESCRIPTION | | | AGENCY USE | | |
| 001 225 76970 63300 19 7325 8483 23,024.33 13052 0014 GIST-0219-01 GIST FACILITY | | | | | | | | | | |
| | | | | | | | | | | |
| DATE | | DESCRIPTION OF GOODS OR SERVICES | | | | QTY | UNIT COST | | AMOUNT | |
| 02/28/19 | | TX GOVT CODE 493.009 AND 501.0931 | | | | | | | | |
| | | | | | | | | | | |
| CONTACT NAME | | INVOICE SERVICES | | | | (936) 437-6929 | | LA00092 | | |
| | | PHONE | | | | ENT BY | | | | |
| I approve this voucher for payment. The above goods or services correspond in every particular with the contract under which they were purchased. The invoice for the goods or services is correct. The payment complies with the General Appropriations Act. | | | | | | | | | | |
| APPROVED: NAME | | TITLE | | | | DATE | | | | |
| APPROVED: NAME | | TITLE | | | | DATE | | | | |

991045289 ✓
3-4
2-28
4-3

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Private Facility Contract Monitoring / Oversight Division

TO: Alison Lago
Accounts Payable

DATE: March 21, 2019

FROM: Kandy Dorey
Private Facilities
Accountant IV - Business Operations

SUBJECT: February 2019
Management & Training Corp.
Contract No: PF-18-19-C160 ✓
Invoice Received: 3/4/2019
Payment Due: 4/3/2019

Enclosed is the invoice per diem payment for *Gist Facility*.

| Invoice # | Vendor | Man Days | Rate | Total |
|--------------|-----------------------------|----------|---------|----------------|
| Gist-0219-01 | Management & Training Corp. | 2,723 | \$ 9.71 | \$ 26,440.33 ✓ |

The following adjustments have been made:

| Sanction | Date | Amount Withheld |
|-------------------------------|--------|-----------------|
| Position Vacancy - SAC II/DWI | Feb-19 | \$ 3,416.00 ✓ |

Total Withholdings: \$ 3,416.00

| Total amount to be paid: | | | | \$ 23,024.33 ✓ |
|---------------------------------|-------|-------|------|-----------------------|
| Lonestar | Index | PCA | AOBJ | Amount |
| Coding | 76970 | 63300 | 8483 | \$ 23,024.33 |

Attachments
File

cc: Michael Bell, Management & Training Corp.
Jason Diehl, Budget

Jared Howes, Management & Training Corp.
Michelle Greenalch, Management & Training Corp.

REFUSE INTEREST *Mi-1*

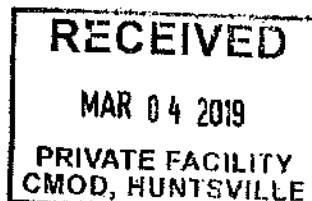
I certify that the attached invoices have been audited for compliance with the currently approved contract prices, are free of mathematical errors, the services / goods were received and correspond in every particular way with the contract under which they were procured, and the invoices are true and unpaid.

Kandy Dorey 3/21/19
Signature & Date

Received
MAR 21 2019
Accounts Payable

Please contact Rebecca Jones, Accountant VI, at Rebecca.Jones@tdcj.texas.gov or 936-437-7083 for any errors, questions or concerns regarding payment and/or contracts.

Gist State Jail
3295 Farm to Market 3514
Beaumont, TX 77705
PHONE (409) 727-8400



ATTN: TDCJ - Private Facility Contract Monitoring /
Oversight Division
Two Financial Plaza Suite 310
Huntsville, TX 77340

REMT TO: MANAGEMENT & TRAINING CORP.
500 N. Marketplace Dr.
P.O. Box 10
Centerville UT 84014

Inv. No. GIST-0219-01 ✓
Date: March 01, 2019

Contract 696-PF-18-19-C160 ✓

| DESCRIPTION | AMOUNT |
|--|----------------|
| GIST MANDAYS PER ATTACHED COUNT FOR FEBRUARY 2019 ✓ ✓ 2,723 INMATES \$ 9.71 ✓ | \$ 26,440.33 ✓ |
| Total | \$ 26,440.33 ✓ |

Remittance Requested by Direct Deposit to:
Management & Training Corporation
ID# 87-0365322
Account# 032-00638-60
Wells Fargo Bank
ABA Routing# 121000248

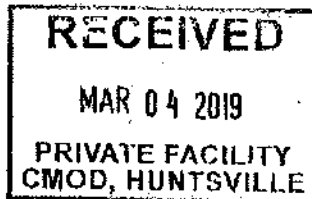
Michael Bell ✓
Michael Bell, Vice President
Region III

WORKING PAPERS

2/13/19

Gist State Jail
MONTHLY BILLING

Inv. No. GIST-0219-01
Date: March 01, 2019



| DAY | INMATE HEAD COUNT | HOSPITAL COUNT | RATE | TOTAL |
|-----------|----------------------|-------------------|---------|--------------|
| 2/1/2019 | 91 | | \$ 9.71 | \$ 883.61 |
| 2/2/2019 | 91 | | \$ 9.71 | \$ 883.61 |
| 2/3/2019 | 91 | | \$ 9.71 | \$ 883.61 |
| 2/4/2019 | 92 | | \$ 9.71 | \$ 893.32 |
| 2/5/2019 | 94 | | \$ 9.71 | \$ 912.74 |
| 2/6/2019 | 92 | | \$ 9.71 | \$ 893.32 |
| 2/7/2019 | 94 | | \$ 9.71 | \$ 912.74 |
| 2/8/2019 | 92 | | \$ 9.71 | \$ 893.32 |
| 2/9/2019 | 92 | | \$ 9.71 | \$ 893.32 |
| 2/10/2019 | 92 | | \$ 9.71 | \$ 893.32 |
| 2/11/2019 | 94 | | \$ 9.71 | \$ 912.74 |
| 2/12/2019 | 98 | | \$ 9.71 | \$ 951.58 |
| 2/13/2019 | 97 | | \$ 9.71 | \$ 941.87 |
| 2/14/2019 | 100 | | \$ 9.71 | \$ 971.00 |
| 2/15/2019 | 96 | | \$ 9.71 | \$ 932.16 |
| 2/16/2019 | 96 | | \$ 9.71 | \$ 932.16 |
| 2/17/2019 | 96 | | \$ 9.71 | \$ 932.16 |
| 2/18/2019 | 96 | | \$ 9.71 | \$ 932.16 |
| 2/19/2019 | 101 | | \$ 9.71 | \$ 980.71 |
| 2/20/2019 | 102 | | \$ 9.71 | \$ 990.42 |
| 2/21/2019 | 103 | | \$ 9.71 | \$ 1,000.13 |
| 2/22/2019 | 100 | | \$ 9.71 | \$ 971.00 |
| 2/23/2019 | 100 | | \$ 9.71 | \$ 971.00 |
| 2/24/2019 | 100 | | \$ 9.71 | \$ 971.00 |
| 2/25/2019 | 100 | | \$ 9.71 | \$ 971.00 |
| 2/26/2019 | 107 | | \$ 9.71 | \$ 1,038.97 |
| 2/27/2019 | 108 | | \$ 9.71 | \$ 1,048.68 |
| 2/28/2019 | 108 | | \$ 9.71 | \$ 1,048.68 |
| | 2,723 | 0 | 9.71 | \$ 26,440.33 |

AVG. 87

TOTAL MONTHLY BILLING

\$ 26,440.33

WORKING PAPERS

**Compliance Sanction 1
Position Vacancy - Counselors
Gist SJ - February 2019**

| PCN # | Position Title | Date Vacated | Sanctions Began | Date Filled | 90 Day Pos | \$122.00 Avg Daily Salary | Feb-19 | |
|----------------|----------------------------------|--------------|-----------------|-------------|------------|------------------------------|-------------|-----------------|
| | | | | | | | Days Vacant | Amount Withheld |
| 582002030001 | Substance Abuse Counselor II-DWI | 08/01/18 | 08/31/18 | | 90 | \$122.00 | 28 | \$ 3,416.00 |
| 1 | TOTAL | | | | | | 28 | \$ 3,416.00 |
| TOTAL SANCTION | | | | | | | 28 | \$ 3,416.00 |

✓

Page 001 of 001

LNSTR-008-TE(2/03)

99047152

4-21
3-31
5-21

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Private Facility Contract Monitoring / Oversight Division

TO: Alison Lago
Accounts Payable

DATE: April 24, 2019

FROM: Margie Ainsworth
Private Facilities
Accountant II - Business Operations

SUBJECT: March 2019
Management & Training Corp.
Contract No: PF-18-19-C160
Invoice Received: 4/2/2019
Payment Due: 5/2/2019

Enclosed is the invoice per diem payment for *Gist Facility*.

| Invoice # | Vendor | Man Days | Rate | Total |
|--------------|-----------------------------|----------|---------|--------------|
| Gist-0319-01 | Management & Training Corp. | 3,455 | \$ 9.71 | \$ 33,548.05 |

The following adjustments have been made:

| Sanction | Date | Amount Withheld |
|----------------------------------|--------|-----------------|
| Pre-Employment Background Checks | Dec-18 | \$ 16.50 |
| Position Vacancy - SAC II/DWI | Mar-19 | \$ 3,782.00 |

Total Withholdings: \$ 3,798.50

| Total amount to be paid: | | | | \$ 29,749.55 |
|---------------------------------|-------|-------|------|---------------------|
| Lonestar Coding | Index | PCA | AOBJ | Amount |
| | 76970 | 63300 | 8483 | \$ 29,749.55 |

Attachments
File

cc: Michael Bell, Management & Training Corp. Jared Howes, Management & Training Corp.
Jason Diehl, Budget Erica Wehmeyer, Management & Training Corp.

REFUSE INTEREST *mi-1*

I certify that the attached invoices have been audited for compliance with the currently approved contract prices, are free of mathematical errors, the services / goods were received and correspond in every particular way with the contract under which they were procured, and the invoices are true and unpaid.

Margie Ainsworth 4/24/19
Signature & Date

Please contact Rebecca Jones, Accountant VI, at Rebecca.Jones@tdcj.texas.gov or 936-437-7083 for any errors, questions or concerns regarding payment and/or contracts.

Received

APR 25 2019

Accounts Payable

Gist State Jail
3295 Farm to Market 3514
Beaumont, TX 77705
PHONE (409) 727-8400

RECEIVED

APR 02 2019

**PRIVATE FACILITY
CMOD, HUNTSVILLE**

**ATTN: TDCJ - Private Facility Contract Monitoring /
Oversight Division
Two Financial Plaza Suite 310
Huntsville, TX 77340**

**REMT TO: MANAGEMENT & TRAINING CORP.
500 N. Marketplace Dr.
P.O. Box 10
Centerville UT 84014**

**Inv. No. GIST-0319-01 ✓
Date: April 01, 2019**

Contract 696-PF-18-19-C160 ✓

| DESCRIPTION | AMOUNT |
|--|--------------------------|
| GIST MANDAYS PER ATTACHED COUNT FOR MARCH 2019 ✓ 3,455 INMATES \$ | 9.71 ✓ \$ 33,548.05 ✓ |
| Total | \$ 33,548.05 ✓ ✓ |

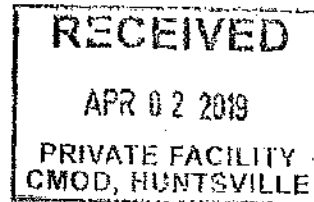
**Remittance Requested by Direct Deposit to:
Management & Training Corporation
ID# 87-0365322
Account# 032-00638-60
Wells Fargo Bank
ABA Routing# 121000248**

Michael Bell ✓
**Michael Bell, Vice President
Region III**

WORKING PAPERS

*MB
4/4/19*

Gist State Jail
MONTHLY BILLING
Inv. No. GIST-0319-01
Date: April 01, 2019



| DAY | INMATE HEAD COUNT | HOSPITAL COUNT | RATE | TOTAL |
|-----------------------|----------------------|-------------------|---------|------------------|
| 3/1/2019 | 105 | | \$ 9.71 | \$ 1,019.55 |
| 3/2/2019 | 105 | | \$ 9.71 | \$ 1,019.55 |
| 3/3/2019 | 105 | | \$ 9.71 | \$ 1,019.55 |
| 3/4/2019 | 107 | | \$ 9.71 | \$ 1,038.97 |
| 3/5/2019 | 110 | | \$ 9.71 | \$ 1,068.10 |
| 3/6/2019 | 114 | | \$ 9.71 | \$ 1,106.94 |
| 3/7/2019 | 112 | | \$ 9.71 | \$ 1,087.52 |
| 3/8/2019 | 110 | | \$ 9.71 | \$ 1,068.10 |
| 3/9/2019 | 110 | | \$ 9.71 | \$ 1,068.10 |
| 3/10/2019 | 110 | | \$ 9.71 | \$ 1,068.10 |
| 3/11/2019 | 109 | | \$ 9.71 | \$ 1,058.99 |
| 3/12/2019 | 111 | | \$ 9.71 | \$ 1,077.81 |
| 3/13/2019 | 111 | | \$ 9.71 | \$ 1,077.81 |
| 3/14/2019 | 115 | | \$ 9.71 | \$ 1,116.65 |
| 3/15/2019 | 111 | | \$ 9.71 | \$ 1,077.81 |
| 3/16/2019 | 111 | | \$ 9.71 | \$ 1,077.81 |
| 3/17/2019 | 111 | | \$ 9.71 | \$ 1,077.81 |
| 3/18/2019 | 111 | | \$ 9.71 | \$ 1,077.81 |
| 3/19/2019 | 112 | | \$ 9.71 | \$ 1,087.52 |
| 3/20/2019 | 114 | | \$ 9.71 | \$ 1,106.94 |
| 3/21/2019 | 115 | | \$ 9.71 | \$ 1,116.65 |
| 3/22/2019 | 115 | | \$ 9.71 | \$ 1,116.65 |
| 3/23/2019 | 115 | | \$ 9.71 | \$ 1,116.65 |
| 3/24/2019 | 115 | | \$ 9.71 | \$ 1,116.65 |
| 3/25/2019 | 115 | | \$ 9.71 | \$ 1,116.65 |
| 3/26/2019 | 116 | | \$ 9.71 | \$ 1,126.36 |
| 3/27/2019 | 113 | | \$ 9.71 | \$ 1,097.23 |
| 3/28/2019 | 114 | | \$ 9.71 | \$ 1,106.94 |
| 3/29/2019 | 111 | | \$ 9.71 | \$ 1,077.81 |
| 3/30/2019 | 111 | | \$ 9.71 | \$ 1,077.81 |
| 3/31/2019 | 111 | | \$ 9.71 | \$ 1,077.81 |
| | 3,455 | 0 | 9.71 | \$ 33,548.05 |
| AVG. | 111 | | | |
| TOTAL MONTHLY BILLING | | | \$ | <u>33,548.05</u> |

WORKING PAPERS

**Compliance Sanction 1
Position Vacancy - Counselors
Gist SJ - March 2019**

| PCN # | Position Title | Date Vacated | Sanctions Began | Date Filled | 90 Day Pos | Avg Daily Salary | Mar-18 | |
|--------------|----------------------------------|--------------|-----------------|-------------|------------|------------------|-------------|-----------------|
| | | | | | | | Days Vacant | Amount Withheld |
| 582002030001 | Substance Abuse Counselor II-DWI | 06/01/18 | 09/31/18 | | 90 | \$122.00 | 31 | \$3,782.00 |
| 1 | TOTAL | | | | | | 31 | \$3,782.00 |
| | TOTAL SANCTION | | | | | | 31 | \$3,782.00 |

Texas Department of Criminal Justice
DPS Invoices Received
Gist Jail - December 2018

| Applicant's Name | Facility | DPS Month | DPS |
|----------------------|-----------|-----------|----------|
| HOLLIS-SMITH, CEAN M | GIST JAIL | 12/1/2018 | \$ 16.50 |

1

Total: \$ 16.50

STATE OF TEXAS PURCHASE VOUCHER

Page 001 of 001

| | | | | | | | | | |
|---|----------------------------------|--|-----------------------------|-----------------------------|--|-------------------------------------|--|-------------------------------------|---|
| ARCHIVE REFERENCE NO | | AGENCY 696 - HUNTSVILLE ACCOUNTS PAYABLE | | | | | | CURRENT DOCUMENT 99048720 | |
| | | EFF DATE 05/23/19 | DOC DATE 06/01/18 | DUE DATE 06/01/19 | DOC AGY 696 | DOCUMENT AMOUNT 28,990.86 | | | |
| VENDOR NO / MC | | REQUESTED PAYMENT DATE | | | PDT | PCC | REQUISITION NO 696-9-PF1819C160- | | |
| VENDOR NAME / ADDRESS MANAGEMENT & TRAINING CORP P O BOX 10 ****DIRECT DEPOSIT**** CENTERVILLE, UT 84014 | | | | | AGENCY USE TEXAS DEPARTMENT OF CRIMINAL JUST P.O. BOX 4018 HUNTSVILLE, TX 77342 | | | | |
| REF DOC - SFX | M | TC | INDEX | PCA | AY | COBJ | AOBJ | AMOUNT | R |
| 3FX | APPH | FUND | INVOICE NUMBER | | DESCRIPTION | | | AGENCY USE | |
| 001 | | 225 76970 63300 | | 19 7325 8483 | | | | 28,990.86 | |
| 13052 | | 0014 GIST-0419-01 | | GIST FACILITY | | | | | |
| DATE | DESCRIPTION OF GOODS OR SERVICES | | | | | QTY | UNIT COST | AMOUNT | |
| 04/30/19 TX GOVT CODE 493.009 AND 501.0931 | | | | | | | | | |
| CONTACT NAME INVOICE SERVICES | | | | | PHONE (936) 437-6929 | | ENT BY LA00092 | | |
| <p>I approve this voucher for payment. The above goods or services correspond in every particular with the contract under which they were purchased. The invoice for the goods or services is correct.</p> <p>The payment complies with the General Appropriations Act.</p> | | | | | | | | | |
| APPROVED: NAME _____ | | TITLE _____ | | | DATE _____ | | | | |
| APPROVED: NAME _____ | | TITLE _____ | | | DATE _____ | | | | |

99018720

5-2
4-30
6-1

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Private Facility Contract Monitoring / Oversight Division

TO: Alison Lago
Accounts Payable

DATE: May 16, 2019

FROM: Margie Ainsworth
Private Facilities
Accountant II - Business Operations

SUBJECT: April 2019
Management & Training Corp.
Contract No: PF-18-19-C160
Invoice Received: 5/2/2019
Payment Due: 6/1/2019

Enclosed is the invoice per diem payment for *Gist Facility*.

| Invoice # | Vendor | Man Days | Rate | Total |
|--------------|-----------------------------|----------|---------|--------------|
| Gist-0419-01 | Management & Training Corp. | 3,366 | \$ 9.71 | \$ 32,683.86 |

The following adjustments have been made:

| Sanction | Date | Amount Withheld |
|----------------------------------|--------|-----------------|
| Pre-Employment Background Checks | Feb-19 | \$ 33.00 |
| Position Vacancy - SAC II/DWI | Apr-19 | \$ 3,660.00 |

Total Withholdings: \$ 3,693.00

| | | | | |
|--------------------------|-------|-------|------|--------------|
| Total amount to be paid: | | | | \$ 28,990.86 |
| Lonestar Coding | Index | PCA | AOBJ | Amount |
| | 76970 | 63300 | 8483 | \$ 28,990.86 |

Attachments
File

cc: Michael Bell, Management & Training Corp.
Jason Diehl, Budget

Jared Howes, Management & Training Corp.
Erica Wehmeyer, Management & Training Corp.

REFUSE INTEREST *mi-1*

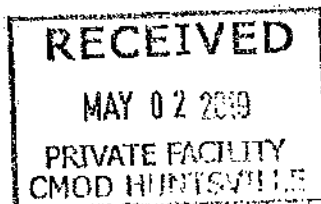
I certify that the attached invoices have been audited for compliance with the currently approved contract prices, are free of mathematical errors, the services / goods were received and correspond in every particular way with the contract under which they were procured, and the invoices are paid and unpaid.

Chang N. Williams 5/16/19
Signature & Date

Received
MAY 17 2019

Please contact Rebecca Jones, Accountant VI, at Rebecca.Jones@tdcj.texas.gov or 936-437-7083 for any errors, questions or concerns regarding payment and/or contracts.

Accounts Payable



Gist State Jail
3295 Farm to Market 3514
Beaumont, TX 77705
PHONE (409) 727-8400

ATTN: TDCJ - Private Facility Contract Monitoring /
Oversight Division
Two Financial Plaza Suite 310
Huntsville, TX 77340

REMT TO: MANAGEMENT & TRAINING CORP.
500 N. Marketplace Dr.
P.O. Box 10
Centerville UT 84014

Inv. No. GIST-0419-01
Date: May 01, 2019

Contract 696-PF-18-19-C160 /

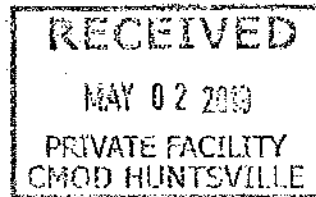
| DESCRIPTION | | AMOUNT |
|---|--|--------------|
| GIST MANDAYS PER ATTACHED COUNT FOR APRIL 2019 3,366 / INMATES | | \$ 32,693.86 |
| Total | | \$ 32,693.86 |

Remittance Requested by Direct Deposit to:
Management & Training Corporation
ID# 87-0365322
Account# 032-00838-60
Wells Fargo Bank
ABA Routing# 121000248

Michael Bell
Michael Bell, Vice President
Region III

5/7/19
JMB

Gist State Jail
MONTHLY BILLING
Inv. No. GIST-0419-01
Date: May 01, 2019



| DAY | INMATE HEAD COUNT | HOSPITAL COUNT | RATE | TOTAL |
|-----------|----------------------|-------------------|---------|--------------|
| 4/1/2019 | 110 | | \$ 9.71 | \$ 1,066.10 |
| 4/2/2019 | 114 | | \$ 9.71 | \$ 1,106.94 |
| 4/3/2019 | 115 | | \$ 9.71 | \$ 1,116.65 |
| 4/4/2019 | 116 | | \$ 9.71 | \$ 1,126.36 |
| 4/5/2019 | 115 | | \$ 9.71 | \$ 1,116.65 |
| 4/6/2019 | 115 | | \$ 9.71 | \$ 1,116.65 |
| 4/7/2019 | 115 | | \$ 9.71 | \$ 1,116.65 |
| 4/8/2019 | 111 | | \$ 9.71 | \$ 1,077.81 |
| 4/9/2019 | 109 | | \$ 9.71 | \$ 1,058.39 |
| 4/10/2019 | 110 | | \$ 9.71 | \$ 1,068.10 |
| 4/11/2019 | 109 | | \$ 9.71 | \$ 1,058.39 |
| 4/12/2019 | 108 | | \$ 9.71 | \$ 1,029.26 |
| 4/13/2019 | 108 | | \$ 9.71 | \$ 1,029.26 |
| 4/14/2019 | 106 | | \$ 9.71 | \$ 1,029.26 |
| 4/15/2019 | 108 | | \$ 9.71 | \$ 1,048.68 |
| 4/16/2019 | 109 | | \$ 9.71 | \$ 1,058.39 |
| 4/17/2019 | 112 | | \$ 9.71 | \$ 1,087.52 |
| 4/18/2019 | 115 | | \$ 9.71 | \$ 1,116.65 |
| 4/19/2019 | 113 | | \$ 9.71 | \$ 1,097.23 |
| 4/20/2019 | 113 | | \$ 9.71 | \$ 1,097.23 |
| 4/21/2019 | 113 | | \$ 9.71 | \$ 1,097.23 |
| 4/22/2019 | 114 | | \$ 9.71 | \$ 1,106.94 |
| 4/23/2019 | 114 | | \$ 9.71 | \$ 1,106.94 |
| 4/24/2019 | 116 | | \$ 9.71 | \$ 1,126.36 |
| 4/25/2019 | 114 | | \$ 9.71 | \$ 1,106.94 |
| 4/26/2019 | 113 | | \$ 9.71 | \$ 1,097.23 |
| 4/27/2019 | 113 | | \$ 9.71 | \$ 1,097.23 |
| 4/28/2019 | 113 | | \$ 9.71 | \$ 1,097.23 |
| 4/29/2019 | 115 | | \$ 9.71 | \$ 1,116.65 |
| 4/30/2019 | 114 | | \$ 9.71 | \$ 1,106.94 |
| 3,366 | | 0 | 9.71 | \$ 32,683.86 |

AVG. 112

TOTAL MONTHLY BILLING

\$ 32,683.86

Texas Department of Criminal Justice
DPS Invoices Received
Gist - February 2019

| Applicant's Name | Facility | DPS Month | DPS |
|------------------|--------------------|-----------|----------|
| OTTO, SHIRLEY M | GIST PF-18-19-C160 | 2/1/2019 | \$ 16.50 |
| GUIDRY, LATRELL | GIST PF-18-19-C160 | 2/1/2019 | \$ 16.50 |

2

Total: \$ 33.00

✓

**Compliance Sanction 1
Position Vacancy - Counselors
Gist SJ - April 2019**

| PCN # | Position Title | Date Vacated | Sanctions Began | Date Filled | 90 Day Pos | \$122.00 Avg Daily Salary | FTE | Adj Avg Daily Salary | Apr-18 | |
|----------------|----------------------------------|--------------|-----------------|-------------|------------|------------------------------|------|----------------------|-------------|-----------------|
| | | | | | | | | | Days Vacant | Amount Withheld |
| 582002030001 | Substance Abuse Counselor II-DWI | 08/01/18 | 08/31/18 | | 90 | \$122.00 | 1.00 | \$122.00 | 30 | \$3,660.00 |
| TOTAL | | | | | | | | | 30 | \$3,660.00 |
| TOTAL SANCTION | | | | | | | | | 30 | \$3,660.00 |

✓

STATE OF TEXAS PURCHASE VOUCHER

Page 001 of 001

| | | | | | | | | | | |
|--|---------------|-----------------------------------|----------------|----------|--|-----------------|-------------------|------------|-----------|---|
| ARCHIVE REFERENCE NO | | AGENCY | | | | | CURRENT DOCUMENT | | | |
| | | 696 - HUNTSVILLE ACCOUNTS PAYABLE | | | | | 99050817 | | | |
| | | EFF DATE | DOC DATE | DUE DATE | DOC AGY | DOCUMENT AMOUNT | | | | |
| | | 06/26/19 | 06/01/18 | 07/10/19 | 696 | 29,872.86 | | | | |
| VENDOR NO / MC | | REQUESTED PAYMENT DATE | | | PDT | PCC | REQUISITION NO | | | |
| | | | | | | | 696-9-PF1819C160- | | | |
| VENDOR NAME / ADDRESS | | | | | AGENCY USE | | | | | |
| MANAGEMENT & TRAINING CORP P O BOX 10 ****DIRECT DEPOSIT**** CENTERVILLE, UT 84014 | | | | | TEXAS DEPARTMENT OF CRIMINAL JUST P.O. BOX 4018 HUNTSVILLE, TX 77342 | | | | | |
| SFX | REF DOC - SFX | M | TC | INDEX | PCA | AY | COBJ | AOBJ | AMOUNT | R |
| | APPN | FUND | INVOICE NUMBER | | DESCRIPTION | | | AGENCY USE | | |
| 001 | | | | | | | | | 29,872.86 | |
| | 13052 | 0014 | GIST-0519-01 | | GIST FACILITY | | | | | |
| | | | | | | | | | | |
| DATE | | DESCRIPTION OF GOODS OR SERVICES | | | | QTY | UNIT COST | | AMOUNT | |
| 05/31/19 | | TX GOVT CODE 493.009 AND 501.0931 | | | | | | | | |
| | | | | | | | | | | |
| CONTACT | | INVOICE SERVICES | | | | (936) 437-6929 | | LA00092 | | |
| NAME | | | | | | PHONE | | ENT BY | | |
| I approve this voucher for payment. The above goods or services correspond in every particular with the contract under which they were purchased. The invoice for the goods or services is correct. The payment complies with the General Appropriations Act. | | | | | | | | | | |
| APPROVED: | | NAME | | | | TITLE | | DATE | | |
| APPROVED: | | NAME | | | | TITLE | | DATE | | |


99050817 ✓

6-10
5-31
7-10

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Private Facility Contract Monitoring / Oversight Division

TO: Alison Lago
Accounts Payable

DATE: June 24, 2019

FROM: Kandy Dorey 
Private Facilities
Accountant IV - Business Operations

SUBJECT: May 2019 ✓
Management & Training Corp.
Contract No: PF-18-19-C160 ✓
Invoice Received: 6/10/2019 ✓
Payment Due: 7/10/2019

Enclosed is the invoice per diem payment for *Gist Facility*.

| Invoice # | Vendor | Man Days | Rate | Total |
|----------------|-----------------------------|----------|---------|----------------|
| ✓ Gist-0519-01 | Management & Training Corp. | 3,466 | \$ 9.71 | \$ 33,654.86 ✓ |

The following adjustments have been made:

| Sanction | Date | Amount Withheld |
|-------------------------------|--------|-----------------|
| Position Vacancy - SAC II/DWI | May-19 | \$ 3,782.00 ✓ |

Total Withholdings: \$ 3,782.00

| Total amount to be paid: | | | | \$ 29,872.86 ✓ |
|---------------------------------|-------|-------|--------|-----------------------|
| Lonestar Coding | Index | PCA | AOBJ | Amount |
| | 76970 | 63300 | ✓ 8483 | \$ 29,872.86 |

Attachments
File

cc: Michael Bell, Management & Training Corp.
Jason Diehl, Budget

Jared Howes, Management & Training Corp.
Erica Wehmeyer, Management & Training Corp.

I certify that the attached invoices have been audited for compliance with the currently approved contract prices, are free of mathematical errors, the services / goods were received and correspond in every particular way with the contract under which they were procured, and the invoices are true and unpaid.

Kandy Dorey 6/24/19
Signature & Date

REFUSE INTEREST *mi-1*

Please contact Rebecca Jones, Accountant VI, at Rebecca.Jones@tdcj.texas.gov or 936-437-7083 for any errors, questions or concerns regarding payment and/or contracts.

Received
JUN 26 2019
Accounts Payable

Gist State Jail
3295 Farm to Market 3514
Beaumont, TX 77705
PHONE (409) 727-8400

CORRECTED COPY
JUN 10 2019
PRIVATE FACILITY CMOD
HUNTSVILLE

ATTN: TDCJ - Private Facility Contract Monitoring /
Overnight Division
Two Financial Plaza Suite 310
Huntsville, TX 77340

REMT TO: MANAGEMENT & TRAINING CORP.
500 N. Marketplace Dr.
P.O. Box 10
Centerville UT 84014

Inv. No. GIST-0519-01 ✓
Date: June 10, 2019

Contract 698-PF-18-19-C160 ✓

| DESCRIPTION | | AMOUNT |
|--|-----------|------------------|
| GIST MANDAYS PER ATTACHED COUNT FOR MAY 2019 ✓ ✓3,466 INMATES | \$ 9.71 ✓ | \$ 33,654.88 |
| Total | | \$ 33,654.88 ✓ ✓ |

Remittance Requested by Direct Deposit to:
Management & Training Corporation
ID# 87-0365322
Account# 032-00638-60
Wells Fargo Bank
ABA Routing# 121000248

Michael Bell ✓
Michael Bell, Vice President
Region III

6/10/19

Gist State Jail
MONTHLY BILLING
Inv. No. GIST-0519-01
Date: June 10, 2019

CORRECTED COPY

JUN 10 2019
PRIVATE FACILITY CMOD
HUNTSVILLE

| DAY | INMATE HEAD COUNT | HOSPITAL COUNT | RATE | TOTAL |
|-----------------------|----------------------|-------------------|-------------|---------------------|
| 5/1/2019 | 114 | | \$ 9.71 | \$ 1,108.94 |
| 5/2/2019 | 115 | | \$ 9.71 | \$ 1,116.65 |
| 5/3/2019 | 116 | | \$ 9.71 | \$ 1,126.36 |
| 5/4/2019 | 116 | | \$ 9.71 | \$ 1,126.36 |
| 5/5/2019 | 116 | | \$ 9.71 | \$ 1,126.36 |
| 5/6/2019 | 116 | | \$ 9.71 | \$ 1,126.36 |
| 5/7/2019 | 115 | | \$ 9.71 | \$ 1,116.65 |
| 5/8/2019 | 116 | | \$ 9.71 | \$ 1,116.65 |
| 5/9/2019 | 115 | | \$ 9.71 | \$ 1,116.65 |
| 5/10/2019 | 106 | | \$ 9.71 | \$ 1,019.55 |
| 5/11/2019 | 106 | | \$ 9.71 | \$ 1,019.55 |
| 5/12/2019 | 106 | | \$ 9.71 | \$ 1,019.55 |
| 5/13/2019 | 108 | | \$ 9.71 | \$ 1,048.68 |
| 5/14/2019 | 108 | | \$ 9.71 | \$ 1,048.68 |
| 5/15/2019 | 112 | | \$ 9.71 | \$ 1,087.52 |
| 5/16/2019 | 114 | | \$ 9.71 | \$ 1,108.94 |
| 5/17/2019 | 116 | | \$ 9.71 | \$ 1,116.65 |
| 5/18/2019 | 116 | | \$ 9.71 | \$ 1,126.36 |
| 5/19/2019 | 116 | | \$ 9.71 | \$ 1,126.36 |
| 5/20/2019 | 115 | | \$ 9.71 | \$ 1,116.65 |
| 5/21/2019 | 115 | | \$ 9.71 | \$ 1,116.65 |
| 5/22/2019 | 115 | | \$ 9.71 | \$ 1,116.65 |
| 5/23/2019 | 112 | | \$ 9.71 | \$ 1,087.52 |
| 5/24/2019 | 108 | | \$ 9.71 | \$ 1,048.68 |
| 5/25/2019 | 109 | | \$ 9.71 | \$ 1,048.68 |
| 5/26/2019 | 108 | | \$ 9.71 | \$ 1,048.68 |
| 5/27/2019 | 108 | | \$ 9.71 | \$ 1,048.68 |
| 5/28/2019 | 108 | | \$ 9.71 | \$ 1,048.68 |
| 5/29/2019 | 109 | | \$ 9.71 | \$ 1,058.39 |
| 5/30/2019 | 109 | | \$ 9.71 | \$ 1,058.39 |
| 5/31/2019 | 109 | | \$ 9.71 | \$ 1,058.39 |
| | <u>3,486</u> | <u>0</u> | <u>9.71</u> | <u>\$ 33,654.86</u> |
| AVG. | 112 | | | |
| TOTAL MONTHLY BILLING | | | | <u>\$ 33,654.86</u> |

WORKING PAPERS

**Compliance Sanction 1
Position Vacancy - Counselors
Gist SJ - May 2019**

| PCN # | Position Title | Date Vacated | Sanctions Began | Date Filled | 90 Day Pos | \$122.00 Avg Daily Salary | May-19 | |
|----------------|----------------------------------|--------------|-----------------|-------------|------------|------------------------------|-------------|-----------------|
| | | | | | | | Days Vacant | Amount Withheld |
| 582002030001 | Substance Abuse Counselor II-DWI | 06/01/18 | 08/31/18 | | 90 | \$122.00 | 31 | \$3,782.00 |
| 2 | TOTAL | | | | | | 31 | \$3,782.00 |
| TOTAL SANCTION | | | | | | | 31 | \$3,782.00 |



STATE OF TEXAS PURCHASE VOUCHER

Page 001 of 001


| | | | | | | | | |
|--|----------------------------------|--|-----------------------------|-----------------------------|---|-------------------------------------|--|------------|
| ARCHIVE REFERENCE NO | | AGENCY 696 - HUNTSVILLE ACCOUNTS PAYABLE | | | | | CURRENT DOCUMENT 99052451 | |
| | | EFF DATE 07/25/19 | DOC DATE 06/01/18 | DUE DATE 08/01/19 | DOC AGY 696 | DOCUMENT AMOUNT 28,140.25 | | |
| VENDOR NO / MC | | REQUESTED PAYMENT DATE | | | PDT | PCC | REQUISITION NO 696-9-PF1819C160- | |
| VENDOR NAME / ADDRESS MANAGEMENT & TRAINING CORP P O BOX 10 ****DIRECT DEPOSIT**** CENTERVILLE, UT 84014 | | | | | AGENCY USE TEXAS DEPARTMENT OF CRIMINAL JUST P.O. BOX 4018 HUNTSVILLE, TX 77342 | | | |
| SPX | REF DOC - SPX | M | TC | INDEX | PCA | AY | COBJ | AOBJ |
| | APPN | FUND | INVOICE NUMBER | | DESCRIPTION | | | AGENCY USE |
| 001 | | 225 76970 63300 19 7325 8483 | | | | | 28,140.25 | |
| 13052 | | 0014 GIST-0619-01 GIST FACILITY | | | | | | |
| | | | | | | | | |
| DATE | DESCRIPTION OF GOODS OR SERVICES | | | | | QTY | UNIT COST | AMOUNT |
| 06/30/19 TX GOVT CODE 493.009 AND 501.0931 | | | | | | | | |
| | | | | | | | | |
| CONTACT NAME | | INVOICE SERVICES | | | (936) 437-6929 | | PA00029 | |
| NAME | | PHONE | | | ENT BY | | | |
| I approve this voucher for payment. The above goods or services correspond in every particular with the contract under which they were purchased. The invoice for the goods or services is correct. The payment complies with the General Appropriations Act. | | | | | | | | |
| APPROVED: NAME | | TITLE | | | DATE | | | |
| APPROVED: NAME | | TITLE | | | DATE | | | |

99052451 ✓

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Private Facility Contract Monitoring / Oversight Division

TO: Amanda Alvarado
 Accounts Payable

DATE: July 24, 2019

FROM: Kandy Dorey 
 Private Facilities
 Accountant IV - Business Operations

SUBJECT: June 2019
 Management & Training Corp.
 Contract No: PF-18-19-C160 ✓
 Invoice Received: 7/2/2019 ✓
 Payment Due: 8/1/2019

Enclosed is the invoice per diem payment for Gist Facility. ✓

| Invoice # | Vendor | Man Days | Rate | Total |
|--------------|-----------------------------|----------|---------|--------------|
| Gist-0619-01 | Management & Training Corp. | 3,275 | \$ 9.71 | \$ 31,800.25 |

The following adjustments have been made:

| Sanction | Date | Amount Withheld |
|-------------------------------|--------|-----------------|
| Position Vacancy - SAC II/DWI | Jun-19 | \$ 3,660.00 |

Total Withholdings: \$ 3,660.00


| Total amount to be paid: | | | | \$ 28,140.25 |
|---------------------------------|---------|---------|--------|---------------------|
| Lonestar Coding | Index | PCA | AOBJ | Amount |
| | ✓ 76970 | ✓ 63300 | ✓ 8483 | \$ ✓ 28,140.25 |

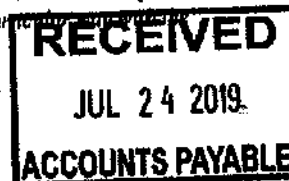
Attachments
File

cc: Michael Bell, Management & Training Corp.
 Jason Diehl, Budget

Jared Howes, Management & Training Corp.
 Erica Wehmeyer, Management & Training Corp.

I certify that the attached invoices have been audited for compliance with the currently approved contract prices, are free of mathematical errors, the services / goods were received and correspond in every particular to the contract under which they were procured, and the invoices are true and unpaid.

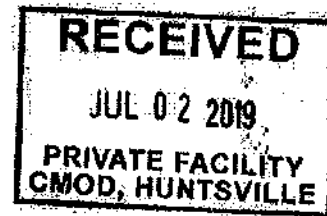
 7/24/19
 Signature & Date



Please contact Rebecca Jones, Accountant VI, at Rebecca.Jones@tdcj.texas.gov or 936-437-7083 for any errors, questions or concerns regarding payment and/or contracts.

REFUSE INTEREST 

R 7/12 ✓
 S 4/30 ✓
 D 8/1



Glat State Jail
3295 Farm to Market 3514
Beaumont, TX 77705
PHONE (409) 727-8400

**ATTN: TDCJ - Private Facility Contract Monitoring /
Overnight Division**
Two Financial Plaza Suite 310
Huntsville, TX 77340

REMT TO: MANAGEMENT & TRAINING CORP.
500 N. Marketplace Dr.
P.O. Box 10
Centerville UT 84014

Inv. No. GIST-0619-01✓
Date: July 02, 2019

Contract 006-PF-18-18-C100✓

| DESCRIPTION | AMOUNT |
|--|--------------------|
| GIST MANDAYS PER ATTACHED COUNT FOR JUNE 2019 ✓ ✓3,276 INMATES \$ | 9.71✓ \$ 31,800.25 |
| Total | \$ 31,800.25✓ |

Remittance Requested by Direct Deposit to:
Management & Training Corporation
ID# 87-0366322
Account# 032-00638-50
Wells Fargo Bank
ABA Routing# 121000248


Michael Bell, Vice President
Region III

2
784

RECEIVED

JUL 02 2019

PRIVATE FACILITY
CMOD, HUNTSVILLE

Gist State Jail

MONTHLY BILLING

Inv. No. GIST-0619-01

Date: July 02, 2019

| DAY | INMATE HEAD COUNT | HOSPITAL COUNT | RATE | TOTAL |
|-----------|----------------------|-------------------|---------|--------------|
| 6/1/2019 | 109 | | \$ 9.71 | \$ 1,058.39 |
| 6/2/2019 | 109 | | \$ 9.71 | \$ 1,058.39 |
| 6/3/2019 | 108 | | \$ 9.71 | \$ 1,048.68 |
| 6/4/2019 | 112 | | \$ 9.71 | \$ 1,087.52 |
| 6/5/2019 | 112 | | \$ 9.71 | \$ 1,087.52 |
| 6/6/2019 | 110 | | \$ 9.71 | \$ 1,068.10 |
| 6/7/2019 | 107 | | \$ 9.71 | \$ 1,038.87 |
| 6/8/2019 | 107 | | \$ 9.71 | \$ 1,038.87 |
| 6/9/2019 | 107 | | \$ 9.71 | \$ 1,038.87 |
| 6/10/2019 | 110 | | \$ 9.71 | \$ 1,068.10 |
| 6/11/2019 | 110 | | \$ 9.71 | \$ 1,068.10 |
| 6/12/2019 | 113 | | \$ 9.71 | \$ 1,097.23 |
| 6/13/2019 | 111 | | \$ 9.71 | \$ 1,077.81 |
| 6/14/2019 | 108 | | \$ 9.71 | \$ 1,048.68 |
| 6/15/2019 | 108 | | \$ 9.71 | \$ 1,048.68 |
| 6/16/2019 | 108 | | \$ 9.71 | \$ 1,048.68 |
| 6/17/2019 | 109 | | \$ 9.71 | \$ 1,058.39 |
| 6/18/2019 | 106 | | \$ 9.71 | \$ 1,029.26 |
| 6/19/2019 | 110 | | \$ 9.71 | \$ 1,068.10 |
| 6/20/2019 | 112 | | \$ 9.71 | \$ 1,087.52 |
| 6/21/2019 | 110 | | \$ 9.71 | \$ 1,068.10 |
| 6/22/2019 | 110 | | \$ 9.71 | \$ 1,068.10 |
| 6/23/2019 | 110 | | \$ 9.71 | \$ 1,068.10 |
| 6/24/2019 | 111 | | \$ 9.71 | \$ 1,077.81 |
| 6/25/2019 | 103 | | \$ 9.71 | \$ 1,000.13 |
| 6/26/2019 | 103 | | \$ 9.71 | \$ 1,000.13 |
| 6/27/2019 | 110 | | \$ 9.71 | \$ 1,068.10 |
| 6/28/2019 | 110 | | \$ 9.71 | \$ 1,068.10 |
| 6/29/2019 | 111 | | \$ 9.71 | \$ 1,077.81 |
| 6/30/2019 | 111 | | \$ 9.71 | \$ 1,077.81 |
| √ 3,275 | | 0 | 9.71 | \$ 31,800.25 |

AVG: 109

TOTAL MONTHLY BILLING

\$ 31,800.25

WORKING PAPERS

**Compliance Sanction 1
Position Vacancy - Counselors
Gist SJ - June 2019**

| PCN # | Position Title | Date Vacated | Sanctions Began | Date Filled | 90 Day Pos | Avg Daily Salary | Jun-19 | |
|----------------|----------------------------------|--------------|-----------------|-------------|------------|------------------|-------------|-----------------|
| | | | | | | | Days Vacant | Amount Withheld |
| 582002030001 | Substance Abuse Counselor II-DWI | 06/01/18 | 08/31/18 | | 90 | \$122.00 | 30 | \$ 3,660.00 |
| 1 | TOTAL | | | | | | 30 | \$ 3,660.00 |
| TOTAL SANCTION | | | | | | | 30 | \$ 3,660.00 |

STATE OF TEXAS PURCHASE VOUCHER

Page 001 of 001

| | | | | | |
|----------------------|--|-----------------------------|-----------------------------|-----------------------|--|
| ARCHIVE REFERENCE NO | AGENCY 696 - HUNTSVILLE ACCOUNTS PAYABLE | | | | CURRENT DOCUMENT 99054235 |
| | EFF DATE 08/26/19 | DOC DATE 06/01/18 | DUE DATE 08/31/19 | DOC AGY 696 | DOCUMENT AMOUNT 28,717.37 |
| VENDOR NO / MC | REQUESTED PAYMENT DATE | | PDT | PCC | REQUISITION NO 696-9-PF1819C160- |

| | |
|--|---|
| VENDOR NAME / ADDRESS MANAGEMENT & TRAINING CORP P O BOX 10 ****DIRECT DEPOSIT**** CENTERVILLE, UT 84014 | AGENCY USE TEXAS DEPARTMENT OF CRIMINAL JUST P.O. BOX 4018 HUNTSVILLE, TX 77342 |
|--|---|

| | | | | | | | | | | |
|---|---------------|------|----------------|-------|-------------|----|------|------|------------------|---|
| SFX | REF DOC - SFX | M | TC | INDEX | PCA | AY | COBJ | AOBJ | AMOUNT | R |
| | APPN | FUND | INVOICE NUMBER | | DESCRIPTION | | | | AGENCY USE | |
| 001 225 76970 63300 19 7325 8483 13052 0014 GIST-0719-01 GIST FACILITY | | | | | | | | | 28,717.37 | |

| DATE | DESCRIPTION OF GOODS OR SERVICES | QTY | UNIT COST | AMOUNT |
|-----------------|--|-----|-----------|--------|
| 07/31/19 | TX GOVT CODE 493.009 AND 501.0931 | | | |

| | | | | | | | |
|--|--|-------------------------|--|-----------------------|--|-----------------------|--|
| CONTACT NAME | | INVOICE SERVICES | | (936) 437-6929 | | ENT BY PA00029 | |
| I approve this voucher for payment. The above goods or services correspond in every particular with the contract under which they were purchased. The invoice for the goods or services is correct. The payment complies with the General Appropriations Act. | | | | | | | |
| APPROVED: NAME | | TITLE | | DATE | | | |
| APPROVED: NAME | | TITLE | | DATE | | | |

990 54235 ✓

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Private Facility Contract Monitoring / Oversight Division

TO: Amanda Alvarado
 Accounts Payable

DATE: August 21, 2019

FROM: Miranda Rose *WR*
 Accountant III - Business Operations
 Private Facilities

SUBJECT: July 2019
 Management & Training Corp.
 Contract No: PF-18-19-C160 ✓
 Invoice Received: 8/1/2019
 Payment Due: 8/31/2019

Enclosed is the invoice per diem payment for *Gist Facility*. ✓

| Invoice # | Vendor | Man Days | Rate | Total |
|--------------|-----------------------------|----------|---------|----------------|
| Gist-0719-01 | Management & Training Corp. | 3,347 | \$ 9.71 | \$ 32,499.37 ✓ |

The following adjustments have been made:

| Sanction | Date | Amount Withheld |
|-------------------------------|--------|-----------------|
| Position Vacancy - SAC II/DWI | Jul-19 | \$ 3,782.00 |

Total Withholdings: \$ 3,782.00

| Total amount to be paid: | | | | \$ 28,717.37 ✓ |
|---------------------------------|---------|---------|--------|-----------------------|
| Lonestar Coding | Index | PCA | AOBJ | Amount |
| | ✓ 76970 | ✓ 63300 | ✓ 8483 | \$ ✓ 28,717.37 |

R-8/1 ✓
 S-7/31 ✓
 D-8/31

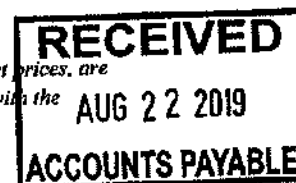
Attachments
File

cc: Michael Bell, Management & Training Corp.
 Jason Diehl, Budget

Jared Howes, Management & Training Corp.
 Erica Wehmeyer, Management & Training Corp.

I certify that the attached invoices have been audited for compliance with the currently approved contract prices, are free of mathematical errors, the services / goods were received and correspond in every particular way with the contract under which they were procured, and the invoices are true and unpaid.

Miranda Rose 8-22-19
 Signature & Date



Please contact Rebecca Jones, Accountant VI, at Rebecca.Jones@tdcj.texas.gov or 936-437-7083 for any errors, questions or concerns regarding payment and/or contracts.

RJ 9

Gist State Jail

3295 Farm to Market 3514
Beaumont, TX 77706
PHONE (409) 727-8400

ATTN: TDCJ - Private Facility Contract Monitoring /
Oversight Division
Two Financial Plaza Suite 310
Huntsville, TX 77340

REMT TO: MANAGEMENT & TRAINING CORP.
500 N. Marketplace Dr.
P.O. Box 10
Centerville UT 84014

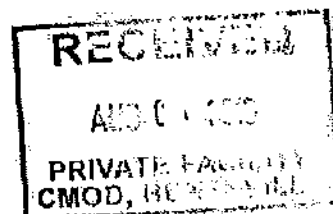
Inv. No. GIST-0719-01 ✓
Date: August 01, 2019

Contract 696-PF-18-19-C160 ✓

| DESCRIPTION | AMOUNT |
|---|-----------------------|
| GIST MANDAYS PER ATTACHED COUNT FOR JULY 2019 ✓ 3,347 / INMATES \$ | 9.71 ✓ \$ 32,499.37 ✓ |
| Total | \$ 32,499.37 ✓ |

Remittance Requested by Direct Deposit to:
Management & Training Corporation
ID# 87-0366322
Account# 032-00638-60
Wells Fargo Bank
ABA Routing# 121000248

Michael Ball
Michael Ball, Vice President
Region III



8-14-19

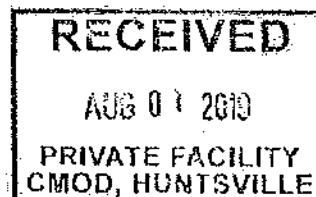
Gist State Jail
MONTHLY BILLING
 Inv. No. GIST-0719-01
 Date: August 01, 2019

| DAY | INMATE HEAD COUNT | HOSPITAL COUNT | RATE | TOTAL |
|-----------|----------------------|-------------------|---------|--------------|
| 7/1/2019 | 112 | | \$ 9.71 | \$ 1,087.52 |
| 7/2/2019 | 110 | | \$ 9.71 | \$ 1,068.10 |
| 7/3/2019 | 112 | | \$ 9.71 | \$ 1,087.52 |
| 7/4/2019 | 112 | | \$ 9.71 | \$ 1,087.52 |
| 7/5/2019 | 110 | | \$ 9.71 | \$ 1,068.10 |
| 7/6/2019 | 110 | | \$ 9.71 | \$ 1,068.10 |
| 7/7/2019 | 110 | | \$ 9.71 | \$ 1,068.10 |
| 7/8/2019 | 111 | | \$ 9.71 | \$ 1,077.81 |
| 7/9/2019 | 114 | | \$ 9.71 | \$ 1,106.94 |
| 7/10/2019 | 114 | | \$ 9.71 | \$ 1,106.94 |
| 7/11/2019 | 111 | | \$ 9.71 | \$ 1,077.81 |
| 7/12/2019 | 110 | | \$ 9.71 | \$ 1,068.10 |
| 7/13/2019 | 110 | | \$ 9.71 | \$ 1,068.10 |
| 7/14/2019 | 110 | | \$ 9.71 | \$ 1,068.10 |
| 7/15/2019 | 108 | | \$ 9.71 | \$ 1,029.26 |
| 7/16/2019 | 107 | | \$ 9.71 | \$ 1,038.97 |
| 7/18/2019 | 108 | | \$ 9.71 | \$ 1,048.68 |
| 7/17/2019 | 109 | | \$ 9.71 | \$ 1,058.39 |
| 7/18/2019 | 109 | | \$ 9.71 | \$ 1,058.39 |
| 7/19/2019 | 105 | | \$ 9.71 | \$ 1,019.55 |
| 7/20/2019 | 104 | | \$ 9.71 | \$ 1,009.84 |
| 7/21/2019 | 104 | | \$ 9.71 | \$ 1,009.84 |
| 7/22/2019 | 106 | | \$ 9.71 | \$ 1,029.26 |
| 7/23/2019 | 106 | | \$ 9.71 | \$ 1,029.26 |
| 7/24/2019 | 106 | | \$ 9.71 | \$ 1,029.26 |
| 7/25/2019 | 106 | | \$ 9.71 | \$ 1,029.26 |
| 7/26/2019 | 103 | | \$ 9.71 | \$ 1,019.55 |
| 7/27/2019 | 104 | | \$ 9.71 | \$ 1,009.84 |
| 7/28/2019 | 104 | | \$ 9.71 | \$ 1,009.84 |
| 7/29/2019 | 103 | | \$ 9.71 | \$ 1,000.13 |
| 7/30/2019 | 105 | | \$ 9.71 | \$ 1,019.55 |
| 7/31/2019 | 106 | | \$ 9.71 | \$ 1,029.26 |
| | 3,347 | 0 | 9.71 | \$ 32,499.37 |

AVG. 108

TOTAL MONTHLY BILLING

\$ 32,499.37



| PCN # | Position Title | Date Vacated | Sanctions Began | Date Filled | 90 Day Pos | Avg Daily Salary | Jul-18 | |
|----------------|----------------------------------|--------------|-----------------|-------------|------------|------------------|-------------|-----------------|
| | | | | | | | Days Vacant | Amount Withheld |
| 582002030001 | Substance Abuse Counselor II-DWI | 06/01/18 | 08/31/18 | | 90 | \$122.00 | 31 | \$3,782.00 |
| 1 | TOTAL | | | | | | 31 | \$3,782.00 |
| TOTAL SANCTION | | | | | | | 31 | \$3,782.00 |

STATE OF TEXAS PURCHASE VOUCHER

Page 001 of 001

| | | | | | | | | | | | |
|--|---------------|---|-----------------------------|-----------------------------|--|-------------------------------------|--|---------|------------|--------|---|
| ARCHIVE REFERENCE NO | | AGENCY 696 - ACCOUNTS PAYABLE | | | | | CURRENT DOCUMENT 90044968 | | | | |
| | | EFF DATE 09/30/19 | DOC DATE 06/01/18 | DUE DATE 10/03/19 | DOC AGY 696 | DOCUMENT AMOUNT 28,699.97 | | | | | |
| VENDOR NO / MC | | REQUESTED PAYMENT DATE | | | PDT | PCC | REQUISITION NO 696-9-PF1819C160- | | | | |
| VENDOR NAME / ADDRESS MANAGEMENT & TRAINING CORP P O BOX 10 ****DIRECT DEPOSIT**** CENTERVILLE, UT 84014 | | | | | AGENCY USE TEXAS DEPARTMENT OF CRIMINAL JUST P.O. BOX 4018 HUNTSVILLE, TX 77342 | | | | | | |
| SFX | REF DOC - SFX | | M | TC | INDEX | PCA | AY | COBJ | AOBJ | AMOUNT | R |
| | APPH | FUND | INVOICE NUMBER | | | DESCRIPTION | | | AGENCY USE | | |
| 001 225 76970 63300 19 7325 8483 28,699.97 13052 0014 GIST-0819-01 GIST FACILITY | | | | | | | | | | | |
| | | | | | | | | | | | |
| DATE | | DESCRIPTION OF GOODS OR SERVICES | | | | QTY | UNIT COST | | AMOUNT | | |
| 08/31/19 | | TX GOVT CODE 493.009 AND 501.0931 | | | | | | | | | |
| | | | | | | | | | | | |
| CONTACT NAME | | INVOICE SERVICES | | | | (936) 437-6929 | | PA00029 | | | |
| NAME | | PHONE | | | | ENT BY | | | | | |
| I approve this voucher for payment. The above goods or services correspond in every particular with the contract under which they were purchased. The invoice for the goods or services is correct. The payment complies with the General Appropriations Act. | | | | | | | | | | | |
| APPROVED: NAME | | TITLE | | | | DATE | | | | | |
| APPROVED: NAME | | TITLE | | | | DATE | | | | | |

12.913 ✓
S. 8/31 ✓
D. 10/3

92044968 ✓

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Private Facility Contract Monitoring / Oversight Division

TO: Amanda Alvarado
Accounts Payable

DATE: September 20, 2019

FROM: Miranda Rose W
Accountant III - Business Operations
Private Facilities

SUBJECT: August 2019
Management & Training Corp.
Contract No: 696-PF-18-19-C160 ✓
Invoice Received: 9/3/2019 ✓
Payment Due: 10/3/2019

Enclosed is the invoice per diem payment for Gist Facility. ✓

| Invoice # | Vendor | Man Days | Rate | Total |
|--------------|-----------------------------|----------|---------|--------------|
| Gist-0819-01 | Management & Training Corp. | 3,407 | \$ 9.71 | \$ 33,081.97 |

The following adjustments have been made:

| Sanction | Date | Amount Withheld |
|-------------------------------|--------|-----------------|
| Position Vacancy - SAC II/DWI | Aug-19 | \$ 3,782.00 |
| Contract Review Finding | Aug-19 | \$ 600.00 |

Total Withholdings: \$ 4,382.00

| | | | | |
|--------------------------|---------|---------|--------|----------------|
| Total amount to be paid: | | | | \$ 28,699.97 |
| Lonestar Coding | Index | PCA | AOBJ | Amount |
| | ✓ 76970 | ✓ 63300 | ✓ 8483 | \$ ✓ 28,699.97 |

Attachments
File

cc: Michael Bell, Management & Training Corp. Jared Howes, Management & Training Corp.
Jason Diehl, Budget Erica Wehmeyer, Management & Training Corp.

I certify that the attached invoices have been audited for compliance with the currently approved contract prices, are free of mathematical errors, the services / goods were received and correspond in every particular way with the contract which they were procured, and the invoices are true and unpaid.

Miranda Rose 9-20-19
Signature & Date

RECEIVED
SEP 23 2019
Accounts Payable

Please contact Rebecca Jones, Accountant VI, at Rebecca.Jones@dcj.texas.gov or 936-437-7083 for any errors, questions or concerns regarding payment and/or contracts.

Gist State Jail
3295 Farm to Market 3514
Beaumont, TX 77705
PHONE (409) 727-8400

**ATTN: TDCJ - Private Facility Contract Monitoring /
Overseight Division**
Two Financial Plaza Suite 310
Huntsville, TX 77340

REMY TO: MANAGEMENT & TRAINING CORP.
500 N. Marketplace Dr.
P.O. Box 10
Centerville UT 84014

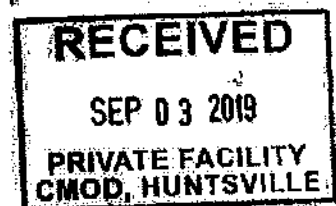
Inv. No. GIST-0819-01
Date: September 03, 2019

Contract 696-PF-18-19-C160

| DESCRIPTION | AMOUNT |
|--|--------------|
| GIST MANDAYS PER ATTACHED COUNT FOR AUGUST 2019 8,407 INMATES | \$ 33,081.97 |
| Total | \$ 33,081.97 |

Remittance Requested by Direct Deposit to:
Management & Training Corporation
ID# 87-0365322
Account# 032-00638-60
Wells Fargo Bank
ABA Routing# 121000248

Michael Bell
Michael Bell, Vice President
Region III



mm
9-13-19

**Gist State Jail
MONTHLY BILLING**

Inv. No. **GIST-0819-01**

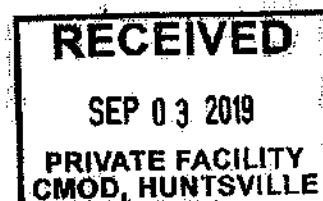
Date: **September 03, 2019**

| DAY | INMATE HEAD COUNT | HOSPITAL COUNT | RATE | TOTAL |
|-----------|----------------------|-------------------|---------|--------------|
| 8/1/2019 | 107 | | \$ 9.71 | \$ 1,038.97 |
| 8/2/2019 | 105 | | \$ 9.71 | \$ 1,019.55 |
| 8/3/2019 | 105 | | \$ 9.71 | \$ 1,019.55 |
| 8/4/2019 | 105 | | \$ 9.71 | \$ 1,019.55 |
| 8/5/2019 | 104 | | \$ 9.71 | \$ 1,009.84 |
| 8/6/2019 | 104 | | \$ 9.71 | \$ 1,009.84 |
| 8/7/2019 | 105 | | \$ 9.71 | \$ 1,019.55 |
| 8/8/2019 | 103 | | \$ 9.71 | \$ 1,000.13 |
| 8/9/2019 | 110 | | \$ 9.71 | \$ 1,068.10 |
| 8/10/2019 | 110 | | \$ 9.71 | \$ 1,068.10 |
| 8/11/2019 | 110 | | \$ 9.71 | \$ 1,068.10 |
| 8/12/2019 | 111 | | \$ 9.71 | \$ 1,077.81 |
| 8/13/2019 | 112 | | \$ 9.71 | \$ 1,087.52 |
| 8/14/2019 | 112 | | \$ 9.71 | \$ 1,087.52 |
| 8/15/2019 | 108 | | \$ 9.71 | \$ 1,048.68 |
| 8/16/2019 | 108 | | \$ 9.71 | \$ 1,029.26 |
| 8/17/2019 | 106 | | \$ 9.71 | \$ 1,029.26 |
| 8/18/2019 | 106 | | \$ 9.71 | \$ 1,029.26 |
| 8/19/2019 | 105 | | \$ 9.71 | \$ 1,019.55 |
| 8/20/2019 | 108 | | \$ 9.71 | \$ 1,048.68 |
| 8/21/2019 | 114 | | \$ 9.71 | \$ 1,106.94 |
| 8/22/2019 | 114 | | \$ 9.71 | \$ 1,106.94 |
| 8/23/2019 | 116 | | \$ 9.71 | \$ 1,126.36 |
| 8/24/2019 | 116 | | \$ 9.71 | \$ 1,126.36 |
| 8/25/2019 | 116 | | \$ 9.71 | \$ 1,126.36 |
| 8/26/2019 | 116 | | \$ 9.71 | \$ 1,126.36 |
| 8/27/2019 | 116 | | \$ 9.71 | \$ 1,126.36 |
| 8/28/2019 | 115 | | \$ 9.71 | \$ 1,116.65 |
| 8/29/2019 | 116 | | \$ 9.71 | \$ 1,126.36 |
| 8/30/2019 | 113 | | \$ 9.71 | \$ 1,097.23 |
| 8/31/2019 | 113 | | \$ 9.71 | \$ 1,097.23 |
| | 3,407 | 0 | 9.71 | \$ 33,081.97 |

AVG. 110

TOTAL MONTHLY BILLING

\$ 33,081.97



| PCN # | Position Title | Date Vacated | Sanctions Began | Date Filled | 90 Day Pos | Avg Daily Salary | Jul-19 | |
|----------------|----------------------------------|--------------|-----------------|-------------|------------|------------------|-------------|-----------------|
| | | | | | | | Days Vacant | Amount Withheld |
| 582002030001 | Substance Abuse Counselor II-DWI | 06/01/18 | 08/31/18 | | 90 | \$122.00 | 31 | \$3,782.00 |
| 1 | TOTAL | | | | | | 31 | \$3,782.00 |
| TOTAL SANCTION | | | | | | | 31 | \$3,782.00 |

Compliance Standard #13
Contract Review
Gist SJ - August 2019

| Contract Review # | Finding | Total Number of Errors | Adjustment Amount | Total Sanction |
|-------------------|---|------------------------|-------------------|----------------|
| 2019-08-028 | Counselor Caseloads Exceed Requirements | 3 | \$200.00 | \$600.00 |

| | |
|--------------|----------|
| Total | \$600.00 |
| Withholding: | |

Page 001 of 001

LNSTR-008-TE(2/93)

90046675

**TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Private Facility Contract Monitoring / Oversight Division**

TO: Alexis Rauf
Accounts Payable

DATE: October 24, 2019

FROM: Miranda Rose *WR*
Accountant III - Business Operations
Private Facilities

SUBJECT: September 2019
Management & Training Corp.
Contract No: 696-PF-18-19-C160
Invoice Received: 10/3/2019
Payment Due: 11/2/2019

Enclosed is the invoice per diem payment for *Gist Facility*.

| Invoice # | Vendor | Man Days | Rate | Total |
|--------------|-----------------------------|----------|---------|--------------|
| GIST-0919-01 | Management & Training Corp. | 3,335 | \$ 9.99 | \$ 33,316.65 |

R-10.03.19
S-09.30.19
D-11.02.19

The following adjustments have been made:

| Sanction | Date | Amount Withheld |
|-------------------------------|--------|-----------------|
| Position Vacancy - SAC II/DWI | Sep-19 | \$ 3,720.00 |

Total Withholdings: \$ 3,720.00

| Total amount to be paid: | | | | \$ 29,596.65 |
|---------------------------------|-------|-------|------|---------------------|
| Lonestar | Index | PCA | AOBJ | Amount |
| Coding | 76970 | 63300 | 8483 | \$ 29,596.65 |

Attachments
File

cc: Michael Bell, Management & Training Corp.
Jason Diehl, Budget

Jared Howes, Management & Training Corp.
Erica Wehmeyer, Management & Training Corp.

I certify that the attached invoices have been audited for compliance with the currently approved contract prices, are free of mathematical errors, the services / goods were received and correspond in every particular way with the contract under which they were procured, and the invoices are true and unpaid.

Miranda Rose 10-24-19
Signature & Date

REFUSE INTEREST MI-1

Please contact Rebecca Jones, Accountant VI, at Rebecca.Jones@tdej.texas.gov or 936-437-7083 for any errors, questions or concerns regarding payment and/or contracts.



Gist State Jail

3295 Farm to Market 3514

Beaumont, TX 77705

PHONE (409) 727-8400

ATTN: TDCJ - Private Facility Contract Monitoring /
Oversight Division
Two Financial Plaza Suite 310
Huntsville, TX 77340

REMT TO: MANAGEMENT & TRAINING CORP.
500 N. Marketplace Dr.
P.O. Box 10
Centerville UT 84014

Inv. No. GIST-0919-01

Date: October 03, 2019

Contract 698-PF-18-19-C160

| DESCRIPTION | AMOUNT |
|---|----------------|
| GIST MANDAYS PER ATTACHED COUNT FOR SEPTEMBER 2019 3,335 INMATES \$ 9.99 ✓ | \$ 33,316.55 |
| Total | \$ 33,316.55 ✓ |

Remittance Requested by Direct Deposit to:
Management & Training Corporation
ID# 87-0366322
Account# 982730939
Zions Bank
ABA Routing# 124000054

Michael Bell
Michael Bell, Vice President
Region III

RECEIVED

OCT 03 2019

PRIVATE FACILITY
CMOD, HUNTSVILLE

✓
10-10-19

Gist State Jail

MONTHLY BILLING

Inv. No: GIST-0919-01

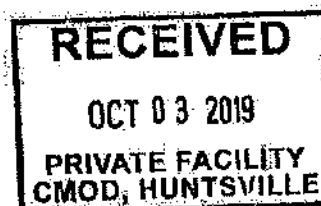
Date: October 03, 2019

| DAY | INMATE HEAD COUNT | HOSPITAL COUNT | RATE | TOTAL |
|-----------|----------------------|-------------------|---------|--------------|
| 9/1/2019 | 113 | | \$ 9.99 | \$ 1,128.87 |
| 9/2/2019 | 113 | | \$ 9.99 | \$ 1,128.87 |
| 9/3/2019 | 114 | | \$ 9.99 | \$ 1,136.86 |
| 9/4/2019 | 113 | | \$ 9.99 | \$ 1,128.87 |
| 9/5/2019 | 113 | | \$ 9.99 | \$ 1,128.87 |
| 9/6/2019 | 109 | | \$ 9.99 | \$ 1,088.91 |
| 9/7/2019 | 109 | | \$ 9.99 | \$ 1,088.91 |
| 9/8/2019 | 109 | | \$ 9.99 | \$ 1,088.91 |
| 9/9/2019 | 109 | | \$ 9.99 | \$ 1,088.91 |
| 9/10/2019 | 112 | | \$ 9.99 | \$ 1,118.88 |
| 9/11/2019 | 111 | | \$ 9.99 | \$ 1,108.89 |
| 9/12/2019 | 111 | | \$ 9.99 | \$ 1,108.89 |
| 9/13/2019 | 108 | | \$ 9.99 | \$ 1,058.94 |
| 9/14/2019 | 108 | | \$ 9.99 | \$ 1,058.94 |
| 9/15/2019 | 108 | | \$ 9.99 | \$ 1,058.94 |
| 9/16/2019 | 107 | | \$ 9.99 | \$ 1,088.93 |
| 9/17/2019 | 111 | | \$ 9.99 | \$ 1,108.89 |
| 9/18/2019 | 112 | | \$ 9.99 | \$ 1,118.88 |
| 9/19/2019 | 112 | | \$ 9.99 | \$ 1,118.88 |
| 9/20/2019 | 111 | | \$ 9.99 | \$ 1,108.89 |
| 9/21/2019 | 111 | | \$ 9.99 | \$ 1,108.89 |
| 9/22/2019 | 111 | | \$ 9.99 | \$ 1,108.89 |
| 9/23/2019 | 116 | | \$ 9.99 | \$ 1,148.86 |
| 9/24/2019 | 114 | | \$ 9.99 | \$ 1,138.86 |
| 9/25/2019 | 113 | | \$ 9.99 | \$ 1,128.87 |
| 9/26/2019 | 114 | | \$ 9.99 | \$ 1,138.86 |
| 9/27/2019 | 112 | | \$ 9.99 | \$ 1,118.88 |
| 9/28/2019 | 112 | | \$ 9.99 | \$ 1,118.88 |
| 9/29/2019 | 112 | | \$ 9.99 | \$ 1,118.88 |
| 9/30/2019 | 114 | | \$ 9.99 | \$ 1,138.86 |
| | 3,335 | 0 | 9.99 | \$ 33,316.65 |

AVG. 111

TOTAL MONTHLY BILLING

\$ 33,316.65



| PCN # | Position Title | Date Vacated | Sanctions Began | Date Filled | 90 Day Pos | Avg Daily Salary | Sep-19 | |
|----------------|----------------------------------|--------------|-----------------|-------------|------------|------------------|-------------|-----------------|
| | | | | | | | Days Vacant | Amount Withheld |
| 582002030001 | Substance Abuse Counselor II/DWI | 06/01/18 | 08/30/18 | | 90 | \$124.00 | 30 | \$ 3,720.00 |
| 2 | SANCTION | | | | | | 30 | \$ 3,720.00 |
| TOTAL SANCTION | | | | | | | 30 | \$ 3,720.00 |

STATE OF TEXAS PURCHASE VOUCHER

Page 001 of 001

| | | | | | | | | |
|--|--|---|--|-----------------------------|--|-----------------------|--|-------------------------------------|
| ARCHIVE REFERENCE NO | | AGENCY 696 - ACCOUNTS PAYABLE | | | | | CURRENT DOCUMENT 90047812 | |
| EFF DATE 11/18/19 | | DOC DATE 06/01/18 | | DUE DATE 12/04/19 | | DOC AGY 696 | | DOCUMENT AMOUNT 30,343.53 |
| VENDOR NO / MC | | REQUESTED PAYMENT DATE | | | PDT | PCC | REQUISITION NO 696-0-PF1819C160- | |
| VENDOR NAME / ADDRESS MANAGEMENT & TRAINING CORP P O BOX 10 ****DIRECT DEPOSIT**** CENTERVILLE, UT 84014 | | | | | AGENCY USE TEXAS DEPARTMENT OF CRIMINAL JUST P.O. BOX 4018 HUNTSVILLE, TX 77342 | | | |
| SFX | REF DOC - SFX | M | TC | INDEX | PCA | AY | COBJ | AOBJ |
| | APPN | FUND | INVOICE NUMBER | | DESCRIPTION | | | AGENCY USE |
| 001 | | | 225 76970 63300 20 7325 8483 | | | | | 30,343.53 |
| | 13052 | 0014 | GIST-1019-01 GIST MANAGEMENT & TRAINING C | | | | | |
| DATE | DESCRIPTION OF GOODS OR SERVICES | | | | | QTY | UNIT COST | AMOUNT |
| 10/31/19 | TX GOVT CODE 493.009 AND 501.0931 | | | | | | | |
| CONTACT | | INVOICE SERVICES | | | (936) 437-6929 | | PA00108 | |
| NAME | | PHONE | | | ENT BY | | | |
| I approve this voucher for payment. The above goods or services correspond in every particular with the contract under which they were purchased. The invoice for the goods or services is correct. The payment complies with the General Appropriations Act. | | | | | | | | |
| APPROVED: | | NAME | | | TITLE | | DATE | |
| APPROVED: | | NAME | | | TITLE | | DATE | |

90047012 ✓

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Private Facility Contract Monitoring / Oversight Division

TO: Alexis Rauf
 Accounts Payable

DATE: November 18, 2019

FROM: Miranda Rose *WR*
 Accountant III - Business Operations
 Private Facilities

SUBJECT: October 2019
 Management & Training Corp.
 Contract No: 696-PF-18-19-C160 ✓
 Invoice Received: 11/4/2019
 Payment Due: 12/4/2019

✓ Enclosed is the invoice per diem payment for *Gist Facility*.

| Invoice # | Vendor | Man Days | Rate | Total |
|--------------|------------------------------|----------|---------|--------------|
| GIST-1019-01 | Management & Training Corp ✓ | 3,447 | \$ 9.99 | \$ 34,435.53 |

R-11.04.19 ✓
 S-1031.19 ✓
 D-12.04.19

The following adjustments have been made:

| Sanction | Date | Amount Withheld |
|-------------------------------|--------|-----------------|
| Position Vacancy - SAC II/DWI | Oct-19 | \$ 4,092.00 |

Total Withholdings: \$ 4,092.00

| | | | | |
|---------------------------------|-------------------------|-----------------------|-----------------------|----------------|
| Total amount to be paid: | | | | \$ 30,343.53 ✓ |
| Lonestar Coding | <i>Index</i> ✓ 76970 | <i>PCA</i> ✓ 63300 | <i>AOBJ</i> ✓ 8483 | \$ ✓ 30,343.53 |

Attachments
File

cc: Michael Bell, Management & Training Corp. Jared Howes, Management & Training Corp.
 Jason Diehl, Budget Erica Wehmeyer, Management & Training Corp.

I certify that the attached invoices have been audited for compliance with the currently approved contract prices, are free of mathematical errors, the services / goods were received and correspond in every particular way with the contract under which they were procured, and the invoices are true and unpaid.

Miranda Rose 11-18-19
 Signature & Date



Please contact Rebecca Jones, Accountant VI, at Rebecca.Jones@tdcj.texas.gov or 936-437-7083 for any errors, questions or concerns regarding payment and/or contracts.

REFUSE INTEREST MI-1 ✓

Gist State Jail
3295 Farm to Market 3614
Beaumont, TX 77705
PHONE (409) 727-8400

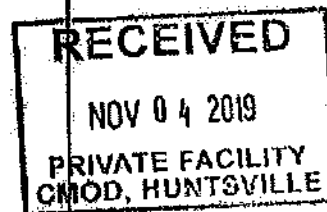
**ATTN: TDCJ - Private Facility Contract Monitoring /
Oversight Division
Two Financial Plaza Suite 310
Huntsville, TX 77340**

**REMT TO: MANAGEMENT & TRAINING CORP.
500 N. Marketplace Dr.
P.O. Box 10
Centerville UT 84014**

**Inv. No. GIST-1019-01
Date: November 04, 2019**

Contract 698-PF-18-19-C180

| DESCRIPTION | | AMOUNT |
|--|---------|--------------|
| GIST MANDAYS PER ATTACHED COUNT FOR OCTOBER 2019 | | |
| 3,447 INMATES | \$ 9.99 | \$ 34,435.53 |
| Total | | \$ 34,435.53 |



Remittance Requested by Direct Deposit to:
Management & Training Corporation
ID# 87-0385322
Account# 982730939
Zions Bank
ABA Routing# 124000054

Michael Bell
Michael Bell, Vice President
Region III

11-7-19

Gist State Jail
MONTHLY BILLING

Inv. No. **GIST-1019-01**

Date: **November 04, 2019**

| DAY | INMATE HEAD COUNT | HOSPITAL COUNT | RATE | TOTAL |
|------------|----------------------|-------------------|---------|--------------|
| 10/1/2019 | 115 | | \$ 9.99 | \$ 1,148.85 |
| 10/2/2019 | 114 | | \$ 9.99 | \$ 1,138.86 |
| 10/3/2019 | 114 | | \$ 9.99 | \$ 1,138.86 |
| 10/4/2019 | 112 | | \$ 9.99 | \$ 1,118.88 |
| 10/5/2019 | 112 | | \$ 9.99 | \$ 1,118.88 |
| 10/6/2019 | 112 | | \$ 9.99 | \$ 1,118.88 |
| 10/7/2019 | 113 | | \$ 9.99 | \$ 1,128.87 |
| 10/8/2019 | 113 | | \$ 9.99 | \$ 1,128.87 |
| 10/9/2019 | 110 | | \$ 9.99 | \$ 1,098.90 |
| 10/10/2019 | 109 | | \$ 9.99 | \$ 1,088.91 |
| 10/11/2019 | 108 | | \$ 9.99 | \$ 1,058.94 |
| 10/12/2019 | 108 | | \$ 9.99 | \$ 1,058.94 |
| 10/13/2019 | 106 | | \$ 9.99 | \$ 1,058.94 |
| 10/14/2019 | 109 | | \$ 9.99 | \$ 1,088.91 |
| 10/15/2019 | 109 | | \$ 9.99 | \$ 1,088.91 |
| 10/16/2019 | 112 | | \$ 9.99 | \$ 1,118.88 |
| 10/17/2019 | 115 | | \$ 9.99 | \$ 1,148.85 |
| 10/18/2019 | 109 | | \$ 9.99 | \$ 1,088.91 |
| 10/19/2019 | 109 | | \$ 9.99 | \$ 1,088.91 |
| 10/20/2019 | 109 | | \$ 9.99 | \$ 1,088.91 |
| 10/21/2019 | 113 | | \$ 9.99 | \$ 1,128.87 |
| 10/22/2019 | 114 | | \$ 9.99 | \$ 1,138.86 |
| 10/23/2019 | 118 | | \$ 9.99 | \$ 1,158.84 |
| 10/24/2019 | 114 | | \$ 9.99 | \$ 1,138.86 |
| 10/25/2019 | 105 | | \$ 9.99 | \$ 1,048.95 |
| 10/26/2019 | 105 | | \$ 9.99 | \$ 1,048.95 |
| 10/27/2019 | 105 | | \$ 9.99 | \$ 1,048.95 |
| 10/28/2019 | 113 | | \$ 9.99 | \$ 1,128.87 |
| 10/29/2019 | 116 | | \$ 9.99 | \$ 1,158.84 |
| 10/30/2019 | 116 | | \$ 9.99 | \$ 1,158.84 |
| 10/31/2019 | 116 | | \$ 9.99 | \$ 1,158.84 |
| | 3,447 | 0 | 9.99 | \$ 34,435.53 |

AVG. 111

TOTAL MONTHLY BILLING

\$ 34,435.53

RECEIVED
NOV 04 2019
PRIVATE FACILITY
CMOD, HUNTSVILLE

**Compliance Standard 1
Position Vacancy - Counselors
Gist - October 2019**

| PCN # | Position Title | Date Vacated | Sanctions Began | Date Filled | 90 Day Pos | Avg Daily Salary | Oct-19 | |
|--------------|----------------------------------|--------------|-----------------|-------------|------------|------------------|-------------|-----------------|
| | | | | | | | Days Vacant | Amount Withheld |
| 582002030001 | Substance Abuse Counselor II/DWI | 08/01/18 | 08/30/18 | | 31 | \$124.00 | 31 | \$ 3,844.00 |
| 582002010003 | Substance Abuse Counselor I | 07/31/19 | 10/29/19 | | 2 | \$124.00 | 2 | \$ 248.00 |
| | | | | | | | 33 | \$ 4,092.00 |

2

SANCTION

TOTAL SANCTION

33 \$ 4,092.00

Page 001 of 001

LNSTR-008-YE(2/93)

90049726

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Private Facility Contract Monitoring / Oversight Division

TO: Alexis Rauf
Accounts Payable

DATE: December 9, 2019

FROM: Miranda Rose *ML*
Accountant III - Business Operations
Private Facilities

SUBJECT: November 2019
Management & Training Corp.
Contract No: 696-PF-18-19-C160
Invoice Received: 12/5/2019
Payment Due: 1/4/2020

Enclosed is the invoice per diem payment for *Gist Facility*.

| Invoice # | Vendor | Man Days | Rate | Total |
|--------------|-----------------------------|----------|---------|--------------|
| GIST-1119-01 | Management & Training Corp. | 3,410 | \$ 9.99 | \$ 34,065.90 |

The following adjustments have been made:

| Sanction | Date | Amount Withheld |
|-------------------------------|--------|-----------------|
| Position Vacancy - SAC II/DWI | Nov-19 | \$ 7,440.00 |
| Contract Review Finding | Nov-19 | \$ 25.00 |

REFUSE INTEREST *MI-1*

Total Withholdings: \$ 7,465.00

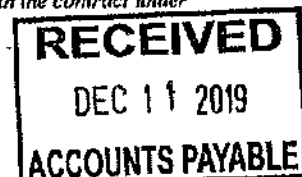
| Total amount to be paid: | | | | \$ 26,600.90 |
|---------------------------------|-------|-------|------|---------------------|
| Lonestar Coding | Index | PCA | AOBJ | Amount |
| | 76970 | 63300 | 8483 | \$ 26,600.90 |

Attachments
File

cc: Michael Bell, Management & Training Corp. Jared Howes, Management & Training Corp.
Jason Diehl, Budget Erica Wehmeyer, Management & Training Corp.

I certify that the attached invoices have been audited for compliance with the currently approved contract prices, are free of mathematical errors, the services / goods were received and correspond in every particular way with the contract under which they were procured, and the invoices are true and unpaid.

Miranda Rose 12-9-19
Signature & Date



Please contact Rebecca Jones, Accountant VI, at Rebecca.Jones@tdcj.texas.gov or 936-437-7083 for any errors, questions or concerns regarding payment and/or contracts.

Gist State Jail
3295 Farm to Market 3514
Beaumont, TX 77705
PHONE (409) 727-8400

ATTN: TDCJ - Private Facility Contract Monitoring / Oversight Division
Two Financial Plaza Suite 310
Huntsville, TX 77340

REMY TO: MANAGEMENT & TRAINING CORP.
500 N. Marketplace Dr.
P.O. Box 10
Centerville UT 84014

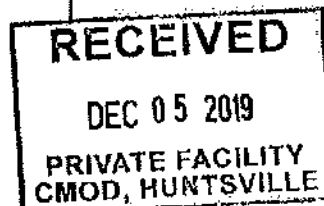
Inv. No. GIST-1119-01
Date: December 03, 2019

Contract 696-PF-18-19-C180

| DESCRIPTION | | | AMOUNT |
|---|---------|---------|----------------|
| GIST MANDAYS PER ATTACHED COUNT FOR NOVEMBER 2019 | | | |
| 3,410 | INMATES | \$ 9.99 | \$ 34,065.90 ✓ |
| Total | | | \$ 34,065.90 ✓ |

Remittance Requested by Direct Deposit to:
Management & Training Corporation
ID# 87-0385322
Account# 982730939
Zions Bank
ABA Routing# 124000054

Michael Bell
Michael Bell, Vice President
Region III



WFL
12-7-19

Gist State Jail

MONTHLY BILLING

Inv. No. GIST-1119-01

Date: December 03, 2019

| DAY | INMATE HEAD COUNT | HOSPITAL COUNT | RATE | TOTAL |
|------------|----------------------|-------------------|---------|--------------|
| 11/1/2019 | 112 | | \$ 9.99 | \$ 1,118.88 |
| 11/2/2019 | 112 | | \$ 9.99 | \$ 1,118.88 |
| 11/3/2019 | 112 | | \$ 9.99 | \$ 1,118.88 |
| 11/4/2019 | 116 | | \$ 9.99 | \$ 1,158.84 |
| 11/5/2019 | 110 | | \$ 9.99 | \$ 1,158.84 |
| 11/6/2019 | 115 | | \$ 9.99 | \$ 1,148.85 |
| 11/7/2019 | 116 | | \$ 9.99 | \$ 1,158.84 |
| 11/8/2019 | 112 | | \$ 9.99 | \$ 1,118.88 |
| 11/9/2019 | 112 | | \$ 9.99 | \$ 1,118.88 |
| 11/10/2019 | 112 | | \$ 9.99 | \$ 1,118.88 |
| 11/11/2019 | 112 | | \$ 9.99 | \$ 1,138.86 |
| 11/12/2019 | 114 | | \$ 9.99 | \$ 1,158.84 |
| 11/13/2019 | 116 | | \$ 9.99 | \$ 1,158.84 |
| 11/14/2019 | 116 | | \$ 9.99 | \$ 1,148.85 |
| 11/15/2019 | 115 | | \$ 9.99 | \$ 1,148.85 |
| 11/16/2019 | 115 | | \$ 9.99 | \$ 1,148.85 |
| 11/17/2019 | 115 | | \$ 9.99 | \$ 1,148.85 |
| 11/18/2019 | 115 | | \$ 9.99 | \$ 1,148.85 |
| 11/19/2019 | 115 | | \$ 9.99 | \$ 1,138.86 |
| 11/20/2019 | 114 | | \$ 9.99 | \$ 1,158.84 |
| 11/21/2019 | 116 | | \$ 9.99 | \$ 1,128.87 |
| 11/22/2019 | 113 | | \$ 9.99 | \$ 1,118.88 |
| 11/23/2019 | 112 | | \$ 9.99 | \$ 1,128.87 |
| 11/24/2019 | 113 | | \$ 9.99 | \$ 1,148.85 |
| 11/25/2019 | 115 | | \$ 9.99 | \$ 1,148.85 |
| 11/26/2019 | 115 | | \$ 9.99 | \$ 1,108.89 |
| 11/27/2019 | 111 | | \$ 9.99 | \$ 1,108.89 |
| 11/28/2019 | 111 | | \$ 9.99 | \$ 1,108.89 |
| 11/29/2019 | 111 | | \$ 9.99 | \$ 1,108.89 |
| 11/30/2019 | 111 | | \$ 9.99 | \$ 1,108.89 |
| | 3,410 | 0 | 9.99 | \$ 34,065.90 |

AVG.

114

TOTAL MONTHLY BILLING

\$ 34,065.90

RECEIVED

DEC 05 2019

**PRIVATE FACILITY
CMOD, HUNTSVILLE**

**Compliance Standard 1
Position Vacancy - Counselors
Gist - November 2019**

| PCN # | Position Title | Date Vacated | Sanctions Began | Date Filled | 90 Day Pos | Avg Daily Salary | Nov-19 | |
|-----------------------|----------------------------------|--------------|-----------------|-------------|------------|------------------|-------------|--------------------|
| | | | | | | | Days Vacant | Amount Withheld |
| 582002030001 | Substance Abuse Counselor II/DWI | 06/01/18 | 08/30/18 | | 90 | \$124.00 | 30 | \$ 3,720.00 |
| 582002010003 | Substance Abuse Counselor I | 07/31/19 | 10/29/19 | | 90 | \$124.00 | 30 | \$ 3,720.00 |
| SANCTION | | | | | | | 60 | \$ 7,440.00 |
| TOTAL SANCTION | | | | | | | 2 | \$ 7,440.00 |

Compliance Standard #15
Contract Review
Gist - November 2019

| Contract Review # | Finding | Number of Findings | Per Diem | Total Sanction |
|-------------------|----------------------|--------------------|----------|----------------|
| 2020-11-027 | Weekly Progress Note | 1 | \$25.00 | \$25.00 |

| | |
|-------------------------------|----------------|
| Total Withholding: | \$25.00 |
|-------------------------------|----------------|

STATE OF TEXAS PURCHASE VOUCHER

Page 001 of 001

| | | | | | | | | | | |
|--|---------------|-----------------------------------|----------------|----------|-----|--|------|-------------------|------------|---|
| ARCHIVE REFERENCE NO | | AGENCY | | | | | | CURRENT DOCUMENT | | |
| | | 696 - ACCOUNTS PAYABLE | | | | | | 90052045 | | |
| EFF DATE | | DOC DATE | | DUE DATE | | DOC AGY | | DOCUMENT AMOUNT | | |
| 01/29/20 | | 06/01/18 | | 02/02/20 | | 696 | | 30,881.24 | | |
| VENDOR NO / MC | | REQUESTED PAYMENT DATE | | | | PDT | PCC | REQUISITION NO | | |
| | | | | | | | | 696-0-PF1819C160- | | |
| VENDOR NAME / ADDRESS | | | | | | AGENCY USE | | | | |
| MANAGEMENT & TRAINING CORP P O BOX 10 ****DIRECT DEPOSIT**** CENTERVILLE, UT 84014 | | | | | | TEXAS DEPARTMENT OF CRIMINAL JUST P.O. BOX 4018 HUNTSVILLE, TX 77342 | | | | |
| SFX | REF DOC - SFX | M | TC | INDEX | PCA | AY | COBJ | AOBJ | AMOUNT | R |
| | APPN | FUND | INVOICE NUMBER | | | DESCRIPTION | | | AGENCY USE | |
| 001 | | | | | | | | | 30,881.24 | |
| 225 76970 63300 20 7325 8483 13052 0014 GIST-1219-01 GIST MANAGEMENT & TRAINING C | | | | | | | | | | |
| DATE | | DESCRIPTION OF GOODS OR SERVICES | | | | | QTY | UNIT COST | AMOUNT | |
| 12/31/19 | | TX GOVT CODE 493.009 AND 501.0931 | | | | | | | | |
| CONTACT | | INVOICE SERVICES | | | | (936) 437-6929 | | PA00108 | | |
| NAME | | | | | | PHONE | | ENT BY | | |
| I approve this voucher for payment. The above goods or services correspond in every particular with the contract under which they were purchased. The invoice for the goods or services is correct. The payment complies with the General Appropriations Act. | | | | | | | | | | |
| APPROVED: | | NAME | | | | TITLE | | DATE | | |
| APPROVED: | | NAME | | | | TITLE | | DATE | | |

90052045

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Private Facility Contract Monitoring / Oversight Division
Fiscal Year 2020

TO: Alexis Rauf
 Accounts Payable

DATE: January 29, 2020

FROM: Kelli Shewell *KS*
 Private Facilities
 Accountant II - Business Operations

SUBJECT: December 2019
 Management & Training Corp.
 Contract No: 696-PF-18-19-C160
 Invoice Received: 1/3/2020
 Payment Due: 2/2/2020

Enclosed is the invoice per diem payment for *Craig Facility*.

| Invoice # | Vendor | Man Days | Rate | Total |
|--------------|--------|----------|---------|--------------|
| Gist-1219-01 | MTC | 3,476 | \$ 9.99 | \$ 34,725.24 |

R-01.07.20

S-12.31.19

D-02.02.20

The following adjustments have been made:

| Sanction | Date | Amount Withheld |
|---------------------------------|---------------|-----------------|
| Position Vacancy - SAC II - DWI | December 2019 | \$ 3,844.00 |

Total Withholdings: \$ 3,844.00

| Total amount to be paid: | | | | | \$ 30,881.24 |
|--------------------------|-------|-------|------|------|--------------|
| Lonestar Coding | Index | PCA | AOBJ | AY | Amount |
| | 76970 | 63300 | 8483 | FY20 | 530,881.24 |

Attachments
 File

cc: Michael Bell, Management & Training Corp.
 Jason Diehl, Budget
 Joey Wren, Budget

Jared Howes, Management & Training Corp.
 Erica Wehmeyer, Management & Training Corp.

I certify that the attached invoices have been audited for compliance with the currently approved contract prices, are free of mathematical errors, the services / goods were received and correspond in every particular way with the contract under which they were procured, and the invoices are true and unpaid.

Kelli R. Shewell 1/29/20
 Signature & Date

REFUSE INTEREST MI-1

Please contact Rebecca Jones, Accountant VI, at Rebecca.Jones@tcdj.texas.gov or 936-437-7083 for any errors, questions or concerns regarding payment and/or contracts.

RECEIVED
 JAN 29 2020
ACCOUNTS PAYABLE

Compliance Standard 1
Position Vacancy - Counselors
Gist - December 2019

| PCN # | Position Title | Date Vacated | Sanctions Began | Date Filled | 90 Day Pos | Avg Daily Salary | Dec-19 | |
|----------------|----------------------------------|--------------|-----------------|-------------|------------|------------------|-------------|-----------------|
| | | | | | | | Days Vacant | Amount Withheld |
| 582002030001 | Substance Abuse Counselor II/DWI | 06/01/18 | 08/30/18 | | 90 | \$124.00 | 31 | \$ 3,844.00 |
| 1 | SANCTION | | | | | | 31 | \$ 3,844.00 |
| TOTAL SANCTION | | | | | | | 31 | \$ 3,844.00 |

Gist State Jail
3295 Farm to Market 3514
Beaumont, TX 77706
PHONE (409) 727-8400

**ATTN: TDCJ - Private Facility Contract Monitoring /
Oversight Division**
Two Financial Plaza Suite 310
Huntsville, TX 77340

REMT TO: MANAGEMENT & TRAINING CORP.
500 N. Marketplace Dr.
P.O. Box 10
Centerville UT 84014

Inv. No. GIST-1219-01 ✓
Date: January 02, 2020

Contract 898-PF-18-19-C160 ✓

| DESCRIPTION | | | AMOUNT |
|---|---------|-----------|----------------|
| GIST MANDAYS PER ATTACHED COUNT FOR December 2019 | | | |
| ✓ 3,476 | INMATES | \$ 9.99 ✓ | \$ 34,725.24 |
| Total | | | \$ 34,725.24 ✓ |

Remittance Requested by Direct Deposit to:
Management & Training Corporation
ID# 87-0365322
Account# 982730939
Zions Bank
ABA Routing# 124000054

Michael Bell ✓
Michael Bell, Vice President
Region III

RECEIVED

JAN 03 2020

PRIVATE FACILITY
CMOD, HUNTSVILLE

Page 001 of 001

LNSTR-008-TE(2/93)

00053999

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Private Facility Contract Monitoring / Oversight Division
Fiscal Year 2020

TO: Alexis Rauf
 Accounts Payable

DATE: February 27, 2020

FROM: Kelli Shewell
 Private Facilities
 Accountant III - Business Operations

SUBJECT: January 2020
 Management & Training Corp.
 Contract No: 696-PF-18-19-C160
 Invoice Received: 2/6/2020
 Payment Due: 3/7/2020

Enclosed is the invoice per diem payment for *Craig Facility*.

| Invoice # | Vendor | Man Days | Rate | Total |
|--------------|--------|----------|---------|--------------|
| Gist-0120-01 | MYC | 3,557 | \$ 9.99 | \$ 35,534.43 |

The following adjustments have been made:

| Sanction | Date | Amount Withheld |
|---------------------------------|--------------|-----------------|
| Position Vacancy - SAC II - DWI | January 2020 | \$ 3,844.00 |

Total Withholdings: \$ 3,844.00

| Total amount to be paid: | | | | | \$ 31,690.43 |
|---------------------------------|-------|-------|------|------|--------------|
| Longstar Coding | Index | PCA | AOBJ | AY | Amount |
| | 76970 | 63300 | 8483 | FY20 | \$31,690.43 |

Attachments
 File

cc: Michael Bell, Management & Training Corp.
 Jason Diehl, Budget
 Joey Wren, Budget

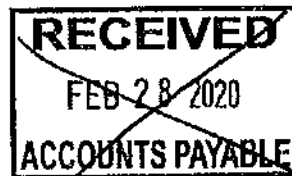
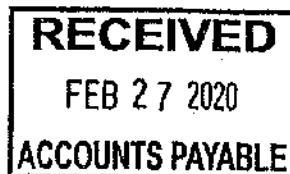
Jared Howes, Management & Training Corp.
 Erica Wehmeyer, Management & Training Corp.

I certify that the attached invoices have been audited for compliance with the currently approved contract prices, are free of mathematical errors, the services / goods were received and correspond in every particular way with the contract under which they were procured, and the invoices are true and unpaid.

Kelli R. Shewell 2/27/20
 Signature & Date

REFUSE INTEREST M-I ✓

Please contact Rebecca Jones, Accountant VI, at Rebecca.Jones@dcj.texas.gov or 936-437-7083 for any errors, questions or concerns regarding payment and/or contracts.

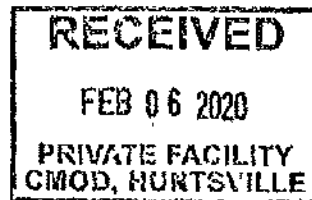


\$124.00

TOTAL SANCTION

| | |
|----|-------------|
| 31 | \$ 3,844.00 |
|----|-------------|

Gist State Jail
3295 Farm to Market 3514
Beaumont, TX 77706
PHONE (409) 727-8400



ATTN: TDCJ - Private Facility Contract Monitoring / Oversight Division
Two Financial Plaza Suite 910
Huntsville, TX 77340

REMY TO: MANAGEMENT & TRAINING CORP.
600 N. Marketplace Dr.
P.O. Box 10
Centerville UT 84014

Inv. No. GIST-0120-01 ✓
Date: February 03, 2020

Contract 696-PF-18-19-C180 ✓

| DESCRIPTION | | AMOUNT |
|--|-----------|----------------|
| GIST MANDAYS PER ATTACHED COUNT FOR JANUARY 2020 | | |
| ✓ 3,567 INMATES | \$ 9.99 / | \$ 35,534.43 |
| Total | | \$ 35,534.43 ✓ |

Remittance Requested by Direct Deposit to:
Management & Training Corporation
ID# 87-0365322
Account# 982730939
Zions Bank
ABA Routing# 124000054

Michael Bell
Michael Bell, Vice President
Region III

STATE OF TEXAS PURCHASE VOUCHER

Page 001 of 001

| | | | | | | | | | | |
|---|--|---|-----------------------------|-----------------------------|---|---|--|----------------|------------------|---|
| ARCHIVE REFERENCE NO | | AGENCY 696 - ACCOUNTS PAYABLE | | | | | CURRENT DOCUMENT 90055846 | | | |
| | | EFF DATE 03/30/20 | DOC DATE 06/01/18 | DUE DATE 04/04/20 | DOC AGY 696 | DOCUMENT AMOUNT 33,183.75 | | | | |
| VENDOR NO / MC | | REQUESTED PAYMENT DATE | | | PDT | PCC | REQUISITION NO 696-0-PF1819C160- | | | |
| VENDOR NAME / ADDRESS MANAGEMENT & TRAINING CORP P O BOX 10 ****DIRECT DEPOSIT**** CENTERVILLE, UT 84014 | | | | | AGENCY USE TEXAS DEPARTMENT OF CRIMINAL JUST P.O. BOX 4018 HUNTSVILLE, TX 77342 | | | | | |
| SFX | REF DOC - SFX | M | TC | INDEX | PCA | AY | COBJ | AOBJ | AMOUNT | R |
| | APPN | FUND | INVOICE NUMBER | | | DESCRIPTION | | | AGENCY USE | |
| 001 | | | | | | | | | 33,183.75 | |
| | 13052 | 0014 | GIST-0220-01 | | | GIST MANAGEMENT & TRAINING C | | | | |
| | | | | | | | | | | |
| DATE | DESCRIPTION OF GOODS OR SERVICES | | | | | QTY | UNIT COST | | AMOUNT | |
| 02/29/20 | TX GOVT CODE 493.009 AND 501.0931 | | | | | | | | | |
| | | | | | | | | | | |
| CONTACT NAME | | INVOICE SERVICES | | | | (936) 437-6929 | | PA00108 | | |
| | | PHONE | | | | ENT BY | | | | |
| <p>I approve this voucher for payment. The above goods or services correspond in every particular with the contract under which they were purchased. The Invoice for the goods or services is correct.</p> <p>The payment complies with the General Appropriations Act.</p> | | | | | | | | | | |
| APPROVED: NAME | | TITLE | | | | DATE | | | | |
| APPROVED: NAME | | TITLE | | | | DATE | | | | |

90055046

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Private Facility Contract Monitoring / Oversight Division
Fiscal Year 2020

TO: Alexis Rauf
Accounts Payable

DATE: March 17, 2020

FROM: Don Cook
Private Facilities
Accountant II - Business Operations

SUBJECT: February 2020
Management & Training Corp.
Contract No: 696-PF-18-19-C160
Invoice Received: 3/5/2020
Payment Due: 4/4/2020

Enclosed is the invoice per diem payment for Crain Facility.

| Invoice # | Vendor | Man Days | Rate | Total |
|--------------|--------|----------|---------|--------------|
| Gist-0220-01 | MTC | 3,325 | \$ 9.99 | \$ 33,216.75 |

R-0305/20
V-0229/20
D-0404/20

The following adjustments have been made:

| Sanction | Date | Amount Withheld |
|---|--------|-----------------|
| Pre-Employment Background Checks - Sept | Sep-19 | \$ 16.50 |
| Pre-Employment Background Checks - Oct | Oct-19 | \$ 16.50 |

Total Withholdings: \$ 33.00

| | | | | | |
|---------------------------------|-------|-------|------|------|---------------------|
| Total amount to be paid: | | | | | \$ 33,183.75 |
| Lonestar Coding | Index | PCA | AOBJ | AY | Amount |
| | 76970 | 63300 | 8483 | FY20 | \$33,183.75 |

Attachments
File

REFUSE INTEREST MI-1

cc: Michael Bell, Management & Training Corp. Jared Howes, Management & Training Corp.
Jason Diehl, Budget Erica Wehneyer, Management & Training Corp.
Joey Wren, Budget

I certify that the attached invoices have been audited for compliance with the currently approved contract prices, are free of mathematical errors, the services / goods were received and correspond in every particular way with the contract under which they were procured, and the invoices are true and unpaid.

Don A. Cook 03/17/2020
Signature & Date

Please contact Rebecca Jones, Accountant VI, at Rebecca.Jones@tdej.texas.gov or 936-437-7083 for any errors, questions or concerns regarding payment and/or contracts.

RECEIVED
MAR 27 2020
ACCOUNTS PAYABLE

Texas Department of Criminal Justice
DPS Invoices Received
Gist - September 2019

| <u>Applicant's Name</u> | <u>Facility</u> | <u>DPS Month</u> | <u>DPS</u> |
|-------------------------|--------------------|------------------|-----------------|
| DALTON, BRENDA | GIST PF-18-19-C160 | 9/1/2019 | \$ 16.50 |
| Total: | | | \$ 16.50 |

Texas Department of Criminal Justice
DPS Invoices Received
Gist - October 2019

| Applicant's Name | Facility | DPS Month | DPS |
|------------------|--------------------|-----------|----------|
| DALTON, BRENDA O | GIST PF-18-19-C160 | 10/1/2019 | \$ 16.50 |
| Total: | | | \$ 16.50 |

Gist State Jail

3295 Farm to Market 3514
Beaumont, TX 77705
PHONE (409) 727-8400

ATTN: TDCJ - Private Facility Contract Monitoring /
Oversight Division
Two Financial Plaza Suite 310
Huntsville, TX 77340

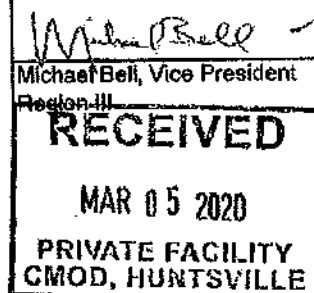
REMIT TO: MANAGEMENT & TRAINING CORP.
500 N. Marketplace Dr.
P.O. Box 10
Centerville UT 84014

Inv. No. GIST-0220-01
Date: March 05, 2020

Contract 698-PF-18-19-C160

| DESCRIPTION | AMOUNT |
|--|----------------|
| GIST MANDAYS PER ATTACHED COUNT FOR FEBRUARY 2020 3,325 INMATES \$ 9.99 | \$ 33,216.75 ✓ |
| Total | \$ 33,216.75 ✓ |

Remittance Requested by Direct Deposit to:
Management & Training Corporation
ID# 87-0365322
Account# 982730939
Zions Bank
ABA Routing# 124000054



STATE OF TEXAS PURCHASE VOUCHER

Page 001 of 001

| | | | | | | | | | | |
|---|---------------|--|------------------------------|----------------------|------------------------------|------------------------------|-------------------------------------|------------------------------|--------|---|
| ARCHIVE REFERENCE NO | | AGENCY 696 - ACCOUNTS PAYABLE | | | | | | CURRENT DOCUMENT 90057162 | | |
| | | EFF DATE 04/20/20 | DOC DATE 06/01/18 | DUE DATE 05/06/20 | DOC AGY 696 | DOCUMENT AMOUNT 35,584.38 | | | | |
| VENDOR NO / MC | | REQUESTED PAYMENT DATE | | | PDT | PCC | REQUISITION NO 696-0-PF1819C160- | | | |
| VENDOR NAME / ADDRESS MANAGEMENT & TRAINING CORP P O BOX 10 ****DIRECT DEPOSIT**** CENTERVILLE, UT 84014 | | AGENCY USE TEXAS DEPARTMENT OF CRIMINAL JUST P.O. BOX 4018 HUNTSVILLE, TX 77342 | | | | | | | | |
| SFX | REF DOC - SFX | M | TC | INDEX | PCA | AY | COBJ | AOBJ | AMOUNT | R |
| | APPN | FUND | INVOICE NUMBER | | DESCRIPTION | | | AGENCY USE | | |
| 001 | | | 225 76970 63300 20 7325 8483 | | | | | 35,584.38 | | |
| 13052 | 0014 | | GIST-0320-01 | | GIST MANAGEMENT & TRAINING C | | | | | |
| DATE | | DESCRIPTION OF GOODS OR SERVICES | | | | QTY | UNIT COST | | AMOUNT | |
| 03/31/20 | | TX GOVT CODE 493.009 AND 501.0931 | | | | | | | | |
| CONTACT NAME | | INVOICE SERVICES | | | | (936) 437-6929 | | PA00108 | | |
| | | PHONE | | | | ENT BY | | | | |
| I approve this voucher for payment. The above goods or services correspond in every particular with the contract under which they were purchased. The invoice for the goods or services is correct. The payment complies with the General Appropriations Act. | | | | | | | | | | |
| APPROVED: NAME | | TITLE | | | | DATE | | | | |
| APPROVED: NAME | | TITLE | | | | DATE | | | | |

90057162

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Private Facility Contract Monitoring / Oversight Division
Fiscal Year 2020

TO: Alexis Rauf
Accounts Payable

DATE: April 16, 2020

FROM: Julie Kuykendall
Accountant IV
Private Facilities - CMOD

SUBJECT: March 2020
Management & Training Corp.
Contract No: 696-PF-18-19-C160 ✓
Invoice Received: 4/6/2020
Payment Due: 5/6/2020

Enclosed is the invoice per diem payment for *Crain Facility*.

| Invoice # | Vendor | Man Days | Rate | Total |
|--------------|--------|----------|---------|--------------|
| Gist-0320-01 | MTC | 3,562 | \$ 9.99 | \$ 35,584.38 |

R-0406.20 ✓
J-0331.20 ✓
D-0506.20

The following adjustments have been made:

| Sanction | Date | Amount Withheld |
|----------|------|-----------------|
| | | \$ - |
| | | \$ - |

Total Withholdings: \$

| | |
|--------------------------|---------------|
| Total amount to be paid: | \$ 35,584.38 |
| <i>Lonestar Coding</i> | |
| Index 75970 ✓ | PCA 63300 ✓ |
| AOBJ 8483 ✓ | AY FY20 ✓ |
| Amount | \$35,584.38 ✓ |

Attachments
File

cc: Michael Bell, Management & Training Corp.
Jason Dichi, Budget
Joey Wren, Budget

Jared Howes, Management & Training Corp.
Erica Wehmeyer, Management & Training Corp.

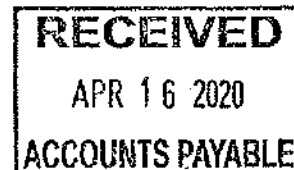
I certify that the attached invoices have been audited for compliance with the currently approved contract prices, are free of mathematical errors, the services/goods were received and correspond in every particular way with the contract order which they were procured, and the invoices are true and unpaid.

Julie Kuykendall 4/16/20
Signature & Date

REFUSE INTEREST

MI-1 ✓

Please contact Rebecca Jones, Accountant VI, at Rebecca.Jones@dcj.texas.gov or 936-437-7083 for any errors, questions or concerns regarding payment and/or contracts.



Gist State Jail

3295 Farm to Market 3514

Beaumont, TX 77705

PHONE (409) 727-8400

ATTN: TDCJ - Private Facility Contract Monitoring /
Oversight Division
Two Financial Plaza Suite 310
Huntsville, TX 77340

REMT TO: MANAGEMENT & TRAINING CORP.
500 N. Marketplace Dr.
P.O. Box 10
Centerville UT 84014

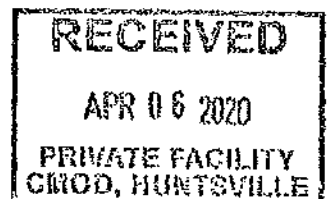
Inv. No. GIST-0320-01
Date: April 01, 2020

Contract 696-PF-18-19-C160

| DESCRIPTION | AMOUNT |
|--|-------------------|
| GIST MANDAYS PER ATTACHED COUNT FOR MARCH 2020 3,562 INMATES \$ | 9.98 \$ 35,584.38 |
| Total | \$ 35,584.38 |

Remittance Requested by Direct Deposit to:
Management & Training Corporation
ID# 87-0365322
Account# 982730939
Zions Bank
ABA Routing# 124000054

Michael Bell
Michael Bell, Vice President
Region III



STATE OF TEXAS PURCHASE VOUCHER

Page 001 of 001

| | | | | | | | | | | |
|---|--|---|-----------------------------|-------------------------------------|--|-----------------------|--|-------------------------------------|--------|---|
| ARCHIVE REFERENCE NO | | AGENCY 696 - ACCOUNTS PAYABLE | | | | | | CURRENT DOCUMENT 90059489 | | |
| | | EFF DATE 05/27/20 | DOC DATE 06/01/18 | DUE DATE 05/31/20 | | DOC AGY 696 | DOCUMENT AMOUNT 34,449.00 | | | |
| VENDOR NO / MC | | REQUESTED PAYMENT DATE | | | PDT | PCC | REQUISITION NO 696-0-PF1819C160- | | | |
| VENDOR NAME / ADDRESS MANAGEMENT & TRAINING CORP P O BOX 10 ****DIRECT DEPOSIT**** CENTERVILLE, UT 84014 | | | | | AGENCY USE TEXAS DEPARTMENT OF CRIMINAL JUST P.O. BOX 4018 HUNTSVILLE, TX 77342 | | | | | |
| SFX | REF DOC - SFX | M | TC | INDEX | PCA | AY | COBJ | AOBJ | AMOUNT | R |
| | APPH | FUND | INVOICE NUMBER | | DESCRIPTION | | | AGENCY USE | | |
| 001 | | | | 225 76970 63300 20 7325 8483 | | | | 34,449.00 | | |
| | 13052 | 0014 | GIST-0420-01 | | GIST FACILITY | | | | | |
| | | | | | | | | | | |
| DATE | DESCRIPTION OF GOODS OR SERVICES | | | | | QTY | UNIT COST | AMOUNT | | |
| 04/30/20 | TX GOVT CODE 493.009 AND 501.0931 | | | | | | | | | |
| | | | | | | | | | | |
| CONTACT NAME | | INVOICE SERVICES | | | | (936) 437-6929 | | PA00108 | | |
| | | | | | | PHONE | | ENT BY | | |
| <p>I approve this voucher for payment. The above goods or services correspond in every particular with the contract under which they were purchased. The invoice for the goods or services is correct.</p> <p>The payment complies with the General Appropriations Act.</p> | | | | | | | | | | |
| APPROVED: NAME | | TITLE | | | | DATE | | | | |
| APPROVED: NAME | | TITLE | | | | DATE | | | | |

90059499

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Private Facility Contract Monitoring / Oversight Division
Fiscal Year 2020

TO: Alexis Rauf
Accounts Payable

DATE: May 20, 2020

FROM: Julie Kuykendall
Accountant IV
Private Facilities - CMOD

SUBJECT: April 2020
Management & Training Corp.
Contract No: 696-PP-18-19-C160
Invoice Received: 5/1/2020
Payment Due: 5/31/2020

Enclosed is the invoice per diem payment for *Gist Facility*.

| Invoice # | Vendor | Man Days | Rate | Total |
|--------------|--------|----------|---------|--------------|
| Gist-0420-01 | MTC | 3,450 | \$ 9.99 | \$ 34,465.50 |

R-050120 ✓
S-04302020 ✓
D-052120

The following adjustments have been made:

| Billing Adjustments | Date | Amount Withheld |
|----------------------------------|---------------|-----------------|
| Pre-Employment Background Checks | December 2019 | \$ 16.50 |

Total Withholdings: \$ 16.50

| Total amount to be paid: | | | | | \$ 34,449.00 |
|--------------------------|-------|-------|------|------|--------------|
| Lonestar Coding | Index | PCA | AQBJ | AY | Amount |
| | 76970 | 63300 | 8483 | FY20 | \$34,449.00 |

Attachments
File

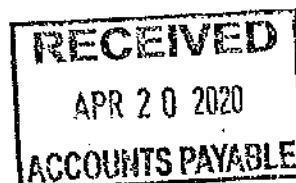
REFUSE INTEREST M1-1 ✓

cc: Michael Bell, Management & Training Corp.
Jason Diehl, Budget
Jacy Wren, Budget

Jared Howes, Management & Training Corp.
Erica Wehmeyer, Management & Training Corp.

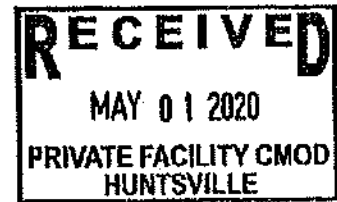
I certify that the attached invoices have been audited for compliance with the currently approved contract prices, are free of mathematical errors, the services / goods were received and correspond in every particular way with the contract under which they were procured, and the invoices are true and unpaid.

Julie Kuykendall 5-20-20
Signature & Date



Please contact Rebecca Jones, Accountant VI, at Rebecca.Jones@dcj.texas.gov or 936-437-7083 for any errors, questions or concerns regarding payment and/or contracts.

Gist State Jail
3295 Farm to Market 3514
Beaumont, TX 77705
PHONE (409) 727-8400



ATTN: TDCJ - Private Facility Contract Monitoring / Oversight Division
Two Financial Plaza Suite 310
Huntsville, TX 77340

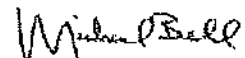
REMT TO: MANAGEMENT & TRAINING CORP.
500 N. Marketplace Dr.
P.O. Box 10
Centerville UT 84014

Inv. No. GIST-0420-01
Date: May 01, 2020

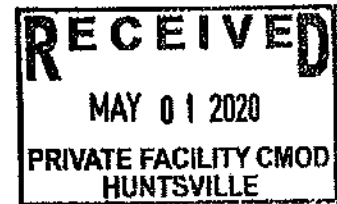
Contract 696-PF-18-19-C160

| DESCRIPTION | | | AMOUNT |
|--|----|------|--------------|
| GIST MANDAYS PER ATTACHED COUNT FOR APRIL 2020 | | | |
| 3,450 INMATES | \$ | 9.99 | \$ 34,465.50 |
| Total | | | \$ 34,465.50 |

Remittance Requested by Direct Deposit to:
Management & Training Corporation
ID# 87-0365322
Account# 982730939
Zions Bank
ABA Routing# 124000054


Michael Bell, Vice President
Region III

Gist State Jail
MONTHLY BILLING
 Inv. No. GIST-0420-01
 Date: May 01, 2020



| DAY | INMATE HEAD COUNT | HOSPITAL COUNT | RATE | GIST-0420-01 |
|-----------------------|----------------------|-------------------|---------|--------------|
| 4/1/2020 | 115 | | \$ 9.99 | \$ 1,148.85 |
| 4/2/2020 | 115 | | \$ 9.99 | \$ 1,148.85 |
| 4/3/2020 | 115 | | \$ 9.99 | \$ 1,148.85 |
| 4/4/2020 | 115 | | \$ 9.99 | \$ 1,148.85 |
| 4/5/2020 | 115 | | \$ 9.99 | \$ 1,148.85 |
| 4/6/2020 | 115 | | \$ 9.99 | \$ 1,148.85 |
| 4/7/2020 | 114 | | \$ 9.99 | \$ 1,138.86 |
| 4/8/2020 | 114 | | \$ 9.99 | \$ 1,138.86 |
| 4/9/2020 | 114 | | \$ 9.99 | \$ 1,138.86 |
| 4/10/2020 | 113 | | \$ 9.99 | \$ 1,128.87 |
| 4/11/2020 | 113 | | \$ 9.99 | \$ 1,128.87 |
| 4/12/2020 | 113 | | \$ 9.99 | \$ 1,128.87 |
| 4/13/2020 | 114 | | \$ 9.99 | \$ 1,138.86 |
| 4/14/2020 | 114 | | \$ 9.99 | \$ 1,138.86 |
| 4/15/2020 | 114 | | \$ 9.99 | \$ 1,138.86 |
| 4/16/2020 | 114 | | \$ 9.99 | \$ 1,138.86 |
| 4/17/2020 | 116 | | \$ 9.99 | \$ 1,158.84 |
| 4/18/2020 | 116 | | \$ 9.99 | \$ 1,158.84 |
| 4/19/2020 | 116 | | \$ 9.99 | \$ 1,158.84 |
| 4/20/2020 | 116 | | \$ 9.99 | \$ 1,158.84 |
| 4/21/2020 | 115 | | \$ 9.99 | \$ 1,148.85 |
| 4/22/2020 | 116 | | \$ 9.99 | \$ 1,158.84 |
| 4/23/2020 | 116 | | \$ 9.99 | \$ 1,158.84 |
| 4/24/2020 | 116 | | \$ 9.99 | \$ 1,158.84 |
| 4/25/2020 | 116 | | \$ 9.99 | \$ 1,158.84 |
| 4/26/2020 | 116 | | \$ 9.99 | \$ 1,158.84 |
| 4/27/2020 | 116 | | \$ 9.99 | \$ 1,158.84 |
| 4/28/2020 | 116 | | \$ 9.99 | \$ 1,158.84 |
| 4/29/2020 | 116 | | \$ 9.99 | \$ 1,158.84 |
| 4/30/2020 | 116 | | \$ 9.99 | \$ 1,158.84 |
| | 3,450 | 0 | 9.99 | \$ 34,465.50 |
| AVG. | 115 | | | |
| TOTAL MONTHLY BILLING | | | | \$ 34,465.50 |

Texas Department of Criminal Justice
DPS Invoices Received
Gist - December 2019

| Applicant's Name | Facility | DPS Month | DPS |
|-------------------------|--------------------|------------------|------------|
| HOLLIS-SMITH, CEAN M | GIST PF-18-19-C160 | 12/1/2019 | \$ 16.50 |

Total: \$ 16.50

STATE OF TEXAS PURCHASE VOUCHER

Page 001 of 001

| | | | | | | | | |
|--|----------------------------------|---|----------------|-----------------------------|--|-----------------------|--|-------------------------------------|
| ARCHIVE REFERENCE NO | | AGENCY 696 - ACCOUNTS PAYABLE | | | | | CURRENT DOCUMENT 90061646 | |
| EFF DATE 07/01/20 | | DOC DATE 06/01/18 | | DUE DATE 07/01/20 | | DOC AGY 696 | | DOCUMENT AMOUNT 35,834.13 |
| VENDOR NO / MC | | REQUESTED PAYMENT DATE | | | PDT | PCC | REQUISITION NO 696-0-PF1819C160- | |
| VENDOR NAME / ADDRESS MANAGEMENT & TRAINING CORP P O BOX 10 ****DIRECT DEPOSIT**** CENTERVILLE, UT 84014 | | | | | AGENCY USE TEXAS DEPARTMENT OF CRIMINAL JUST P.O. BOX 4018 HUNTSVILLE, TX 77342 | | | |
| SPX | REF DOC - SPX | M | TC | INDEX | PCA | AY | COBJ | AOBJ |
| | APPN | FUND | INVOICE NUMBER | | DESCRIPTION | | | AMOUNT |
| | | | | | | | | AGENCY USE |
| 001 | | 225 76970 63300 20 7325 8483 | | | | | 35,834.13 | |
| 13052 | | 0014 GIST-0520-01 GIST FACILITY | | | | | | |
| DATE | DESCRIPTION OF GOODS OR SERVICES | | | | | QTY | UNIT COST | AMOUNT |
| 05/31/20 TX GOVT CODE 493.009 AND 501.0931 | | | | | | | | |
| CONTACT NAME | | INVOICE SERVICES | | | (936) 437-6929 | | PA00108 | |
| NAME | | PHONE | | | ENT BY | | | |
| I approve this voucher for payment. The above goods or services correspond in every particular with the contract under which they were purchased. The invoice for the goods or services is correct. The payment complies with the General Appropriations Act. | | | | | | | | |
| APPROVED: NAME | | TITLE | | | DATE | | | |
| APPROVED: NAME | | TITLE | | | DATE | | | |

90061696 ✓

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Private Facility Contract Monitoring / Oversight Division
Fiscal Year 2020

TO: Alexis Rauf
Accounts Payable

DATE: June 23, 2020

FROM: Julie Kuykendall
Accountant IV
Private Facilities - CMOD

SUBJECT: May 2020
Management & Training Corp.
Contract No: 696-PF-18-19-C160 ✓
Invoice Received: 6/1/2020 ✓
Payment Due: 7/1/2020

Enclosed is the invoice per diem payment for *Gist Facility*.

| Invoice # | Pendor | Mon Days | Rate | Total |
|--------------|--------|----------|---------|--------------|
| Gist-0520-01 | MTC | 3,587 | \$ 9.99 | \$ 35,834.13 |

The following adjustments have been made:

| Billing Adjustments | Date | Amount Withheld |
|---------------------|------|-----------------|
| | | \$ |

Total Withholdings: \$

| Total amount to be paid: | | | | | \$ 35,834.13 |
|--------------------------|---------|---------|--------|------|---------------|
| Lonestar Coding | Index | PCA | AOBJ | AY | Amount |
| | 76970 ✓ | 63300 ✓ | 8483 ✓ | FY20 | \$35,834.13 ✓ |

Attachments
File

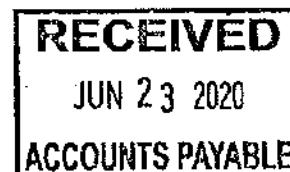
REFUSE INTEREST MI-1 ✓

cc: Michael Bell, Management & Training Corp.
Jason Dichtl, Budget
Joey Wren, Budget

Jared Howes, Management & Training Corp.
Erica Wehmeyer, Management & Training Corp.

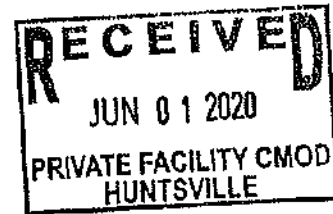
I certify that the attached invoices have been audited for compliance with the currently approved contract prices, are free of mathematical errors, the services / goods were received and correspond in every particular way with the contract under which they were procured, and the invoices are true and unpaid.

Julie Kuykendall 6/23/20
Signature & Date



Please contact Rebecca Jones, Accountant VI, at Rebecca.Jones@dcj.texas.gov or 936-437-7083 for any errors, questions or concerns regarding payment and/or contracts.

Gist State Jail
3295 Farm to Market 3514
Beaumont, TX 77705
PHONE (409) 727-8400



ATTN: TDCJ - Private Facility Contract Monitoring / Oversight Division
Two Financial Plaza Suite 310
Huntsville, TX 77340

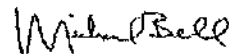
REMT TO: MANAGEMENT & TRAINING CORP.
500 N. Marketplace Dr.
P.O. Box 10
Centerville UT 84014

Inv. No. GIST-0520-01
Date: June 01, 2020

Contract 696-PF-18-19-C160

| DESCRIPTION | | AMOUNT |
|--|---------|--------------|
| GIST MANDAYS PER ATTACHED COUNT FOR MAY 2020 | | |
| 3,587 INMATES | \$ 9.99 | \$ 35,834.13 |
| Total | | \$ 35,834.13 |

Remittance Requested by Direct Deposit to:
Management & Training Corporation
ID# 87-0365322
Account# 982730939
Zions Bank
ABA Routing# 124000054


Michael Bell, Vice President
Region III

Gist State Jail
 MONTHLY BILLING
 Inv. No. GIST-0520-01
 Date: June 01, 2020

| DAY | INMATE HEAD COUNT | HOSPITAL COUNT | RATE | GIST-0420-01 |
|-----------------------|----------------------|-------------------|---------|---------------------|
| 5/1/2020 | 116 | | \$ 9.99 | \$ 1,158.84 |
| 5/2/2020 | 116 | | \$ 9.99 | \$ 1,158.84 |
| 5/3/2020 | 116 | | \$ 9.99 | \$ 1,158.84 |
| 5/4/2020 | 116 | | \$ 9.99 | \$ 1,158.84 |
| 5/5/2020 | 116 | | \$ 9.99 | \$ 1,158.84 |
| 5/6/2020 | 116 | | \$ 9.99 | \$ 1,158.84 |
| 5/7/2020 | 116 | | \$ 9.99 | \$ 1,158.84 |
| 5/8/2020 | 115 | | \$ 9.99 | \$ 1,148.85 |
| 5/9/2020 | 115 | | \$ 9.99 | \$ 1,148.85 |
| 5/10/2020 | 115 | | \$ 9.99 | \$ 1,148.85 |
| 5/11/2020 | 114 | | \$ 9.99 | \$ 1,138.86 |
| 5/12/2020 | 116 | | \$ 9.99 | \$ 1,158.84 |
| 5/13/2020 | 116 | | \$ 9.99 | \$ 1,158.84 |
| 5/14/2020 | 115 | | \$ 9.99 | \$ 1,148.85 |
| 5/15/2020 | 116 | | \$ 9.99 | \$ 1,158.84 |
| 5/16/2020 | 116 | | \$ 9.99 | \$ 1,158.84 |
| 5/17/2020 | 116 | | \$ 9.99 | \$ 1,158.84 |
| 5/18/2020 | 116 | | \$ 9.99 | \$ 1,158.84 |
| 5/19/2020 | 116 | | \$ 9.99 | \$ 1,158.84 |
| 5/20/2020 | 116 | | \$ 9.99 | \$ 1,158.84 |
| 5/21/2020 | 116 | | \$ 9.99 | \$ 1,158.84 |
| 5/22/2020 | 116 | | \$ 9.99 | \$ 1,158.84 |
| 5/23/2020 | 116 | | \$ 9.99 | \$ 1,158.84 |
| 5/24/2020 | 116 | | \$ 9.99 | \$ 1,158.84 |
| 5/25/2020 | 116 | | \$ 9.99 | \$ 1,158.84 |
| 5/26/2020 | 116 | | \$ 9.99 | \$ 1,158.84 |
| 5/27/2020 | 116 | | \$ 9.99 | \$ 1,158.84 |
| 5/28/2020 | 116 | | \$ 9.99 | \$ 1,158.84 |
| 5/29/2020 | 115 | | \$ 9.99 | \$ 1,148.85 |
| 5/30/2020 | 115 | | \$ 9.99 | \$ 1,148.85 |
| 5/31/2020 | 115 | | \$ 9.99 | \$ 1,148.85 |
| | 3,587 | 0 | 9.99 | \$ 35,834.13 |
| AVG. | 116 | | | |
| TOTAL MONTHLY BILLING | | | | <u>\$ 35,834.13</u> |

STATE OF TEXAS PURCHASE VOUCHER

Page 001 of 001

| | | | | | | | | | | |
|---|---------------|---|-----------------------------|-----------------------------|--|-------------------------------------|--|-------------------------------------|-----------|---|
| ARCHIVE REFERENCE NO | | AGENCY 696 - ACCOUNTS PAYABLE | | | | | | CURRENT DOCUMENT 90062592 | | |
| | | EFF DATE 07/22/20 | DOC DATE 06/01/18 | DUE DATE 07/31/20 | DOC AGY 696 | DOCUMENT AMOUNT 31,558.41 | | | | |
| VENDOR NO / MC | | REQUESTED PAYMENT DATE | | | PDT | PCC | REQUISITION NO 696-0-PF1819C160- | | | |
| VENDOR NAME / ADDRESS MANAGEMENT & TRAINING CORP P O BOX 10 ****DIRECT DEPOSIT**** CENTERVILLE, UT 84014 | | | | | AGENCY USE TEXAS DEPARTMENT OF CRIMINAL JUST P.O. BOX 4018 HUNTSVILLE, TX 77342 | | | | | |
| SFX | REF DOC - SFX | M | TC | INDEX | PCA | AV | COBJ | AOBJ | AMOUNT | R |
| | APPN | FUND | INVOICE NUMBER | | DESCRIPTION | | | AGENCY USE | | |
| 001 | | | | 225 76970 | 63300 20 | 7325 8483 | | | 31,558.41 | |
| | 13052 | 0014 | GIST-0620-01 | | GIST FACILITY | | | | | |
| | | | | | | | | | | |
| DATE | | DESCRIPTION OF GOODS OR SERVICES | | | | QTY | UNIT COST | | AMOUNT | |
| 06/30/20 | | TX GOVT CODE 493.009 AND 501.0931 | | | | | | | | |
| | | | | | | | | | | |
| CONTACT NAME | | INVOICE SERVICES | | | | (936) 437-6929 | | JCA6000 | | |
| NAME | | PHONE | | | | ENT BY | | | | |
| <p>I approve this voucher for payment. The above goods or services correspond in every particular with the contract under which they were purchased. The invoice for the goods or services is correct.</p> <p>The payment complies with the General Appropriations Act.</p> | | | | | | | | | | |
| APPROVED: NAME | | TITLE | | | | DATE | | | | |
| APPROVED: NAME | | TITLE | | | | DATE | | | | |

/ 90062592
/ R-7/1
S-6/30
D-7/31

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Private Facility Contract Monitoring / Oversight Division
Fiscal Year 2020

TO: Judy Castillo
Accounts Payable

DATE: July 21, 2020

FROM: Julie Kuykendall
Accountant IV
Private Facilities - CMOD

SUBJECT: June 2020 ✓
Management & Training Corp.
Contract No: 696-PF-18-19-C160 ✓
Invoice Received: 7/1/2020 ✓
Payment Due: 7/31/2020 ✓

REFUSE INTEREST mi-1

Enclosed is the invoice per dlem payment for Gist Facility. ✓

| Invoice # | Vendor | Mon Days | Rate | Total |
|--------------|--------|----------|---------|--------------|
| Gist-0620-01 | MTC | 3,159 | \$ 9.99 | \$ 31,558.41 |

The following adjustments have been made:

| Billing Adjustments | Date | Amount Withheld |
|---------------------|------|-----------------|
| | | \$ - |

Total Withholdings: \$ -

| Total amount to be paid: | | | | | \$ 31,558.41 |
|--------------------------|-------|---------|--------|------|--------------|
| Longstar Coding | Index | PCA | AOBJ | AY | Amount |
| | 76970 | 63300 ✓ | 8483 ✓ | FY20 | \$31,558.41 |

Attachments
File

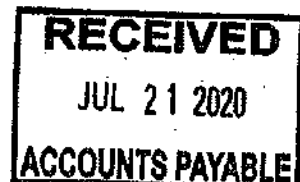
cc: Michael Bell, Management & Training Corp.
Jason Diehl, Budget
Joey Wren, Budget

Jared Howes, Management & Training Corp.
Erica Wehnceyer, Management & Training Corp.

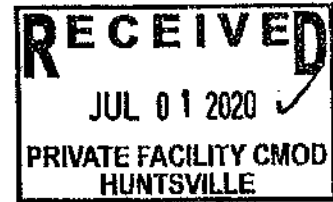
I certify that the attached invoices have been audited for compliance with the currently approved contract prices, are free of mathematical errors, the services / goods were received and correspond in every particular way with the contract under which they were procured, and the invoices are true and unpaid.

Julie Kuykendall 7/21/20
Signature & Date

Please contact Rebecca Jones, Accountant VI, at Rebecca.Jones@dcj.texas.gov or 936-437-7083 for any errors, questions or concerns regarding payment and/or contracts.



Gist State Jail ✓
3295 Farm to Market 3514
Beaumont, TX 77705
PHONE (409) 727-8400



ATTN: TDCJ - Private Facility Contract Monitoring / Oversight Division
Two Financial Plaza Suite 310
Huntsville, TX 77340

REMIT TO: MANAGEMENT & TRAINING CORP.
500 N. Marketplace Dr.
P.O. Box 10
Centerville UT 84014

Inv. No. GIST-0620-01 ✓
Date: July 01, 2020

Contract 698-PF-18-19-C160 ✓

| DESCRIPTION | | AMOUNT |
|---|---------|----------------|
| GIST MANDAYS PER ATTACHED COUNT FOR JUNE 2020 ✓ | | |
| 3,159 INMATES | \$ 9.99 | \$ 31,558.41 |
| Total | | \$ 31,558.41 ✓ |

Remittance Requested by Direct Deposit to:
Management & Training Corporation
ID# 87-0365322
Account# 982730939
Zions Bank
ABA Routing# 124000054


Michael Bell, Vice President
Region III

Gist State Jail
MONTHLY BILLING
 Inv. No. GIST-0620-01
 Date: July 01, 2020

| DAY | INMATE HEAD COUNT | HOSPITAL COUNT | RATE | GIST-0420-01 |
|-----------------------|----------------------|-------------------|---------|---------------------|
| 6/1/2020 | 114 | | \$ 9.99 | \$ 1,138.86 |
| 6/2/2020 | 111 | | \$ 9.99 | \$ 1,108.89 |
| 6/3/2020 | 108 | | \$ 9.99 | \$ 1,078.92 |
| 6/4/2020 | 106 | | \$ 9.99 | \$ 1,058.94 |
| 6/5/2020 | 102 | | \$ 9.99 | \$ 1,018.98 |
| 6/6/2020 | 102 | | \$ 9.99 | \$ 1,018.98 |
| 6/7/2020 | 102 | | \$ 9.99 | \$ 1,018.98 |
| 6/8/2020 | 100 | | \$ 9.99 | \$ 999.00 |
| 6/9/2020 | 98 | | \$ 9.99 | \$ 979.02 |
| 6/10/2020 | 109 | | \$ 9.99 | \$ 1,088.91 |
| 6/11/2020 | 113 | | \$ 9.99 | \$ 1,128.87 |
| 6/12/2020 | 114 | | \$ 9.99 | \$ 1,138.86 |
| 6/13/2020 | 116 | | \$ 9.99 | \$ 1,158.84 |
| 6/14/2020 | 116 | | \$ 9.99 | \$ 1,158.84 |
| 6/15/2020 | 115 | | \$ 9.99 | \$ 1,148.85 |
| 6/16/2020 | 116 | | \$ 9.99 | \$ 1,158.84 |
| 6/17/2020 | 114 | | \$ 9.99 | \$ 1,138.86 |
| 6/18/2020 | 111 | | \$ 9.99 | \$ 1,108.89 |
| 6/19/2020 | 108 | | \$ 9.99 | \$ 1,078.92 |
| 6/20/2020 | 108 | | \$ 9.99 | \$ 1,078.92 |
| 6/21/2020 | 108 | | \$ 9.99 | \$ 1,078.92 |
| 6/22/2020 | 109 | | \$ 9.99 | \$ 1,088.91 |
| 6/23/2020 | 108 | | \$ 9.99 | \$ 1,078.92 |
| 6/24/2020 | 108 | | \$ 9.99 | \$ 1,078.92 |
| 6/25/2020 | 105 | | \$ 9.99 | \$ 1,048.95 |
| 6/26/2020 | 95 | | \$ 9.99 | \$ 949.05 |
| 6/27/2020 | 95 | | \$ 9.99 | \$ 949.05 |
| 6/28/2020 | 95 | | \$ 9.99 | \$ 949.05 |
| 6/29/2020 | 77 | | \$ 9.99 | \$ 769.23 |
| 6/30/2020 | 76 | | \$ 9.99 | \$ 759.24 |
| | 3,159 | 0 | 9.99 | \$ 31,558.41 |
| AVG. | 105 | | | |
| TOTAL MONTHLY BILLING | | | | <u>\$ 31,558.41</u> |

Page 001 of 001

LNSTR-008-TE(2/93)

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Private Facility Contract Monitoring / Oversight Division
Fiscal Year 2020

60064087
 ✓ R-814
 ✓ S-7131
 ✓ D-913

TO: Judy Castillo
 Accounts Payable

DATE: August 18, 2020

FROM: Julie Kuykendall
 Accountant IV
 Private Facilities - CMOD

SUBJECT: July 2020 ✓
 Management & Training Corp.
 Contract No: 696-PF-18-19-C160 ✓
 Invoice Received: 8/4/2020 ✓
 Payment Due: 9/3/2020 ✓

REFUSE INTEREST ml-1

Enclosed is the invoice per diem payment for Gist Facility.

| Invoice # | Vendor | Man Days | Rate | Total |
|--------------|--------|----------|---------|--------------|
| Gist-0720-Q1 | MTC | 1,949 | \$ 9.99 | \$ 19,470.51 |

The following adjustments have been made:

| Billing Adjustments | Date | Amount Withheld |
|---------------------|------|-----------------|
| | | \$ - |

Total Withholdings: \$

| Total amount to be paid: | | | | | \$ 19,470.51 |
|--------------------------|-------|-------|------|------|--------------|
| Lonestar Coding | Index | PCA | AOBJ | AY | Amount |
| | 76970 | 63300 | 8483 | FY20 | \$19,470.51 |

Attachments
 File

CC: Michael Bell, Management & Training Corp.
 Jason Diehl, Budget
 Joey Wren, Budget

Jared Howes, Management & Training Corp.
 Erica Wehmeyer, Management & Training Corp.

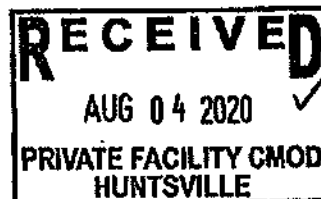
I certify that the attached invoices have been audited for compliance with the currently approved contract prices, are free of mathematical errors, the services / goods were received and correspond in every particular way with the contract under which they were procured, and the invoices are true and unpaid.

Julie Kuykendall 8/18/20
 Signature & Date

Please contact Rebecca Jones, Accountant VI, at Rebecca.Jones@tdcj.texas.gov or 936-437-7083 for any errors, questions or concerns regarding payment and/or contracts.

RECEIVED
 AUG 18 2020
ACCOUNTS PAYABLE

Gist State Jail
3295 Farm to Market 3514
Beaumont, TX 77705
PHONE (409) 727-8400



ATTN: TDCJ - Private Facility Contract Monitoring /
Oversight Division
Two Financial Plaza Suite 310
Huntsville, TX 77340

REMT TO: MANAGEMENT & TRAINING CORP.
500 N. Marketplace Dr.
P.O. Box 10
Centerville UT 84014

Inv. No. GIST-0720-01 ✓
Date: August 03, 2020

Contract 696-PF-18-19-C160 ✓

| DESCRIPTION | | AMOUNT |
|--|---------|----------------|
| GIST MANDAYS PER ATTACHED COUNT FOR JULY 2020 ✓ 1,949 INMATES | \$ 9.99 | \$ 19,470.51 |
| Total | | \$ 19,470.51 ✓ |

Remittance Requested by Direct Deposit to:
Management & Training Corporation
ID# 87-0365322
Account# 982730839
Zions Bank
ABA Routing# 124000054

Michael Bell, Vice President
Region III

Gist State Jail

MONTHLY BILLING

Inv. No. GIST-0720-01

Date: August 03, 2020

| DAY | INMATE HEAD COUNT | HOSPITAL COUNT | RATE | GIST-0420-01 |
|-----------------------|----------------------|-------------------|---------|------------------|
| 7/1/2020 | 75 | | \$ 9.99 | \$ 749.25 |
| 7/2/2020 | 74 | | \$ 9.99 | \$ 739.26 |
| 7/3/2020 | 72 | | \$ 9.99 | \$ 719.28 |
| 7/4/2020 | 72 | | \$ 9.99 | \$ 719.28 |
| 7/5/2020 | 72 | | \$ 9.99 | \$ 719.28 |
| 7/6/2020 | 68 | | \$ 9.99 | \$ 689.31 |
| 7/7/2020 | 66 | | \$ 9.99 | \$ 659.34 |
| 7/8/2020 | 66 | | \$ 9.99 | \$ 659.34 |
| 7/9/2020 | 66 | | \$ 9.99 | \$ 659.34 |
| 7/10/2020 | 65 | | \$ 9.99 | \$ 649.35 |
| 7/11/2020 | 66 | | \$ 9.99 | \$ 659.34 |
| 7/12/2020 | 66 | | \$ 9.99 | \$ 659.34 |
| 7/13/2020 | 63 | | \$ 9.99 | \$ 629.37 |
| 7/14/2020 | 62 | | \$ 9.99 | \$ 619.38 |
| 7/15/2020 | 60 | | \$ 9.99 | \$ 599.40 |
| 7/16/2020 | 60 | | \$ 9.99 | \$ 599.40 |
| 7/17/2020 | 58 | | \$ 9.99 | \$ 579.42 |
| 7/18/2020 | 58 | | \$ 9.99 | \$ 579.42 |
| 7/19/2020 | 58 | | \$ 9.99 | \$ 579.42 |
| 7/20/2020 | 56 | | \$ 9.99 | \$ 559.44 |
| 7/21/2020 | 52 | | \$ 9.99 | \$ 519.48 |
| 7/22/2020 | 52 | | \$ 9.99 | \$ 519.48 |
| 7/23/2020 | 52 | | \$ 9.99 | \$ 519.48 |
| 7/24/2020 | 52 | | \$ 9.99 | \$ 519.48 |
| 7/25/2020 | 52 | | \$ 9.99 | \$ 519.48 |
| 7/26/2020 | 52 | | \$ 9.99 | \$ 519.48 |
| 7/27/2020 | 50 | | \$ 9.99 | \$ 499.50 |
| 7/28/2020 | 66 | | \$ 9.99 | \$ 659.34 |
| 7/29/2020 | 73 | | \$ 9.99 | \$ 729.27 |
| 7/30/2020 | 73 | | \$ 9.99 | \$ 729.27 |
| 7/31/2020 | 71 | | \$ 9.99 | \$ 709.29 |
| 1,849 | | 0 | 9.99 | \$ 19,470.51 |
| AVG. | 63 | | | |
| TOTAL MONTHLY BILLING | | | \$ | <u>19,470.51</u> |

STATE OF TEXAS PURCHASE VOUCHER

Page 001 of 001

| | | | | | | | | |
|---|-----------------------------------|---|-----------------------------|-----------------------------|--|-------------------------------------|--|--------|
| ARCHIVE REFERENCE NO | | AGENCY 696 - ACCOUNTS PAYABLE | | | | | CURRENT DOCUMENT 91040019 | |
| | | EFF DATE 10/05/20 | DOC DATE 09/01/18 | DUE DATE 10/02/20 | DOC AGY 696 | DOCUMENT AMOUNT 16,493.49 | | |
| VENDOR NO / MC | | REQUESTED PAYMENT DATE | | | PDT | PCC | REQUISITION NO 696-0-PF1819C160- | |
| VENDOR NAME / ADDRESS MANAGEMENT & TRAINING CORP P O BOX 10 ****DIRECT DEPOSIT**** CENTERVILLE, UT 84014 | | | | | AGENCY USE TEXAS DEPARTMENT OF CRIMINAL JUST P.O. BOX 4018 HUNTSVILLE, TX 77342 | | | |
| SFX | REF DOC - SFX | M | TC | INDEX | PCA | AY | COBJ | AOBJ |
| | APPN | FUND | INVOICE NUMBER | | DESCRIPTION | | | AMOUNT |
| | | | | | | | | R |
| 001 | | 225 76970 63300 20 7325 8483 | | | | | 16,493.49 | |
| 13052 | | 0014 GIST-0820-01 GIST FACILITY | | | | | | |
| | | | | | | | | |
| DATE | DESCRIPTION OF GOODS OR SERVICES | | | | | QTY | UNIT COST | AMOUNT |
| 08/31/20 | TX GOVT CODE 493.009 AND 501.0931 | | | | | | | |
| | | | | | | | | |
| CONTACT NAME | | INVOICE SERVICES | | | (936) 437-6929 | | PA00029 | |
| NAME | | PHONE | | | ENT BY | | | |
| <p>I approve this voucher for payment. The above goods or services correspond in every particular with the contract under which they were purchased. The invoice for the goods or services is correct.</p> <p>The payment complies with the General Appropriations Act.</p> | | | | | | | | |
| APPROVED: NAME | | TITLE | | | DATE | | | |
| APPROVED: NAME | | TITLE | | | DATE | | | |

910 40019 ✓

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Private Facility Contract Monitoring / Oversight Division
Fiscal Year 2020

TO: Judy Castillo
 Accounts Payable

DATE: September 29, 2020

FROM: Julie Kuykendall
 Accountant IV
 Private Facilities - CMOD

SUBJECT: August 2020
 Management & Training Corp.
 Contract No: 696-PF-18-19-C160
 Invoice Received: 9/2/2020
 Payment Due: 10/2/2020

Enclosed is the invoice per diem payment for Gist Facility.

| Invoice # | Vendor | Man Days | Rate | Total |
|--------------|--------|----------|---------|----------------|
| Gist-0820-01 | MTC | 1,651 | \$ 9.99 | \$ 16,493.49 ✓ |

The following adjustments have been made:

| Billing Adjustments | Date | Amount Withheld |
|---------------------|------|-----------------|
| | | \$ - |

Total Withholdings: \$ -

| Total amount to be paid: | | | | | \$ 16,493.49 |
|---------------------------------|-------|-------|------|------|---------------------|
| Lonestar Coding | Index | PCA | AOBJ | AY | Amount |
| | 76970 | 63300 | 8483 | FY20 | \$16,493.49 |

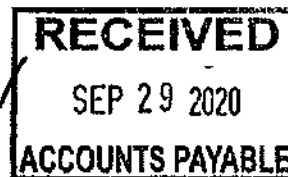
Attachments:
 File

cc: Michael Bell, Management & Training Corp.
 Jason Diehl, Budget
 Joey Wren, Budget

Jared Howes, Management & Training Corp.
 Erica Wehmeyer, Management & Training Corp.

I certify that the attached invoices have been audited for compliance with the currently approved contract prices, are free of mathematical errors, the services / goods were received and correspond in every particular way with the contract under which they were procured, and the invoices are true and unpaid.

Julie Kuykendall 9/29/20
 Signature & Date

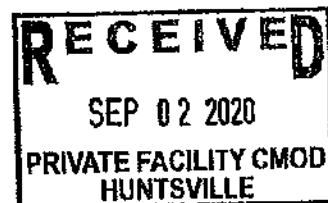


Please contact Rebecca Jones, Accountant VI, at Rebecca.Jones@dcj.texas.gov or 936-437-7083 for any errors, questions or concerns regarding payment and/or contracts.

R-912 ✓
 S 8/31 ✓
 D 10/2 ✓

✓
REFUSE INTEREST *Envi*

Gist State Jail
3286 Farm to Market 3514
Beaumont, TX 77705
PHONE (409) 727-8400



ATTN: TDCJ - Private Facility Contract Monitoring /
Oversight Division
Two Financial Plaza Suite 310
Huntsville, TX 77340

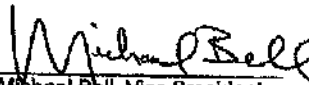
RENT TO: MANAGEMENT & TRAINING CORP.
500 N. Marketplace Dr.
P.O. Box 10
Centerville UT 84014

Inv. No. GIST-0820-01
Date: September 01, 2020

Contract 698-PF-18-19-C160

| DESCRIPTION | | | AMOUNT |
|---|---------|---------|--------------|
| GIST MANDAYS PER ATTACHED COUNT FOR AUGUST 2020 | | | |
| 1,651 | INMATES | \$ 9.99 | \$ 16,493.40 |
| Total | | | \$ 16,493.49 |

Remittance Requested by Direct Deposit to:
Management & Training Corporation
ID# 87-0365322
Account# 982730939
Zions Bank
ABA Routing# 124000054


Michael Bell, Vice President
Region III

Gist State Jail

MONTHLY BILLING

Inv. No. GIST-0820-01

Date: September 01, 2020

| DAY | INMATE HEAD COUNT | HOSPITAL COUNT | RATE | GIST-0820-01 |
|-----------|----------------------|-------------------|---------|--------------|
| 8/1/2020 | 71 | | \$ 9.99 | \$ 709.29 |
| 8/2/2020 | 71 | | \$ 9.99 | \$ 709.29 |
| 8/3/2020 | 69 | | \$ 9.99 | \$ 689.31 |
| 8/4/2020 | 69 | | \$ 9.99 | \$ 689.31 |
| 8/5/2020 | 69 | | \$ 9.99 | \$ 689.31 |
| 8/6/2020 | 69 | | \$ 9.99 | \$ 689.31 |
| 8/7/2020 | 67 | | \$ 9.99 | \$ 669.33 |
| 8/8/2020 | 67 | | \$ 9.99 | \$ 669.33 |
| 8/9/2020 | 67 | | \$ 9.99 | \$ 669.33 |
| 8/10/2020 | 62 | | \$ 9.99 | \$ 619.38 |
| 8/11/2020 | 62 | | \$ 9.99 | \$ 619.38 |
| 8/12/2020 | 61 | | \$ 9.99 | \$ 609.39 |
| 8/13/2020 | 62 | | \$ 9.99 | \$ 619.38 |
| 8/14/2020 | 59 | | \$ 9.99 | \$ 589.41 |
| 8/15/2020 | 59 | | \$ 9.99 | \$ 589.41 |
| 8/16/2020 | 59 | | \$ 9.99 | \$ 589.41 |
| 8/17/2020 | 54 | | \$ 9.99 | \$ 539.46 |
| 8/18/2020 | 57 | | \$ 9.99 | \$ 569.43 |
| 8/19/2020 | 57 | | \$ 9.99 | \$ 569.43 |
| 8/20/2020 | 57 | | \$ 9.99 | \$ 569.43 |
| 8/21/2020 | 57 | | \$ 9.99 | \$ 569.43 |
| 8/22/2020 | 57 | | \$ 9.99 | \$ 569.43 |
| 8/23/2020 | 57 | | \$ 9.99 | \$ 569.43 |
| 8/24/2020 | 55 | | \$ 9.99 | \$ 549.45 |
| 8/25/2020 | 0 | | \$ 9.99 | \$ - |
| 8/26/2020 | 0 | | \$ 9.99 | \$ - |
| 8/27/2020 | 0 | | \$ 9.99 | \$ - |
| 8/28/2020 | 0 | | \$ 9.99 | \$ - |
| 8/29/2020 | 55 | | \$ 9.99 | \$ 549.45 |
| 8/30/2020 | 55 | | \$ 9.99 | \$ 549.45 |
| 8/31/2020 | 47 | | \$ 9.99 | \$ 469.53 |
| | 1,851 | 0 | 9.99 | \$ 16,493.49 |

AVG. 53

TOTAL MONTHLY BILLING

\$ 16,493.49

Page 001 of 001

LNSTR-008-TE(2/93)

91041432

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Private Facility Contract Monitoring / Oversight Division
Fiscal Year 2021

TO: Judy Castillo
 Accounts Payable

DATE: October 23, 2020

FROM: Julie Kuykendall
 Accountant IV
 Private Facilities - CMOD

SUBJECT: September 2020
 Management & Training Corp. ✓
 Contract No: 696-PF-18-19-C160
 Invoice Received: 10/2/2020
 Payment Due: 11/1/2020

REFUSE INTEREST MI-1 ✓

Enclosed is the Invoice per diem payment for *Gist Facility*.

| Invoice # | Vendor | Man Days | Rate | Total |
|----------------|--------|----------|----------|--------------|
| Gist-0920-01 ✓ | MTC | 1,521 | \$ 10.12 | \$ 15,392.52 |

The following adjustments have been made:

| Billing Adjustments | Date | Amount Withheld |
|---------------------|------|-----------------|
| | | \$ - |

Total Withholdings: \$ -

| | | | | | |
|--------------------------|---------|---------|--------|--------|--------------|
| Total amount to be paid: | | | | | \$ 15,392.52 |
| Lonesfor Coding | Index | PCA | AOBJ | AY | Amount |
| | 76970 ✓ | 63300 ✓ | 8483 ✓ | FY21 ✓ | \$15,392.52 |

Attachments
 File

cc: Michael Bell, Management & Training Corp.
 Jason Diehl, Budget
 Joey Wren, Budget

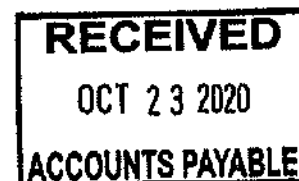
Jared Howes, Management & Training Corp.
 Erica Wehneyer, Management & Training Corp.

I certify that the attached Invoices have been audited for compliance with the currently approved contract prices, are free of mathematical errors, the services / goods were received and correspond in every particular way with the contract under which they were procured, and the invoices are true and unpaid.

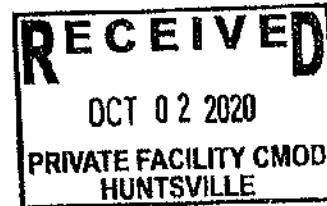
Julie Kuykendall 10/23/20
 Signature & Date

R 10/2 ✓
 S 9/30 ✓
 D 11/1 ✓

Please contact Rebecca Jones, Accountant VI, at Rebecca.Jones@dcj.texas.gov or 936-437-7083 for any errors, questions or concerns regarding payment and/or contracts.



Gist State Jail
3295 Farm to Market 3514
Beaumont, TX 77705
PHONE (409) 727-8400



ATTN: TDCJ - Private Facility Contract Monitoring / Oversight Division
Two Financial Plaza Suite 310
Huntsville, TX 77340

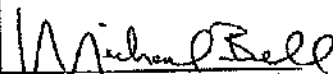
REMT TO: MANAGEMENT & TRAINING CORP.
500 N. Marketplace Dr.
P.O. Box 10
Centerville UT 84014

Inv. No. GIST-0920-01
Date: October 01, 2020

Contract 696-PF-18-19-C160

| DESCRIPTION | | AMOUNT |
|--|----------|--------------|
| GIST MANDAYS PER ATTACHED COUNT FOR SEPTEMBER 2020 | | |
| 1,521 INMATES | \$ 10.12 | \$ 15,392.52 |
| Total | | \$ 15,392.52 |

Remittance Requested by Direct Deposit to:
Management & Training Corporation
ID# 87-0365322
Account# 982730939
Zions Bank
ABA Routing# 124000054


Michael Bell, Vice President
Region III

Gist State Jail

MONTHLY BILLING

Inv. No. **GIST-0920-01**

Date: **October 01, 2020**

| DAY | INMATE HEAD COUNT | HOSPITAL COUNT | RATE | GIST-0820-01 |
|-----------------------|----------------------|-------------------|----------|---------------------|
| 9/1/2020 | 45 | | \$ 10.12 | \$ 455.40 |
| 9/2/2020 | 45 | | \$ 10.12 | \$ 455.40 |
| 9/3/2020 | 45 | | \$ 10.12 | \$ 455.40 |
| 9/4/2020 | 44 | | \$ 10.12 | \$ 445.28 |
| 9/5/2020 | 44 | | \$ 10.12 | \$ 445.28 |
| 9/6/2020 | 44 | | \$ 10.12 | \$ 445.28 |
| 9/7/2020 | 44 | | \$ 10.12 | \$ 445.28 |
| 9/8/2020 | 36 | | \$ 10.12 | \$ 364.32 |
| 9/9/2020 | 36 | | \$ 10.12 | \$ 364.32 |
| 9/10/2020 | 36 | | \$ 10.12 | \$ 364.32 |
| 9/11/2020 | 35 | | \$ 10.12 | \$ 354.20 |
| 9/12/2020 | 35 | | \$ 10.12 | \$ 354.20 |
| 9/13/2020 | 35 | | \$ 10.12 | \$ 354.20 |
| 9/14/2020 | 35 | | \$ 10.12 | \$ 354.20 |
| 9/15/2020 | 35 | | \$ 10.12 | \$ 354.20 |
| 9/16/2020 | 34 | | \$ 10.12 | \$ 344.08 |
| 9/17/2020 | 46 | | \$ 10.12 | \$ 465.52 |
| 9/18/2020 | 47 | | \$ 10.12 | \$ 475.64 |
| 9/19/2020 | 47 | | \$ 10.12 | \$ 475.64 |
| 9/20/2020 | 47 | | \$ 10.12 | \$ 475.64 |
| 9/21/2020 | 48 | | \$ 10.12 | \$ 485.76 |
| 9/22/2020 | 77 | | \$ 10.12 | \$ 779.24 |
| 9/23/2020 | 76 | | \$ 10.12 | \$ 769.12 |
| 9/24/2020 | 74 | | \$ 10.12 | \$ 748.88 |
| 9/25/2020 | 73 | | \$ 10.12 | \$ 738.76 |
| 9/26/2020 | 73 | | \$ 10.12 | \$ 738.76 |
| 9/27/2020 | 73 | | \$ 10.12 | \$ 738.76 |
| 9/28/2020 | 71 | | \$ 10.12 | \$ 718.52 |
| 9/29/2020 | 71 | | \$ 10.12 | \$ 718.52 |
| 9/30/2020 | 70 | | \$ 10.12 | \$ 708.40 |
| | 1,521 | 0 | 10.12 | \$ 15,392.52 |
| AVG. | 51 | | | |
| TOTAL MONTHLY BILLING | | | | <u>\$ 15,392.52</u> |

STATE OF TEXAS PURCHASE VOUCHER

Page 001 of 001

| | | | | | | | | |
|--|-----------------------------------|------------------------------|----|----------|--|---------|-------------------|-----------------|
| ARCHIVE REFERENCE NO | | AGENCY | | | | | CURRENT DOCUMENT | |
| | | 696 - ACCOUNTS PAYABLE | | | | | 91042609 | |
| EFF DATE | | DOC DATE | | DUE DATE | | DOC AGY | | DOCUMENT AMOUNT |
| 11/24/20 | | 06/01/18 | | 12/18/20 | | 696 | | 25,806.00 |
| VENDOR NO / MC | | REQUESTED PAYMENT DATE | | | PDT | PCC | REQUISITION NO | |
| | | | | | | | 696-1-PF1819C160- | |
| VENDOR NAME / ADDRESS | | | | | AGENCY USE | | | |
| MANAGEMENT & TRAINING CORP P O BOX 10 ****DIRECT DEPOSIT**** CENTERVILLE, UT 84014 | | | | | TEXAS DEPARTMENT OF CRIMINAL JUST P.O. BOX 4018 HUNTSVILLE, TX 77342 | | | |
| SFX | REF DOC - SFX | M | TC | INDEX | PCA | AY | COBJ | AOBJ |
| | AMOUNT | R | | | | | | |
| APPN | FUND | INVOICE NUMBER | | | DESCRIPTION | | | AGENCY USE |
| 001 | | 225 76970 63300 21 7325 8483 | | | | | | 25,806.00 |
| 13052 | 0014 | GIST-1020-01 | | | GIST FACILITY | | | |
| | | | | | | | | |
| DATE | DESCRIPTION OF GOODS OR SERVICES | | | | | QTY | UNIT COST | AMOUNT |
| 10/31/20 | TX GOVT CODE 493.009 AND 501.0931 | | | | | | | |
| | | | | | | | | |
| CONTACT NAME | | INVOICE SERVICES | | | (936) 437-6929 | | PA00029 | |
| PHONE | | ENT BY | | | | | | |
| I approve this voucher for payment. The above goods or services correspond in every particular with the contract under which they were purchased. The invoice for the goods or services is correct. The payment complies with the General Appropriations Act. | | | | | | | | |
| APPROVED: NAME | | TITLE | | | DATE | | | |
| APPROVED: NAME | | TITLE | | | DATE | | | |

9104 2409

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Private Facility Contract Monitoring / Oversight Division
Fiscal Year 2021

TO: Judy Castillo
 Accounts Payable

DATE: November 19, 2020

FROM: Julie Kuykendall
 Accountant IV
 Private Facilities - CMOD

SUBJECT: October 2020
 Management & Training Corp.
 Contract No: 696-PF-18-19-C160
 Invoice Received: 11/18/2020
 Payment Due: 12/18/2020

REFUSE INTEREST MM-1

Enclosed is the invoice per diem payment for Gist Facility.

| Invoice # | Vendor | Man Days | Rate | Total |
|--------------|--------|----------|----------|--------------|
| Gist-1020-01 | MTC | 2,550 | \$ 10.12 | \$ 25,806.00 |

The following adjustments have been made:

| Billing Adjustments | Date | Amount Withheld |
|---------------------|------|-----------------|
| | | \$ - |

Total Withholdings: \$ -

| Total amount to be paid: | | | | | \$ 25,806.00 |
|--------------------------|-------|-------|------|------|--------------|
| Lonestar Coding | Index | PCA | AOBJ | AY | Amount |
| | 76970 | 63300 | 8483 | FY21 | \$25,806.00 |

R 11/18

S 10/31

D 12/18

Attachments
File

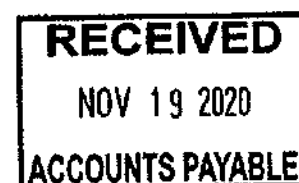
cc: Michael Bell, Management & Training Corp.
 Jason Diehl, Budget
 Joey Wren, Budget

Jared Howes, Management & Training Corp.
 Erica Wehmeyer, Management & Training Corp.

I certify that the attached invoices have been audited for compliance with the currently approved contract prices, are free of mathematical errors, the services / goods were received and correspond in every particular way with the contract under which they were procured, and the invoices are true and unpaid.

Julie Kuykendall
 Signature & Date

Please contact Rebecca Jones, Accountant VI, at Rebecca.Jones@tdej.texas.gov or 936-437-7083 for any errors, questions or concerns regarding payment and/or contracts.



Gist State Jail
3295 Farm to Market 3514
Beaumont, TX 77705
PHONE (409) 727-8400

CORRECTED COPY

NOV 18 2020
PRIVATE FACILITY CMOD
HUNTSVILLE

ATTN: TDCJ - Private Facility Contract Monitoring /
Oversight Division
Two Financial Plaza Suite 310
Huntsville, TX 77340

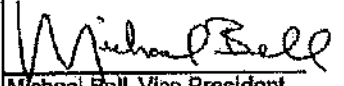
RENT TO: MANAGEMENT & TRAINING CORP.
500 N. Marketplace Dr.
P.O. Box 10
Centerville UT 84014

Inv. No. GIST-1020-01
Date: November 17, 2020

Contract 696-PF-18-18-C160

| DESCRIPTION | | | AMOUNT |
|--|---------|----------|--------------|
| GIST MANDAYS PER ATTACHED COUNT FOR OCTOBER 2020 | | | |
| 2,560 | INMATES | \$ 10.12 | \$ 25,806.00 |
| Total | | | \$ 25,806.00 |

Remittance Requested by Direct Deposit to:
Management & Training Corporation
ID# 87-0365322
Account# 982730939
Zions Bank
ABA Routing# 124000054


Michael Bell, Vice President
Region III

Gist State Jail**MONTHLY BILLING**Inv. No. **GIST-1020-01**Date: **November 17, 2020**

| DAY | INMATE HEAD COUNT | HOSPITAL COUNT | RATE | GIST-1020-01 |
|------------|----------------------|-------------------|----------|--------------|
| 10/1/2020 | 70 | | \$ 10.12 | \$ 708.40 |
| 10/2/2020 | 68 | | \$ 10.12 | \$ 688.16 |
| 10/3/2020 | 68 | | \$ 10.12 | \$ 688.16 |
| 10/4/2020 | 68 | | \$ 10.12 | \$ 688.16 |
| 10/5/2020 | 68 | | \$ 10.12 | \$ 688.16 |
| 10/6/2020 | 77 | | \$ 10.12 | \$ 779.24 |
| 10/7/2020 | 77 | | \$ 10.12 | \$ 779.24 |
| 10/8/2020 | 89 | | \$ 10.12 | \$ 900.68 |
| 10/9/2020 | 89 | | \$ 10.12 | \$ 900.68 |
| 10/10/2020 | 85 | | \$ 10.12 | \$ 860.20 |
| 10/11/2020 | 86 | | \$ 10.12 | \$ 860.20 |
| 10/12/2020 | 86 | | \$ 10.12 | \$ 870.32 |
| 10/13/2020 | 86 | | \$ 10.12 | \$ 870.32 |
| 10/14/2020 | 86 | | \$ 10.12 | \$ 870.32 |
| 10/15/2020 | 86 | | \$ 10.12 | \$ 870.32 |
| 10/16/2020 | 84 | | \$ 10.12 | \$ 850.08 |
| 10/17/2020 | 84 | | \$ 10.12 | \$ 850.08 |
| 10/18/2020 | 84 | | \$ 10.12 | \$ 850.08 |
| 10/19/2020 | 84 | | \$ 10.12 | \$ 850.08 |
| 10/20/2020 | 84 | | \$ 10.12 | \$ 850.08 |
| 10/21/2020 | 80 | | \$ 10.12 | \$ 809.60 |
| 10/22/2020 | 79 | | \$ 10.12 | \$ 799.48 |
| 10/23/2020 | 86 | | \$ 10.12 | \$ 870.32 |
| 10/24/2020 | 86 | | \$ 10.12 | \$ 870.32 |
| 10/25/2020 | 86 | | \$ 10.12 | \$ 870.32 |
| 10/26/2020 | 86 | | \$ 10.12 | \$ 870.32 |
| 10/27/2020 | 86 | | \$ 10.12 | \$ 870.32 |
| 10/28/2020 | 85 | | \$ 10.12 | \$ 860.20 |
| 10/29/2020 | 90 | | \$ 10.12 | \$ 910.80 |
| 10/30/2020 | 89 | | \$ 10.12 | \$ 900.68 |
| 10/31/2020 | 89 | | \$ 10.12 | \$ 900.68 |
| | 2,550 | 0 | 10.12 | \$ 25,805.00 |

AVG. 82

TOTAL MONTHLY BILLING**\$ 25,805.00**

STATE OF TEXAS PURCHASE VOUCHER

Page 001 of 001

| ARCHIVE REFERENCE NO | | AGENCY 696 - ACCOUNTS PAYABLE | | | | | CURRENT DOCUMENT 91044247 | | | | | | | | | | | |
|--|-----------------------------------|----------------------------------|----------------|----------------------|--|----------------|-------------------------------------|------------------------------|------|----------------------------------|-----|-----------|--------|----------|-----------------------------------|--|--|--|
| EFF DATE 12/28/20 | | DOC DATE 06/01/18 | | DUE DATE 01/01/21 | | DOC AGY 696 | | DOCUMENT AMOUNT 26,645.96 | | | | | | | | | | |
| VENDOR NO / MC | | REQUESTED PAYMENT DATE | | | PDT | PCC | REQUISITION NO 696-1-PF1819C160- | | | | | | | | | | | |
| VENDOR NAME / ADDRESS MANAGEMENT & TRAINING CORP P O BOX 10 ****DIRECT DEPOSIT**** CENTERVILLE, UT 84014 | | | | | AGENCY USE TEXAS DEPARTMENT OF CRIMINAL JUST P.O. BOX 4018 HUNTSVILLE, TX 77342 | | | | | | | | | | | | | |
| SFX | REF DOC - SFX | M | TC | INDEX | PCA | AY | COBJ | ACBJ | | | | | | | | | | |
| | APPN | FUND | INVOICE NUMBER | | DESCRIPTION | | | AMOUNT | | | | | | | | | | |
| | | | | | | | | R | | | | | | | | | | |
| 001 | | | 225 76970 | 63300 21 7325 | 8483 | | | 26,645.96 | | | | | | | | | | |
| | 13052 | 0014 | GIST-1120-01 | | GIST FACILITY | | | | | | | | | | | | | |
| <table border="1"> <thead> <tr> <th>DATE</th> <th>DESCRIPTION OF GOODS OR SERVICES</th> <th>QTY</th> <th>UNIT COST</th> <th>AMOUNT</th> </tr> </thead> <tbody> <tr> <td>11/30/20</td> <td>TX GOVT CODE 493.009 AND 501.0931</td> <td></td> <td></td> <td></td> </tr> </tbody> </table> | | | | | | | | | DATE | DESCRIPTION OF GOODS OR SERVICES | QTY | UNIT COST | AMOUNT | 11/30/20 | TX GOVT CODE 493.009 AND 501.0931 | | | |
| DATE | DESCRIPTION OF GOODS OR SERVICES | QTY | UNIT COST | AMOUNT | | | | | | | | | | | | | | |
| 11/30/20 | TX GOVT CODE 493.009 AND 501.0931 | | | | | | | | | | | | | | | | | |
| CONTACT NAME INVOICE SERVICES | | | | | PHONE (936) 437-6929 | | JCA6000 | | | | | | | | | | | |
| I approve this voucher for payment. The above goods or services correspond in every particular with the contract under which they were purchased. The invoice for the goods or services is correct. The payment complies with the General Appropriations Act. | | | | | ENT BY | | | | | | | | | | | | | |
| APPROVED: NAME | | TITLE | | DATE | | | | | | | | | | | | | | |
| APPROVED: NAME | | TITLE | | DATE | | | | | | | | | | | | | | |

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Private Facility Contract Monitoring / Oversight Division
Fiscal Year 2021

91044247

R-12/2
 S-11/30
 D-1/1

TO: Judy Castillo
 Accounts Payable

DATE: December 17, 2020

FROM: Julie Kuykendall
 Accountant IV
 Private Facilities - CMOD

SUBJECT: ✓ November 2020
 Management & Training Corp.
 Contract No: 696-PF-18-19-C160
 Invoice Received: 12/2/2020
 Payment Due: 1/1/2021

REFUSE INTEREST

M1-1

Enclosed is the invoice per diem payment for Gist Facility.

| Invoice # | Vendor | Man Days | Rate | Total |
|----------------|--------|----------|----------|--------------|
| ✓ Gist-1120-01 | MTC | 2,633 | \$ 10.12 | \$ 26,645.96 |

The following adjustments have been made:

| Billing Adjustments | Date | Amount Withheld |
|---------------------|------|-----------------|
| | | \$ - |

Total Withholdings: \$ -

| Total amount to be paid: | | | | | \$ 26,645.96 |
|--------------------------|-------|-------|------|--------|--------------|
| Index | PCA | AOBJ | AY | Amount | |
| Lonestar Coding | 76970 | 63300 | 8483 | FY21 | \$26,645.96 |

Attachments
 File

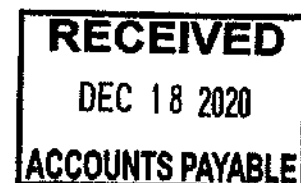
cc: Michael Bell, Management & Training Corp.
 Jason Diehl, Budget
 Joey Wren, Budget

Jared Howes, Management & Training Corp.
 Erica Wehmeyer, Management & Training Corp.

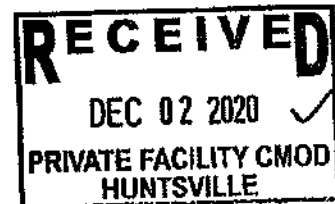
I certify that the attached invoices have been audited for compliance with the currently approved contract prices, are free of mathematical errors, the services / goods were received and correspond in every particular way with the contract under which they were procured, and the invoices are true and unpaid.

Julie Kuykendall 12/17/20
 Signature & Date

Please contact Rebecca Jones, Accountant VI, at Rebecca.Jones@dcj.texas.gov or 936-437-7083 for any errors, questions or concerns regarding payment and/or contracts.



Gist State Jail
3295 Farm to Market 3514
Beaumont, TX 77706
PHONE (409) 727-8400



ATTN: TDCJ - Private Facility Contract Monitoring / Oversight Division
Two Financial Plaza Suite 310
Huntsville, TX 77340


REMT TO: MANAGEMENT & TRAINING CORP.
500 N. Marketplace Dr.
P.O. Box 10
Centerville UT 84014

Inv. No. GIST-1120-01 ✓
Date: December 01, 2020

Contract 696-PF-18-19-C160 ✓

| DESCRIPTION | AMOUNT |
|--|----------------|
| GIST MANDAYS PER ATTACHED COUNT FOR NOVEMBER 2020 2,633 INMATES ✓ | \$ 26,645.96 |
| Total | \$ 26,645.96 ✓ |

Remittance Requested by Direct Deposit to:
Management & Training Corporation
ID# 87-0365322
Account# 982730939
Zions Bank
ABA Routing# 124000054


Michael Bell, Vice President
Region III

**Gist State Jail
MONTHLY BILLING**

Inv. No. **GIST-1120-01**

Date: **December 01, 2020**

| DAY | INMATE HEAD COUNT | HOSPITAL COUNT | RATE | GIST-1020-01 |
|-----------------------|----------------------|-------------------|----------|---------------------|
| 11/1/2020 | 89 | | \$ 10.12 | \$ 900.68 |
| 11/2/2020 | 87 | | \$ 10.12 | \$ 880.44 |
| 11/3/2020 | 86 | | \$ 10.12 | \$ 870.32 |
| 11/4/2020 | 84 | | \$ 10.12 | \$ 850.08 |
| 11/5/2020 | 83 | | \$ 10.12 | \$ 839.96 |
| 11/6/2020 | 81 | | \$ 10.12 | \$ 819.72 |
| 11/7/2020 | 81 | | \$ 10.12 | \$ 819.72 |
| 11/8/2020 | 81 | | \$ 10.12 | \$ 819.72 |
| 11/9/2020 | 82 | | \$ 10.12 | \$ 829.84 |
| 11/10/2020 | 83 | | \$ 10.12 | \$ 839.96 |
| 11/11/2020 | 83 | | \$ 10.12 | \$ 839.96 |
| 11/12/2020 | 96 | | \$ 10.12 | \$ 971.52 |
| 11/13/2020 | 92 | | \$ 10.12 | \$ 931.04 |
| 11/14/2020 | 92 | | \$ 10.12 | \$ 931.04 |
| 11/15/2020 | 92 | | \$ 10.12 | \$ 931.04 |
| 11/16/2020 | 93 | | \$ 10.12 | \$ 941.16 |
| 11/17/2020 | 92 | | \$ 10.12 | \$ 931.04 |
| 11/18/2020 | 91 | | \$ 10.12 | \$ 920.92 |
| 11/19/2020 | 90 | | \$ 10.12 | \$ 910.80 |
| 11/20/2020 | 88 | | \$ 10.12 | \$ 890.56 |
| 11/21/2020 | 88 | | \$ 10.12 | \$ 890.56 |
| 11/22/2020 | 88 | | \$ 10.12 | \$ 890.56 |
| 11/23/2020 | 86 | | \$ 10.12 | \$ 870.32 |
| 11/24/2020 | 91 | | \$ 10.12 | \$ 920.92 |
| 11/25/2020 | 89 | | \$ 10.12 | \$ 900.68 |
| 11/26/2020 | 88 | | \$ 10.12 | \$ 890.56 |
| 11/27/2020 | 89 | | \$ 10.12 | \$ 900.68 |
| 11/28/2020 | 89 | | \$ 10.12 | \$ 900.68 |
| 11/29/2020 | 89 | | \$ 10.12 | \$ 900.68 |
| 11/30/2020 | 90 | | \$ 10.12 | \$ 910.80 |
| 2,633 | | 0 | 10.12 | \$ 26,645.96 |
| AVG. | 88 | | | |
| TOTAL MONTHLY BILLING | | | | <u>\$ 26,645.96</u> |

STATE OF TEXAS PURCHASE VOUCHER

Page 001 of 001

| | | | | | | | | | | |
|--|---------------|--|--------------------------------|-----------------------------|--|-----------------------|--|-------------------------------------|--------|---|
| ARCHIVE REFERENCE NO | | AGENCY 696 - ACCOUNTS PAYABLE | | | | | CURRENT DOCUMENT 91046095 | | | |
| EFF DATE 02/01/21 | | DOC DATE 06/01/18 | | DUE DATE 02/07/21 | | DOC AGY 696 | | DOCUMENT AMOUNT 27,202.56 | | |
| VENDOR NO / MC | | REQUESTED PAYMENT DATE | | | PDT | PCC | REQUISITION NO 696-1-PF1819C160- | | | |
| VENDOR NAME / ADDRESS MANAGEMENT & TRAINING CORP P O BOX 10 ****DIRECT DEPOSIT**** CENTERVILLE, UT 84014 | | | | | AGENCY USE TEXAS DEPARTMENT OF CRIMINAL JUST P.O. BOX 4018 HUNTSVILLE, TX 77342 | | | | | |
| SFX | REF DOC - SFX | M | TC | INDEX | PCA | AY | COBJ | ACBJ | AMOUNT | R |
| | APPN | FUND | INVOICE NUMBER | | DESCRIPTION | | | AGENCY USE | | |
| 001 | | | 225 76970 63300 21 7325 | | 8483 | | | 27,202.56 | | |
| 13052 0014 GIST-1220-01 GIST FACILITY | | | | | | | | | | |
| DATE | | DESCRIPTION OF GOODS OR SERVICES | | | | QTY | UNIT COST | AMOUNT | | |
| 12/31/20 | | TX GOVT CODE 493.009 AND 501.0931 | | | | | | | | |
| CONTACT INVOICE SERVICES | | | | | (936) 437-6929 | | | JCA6000 | | |
| NAME _____ | | | | | PHONE _____ | | | EXT BY _____ | | |
| I approve this voucher for payment. The above goods or services correspond in every particular with the contract under which they were purchased. The invoice for the goods or services is correct. The payment complies with the General Appropriations Act. | | | | | | | | | | |
| APPROVED: NAME _____ | | | | | TITLE _____ | | | DATE _____ | | |
| APPROVED: NAME _____ | | | | | TITLE _____ | | | DATE _____ | | |

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Private Facility Contract Monitoring / Oversight Division
Fiscal Year 2021

91046095
 R-118
 S-12/31
 217

TO: Judy Castillo
 Accounts Payable

DATE: January 30, 2021

FROM: Julie Kuykendall
 Accountant IV
 Private Facilities - CMOD

SUBJECT: ✓ December 2020
 Management & Training Corp.
 Contract No: 696-PF-18-19-C160 ✓
 Invoice Received: 1/8/2021 ✓
 Payment Due: 2/7/2021 ✓

REFUSE INTEREST M-1

Enclosed is the invoice per diem payment for Gist Facility.

| Invoice # | Vendor | Man Days | Rate | Total |
|----------------|--------|----------|----------|--------------|
| ✓ Gist-1220-01 | MTC | 2,688 | \$ 10.12 | \$ 27,202.56 |

The following adjustments have been made:

| Billing Adjustments | Date | Amount Withheld |
|---------------------|------|-----------------|
| | | \$ - |

Total Withholdings: \$

| Total amount to be paid: | | | | | \$ 27,202.56 ✓ |
|--------------------------|-------|-------|------|------|----------------|
| Lonestar Coding | Index | PCA | AOBJ | AY | Amount |
| | 76970 | 63300 | 8483 | FY21 | \$27,202.56 ✓ |

Attachments
File

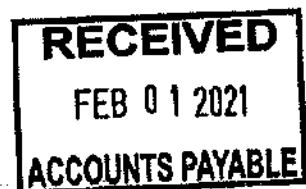
cc: Michael Bell, Management & Training Corp.
 Jason Diehl, Budget
 Joey Wren, Budget

Jared Howes, Management & Training Corp.
 Erica Wehmeyer, Management & Training Corp.

I certify that the attached invoices have been audited for compliance with the currently approved contract prices, are free of mathematical errors, the services / goods were received and correspond in every particular way with the contract under which they were procured, and the invoices are true and unpaid.

Julie Kuykendall 1/30/21
 Signature & Date

Please contact Rebecca Jones, Accountant VI, at Rebecca.Jones@dcj.texas.gov or 936-437-7083 for any errors, questions or concerns regarding payment and/or contracts.



Gist State Jail
3295 Farm to Market 3514
Beaumont, TX 77706
PHONE (409) 727-8400

CORRECTED COPY
JAN 08 2021
PRIVATE FACILITY CMOD
HUNTSVILLE

RECEIVED
JAN 05 2021
PRIVATE FACILITY CMOD
HUNTSVILLE

ATTN: TDCJ - Private Facility Contract Monitoring /
Oversight Division
Two Financial Plaza Suite 310
Huntsville, TX 77340

REMIT TO: MANAGEMENT & TRAINING CORP.
500 N. Marketplace Dr.
P.O. Box 10
Centerville UT 84014

Inv. No. GIST-1220-01
Date: January 04, 2021

Contract 696-PF-18-19-C160 ✓

| DESCRIPTION | AMOUNT |
|---|----------------|
| ✓ GIST MANDAYS PER ATTACHED COUNT FOR DECEMBER 2020 2,688 INMATES ✓ | \$ 27,202.56 |
| Total | \$ 27,202.56 ✓ |

Remittance Requested by Direct Deposit to:
Management & Training Corporation
ID# 87-0365322
Account# 982730839
Zions Bank
ABA Routing# 124000064

Michael Bell
Michael Bell, Vice President
Region II

Gist State Jail
MONTHLY BILLING

Inv. No. GIST-1220-01
 Date: January 04, 2021

| DAY | INMATE HEAD COUNT | HOSPITAL COUNT | RATE | GIST-1020-01 |
|-----------------------|----------------------|-------------------|----------|--------------|
| 12/1/2020 | 90 | | \$ 10.12 | \$ 910.80 |
| 12/2/2020 | 88 | | \$ 10.12 | \$ 890.56 |
| 12/3/2020 | 88 | | \$ 10.12 | \$ 890.56 |
| 12/4/2020 | 88 | | \$ 10.12 | \$ 890.56 |
| 12/5/2020 | 88 | | \$ 10.12 | \$ 890.56 |
| 12/6/2020 | 87 | | \$ 10.12 | \$ 880.44 |
| 12/7/2020 | 87 | | \$ 10.12 | \$ 880.44 |
| 12/8/2020 | 87 | | \$ 10.12 | \$ 880.44 |
| 12/9/2020 | 87 | | \$ 10.12 | \$ 880.44 |
| 12/10/2020 | 83 | | \$ 10.12 | \$ 839.96 |
| 12/11/2020 | 82 | | \$ 10.12 | \$ 829.84 |
| 12/12/2020 | 82 | | \$ 10.12 | \$ 829.84 |
| 12/13/2020 | 82 | | \$ 10.12 | \$ 829.84 |
| 12/14/2020 | 81 | | \$ 10.12 | \$ 819.72 |
| 12/15/2020 | 89 | | \$ 10.12 | \$ 900.88 |
| 12/16/2020 | 87 | | \$ 10.12 | \$ 880.44 |
| 12/17/2020 | 85 | | \$ 10.12 | \$ 860.20 |
| 12/18/2020 | 84 | | \$ 10.12 | \$ 850.08 |
| 12/19/2020 | 84 | | \$ 10.12 | \$ 850.08 |
| 12/20/2020 | 84 | | \$ 10.12 | \$ 850.08 |
| 12/21/2020 | 86 | | \$ 10.12 | \$ 870.32 |
| 12/22/2020 | 91 | | \$ 10.12 | \$ 920.92 |
| 12/23/2020 | 88 | | \$ 10.12 | \$ 890.56 |
| 12/24/2020 | 88 | | \$ 10.12 | \$ 890.56 |
| 12/25/2020 | 88 | | \$ 10.12 | \$ 890.56 |
| 12/26/2020 | 88 | | \$ 10.12 | \$ 890.56 |
| 12/27/2020 | 88 | | \$ 10.12 | \$ 890.56 |
| 12/28/2020 | 86 | | \$ 10.12 | \$ 870.32 |
| 12/29/2020 | 87 | | \$ 10.12 | \$ 880.44 |
| 12/30/2020 | 95 | | \$ 10.12 | \$ 961.40 |
| 12/31/2020 | 90 | | \$ 10.12 | \$ 910.80 |
| | 2,688 | 0 | 10.12 | \$ 27,202.56 |
| AVG. | 87 | | | |
| TOTAL MONTHLY BILLING | | | | \$ 27,202.56 |

STATE OF TEXAS PURCHASE VOUCHER

Page 001 of 001

| | | | | | | | | | | |
|--|---------------|-----------------------------------|----------------|----------|--|-------------|-------------------|-----------------|------------|---------|
| ARCHIVE REFERENCE NO | | AGENCY | | | | | CURRENT DOCUMENT | | | |
| | | 696 - ACCOUNTS PAYABLE | | | | | 91047574 | | | |
| EFF DATE | | DOC DATE | | DUE DATE | | DOC AGY | | DOCUMENT AMOUNT | | |
| 03/03/21 | | 06/01/18 | | 03/04/21 | | 696 | | 25,229.16 | | |
| VENDOR NO / MC | | REQUESTED PAYMENT DATE | | | PDT | PCC | REQUISITION NO | | | |
| | | | | | | | 696-1-PF1819C160- | | | |
| VENDOR NAME / ADDRESS | | | | | AGENCY USE | | | | | |
| MANAGEMENT & TRAINING CORP P O BOX 10 ***DIRECT DEPOSIT*** CENTERVILLE, UT 84014 | | | | | TEXAS DEPARTMENT OF CRIMINAL JUST P.O. BOX 4018 HUNTSVILLE, TX 77342 | | | | | |
| SFX | REF DOC - SFX | M | TC | INDEX | PCA | AV | COBJ | AOBJ | AMOUNT | R |
| | APPN | FUND | INVOICE NUMBER | | | DESCRIPTION | | | AGENCY USE | |
| 001 | | | | | | | | | 25,229.16 | |
| 225 76980 63300 21 7325 8483 13052 0014 GIST-0121-01 GIST FACILITY | | | | | | | | | | |
| DATE | | DESCRIPTION OF GOODS OR SERVICES | | | | | QTY | UNIT COST | AMOUNT | |
| 01/31/21 | | TX GOVT CODE 493.009 AND 501.0931 | | | | | | | | |
| CONTACT NAME | | | | | INVOICE SERVICES | | | (936) 437-6929 | | JCA6000 |
| NAME | | | | | PHONE | | | EXT BY | | |
| I approve this voucher for payment. The above goods or services correspond in every particular with the contract under which they were purchased. The invoice for the goods or services is correct. The payment complies with the General Appropriations Act. | | | | | | | | | | |
| APPROVED: NAME | | | | | TITLE | | | DATE | | |
| APPROVED: NAME | | | | | TITLE | | | DATE | | |

191047574

✓ R-212
✓ S-1131
D-314

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Private Facility Contract Monitoring / Oversight Division
Fiscal Year 2021

TO: Judy Castillo
Accounts Payable

DATE: February 25, 2021

FROM: Julie Kuykendall
Accountant IV
Private Facilities - CMOD

SUBJECT: ✓ January 2021
Management & Training Corp. ✓
Contract No: 696-PF-18-19-C160 ✓
Invoice Received: 2/2/2021 ✓
Payment Due: 3/4/2021 ✓

REFUSE INTEREST MI-1 ✓

Enclosed is the invoice per diem payment for Gist Facility. ✓

| Invoice # | Vendor | Man Days | Rate | Total |
|----------------|--------|----------|----------|----------------|
| ✓ Gist-0121-01 | MTG | 2,493 | \$ 10.12 | \$ 25,229.16 ✓ |

The following adjustments have been made:

| Billing Adjustments | Date | Amount Withheld |
|---------------------|------|-----------------|
| | | \$ - |

Total Withholdings: \$ - ✓

| Total amount to be paid: | | | | | \$ 25,229.16 ✓ |
|--------------------------|---------|---------|--------|------|----------------|
| Lonestar Coding | Index | PCA | AOBJ | AY | Amount |
| | 76970 ✓ | 63300 ✓ | 8483 ✓ | FY21 | \$25,229.16 ✓ |

Attachments
File

cc: Michael Bell, Management & Training Corp.
Jason Diehl, Budget
Joey Wren, Budget

Jared Howes, Management & Training Corp.
Erica Wehmeyer, Management & Training Corp.

I certify that the attached invoices have been audited for compliance with the currently approved contract prices, are free of mathematical errors, the services / goods were received and correspond in every particular way with the contract under which they were procured, and the invoices are true and unpaid.

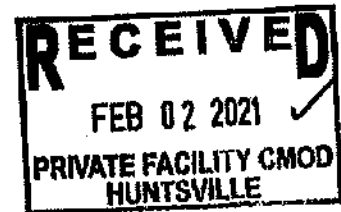
✓
Julie Kuykendall 2/25/21
Signature & Date

RECEIVED
FEB 26 2021
ACCOUNTS PAYABLE

Gist State Jail ✓
3295 Farm to Market 3514
Beaumont, TX 77705
PHONE (409) 727-8400

ATTN: TDCJ - Private Facility Contract Monitoring /
Oversight Division
Two Financial Plaza Suite 310
Huntsville, TX 77340

Contract 696-PF-18-19-C160 ✓



REMT TO: MANAGEMENT & TRAINING CORP.
500 N. Marketplace Dr.
P.O. Box 10
Centerville UT 84014

Inv. No. GIST-0121-01 ✓
Date: February 01, 2021

| DESCRIPTION | | AMOUNT |
|---|----------|--------------|
| GIST MANDAYS PER ATTACHED COUNT FOR JANUARY 2021 ✓ 2,493 INMATES | \$ 10.12 | \$ 25,229.16 |
| Total | | \$ 25,229.16 |

Remittance Requested by Direct Deposit to:
Management & Training Corporation
ID# 87-0366322
Account# 982730939
Zions Bank
ABA Routing# 124000054

Michael Bell
Michael Bell, Vice President
Region III

#REFI

MONTHLY BILLING

Inv. No. GIST-0121-01

Date: February 01, 2021

| DAY | INMATE HEAD COUNT | HOSPITAL COUNT | RATE | TOTAL |
|-----------------------|----------------------|-------------------|----------|--------------|
| 1/1/2021 | 90 | | \$ 10.12 | \$ 910.80 |
| 1/2/2021 | 90 | | \$ 10.12 | \$ 910.80 |
| 1/3/2021 | 90 | | \$ 10.12 | \$ 910.80 |
| 1/4/2021 | 89 | | \$ 10.12 | \$ 900.88 |
| 1/5/2021 | 87 | | \$ 10.12 | \$ 880.44 |
| 1/6/2021 | 84 | | \$ 10.12 | \$ 850.08 |
| 1/7/2021 | 81 | | \$ 10.12 | \$ 819.72 |
| 1/8/2021 | 77 | | \$ 10.12 | \$ 779.24 |
| 1/9/2021 | 77 | | \$ 10.12 | \$ 779.24 |
| 1/10/2021 | 77 | | \$ 10.12 | \$ 779.24 |
| 1/11/2021 | 78 | | \$ 10.12 | \$ 789.36 |
| 1/12/2021 | 78 | | \$ 10.12 | \$ 789.36 |
| 1/13/2021 | 85 | | \$ 10.12 | \$ 860.20 |
| 1/14/2021 | 83 | | \$ 10.12 | \$ 839.96 |
| 1/15/2021 | 79 | | \$ 10.12 | \$ 799.48 |
| 1/16/2021 | 79 | | \$ 10.12 | \$ 799.48 |
| 1/17/2021 | 79 | | \$ 10.12 | \$ 799.48 |
| 1/18/2021 | 79 | | \$ 10.12 | \$ 799.48 |
| 1/19/2021 | 78 | | \$ 10.12 | \$ 789.36 |
| 1/20/2021 | 75 | | \$ 10.12 | \$ 759.00 |
| 1/21/2021 | 74 | | \$ 10.12 | \$ 748.88 |
| 1/22/2021 | 65 | | \$ 10.12 | \$ 657.80 |
| 1/23/2021 | 65 | | \$ 10.12 | \$ 657.80 |
| 1/24/2021 | 65 | | \$ 10.12 | \$ 657.80 |
| 1/25/2021 | 62 | | \$ 10.12 | \$ 627.44 |
| 1/26/2021 | 72 | | \$ 10.12 | \$ 728.64 |
| 1/27/2021 | 94 | | \$ 10.12 | \$ 951.28 |
| 1/28/2021 | 94 | | \$ 10.12 | \$ 951.28 |
| 1/29/2021 | 89 | | \$ 10.12 | \$ 900.68 |
| 1/30/2021 | 89 | | \$ 10.12 | \$ 900.68 |
| 1/31/2021 | 89 | | \$ 10.12 | \$ 900.68 |
| | 2,493 | 0 | \$ 10.12 | \$ 25,229.16 |
| AVG. | 80 | | | |
| TOTAL MONTHLY BILLING | | | | \$ 25,229.16 |

Page 001 of 001LNSTR-008-TE(2/93)

91048789
R-312
S-2128
D-411

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Private Facility Contract Monitoring / Oversight Division
Fiscal Year 2021

TO: Judy Castillo
Accounts Payable

DATE: March 15, 2021

FROM: Julie Kuykendall
Accountant IV
Private Facilities - CMOD

SUBJECT: February 2021 ✓
Management & Training Corp. ✓
Contract No: 696-PF-18-19-C160 ✓
Invoice Received: 3/2/2021 ✓
Payment Due: 4/1/2021 ✓

REFUSE INTEREST *ml-1*

Enclosed is the invoice per diem payment for Gist Facility.

| Invoice # | Vendor | Man Days | Rate | Total |
|--------------|--------|----------|----------|--------------|
| Gist-0221-01 | MTC | 2,536 | \$ 10.12 | \$ 25,664.32 |

The following adjustments have been made:

| Billing Adjustments | Date | Amount Withheld |
|--------------------------|---------------|-----------------|
| Position Vacancy - Other | February 2021 | \$ 560.00 |

Total Withholdings: \$ 560.00

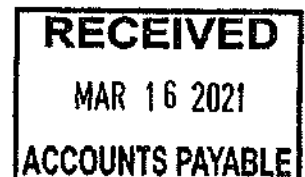
| Total amount to be paid: | | | | | \$ 25,104.32 |
|--------------------------|-------|-------|------|------|--------------|
| Lonestar Coding | Index | PCA | AOBJ | AY | Amount |
| | 76970 | 63300 | 8483 | FY21 | \$25,104.32 |

Attachments
File

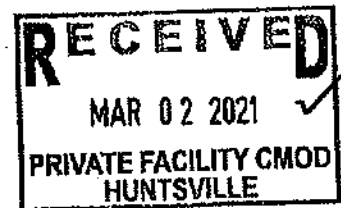
cc: Michael Bell, Management & Training Corp. Jared Howes, Management & Training Corp.
Jason Diehl, Budget Erica Wehmeyer, Management & Training Corp.
Joey Wren, Budget

I certify that the attached invoices have been audited for compliance with the currently approved contract prices, are free of mathematical errors, the services / goods were received and correspond in every particular way with the contract under which they were procured, and the invoices are true and unpaid.

Julie Kuykendall 3/15/21
Signature & Date



Gist State Jail
3295 Farm to Market 3514
Beaumont, TX 77705
PHONE (409) 727-8400



ATTN: TDCJ - Private Facility Contract Monitoring /
Oversight Division
Two Financial Plaza Suite 310
Huntsville, TX 77340

REMT TO: MANAGEMENT & TRAINING CORP.
500 N. Marketplace Dr.
P.O. Box 10
Centerville UT 84014

Inv. No. GIST-0221-01 ✓
Date: March 01, 2021

Contract 696-PF-18-19-C160 ✓

| DESCRIPTION | | | AMOUNT |
|---|---------|----------|----------------|
| GIST MANDAYS PER ATTACHED COUNT FOR FEBRUARY 2021 ✓ | | | |
| 2,536 | INMATES | \$ 10.12 | \$ 25,664.32 |
| Total | | | \$ 25,664.32 ✓ |

Remittance Requested by Direct Deposit to:
Management & Training Corporation
ID# 87-0365322
Account# 982730939
Zions Bank
ABA Routing# 124000054

Michael Bell, Vice President
Region III

#REF!

MONTHLY BILLING

Inv. No. GIST-0221-01

Date: March 01, 2021

| DAY | INMATE HEAD COUNT | HOSPITAL COUNT | RATE | TOTAL |
|-----------------------|----------------------|-------------------|----------|--------------|
| 2/1/2021 | 87 | | \$ 10.12 | \$ 880.44 |
| 2/2/2021 | 86 | | \$ 10.12 | \$ 870.32 |
| 2/3/2021 | 87 | | \$ 10.12 | \$ 880.44 |
| 2/4/2021 | 86 | | \$ 10.12 | \$ 870.32 |
| 2/5/2021 | 84 | | \$ 10.12 | \$ 850.08 |
| 2/6/2021 | 84 | | \$ 10.12 | \$ 850.08 |
| 2/7/2021 | 84 | | \$ 10.12 | \$ 850.08 |
| 2/8/2021 | 84 | | \$ 10.12 | \$ 850.08 |
| 2/9/2021 | 85 | | \$ 10.12 | \$ 860.20 |
| 2/10/2021 | 85 | | \$ 10.12 | \$ 860.20 |
| 2/11/2021 | 85 | | \$ 10.12 | \$ 860.20 |
| 2/12/2021 | 87 | | \$ 10.12 | \$ 880.44 |
| 2/13/2021 | 87 | | \$ 10.12 | \$ 880.44 |
| 2/14/2021 | 87 | | \$ 10.12 | \$ 880.44 |
| 2/15/2021 | 87 | | \$ 10.12 | \$ 880.44 |
| 2/16/2021 | 87 | | \$ 10.12 | \$ 880.44 |
| 2/17/2021 | 87 | | \$ 10.12 | \$ 880.44 |
| 2/18/2021 | 87 | | \$ 10.12 | \$ 880.44 |
| 2/19/2021 | 98 | | \$ 10.12 | \$ 991.76 |
| 2/20/2021 | 98 | | \$ 10.12 | \$ 991.76 |
| 2/21/2021 | 98 | | \$ 10.12 | \$ 991.76 |
| 2/22/2021 | 98 | | \$ 10.12 | \$ 991.76 |
| 2/23/2021 | 98 | | \$ 10.12 | \$ 991.76 |
| 2/24/2021 | 100 | | \$ 10.12 | \$ 1,012.00 |
| 2/25/2021 | 100 | | \$ 10.12 | \$ 1,012.00 |
| 2/26/2021 | 100 | | \$ 10.12 | \$ 1,012.00 |
| 2/27/2021 | 100 | | \$ 10.12 | \$ 1,012.00 |
| 2/28/2021 | 100 | | \$ 10.12 | \$ 1,012.00 |
| 2,536 | | 0 | 10.12 | \$ 25,664.32 |
| AVG. | 91 | | | |
| TOTAL MONTHLY BILLING | | | | \$ 25,664.32 |

| PCN # | Position Title | Date Vacated | Sanctions Began | Date Filled | 60/90 | Avg | Adj Avg | Feb-21 | |
|----------------|------------------------|--------------|-----------------|-------------|---------|--------------|------------|-------------|-----------------|
| | | | | | Day Pos | Daily Salary | FTE Salary | Days Vacant | Amount Withheld |
| 582001020001 | Office Manager - L.O.A | 11/09/20 | 02/21/21 | | 104 | \$ 80.00 | 1.00 | \$ 80.00 | 7 \$ 560.00 |
| 1 | SANCTION | | | | | | | | 7 \$ 560.00 |
| TOTAL SANCTION | | | | | | | | | 7 \$ 560.00 |

STATE OF TEXAS PURCHASE VOUCHER

Page 001 of 001

| | | | | | | | | | | |
|--|-----------------------------------|------------------------|----------------|-----------|--|-----------------|-------------------|------------------|-----------|---|
| ARCHIVE REFERENCE NO | | AGENCY | | | | | | CURRENT DOCUMENT | | |
| | | 696 - ACCOUNTS PAYABLE | | | | | | 91051301 | | |
| | | EFF DATE | DOC DATE | DUE DATE | DOC AGY | DOCUMENT AMOUNT | | | | |
| | | 05/07/21 | 06/01/18 | 05/27/21 | 696 | 31,251.76 | | | | |
| VENDOR NO / MC | | REQUESTED PAYMENT DATE | | | PDT | PCC | REQUISITION NO | | | |
| | | | | | | | 696-1-PF1819C160- | | | |
| VENDOR NAME / ADDRESS | | | | | AGENCY USE | | | | | |
| MANAGEMENT & TRAINING CORP P O BOX 10 ****DIRECT DEPOSIT**** CENTERVILLE, UT 84014 | | | | | TEXAS DEPARTMENT OF CRIMINAL JUST P.O. BOX 4018 HUNTSVILLE, TX 77342 | | | | | |
| SFX | REF DOC - SFX | M | TC | INDEX | PCA | AY | COBJ | AOBJ | AMOUNT | R |
| | APPN | FUND | INVOICE NUMBER | | DESCRIPTION | | | AGENCY USE | | |
| 001 | | | | 225 76970 | 63300 | 21 | 7325 | 8483 | 31,251.76 | |
| | 13052 | 0014 | GIST-0321-01 | | GIST FACILITY | | | | | |
| | | | | | | | | | | |
| DATE | DESCRIPTION OF GOODS OR SERVICES | | | | | QTY | UNIT COST | AMOUNT | | |
| 03/31/21 | TX GOVT CODE 493.009 AND 501.0931 | | | | | | | | | |
| | | | | | | | | | | |
| CONTACT | | INVOICE SERVICES | | | (936) 437-6929 | | | JCA6000 | | |
| NAME | | | | | PHONE | | | ENT BY | | |
| I approve this voucher for payment. The above goods or services correspond in every particular with the contract under which they were purchased. The invoice for the goods or services is correct. The payment complies with the General Appropriations Act. | | | | | | | | | | |
| APPROVED: | | NAME | | | TITLE | | | DATE | | |
| APPROVED: | | NAME | | | TITLE | | | DATE | | |

91051301 ✓
R-4/27 ✓
S-3/31 ✓
D-5/27 ✓

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Private Facility Contract Monitoring / Oversight Division
Fiscal Year 2021

TO: Judy Castillo
Accounts Payable

DATE: May 5, 2021

FROM: Julie Kuykendall
Accountant IV
Private Facilities - CMOD

SUBJECT: ✓ March 2021
Management & Training Corp. ✓
Contract No: 696-PF-18-19-C160 ✓
Invoice Received: 4/27/2021 ✓
Payment Due: 5/27/2021 ✓

REFUSE INTEREST *ML*

Enclosed is the invoice per diem payment for Gist Facility.

| ✓ Invoice # | Vendor | Man Days | Rate | Total |
|----------------|--------|----------|----------|----------------|
| ✓ Gist-0321-01 | MTC | 3,098 | \$ 10.12 | \$ 31,351.76 ✓ |

The following adjustments have been made:

| Billing Adjustments | Date | Amount Withheld |
|-------------------------|------------|-----------------|
| Compliance Standard #14 | March 2021 | \$ 100.00 |

Total Withholdings: \$ 100.00

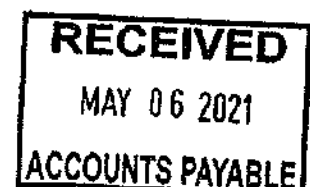
| Total amount to be paid: | | | | | \$ 31,251.76 ✓ |
|--------------------------|-------|-------|------|------|----------------|
| Lonestar Coding | Index | PCA | AOBJ | AY | Amount |
| | 76970 | 63300 | 8483 | FY21 | \$31,251.76 ✓ |

Attachments
File

cc: Michael Bell, Management & Training Corp. Jared Howes, Management & Training Corp.
Jason Diehl, Budget Erica Wehmeyer, Management & Training Corp.
Joey Wren, Budget

I certify that the attached invoices have been audited for compliance with the currently approved contract prices, are free of mathematical errors, the services / goods were received and correspond in every particular way with the contract under which they were procured, and the invoices are true and unpaid.

Julie Kuykendall ✓ 5/5/21
Signature & Date



Gist State Jail
3295 Farm to Market 3514
Beaumont, TX 77705
PHONE (409) 727-8400

CORRECTED COPY
APR 27 2021 ✓
**PRIVATE FACILITY CMOD
HUNTSVILLE**

RECEIVED
APR 01 2021
**PRIVATE FACILITY CMOD
HUNTSVILLE**

ATTN: TDCJ - Private Facility Contract Monitoring /
Oversight Division
Two Financial Plaza Suite 310
Huntsville, TX 77340

REMT TO: MANAGEMENT & TRAINING CORP.
600 N. Marketplace Dr.
P.O. Box 10
Centerville UT 84014

Inv. No. GIST-0321-01 ✓
Date: April 01, 2021

Contract 696-PF-18-19-C160 ✓

| DESCRIPTION | AMOUNT |
|--|----------------|
| GIST MANDAYS PER ATTACHED COUNT FOR MARCH 2021 ✓ | |
| 3,098 INMATES \$ 10.12 | \$ 31,351.76 |
| Total | \$ 31,351.76 ✓ |

Remittance Requested by Direct Deposit to:
Management & Training Corporation
ID# 87-0385322
Account# 982730939
Zions Bank
ABA Routing# 124000054

Michael Bell
Michael Bell, Vice President
Region III

#REF!

MONTHLY BILLING

Inv. No. GIST-0321-01

Date: April 01, 2021

| DAY | INMATE HEAD COUNT | HOSPITAL COUNT | RATE | TOTAL |
|-----------------------|----------------------|-------------------|----------|------------------|
| 3/1/2021 | 104 | | \$ 10.12 | \$ 1,052.48 |
| 3/2/2021 | 108 | | \$ 10.12 | \$ 1,092.96 |
| 3/3/2021 | 107 | | \$ 10.12 | \$ 1,082.84 |
| 3/4/2021 | 105 | | \$ 10.12 | \$ 1,062.60 |
| 3/5/2021 | 105 | | \$ 10.12 | \$ 1,062.60 |
| 3/6/2021 | 105 | | \$ 10.12 | \$ 1,062.60 |
| 3/7/2021 | 105 | | \$ 10.12 | \$ 1,062.60 |
| 3/8/2021 | 103 | | \$ 10.12 | \$ 1,042.36 |
| 3/9/2021 | 99 | | \$ 10.12 | \$ 1,001.88 |
| 3/10/2021 | 101 | | \$ 10.12 | \$ 1,022.12 |
| 3/11/2021 | 100 | | \$ 10.12 | \$ 1,012.00 |
| 3/12/2021 | 95 | | \$ 10.12 | \$ 961.40 |
| 3/13/2021 | 94 | | \$ 10.12 | \$ 951.28 |
| 3/14/2021 | 94 | | \$ 10.12 | \$ 951.28 |
| 3/15/2021 | 94 | | \$ 10.12 | \$ 951.28 |
| 3/16/2021 | 87 | | \$ 10.12 | \$ 880.44 |
| 3/17/2021 | 96 | | \$ 10.12 | \$ 971.52 |
| 3/18/2021 | 96 | | \$ 10.12 | \$ 971.52 |
| 3/19/2021 | 92 | | \$ 10.12 | \$ 931.04 |
| 3/20/2021 | 91 | | \$ 10.12 | \$ 920.92 |
| 3/21/2021 | 91 | | \$ 10.12 | \$ 920.92 |
| 3/22/2021 | 89 | | \$ 10.12 | \$ 900.68 |
| 3/23/2021 | 98 | | \$ 10.12 | \$ 991.76 |
| 3/24/2021 | 97 | | \$ 10.12 | \$ 981.64 |
| 3/25/2021 | 102 | | \$ 10.12 | \$ 1,032.24 |
| 3/26/2021 | 104 | | \$ 10.12 | \$ 1,052.48 |
| 3/27/2021 | 106 | | \$ 10.12 | \$ 1,072.72 |
| 3/28/2021 | 106 | | \$ 10.12 | \$ 1,072.72 |
| 3/29/2021 | 109 | | \$ 10.12 | \$ 1,103.08 |
| 3/30/2021 | 105 | | \$ 10.12 | \$ 1,062.60 |
| 3/31/2021 | 110 | | \$ 10.12 | \$ 1,113.20 |
| | 3,098 | 0 | 10.12 | \$ 31,351.76 |
| AVG. | 100 | | | |
| TOTAL MONTHLY BILLING | | | \$ | <u>31,351.76</u> |

Compliance Standard 14
Required Reports (Accurate and Complete)
Gist State Jail - March 2021

A.

| Report | Error | Total Number of Errors | Adjustment Amount | Total Adjustment |
|--------|------------------------------|------------------------|-------------------|------------------|
| PVR | information on PVR incorrect | 1 | \$100.00 | \$100.00 |

Sub-Total: \$100.00

Total Withholding: \$100.00

Page 001 of 001

LNSTR-008-TE(2/93)

91052311 ✓
R-5/3 ✓
S-4/30 ✓
D-6/2 ✓

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Private Facility Contract Monitoring / Oversight Division
Fiscal Year 2021

TO: Judy Castillo
Accounts Payable

DATE: May 19, 2021

FROM: Tara Welch
Accountant III
Private Facilities - CMOD

SUBJECT: ✓ April 2021
Management & Training Corp.
Contract No: 696-PF-18-19-C160 ✓
Invoice Received: 5/3/2021 ✓
Payment Due: 6/2/2021 ✓

REFUSE INTEREST MI-1

Enclosed is the invoice per diem payment for Gist Facility.

| Invoice # | Vendor | Man Days | Rate | Total |
|----------------|--------|----------|----------|----------------|
| ✓ Gist-0421-01 | MTC | 3,309 | \$ 10.12 | \$ 33,487.08 ✓ |

The following adjustments have been made:

| Billing Adjustments | Date | Amount Withheld |
|--------------------------|------------|-----------------|
| Position Vacancy - Other | April 2021 | \$ 3,810.00 |


Total Withholdings: \$ 3,810.00 ✓

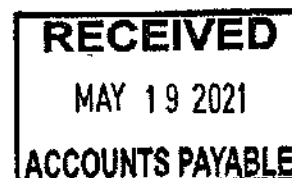
| Total amount to be paid: | | | | | \$ 29,677.08 ✓ |
|--------------------------|-------|-------|------|------|----------------|
| Lonestar Coding | Index | PCA | AORJ | AY | Amount |
| | 76970 | 63300 | 8483 | FY21 | \$29,677.08 ✓ |

Attachments
File

cc: Michael Bell, Management & Training Corp. Jared Howes, Management & Training Corp.
Jason Diehl, Budget Erica Wehmeyer, Management & Training Corp.
Joey Wren, Budget

I certify that the attached invoices have been audited for compliance with the currently approved contract prices, are free of mathematical errors, the services / goods were received and correspond in every particular way with the contract under which they were procured, and the invoices are true and unpaid.

 5/19/21
Signature & Date



Gist State Jail
3295 Farm to Market 3514
Beaumont, TX 77705
PHONE (409) 727-8400



ATTN: TDCJ - Private Facility Contract Monitoring /
Oversight Division
Two Financial Plaza Suite 310
Huntsville, TX 77340

REMT TO: MANAGEMENT & TRAINING CORP.
500 N. Marketplace Dr.
P.O. Box 10
Centerville UT 84014

Inv. No. GIST-0421-01
Date: May 03, 2021

Contract 696-PF-18-19-C160

| DESCRIPTION | AMOUNT |
|---|--------------|
| GIST MANDAYS PER ATTACHED COUNT FOR APRIL 2021 3,309 INMATES | \$ 33,487.08 |
| Total | \$ 33,487.08 |

Remittance Requested by Direct Deposit to:
Management & Training Corporation
ID# 87-0365322
Account# 982730939
Zions Bank
ABA Routing# 124000054

Michael Bell
Michael Bell, Vice President
Region III

5/19/21
CM

#REF!

MONTHLY BILLING

Inv. No. GIST-0421-01

Date: May 03, 2021

| DAY | INMATE HEAD COUNT | HOSPITAL COUNT | RATE | TOTAL |
|-----------------------|----------------------|-------------------|----------|------------------|
| 4/1/2021 | 110 | | \$ 10.12 | \$ 1,113.20 |
| 4/2/2021 | 111 | | \$ 10.12 | \$ 1,123.32 |
| 4/3/2021 | 111 | | \$ 10.12 | \$ 1,123.32 |
| 4/4/2021 | 111 | | \$ 10.12 | \$ 1,123.32 |
| 4/5/2021 | 109 | | \$ 10.12 | \$ 1,103.08 |
| 4/6/2021 | 108 | | \$ 10.12 | \$ 1,092.96 |
| 4/7/2021 | 108 | | \$ 10.12 | \$ 1,092.96 |
| 4/8/2021 | 118 | | \$ 10.12 | \$ 1,173.92 |
| 4/9/2021 | 115 | | \$ 10.12 | \$ 1,163.80 |
| 4/10/2021 | 115 | | \$ 10.12 | \$ 1,163.80 |
| 4/11/2021 | 115 | | \$ 10.12 | \$ 1,163.80 |
| 4/12/2021 | 113 | | \$ 10.12 | \$ 1,143.56 |
| 4/13/2021 | 115 | | \$ 10.12 | \$ 1,163.80 |
| 4/14/2021 | 114 | | \$ 10.12 | \$ 1,153.68 |
| 4/15/2021 | 111 | | \$ 10.12 | \$ 1,123.32 |
| 4/16/2021 | 113 | | \$ 10.12 | \$ 1,143.56 |
| 4/17/2021 | 113 | | \$ 10.12 | \$ 1,143.56 |
| 4/18/2021 | 113 | | \$ 10.12 | \$ 1,143.56 |
| 4/19/2021 | 113 | | \$ 10.12 | \$ 1,143.56 |
| 4/20/2021 | 114 | | \$ 10.12 | \$ 1,153.68 |
| 4/21/2021 | 113 | | \$ 10.12 | \$ 1,143.56 |
| 4/22/2021 | 106 | | \$ 10.12 | \$ 1,072.72 |
| 4/23/2021 | 105 | | \$ 10.12 | \$ 1,062.60 |
| 4/24/2021 | 105 | | \$ 10.12 | \$ 1,062.60 |
| 4/25/2021 | 105 | | \$ 10.12 | \$ 1,062.60 |
| 4/26/2021 | 103 | | \$ 10.12 | \$ 1,042.36 |
| 4/27/2021 | 107 | | \$ 10.12 | \$ 1,082.84 |
| 4/28/2021 | 107 | | \$ 10.12 | \$ 1,082.84 |
| 4/29/2021 | 107 | | \$ 10.12 | \$ 1,082.84 |
| 4/30/2021 | 103 | | \$ 10.12 | \$ 1,042.36 |
| | 3,309 | 0 | 10.12 | \$ 33,487.08 |
| AVG. | 110 | | | |
| TOTAL MONTHLY BILLING | | | \$ | <u>33,487.08</u> |

USE: Manual

TOTAL ADJUSTMENT

NO
rec'd date
stamp

Gist State Jail
3295 Farm to Market 3514
Beaumont, TX 77705
PHONE (409) 727-8400

**ATTN: TDCJ - Private Facility Contract Monitoring /
Oversight Division**
Two Financial Plaza Suite 310
Huntsville, TX 77340

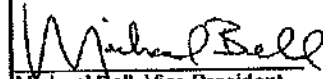
REMT TO: MANAGEMENT & TRAINING CORP.
500 N. Marketplace Dr.
P.O. Box 10
Centerville UT 84014

Inv. No. GIST-0421-01
Date: May 03, 2021

Contract 696-PF-18-19-C160

| DESCRIPTION | | AMOUNT |
|--|----------|--------------|
| GIST MANDAYS PER ATTACHED COUNT FOR APRIL 2021 | | |
| 3,309 INMATES | \$ 10.12 | \$ 33,487.08 |
| Total | | \$ 33,487.08 |

Remittance Requested by Direct Deposit to:
Management & Training Corporation
ID# 87-0365322
Account# 882730939
Zions Bank
ABA Routing# 124000054


Michael Bell, Vice President
Region III

5/19/21
M

STATE OF TEXAS PURCHASE VOUCHER

Page 001 of 001

| | | | | | | | | | | |
|--|---------------|---|-----------------------------|-----------------------------|--|-------------------------------------|--|----------------|------------------|---|
| ARCHIVE REFERENCE NO | | AGENCY 696 - ACCOUNTS PAYABLE | | | | | CURRENT DOCUMENT 91053791 | | | |
| | | EFF DATE 06/21/21 | DOC DATE 06/01/18 | DUE DATE 07/02/21 | DOC AGY 696 | DOCUMENT AMOUNT 30,644.00 | | | | |
| VENDOR NO / MC | | REQUESTED PAYMENT DATE | | | PDT | PCC | REQUISITION NO 696-1-PF1819C160- | | | |
| VENDOR NAME / ADDRESS MANAGEMENT & TRAINING CORP P O BOX 10 ***DIRECT DEPOSIT*** CENTERVILLE, UT 84014 | | | | | AGENCY USE TEXAS DEPARTMENT OF CRIMINAL JUST P.O. BOX 4018 HUNTSVILLE, TX 77342 | | | | | |
| SFX | REF DOC - SFX | M | TC | INDEX | PCA | AY | COBJ | AOBJ | AMOUNT | R |
| | APPN | FUND | INVOICE NUMBER | | | DESCRIPTION | | | AGENCY USE | |
| 001 | | | | | | | | | 30,644.00 | |
| 13052 0014 GIST-0521-01 GIST FACILITY | | | | | | | | | | |
| | | | | | | | | | | |
| DATE | | DESCRIPTION OF GOODS OR SERVICES | | | | QTY | UNIT COST | | AMOUNT | |
| 05/31/21 TX GOVT CODE 493.009 AND 501.0931 | | | | | | | | | | |
| CONTACT | | INVOICE SERVICES | | | | (936) 437-6929 | | BJ00369 | | |
| NAME | | | | | | PHONE | | EXT BY | | |
| I approve this voucher for payment. The above goods or services correspond in every particular with the contract under which they were purchased. The invoice for the goods or services is correct. The payment complies with the General Appropriations Act. | | | | | | | | | | |
| APPROVED: | | NAME | | | | TITLE | | DATE | | |
| APPROVED: | | NAME | | | | TITLE | | DATE | | |

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Private Facility Contract Monitoring / Oversight Division
Fiscal Year 2021

91053791 ✓

TO: Jordan Brooks
Accounts Payable

FROM: Tara Welch
Accountant III
Private Facilities - CMOD

DATE: June 10, 2021

SUBJECT: May 2021
Management & Training Corp.
Contract No: 696-PF-18-19-C160
Invoice Received: 6/2/2021
Payment Due: 7/2/2021

Enclosed is the invoice per diem payment for Gist Facility.

| Invoice # | Vendor | Man Days | Rate | Total |
|--------------|--------|----------|----------|--------------|
| Gist-0521-01 | MTC | 3,425 | \$ 10.12 | \$ 34,661.00 |

R 06/02 ✓
S 05/31 ✓
D 07/02 ✓

The following adjustments have been made:

| Billing Adjustments | Date | Amount Withheld |
|-------------------------------|----------|-----------------|
| Position Vacancy - Other | May 2021 | \$ 80.00 |
| Position Vacancy - Counselors | May 2021 | \$ 3,937.00 |

Total Withholdings: \$ 4,017.00

| Total amount to be paid: | | | | | \$ 30,644.00 |
|--------------------------|-------|-------|------|------|--------------|
| Lonestar Coding | Index | PCA | AOBJ | AY | Amount |
| | 76970 | 63300 | 8483 | FY21 | \$30,644.00 |

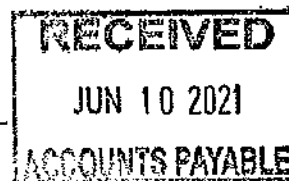
Attachments
File

REFUSE INTEREST MT ✓

cc: Michael Bell, Management & Training Corp. Jared Howes, Management & Training Corp.
Jason Diehl, Budget Erica Wehmeyer, Management & Training Corp.
Mary Buasan, Budget

I certify that the attached invoices have been audited for compliance with the currently approved contract prices, are free of mathematical errors, the services / goods were received and correspond in every particular way with the contract under which they were procured, and the invoices are true and unpaid.


Signature & Date 6/10/21



Gist State Jail
3295 Farm to Market 3514
Beaumont, TX 77705
PHONE (409) 727-8400

ATTN: TDCJ - Private Facility Contract Monitoring /
Oversight Division
Two Financial Plaza Suite 310
Huntsville, TX 77340

REMT TO: MANAGEMENT & TRAINING CORP.
500 N. Marketplace Dr.
P.O. Box 10
Centerville UT 84014

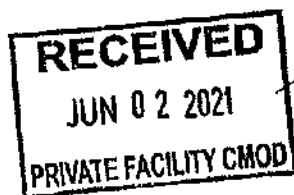
Inv. No. GIST-0521-01
Date: June 01, 2021

Contract 696-PF-18-19-C160

| DESCRIPTION | | AMOUNT |
|--|----------|--------------|
| GIST MANDAYS PER ATTACHED COUNT FOR MAY 2021 | | |
| 3,425 INMATES | \$ 10.12 | \$ 34,661.00 |
| Total | | \$ 34,661.00 |

Remittance Requested by Direct Deposit to:
Management & Training Corporation
ID# 87-0365322
Account# 982730939
Zions Bank
ABA Routing# 124000054

Michael Bell
Michael Bell, Vice President
Region III



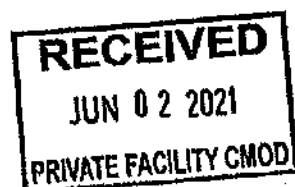
#REF!

MONTHLY BILLING

Inv. No. GIST-0521-01

Date: June 01, 2021

| DAY | INMATE HEAD COUNT | HOSPITAL COUNT | RATE | TOTAL |
|-----------------------|----------------------|-------------------|----------|--------------|
| 5/1/2021 | 103 | | \$ 10.12 | \$ 1,042.36 |
| 5/2/2021 | 103 | | \$ 10.12 | \$ 1,042.36 |
| 5/3/2021 | 103 | | \$ 10.12 | \$ 1,042.36 |
| 5/4/2021 | 101 | | \$ 10.12 | \$ 1,022.12 |
| 5/5/2021 | 116 | | \$ 10.12 | \$ 1,173.92 |
| 5/6/2021 | 115 | | \$ 10.12 | \$ 1,163.80 |
| 5/7/2021 | 112 | | \$ 10.12 | \$ 1,133.44 |
| 5/8/2021 | 112 | | \$ 10.12 | \$ 1,133.44 |
| 5/9/2021 | 112 | | \$ 10.12 | \$ 1,133.44 |
| 5/10/2021 | 113 | | \$ 10.12 | \$ 1,143.56 |
| 5/11/2021 | 113 | | \$ 10.12 | \$ 1,143.56 |
| 5/12/2021 | 110 | | \$ 10.12 | \$ 1,113.20 |
| 5/13/2021 | 110 | | \$ 10.12 | \$ 1,113.20 |
| 5/14/2021 | 109 | | \$ 10.12 | \$ 1,103.08 |
| 5/15/2021 | 109 | | \$ 10.12 | \$ 1,103.08 |
| 5/16/2021 | 109 | | \$ 10.12 | \$ 1,103.08 |
| 5/17/2021 | 114 | | \$ 10.12 | \$ 1,153.68 |
| 5/18/2021 | 113 | | \$ 10.12 | \$ 1,143.56 |
| 5/19/2021 | 116 | | \$ 10.12 | \$ 1,173.92 |
| 5/20/2021 | 115 | | \$ 10.12 | \$ 1,163.80 |
| 5/21/2021 | 114 | | \$ 10.12 | \$ 1,153.68 |
| 5/22/2021 | 114 | | \$ 10.12 | \$ 1,153.68 |
| 5/23/2021 | 114 | | \$ 10.12 | \$ 1,153.68 |
| 5/24/2021 | 116 | | \$ 10.12 | \$ 1,173.92 |
| 5/25/2021 | 113 | | \$ 10.12 | \$ 1,143.56 |
| 5/26/2021 | 112 | | \$ 10.12 | \$ 1,133.44 |
| 5/27/2021 | 110 | | \$ 10.12 | \$ 1,113.20 |
| 5/28/2021 | 106 | | \$ 10.12 | \$ 1,072.72 |
| 5/29/2021 | 106 | | \$ 10.12 | \$ 1,072.72 |
| 5/30/2021 | 106 | | \$ 10.12 | \$ 1,072.72 |
| 5/31/2021 | 106 | | \$ 10.12 | \$ 1,072.72 |
| | 3,425 | 0 | 10.12 | \$ 34,661.00 |
| AVG. | 110 | | | |
| TOTAL MONTHLY BILLING | | | | \$ 34,661.00 |



| PCN # | Position Title | Date Vacated | Sanctions Began | Date Filled | 60/90 Day Pos | Avg. Daily Salary | FTE | Adj. Avg. Daily Salary | May-21 | |
|----------------|----------------|--------------|-----------------|-------------|---------------|-------------------|------|------------------------|-------------|-----------------|
| | | | | | | | | | Days Vacant | Amount Withheld |
| 582001020001 | Office Manager | 03/01/21 | 05/30/21 | | 90 | \$ 80.00 | 1.00 | \$ 80.00 | 1 | \$ 80.00 |
| 1 | SANCTION | | | | | | | | 1 | \$ 80.00 |
| TOTAL SANCTION | | | | | | | | | 1 | \$ 80.00 |

**Compliance Standard 1
Position Vacancy - Counselors
Gist State Jail - May 2021**

| PCN # | Position Title | Date Vacated | Sanctions Began | Date Filled | 90 | Avg | Adj Avg | May-21 | |
|--------------|--|--------------|-----------------|-------------|---------|--------------|------------------|-------------|-----------------|
| | | | | | Day Pos | Daily Salary | Daily FTE Salary | Days Vacant | Amount Withheld |
| 582002030001 | Substance Abuse Counselor II - DWI LOA | 10/26/20 | 02/07/21 | | 104 | \$127.00 | 1.00 \$127.00 | 31 | \$ 3,937.00 |
| 1 | TOTAL SANCTION | | | | | | | 31 | \$ 3,937.00 |
| | TOTAL ADJUSTMENT | | | | | | | 31 | \$ 3,937.00 |

STATE OF TEXAS PURCHASE VOUCHER

Page 001 of 001

| | | | | | | | | | | |
|--|----------------------------------|---|-----------------------------|-----------------------------|---|-------------------------------------|--|----------------|------------|------------------|
| ARCHIVE REFERENCE NO | | AGENCY 696 - ACCOUNTS PAYABLE | | | | | CURRENT DOCUMENT 91055855 | | | |
| | | EFF DATE 08/04/21 | DOC DATE 06/01/18 | DUE DATE 08/07/21 | DOC AGY 696 | DOCUMENT AMOUNT 29,213.64 | | | | |
| VENDOR NO / MC | | REQUESTED PAYMENT DATE | | | PDT | PCC | REQUISITION NO 696-1-PF1819C160- | | | |
| VENDOR NAME / ADDRESS MANAGEMENT & TRAINING CORP P O BOX 10 ****DIRECT DEPOSIT**** CENTERVILLE, UT 84014 | | | | | AGENCY USE TEXAS DEPARTMENT OF CRIMINAL JUST P.O. BOX 4018 HUNTSVILLE, TX 77342 | | | | | |
| SFX | REF DOC - SFX | M | TC | INDEX | PCA | AY | COBJ | AOBJ | AMOUNT | R |
| | APPN | FUND | INVOICE NUMBER | | | DESCRIPTION | | | AGENCY USE | |
| 001 | | 225 76970 63300 21 7325 8483 | | | | | | | | 29,213.64 |
| 13052 | | 0014 GIST-0621-01 GIST FACILITY | | | | | | | | |
| | | | | | | | | | | |
| DATE | DESCRIPTION OF GOODS OR SERVICES | | | | | QTY | UNIT COST | AMOUNT | | |
| 06/30/21 TX GOVT CODE 493.009 AND 501.0931 | | | | | | | | | | |
| | | | | | | | | | | |
| CONTACT NAME | | | | | INVOICE SERVICES | | | (936) 437-6929 | | BJ00369 |
| NAME | | | | | PHONE | | | ENT BY | | |
| I approve this voucher for payment. The above goods or services correspond in every particular with the contract under which they were purchased. The invoice for the goods or services is correct. The payment complies with the General Appropriations Act. | | | | | | | | | | |
| APPROVED: NAME | | | | | TITLE | | | DATE | | |
| APPROVED: NAME | | | | | TITLE | | | DATE | | |

91055855 ✓

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Private Facility Contract Monitoring / Oversight Division
Fiscal Year 2021

TO: Jordan Brooks
 Accounts Payable

FROM: Kandy Dorey
 Accountant IV
 Private Facilities - CMOD

DATE: August 2, 2021

SUBJECT: June 2021
 Management & Training Corp.
 Contract No: 696-PF-18-19-C160
 Invoice Received: 7/8/2021
 Payment Due: 8/7/2021

Enclosed is the invoice per diem payment for Gist Facility.

| Invoice # | Vendor | Man Days | Rate | Total |
|--------------|--------|----------|----------|--------------|
| Gist-0621-01 | MTC | 3,290 | \$ 10.12 | \$ 33,294.80 |

The following adjustments have been made:

| Billing Adjustments | Date | Amount Withheld |
|---------------------------------|--------------|-----------------|
| Position Vacancy - Other | June 2021 | \$ 880.00 |
| Position Vacancy - Counselors | June 2021 | \$ 3,810.00 |
| Reimbursement: Position Vacancy | April 2021 | \$ (2,286.00) |
| Contract Review #2021-01-012 | January 2021 | \$ 757.16 |
| Compliance Standard #5 | May 2021 | \$ 184.00 |
| Compliance Standard #5 | June 2021 | \$ 736.00 |

Total Withholdings: \$ 4,081.16

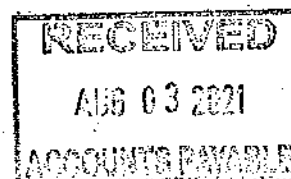
| Total amount to be paid: | | | | | \$ 29,213.64 |
|---------------------------------|---------|---------|--------|------|---------------------|
| Lonestar Coding | Index | PCA | AOBJ | AY | Amount |
| | 76970 ✓ | 63300 ✓ | 8483 ✓ | FY21 | \$29,213.64 ✓ |

Attachments
 File

cc: Michael Bell, Management & Training Corp. Jared Howes, Management & Training Corp.
 Jason Diehl, Budget Erica Wehmeyer, Management & Training Corp.
 Mary Buasan, Budget

I certify that the attached invoices have been audited for compliance with the currently approved contract prices, are free of mathematical errors, the services / goods were received and correspond in every particular way with the contract under which they were procured, and the invoices are true and unpaid.

Kandy Dorey 8/2/21
 Signature & Date



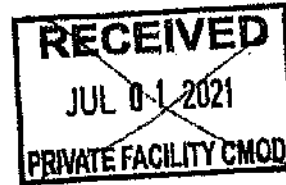
Accurate + Complete

CORRECTED COPY

JUL 08 2021

**PRIVATE FACILITY CMOD
HUNTSVILLE**

Gist State Jail
3295 Farm to Market 3514
Beaumont, TX 77705
PHONE (409) 727-8400



**ATTN: TDCJ - Private Facility Contract Monitoring /
Oversight Division**
Two Financial Plaza Suite 310
Huntsville, TX 77340

RENT TO: MANAGEMENT & TRAINING CORP.
500 N. Marketplace Dr.
P.O. Box 10
Centerville UT 84014

Inv. No. GIST-0621-01
Date: July 01, 2021

Contract 696-PF-18-19-C160

| DESCRIPTION | | AMOUNT |
|---|----------|--------------|
| GIST MANDAYS-PER ATTACHED COUNT FOR JUNE 2021 | | |
| 3,290 INMATES | \$ 10.12 | \$ 33,294.80 |
| Total | | \$ 33,294.80 |

Remittance Requested by Direct Deposit to:
Management & Training Corporation
ID# 87-0365322
Account# 982730939
Zions Bank
ABA Routing# 124000054

Michael Bell
Michael Bell, Vice President
Region III

#REF1

MONTHLY BILLING

Inv. No. GIST-0621-01

Date: July 01, 2021

| DAY | INMATE HEAD COUNT | HOSPITAL COUNT | RATE | TOTAL |
|-----------------------|----------------------|-------------------|----------|--------------|
| 6/1/2021 | 108 | | \$ 10.12 | \$ 1,092.96 |
| 6/2/2021 | 108 | | \$ 10.12 | \$ 1,092.96 |
| 6/3/2021 | 115 | | \$ 10.12 | \$ 1,163.80 |
| 6/4/2021 | 114 | | \$ 10.12 | \$ 1,153.68 |
| 6/5/2021 | 114 | | \$ 10.12 | \$ 1,153.68 |
| 6/6/2021 | 114 | | \$ 10.12 | \$ 1,153.68 |
| 6/7/2021 | 114 | | \$ 10.12 | \$ 1,153.68 |
| 6/8/2021 | 114 | | \$ 10.12 | \$ 1,153.68 |
| 6/9/2021 | 114 | | \$ 10.12 | \$ 1,153.68 |
| 6/10/2021 | 114 | | \$ 10.12 | \$ 1,153.68 |
| 6/11/2021 | 111 | | \$ 10.12 | \$ 1,123.32 |
| 6/12/2021 | 111 | | \$ 10.12 | \$ 1,123.32 |
| 6/13/2021 | 111 | | \$ 10.12 | \$ 1,123.32 |
| 6/14/2021 | 111 | | \$ 10.12 | \$ 1,123.32 |
| 6/15/2021 | 114 | | \$ 10.12 | \$ 1,153.68 |
| 6/16/2021 | 115 | | \$ 10.12 | \$ 1,163.80 |
| 6/17/2021 | 114 | | \$ 10.12 | \$ 1,153.68 |
| 6/18/2021 | 111 | | \$ 10.12 | \$ 1,123.32 |
| 6/19/2021 | 111 | | \$ 10.12 | \$ 1,123.32 |
| 6/20/2021 | 111 | | \$ 10.12 | \$ 1,123.32 |
| 6/21/2021 | 111 | | \$ 10.12 | \$ 1,123.32 |
| 6/22/2021 | 112 | | \$ 10.12 | \$ 1,133.44 |
| 6/23/2021 | 112 | | \$ 10.12 | \$ 1,133.44 |
| 6/24/2021 | 113 | | \$ 10.12 | \$ 1,143.56 |
| 6/25/2021 | 100 | | \$ 10.12 | \$ 1,012.00 |
| 6/26/2021 | 100 | | \$ 10.12 | \$ 1,012.00 |
| 6/27/2021 | 100 | | \$ 10.12 | \$ 1,012.00 |
| 6/28/2021 | 99 | | \$ 10.12 | \$ 1,001.88 |
| 6/29/2021 | 97 | | \$ 10.12 | \$ 981.64 |
| 6/30/2021 | 97 | | \$ 10.12 | \$ 981.64 |
| | 3,290 | 0 | 10.12 | \$ 33,294.80 |
| AVG. | 110 | | | |
| TOTAL MONTHLY BILLING | | | | \$ 33,294.80 |

Original Sanction

Correct Sanction

| PCN # | Position Title | Date Vacated | Sanctions Began | Date Filled | 90 Day Pos | Avg Daily Salary | FTE | Avg Daily Salary | Apr-21 | |
|---------------------|---|--------------|-----------------|-------------|------------|------------------|------|------------------|-------------|-----------------|
| | | | | | | | | | Days Vacant | Amount Withheld |
| 582002030001 | Substance Abuse Counselor II - DWI FMLA | 10/26/20 | 04/18/21 | | 90 | \$127.00 | 1.00 | \$127.00 | 12 | \$ 1,524.00 |
| 1 | TOTAL | | | | | | | | 12 | \$ 1,524.00 |
| Total Reimbursement | | | | | | | | | 18 | \$ 2,286.00 |

| PCN # | Position Title | Date Vacated | Sanctions Began | Date Filled | 90 Day Pos | Avg Daily Salary | Adj Avg Daily Salary | Jun-21 | |
|----------------|---|--------------|-----------------|-------------|------------|------------------|----------------------|-------------|-----------------|
| | | | | | | | | Days Vacant | Amount Withheld |
| 582002030001 | Substance Abuse Counselor II - DWI FMLA | 10/26/20 | 04/18/21 | | 90 | \$127.00 | 1.00 | \$127.00 | 30 \$ 3,810.00 |
| SANCTION | | | | | | | | 30 | \$ 3,810.00 |
| TOTAL SANCTION | | | | | | | | 30 | \$ 3,810.00 |

| PCN # | Position Title | Date Vacated | Sanctions Began | Date Filled | 60/90 Day Pos | Avg Daily Salary | FTE | Adj Avg Daily Salary | Jun-21 | |
|----------------|----------------|--------------|-----------------|-------------|---------------|------------------|------|----------------------|-------------|-----------------|
| | | | | | | | | | Days Vacant | Amount Withheld |
| 582001020001 | Office Manager | 02/01/21 | 05/02/21 | 06/12/21 | 90 | \$ 80.00 | 1.00 | \$ 80.00 | 11 | \$ 880.00 |
| 1 | SANCTION | | | | | | | | 11 | \$ 880.00 |
| TOTAL SANCTION | | | | | | | | | 11 | \$ 880.00 |

Compliance Standard #5
Corrective Action Response
Gist SJ - May 2021

| Contract Review # | Vendor Response Due Date | Vendor Response Actual Recd Date | Vendor Response # of days late | Average Daily Salary | Total Sanction |
|-------------------|--------------------------------|--|--------------------------------------|-------------------------|----------------|
| 2021-01-012 | 05/30/21 | | 1 | \$184.00 | \$184.00 |

| | |
|-------------------------------|-----------------|
| Total Withholding: | \$184.00 |
|-------------------------------|-----------------|

Compliance Standard #5
Corrective Action Response
Gist SJ - June 2021

| Contract Review # | Vendor Response Due Date | Vendor Response Actual Recd Date | Vendor Response # of days late | Average Daily Salary | Total Sanction |
|-------------------|--------------------------|----------------------------------|--------------------------------|----------------------|----------------|
| 2021-01-012 | 05/30/21 | 06/04/21 | 4 | \$184.00 | \$736.00 |

| | |
|---------------------------|-----------------|
| Total Withholding: | \$736.00 |
|---------------------------|-----------------|

Contract Review
Gist State Jail - January 2021

| Contract Review # | Finding | Over Ratio | Per Diem | Total Sanction |
|-------------------|---------------------------------------|------------|----------|----------------|
| 2021-01-012 | C.5.G Staffing Caseload Ratios | 18 | \$10.12 | \$182.16 |
| 2021-01-012 | C.5.G Staffing Required Documentation | 3 | \$25.00 | \$75.00 |
| 2021-01-012 | C.5.G Staffing PIAR | 1 | \$500.00 | \$500.00 |

| | |
|---------------------|-----------------|
| Total | \$757.16 |
| Withholding: | |

STATE OF TEXAS PURCHASE VOUCHER

Page 001 of 001

| ARCHIVE REFERENCE NO | | AGENCY 696 - ACCOUNTS PAYABLE | | | | | CURRENT DOCUMENT 92036885 | | | | | | | | | | | |
|--|-----------------------------------|----------------------------------|-----------|----------------------|--|----------------|-------------------------------------|------------------------------|------|----------------------------------|-----|-----------|--------|----------|-----------------------------------|--|--|--|
| EFF DATE 09/08/21 | | DOC DATE 06/01/18 | | DUE DATE 09/12/21 | | DOC AGY 696 | | DOCUMENT AMOUNT 29,803.32 | | | | | | | | | | |
| VENDOR NO / MC | | REQUESTED PAYMENT DATE | | | PDT | PCC | REQUISITION NO 696-1-PF1819C160- | | | | | | | | | | | |
| VENDOR NAME / ADDRESS MANAGEMENT & TRAINING CORP P O BOX 10 ****DIRECT DEPOSIT**** CENTERVILLE, UT 84014 | | | | | AGENCY USE TEXAS DEPARTMENT OF CRIMINAL JUST P.O. BOX 4018 HUNTSVILLE, TX 77342 | | | | | | | | | | | | | |
| SPX | REF DOC - SPX | M | TC | INDEX | PCA | AY | COBJ | AOBJ | | | | | | | | | | |
| | AMOUNT | | | | | | | R | | | | | | | | | | |
| APPN | FUND | INVOICE NUMBER | | | DESCRIPTION | | | AGENCY USE | | | | | | | | | | |
| 001 | | 225 76970 63300 21 7325 8483 | | | | | | 29,803.32 | | | | | | | | | | |
| 13052 | 0014 | GIST-0721-01 | | | GIST FACILITY | | | | | | | | | | | | | |
| <table border="1"> <thead> <tr> <th>DATE</th> <th>DESCRIPTION OF GOODS OR SERVICES</th> <th>QTY</th> <th>UNIT COST</th> <th>AMOUNT</th> </tr> </thead> <tbody> <tr> <td>07/31/21</td> <td>TX GOVT CODE 493.009 AND 501.0931</td> <td></td> <td></td> <td></td> </tr> </tbody> </table> | | | | | | | | | DATE | DESCRIPTION OF GOODS OR SERVICES | QTY | UNIT COST | AMOUNT | 07/31/21 | TX GOVT CODE 493.009 AND 501.0931 | | | |
| DATE | DESCRIPTION OF GOODS OR SERVICES | QTY | UNIT COST | AMOUNT | | | | | | | | | | | | | | |
| 07/31/21 | TX GOVT CODE 493.009 AND 501.0931 | | | | | | | | | | | | | | | | | |
| CONTACT NAME | | INVOICE SERVICES | | | (936) 437-6929 | | BJ00369 | | | | | | | | | | | |
| NAME | | PHONE | | | ENT BY | | | | | | | | | | | | | |
| <p>I approve this voucher for payment. The above goods or services correspond in every particular with the contract under which they were purchased. The invoice for the goods or services is correct.</p> <p>The payment complies with the General Appropriations Act.</p> | | | | | | | | | | | | | | | | | | |
| APPROVED: NAME | | TITLE | | | DATE | | | | | | | | | | | | | |
| APPROVED: NAME | | TITLE | | | DATE | | | | | | | | | | | | | |

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Private Facility Contract Monitoring / Oversight Division
Fiscal Year 2021

92036885

TO: Jordan Brooks
Accounts Payable

FROM: Kandy Dorey
Accountant IV
Private Facilities - CMOD

DATE: September 1, 2021

SUBJECT: July 2021
Management & Training Corp.
Contract No: 696-PF-18-19-C160
Invoice Received: 8/13/2021
Payment Due: 9/12/2021

Enclosed is the invoice per diem payment for Gist Facility.

| Invoice # | Vendor | Man Days | Rate | Total |
|--------------|--------|----------|----------|--------------|
| Gist-0721-01 | MTC | 3,111 | \$ 10.12 | \$ 31,483.32 |

The following adjustments have been made:

| Billing Adjustments | Date | Amount Withheld |
|---------------------------------|------------|-----------------|
| Position Vacancy - Other | May 2021 | \$ 2,240.00 |
| Reimbursement: Position Vacancy | April 2021 | \$ (560.00) |

Total Withholdings: \$ 1,680.00

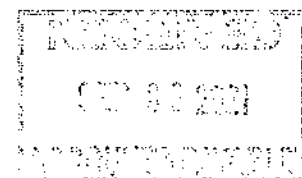
| | | | | | |
|--------------------------|-------|-------|------|------|--------------|
| Total amount to be paid: | | | | | \$ 29,803.32 |
| Lonestar Coding | Index | PCA | AOBJ | AV | Amount |
| | 76970 | 63300 | 8483 | FY21 | \$29,803.32 |

Attachments
File

cc: Michael Bell, Management & Training Corp. Pamela Barker, Management & Training Corp.
Jason Diehl, Budget Erica Wehmeyer, Management & Training Corp.
Mary Buasan, Budget

I certify that the attached invoices have been audited for compliance with the currently approved contract prices, are free of mathematical errors, the services / goods were received and correspond in every particular way with the contract under which they were procured, and the invoices are true and unpaid.

Kandy Dorey 9/1/21
Signature & Date



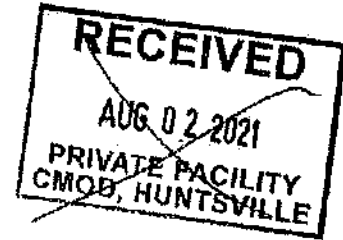
Accurate & Complete

CORRECTED COPY

AUG 13 2021

**PRIVATE FACILITY CMOB
HUNTSVILLE**

Gist State Jail
3295 Farm to Market 3514
Beaumont, TX 77705
PHONE (409) 727-8400



**ATTN: TDCJ - Private Facility Contract Monitoring /
Oversight Division
Two Financial Plaza Suite 310
Huntsville, TX 77340**

**REMT TO: MANAGEMENT & TRAINING CORP.
500 N. Marketplace Dr.
P.O. Box 10
Centerville UT 84014**

**Inv. No. GIST-0721-01
Date: August 02, 2021**

Contract 696-PF-18-19-C160

| DESCRIPTION | | AMOUNT |
|---|------------|----------------|
| GIST MANDAYS PER ATTACHED COUNT FOR JULY 2021 | | |
| ✓3,111 INMATES | \$ 10.12 ✓ | \$ 31,483.32 |
| Total | | \$ 31,483.32 ✓ |

Remittance Requested by Direct Deposit to:
Management & Training Corporation
ID# 87-0365322
Account# 982730939
Zions Bank
ABA Routing# 124000054

Michael Bell ✓
**Michael Bell, Vice President
Region III**

0-24-02

#REF!

MONTHLY BILLING

Inv. No. GIST-0721-01

Date: August 02, 2021

RECEIVED

AUG 02 2021

PRIVATE FACILITY
CMOD, HUNTSVILLE

| DAY | INMATE HEAD COUNT | HOSPITAL COUNT | RATE | TOTAL |
|-----------|----------------------|-------------------|----------|--------------|
| 7/1/2021 | 98 | | \$ 10.12 | \$ 971.52 |
| 7/2/2021 | 96 | | \$ 10.12 | \$ 971.52 |
| 7/3/2021 | 96 | | \$ 10.12 | \$ 971.52 |
| 7/4/2021 | 96 | | \$ 10.12 | \$ 971.52 |
| 7/5/2021 | 93 | | \$ 10.12 | \$ 941.16 |
| 7/6/2021 | 95 | | \$ 10.12 | \$ 961.40 |
| 7/7/2021 | 98 | | \$ 10.12 | \$ 991.76 |
| 7/8/2021 | 96 | | \$ 10.12 | \$ 971.52 |
| 7/9/2021 | 100 | | \$ 10.12 | \$ 1,012.00 |
| 7/10/2021 | 100 | | \$ 10.12 | \$ 1,012.00 |
| 7/11/2021 | 100 | | \$ 10.12 | \$ 1,012.00 |
| 7/12/2021 | 98 | | \$ 10.12 | \$ 991.76 |
| 7/13/2021 | 103 | | \$ 10.12 | \$ 1,042.36 |
| 7/14/2021 | 100 | | \$ 10.12 | \$ 1,012.00 |
| 7/15/2021 | 102 | | \$ 10.12 | \$ 1,032.24 |
| 7/16/2021 | 98 | | \$ 10.12 | \$ 991.76 |
| 7/17/2021 | 98 | | \$ 10.12 | \$ 991.76 |
| 7/18/2021 | 98 | | \$ 10.12 | \$ 991.76 |
| 7/19/2021 | 94 | | \$ 10.12 | \$ 951.28 |
| 7/20/2021 | 102 | | \$ 10.12 | \$ 1,032.24 |
| 7/21/2021 | 105 | | \$ 10.12 | \$ 1,062.60 |
| 7/22/2021 | 105 | | \$ 10.12 | \$ 1,062.60 |
| 7/23/2021 | 101 | | \$ 10.12 | \$ 1,022.12 |
| 7/24/2021 | 101 | | \$ 10.12 | \$ 1,022.12 |
| 7/25/2021 | 101 | | \$ 10.12 | \$ 1,022.12 |
| 7/26/2021 | 103 | | \$ 10.12 | \$ 1,042.36 |
| 7/27/2021 | 103 | | \$ 10.12 | \$ 1,042.36 |
| 7/28/2021 | 104 | | \$ 10.12 | \$ 1,052.48 |
| 7/29/2021 | 109 | | \$ 10.12 | \$ 1,103.08 |
| 7/30/2021 | 110 | | \$ 10.12 | \$ 1,113.20 |
| 7/31/2021 | 110 | | \$ 10.12 | \$ 1,113.20 |
| 3,111 | | 0 | 10.12 | \$ 31,483.32 |

AVG.

100

TOTAL MONTHLY BILLING

\$ 31,483.32

**Compliance Standard 1
Position Vacancy - Others
Gist State Jail - February 2021**

| PCN # | Position Title | Date Vacated | Sanctions Began | Date Filled | 60/90 Day Pos | Avg Daily Salary | Adj Avg Daily FTE Salary | Feb-21 Days Vacant | Amount Withheld |
|--------------|----------------------|--------------|-----------------|-------------|---------------|------------------|--------------------------|--------------------|-----------------|
| 582001020001 | Office Manager - LOA | 11/09/20 | 02/21/21 | | 104 | \$ 80.00 | 1.00 \$ 80.00 | 7 | \$ 560.00 |
| 1 | SANCTION | | | | | | | 7 | \$ 560.00 |
| ORIGINAL | TOTAL SANCTION | | | | | | | 7 | \$ 560.00 |

| Corrected | | | | | | | | | |
|--------------|----------------------|--------------|-----------------|-------------|---------------|------------------|--------------------------|--------------------|-----------------|
| PCN # | Position Title | Date Vacated | Sanctions Began | Date Filled | 60/90 Day Pos | Avg Daily Salary | Adj Avg Daily FTE Salary | Feb-21 Days Vacant | Amount Withheld |
| 582001020001 | Office Manager - LOA | 02/01/21 | 05/02/21 | | 90 | \$ 80.00 | 1.00 \$ 80.00 | - | \$ - |
| 1 | SANCTION | | | | | | | - | \$ - |
| CORRECTED | TOTAL SANCTION | | | | | | | - | \$ - |

Reimbursement Amount: \$ (560.00)

**Compliance Standard 1
Position Vacancy - Others
Gst State Jail - May 2021**

| PCN # | Position Title | Date Vacated | Sanctions Began | Date Filled | 60/90 | Avg | Adj Avg | May-21 | |
|-------------------------|----------------|--------------|-----------------|-------------|---------|--------------|------------|-------------|-----------------|
| | | | | | Day Pos | Daily Salary | FTE Salary | Days Vacant | Amount Withheld |
| 582001020001 | Office Manager | 03/01/21 | 05/30/21 | | 90 | \$ 80.00 | 1.00 | \$ 80.00 | 1 \$ 80.00 |
| 1 SANCTION | | | | | | | | | 1 \$ 80.00 |
| ORIGINAL TOTAL SANCTION | | | | | | | | | 1 \$ 80.00 |

| CORRECTED | | | | | | | | | |
|--------------------------|----------------|--------------|-----------------|-------------|---------|--------------|------------|-------------|-----------------|
| PCN # | Position Title | Date Vacated | Sanctions Began | Date Filled | 60/90 | Avg | Adj Avg | May-21 | |
| | | | | | Day Pos | Daily Salary | FTE Salary | Days Vacant | Amount Withheld |
| 582001020001 | Office Manager | 02/01/21 | 05/02/21 | | 90 | \$ 80.00 | 1.00 | \$ 80.00 | 29 \$ 2,320.00 |
| 1 SANCTION | | | | | | | | | 29 \$ 2,320.00 |
| CORRECTED TOTAL SANCTION | | | | | | | | | 29 \$ 2,320.00 |

Adjustment Amount: \$ 2,240.00

STATE OF TEXAS PURCHASE VOUCHER

Page 001 of 001

| | | | | | | | | |
|---|----------------------------------|---|-----------------------------|-----------------------------|--|-------------------------------------|--|--------|
| ARCHIVE REFERENCE NO | | AGENCY 696 - ACCOUNTS PAYABLE | | | | | CURRENT DOCUMENT 92041876 | |
| | | EFF DATE 10/27/21 | DOC DATE 06/01/18 | DUE DATE 10/01/21 | DOC AGY 696 | DOCUMENT AMOUNT 27,756.90 | | |
| VENDOR NO / MC | | REQUESTED PAYMENT DATE | | | PDT | PCC | REQUISITION NO 696-1-PF1819C160- | |
| VENDOR NAME / ADDRESS MANAGEMENT & TRAINING CORP P O BOX 10 ****DIRECT DEPOSIT**** CENTERVILLE, UT 84014 | | | | | AGENCY USE TEXAS DEPARTMENT OF CRIMINAL JUST P.O. BOX 4018 HUNTSVILLE, TX 77342 | | | |
| SFX | REF DOC - SFX | M | TC | INDEX | PCA | AY | COBJ | AOBJ |
| | APPN | FUND | INVOICE NUMBER | | DESCRIPTION | | | AMOUNT |
| | | | | | | | | |
| 001 | | 225 76970 63300 21 7325 8483 | | | | | 27,756.90 | |
| 13052 0014 GIST-0821-01 | | GIST FACILITY | | | | | | |
| | | | | | | | | |
| DATE | DESCRIPTION OF GOODS OR SERVICES | | | | | QTY | UNIT COST | AMOUNT |
| 08/31/21 TX GOVT CODE 493.009 AND 501.0931 | | | | | | | | |
| | | | | | | | | |
| CONTACT | | INVOICE SERVICES | | | (936) 437-6929 | | BJ00369 | |
| NAME | | | | | PHONE | | ENT BY | |
| <p>I approve this voucher for payment. The above goods or services correspond in every particular with the contract under which they were purchased. The invoice for the goods or services is correct.</p> <p>The payment complies with the General Appropriations Act.</p> | | | | | | | | |
| APPROVED: | | NAME | | | TITLE | | DATE | |
| APPROVED: | | NAME | | | TITLE | | DATE | |

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Private Facility Contract Monitoring / Oversight Division
Fiscal Year 2021

92041876

TO: Jordan Brooks
Accounts Payable

FROM: Kandy Dorey
Accountant IV
Private Facilities - CMOD

DATE: October 18, 2021

SUBJECT: August 2021
Management & Training Corp.
Contract No: 696-PF-18-19-C160
Invoice Received: 9/1/2021
Payment Due: 10/1/2021

Enclosed is the invoice per diem payment for Gist Facility.

| Invoice # | Vendor | Man Days | Rate | Total |
|--------------|--------|----------|----------|--------------|
| Gist-0821-01 | MTC | 3,245 | \$ 10.12 | \$ 32,839.40 |

The following adjustments have been made:

| Billing Adjustments | Date | Amount Withheld |
|----------------------------------|-----------|-----------------|
| Compliance Standard #6 | July 2021 | \$ 5,000.00 |
| Pre-employment Background Checks | FY2021 | \$ 82.50 |

Total Withholdings: \$ 5,082.50

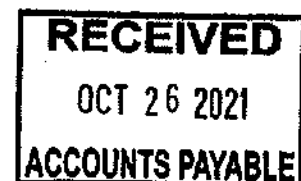
| | | | | | |
|--------------------------|-------|-------|------|------|--------------|
| Total amount to be paid: | | | | | \$ 27,756.90 |
| Lonestar Coding | Index | PCA | AOBJ | AY | Amount |
| | 76970 | 63300 | 8483 | FY21 | \$27,756.90 |

Attachments
File

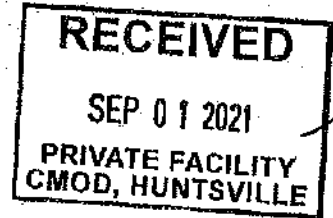
cc: Michael Bell, Management & Training Corp. Pamela Barker, Management & Training Corp.
Eugene Stroud, Budget Erica Wehmeyer, Management & Training Corp.
Mary Buasan, Budget

I certify that the attached invoices have been audited for compliance with the currently approved contract prices, are free of mathematical errors, the services / goods were received and correspond in every particular way with the contract under which they were procured, and the invoices are true and unpaid.

Kandy Dorey 10/18/21
Signature & Date



REFUSE INTEREST



Gist State Jail
3295 Farm to Market 3514
Beaumont, TX 77705
PHONE (409) 727-8400

ATTN: TDCJ - Private Facility Contract Monitoring /
Oversight Division
Two Financial Plaza Suite 310
Huntsville, TX 77340

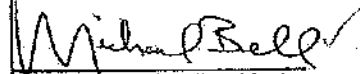
REMT TO: MANAGEMENT & TRAINING CORP.
500 N. Marketplace Dr.
P.O. Box 10
Centerville UT 84014

Inv. No. GIST-0821-01
Date: September 01, 2021

Contract 696-PF-18-19-C160

| DESCRIPTION | | AMOUNT |
|---|----------|----------------|
| GIST MANDAYS PER ATTACHED COUNT FOR AUGUST 2021 | | |
| ✓ 3,245 INMATES | \$ 10.12 | \$ 32,839.40 ✓ |
| Total | | \$ 32,839.40 |

Remittance Requested by Direct Deposit to:
Management & Training Corporation
ID# 87-0365322
Account# 982730939
Zions Bank
ABA Routing# 124000054


Michael Bell, Vice President
Region III

3295
727-8400

#REFI

MONTHLY BILLING

Inv. No. GIST-0821-01

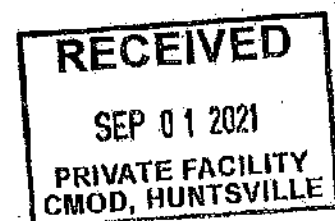
Date: September 01, 2021

| DAY | INMATE HEAD COUNT | HOSPITAL COUNT | RATE | TOTAL |
|-----------|----------------------|-------------------|----------|--------------|
| 8/1/2021 | 110 | | \$ 10.12 | \$ 1,113.20 |
| 8/2/2021 | 105 | | \$ 10.12 | \$ 1,062.60 |
| 8/3/2021 | 106 | | \$ 10.12 | \$ 1,072.72 |
| 8/4/2021 | 107 | | \$ 10.12 | \$ 1,082.84 |
| 8/5/2021 | 105 | | \$ 10.12 | \$ 1,062.60 |
| 8/6/2021 | 104 | | \$ 10.12 | \$ 1,052.48 |
| 8/7/2021 | 104 | | \$ 10.12 | \$ 1,052.48 |
| 8/8/2021 | 104 | | \$ 10.12 | \$ 1,052.48 |
| 8/9/2021 | 105 | | \$ 10.12 | \$ 1,062.60 |
| 8/10/2021 | 105 | | \$ 10.12 | \$ 1,062.60 |
| 8/11/2021 | 103 | | \$ 10.12 | \$ 1,042.36 |
| 8/12/2021 | 110 | | \$ 10.12 | \$ 1,113.20 |
| 8/13/2021 | 107 | | \$ 10.12 | \$ 1,082.84 |
| 8/14/2021 | 107 | | \$ 10.12 | \$ 1,082.84 |
| 8/15/2021 | 107 | | \$ 10.12 | \$ 1,082.84 |
| 8/16/2021 | 105 | | \$ 10.12 | \$ 1,062.60 |
| 8/17/2021 | 105 | | \$ 10.12 | \$ 1,062.60 |
| 8/18/2021 | 105 | | \$ 10.12 | \$ 1,062.60 |
| 8/19/2021 | 105 | | \$ 10.12 | \$ 1,062.60 |
| 8/20/2021 | 107 | | \$ 10.12 | \$ 1,082.84 |
| 8/21/2021 | 107 | | \$ 10.12 | \$ 1,082.84 |
| 8/22/2021 | 107 | | \$ 10.12 | \$ 1,082.84 |
| 8/23/2021 | 107 | | \$ 10.12 | \$ 1,082.84 |
| 8/24/2021 | 107 | | \$ 10.12 | \$ 1,082.84 |
| 8/25/2021 | 107 | | \$ 10.12 | \$ 1,082.84 |
| 8/26/2021 | 104 | | \$ 10.12 | \$ 1,052.48 |
| 8/27/2021 | 98 | | \$ 10.12 | \$ 991.76 |
| 8/28/2021 | 98 | | \$ 10.12 | \$ 991.76 |
| 8/29/2021 | 98 | | \$ 10.12 | \$ 991.76 |
| 8/30/2021 | 98 | | \$ 10.12 | \$ 991.76 |
| 8/31/2021 | 98 | | \$ 10.12 | \$ 991.76 |
| | 3,245 | 0 | 10.12 | \$ 32,839.40 |

AVG. 105

TOTAL MONTHLY BILLING

\$ 32,839.40



Texas Department of Criminal Justice
Pre-Employment Background Checks
September 2020 - August 2021

| Facility | Gist |
|----------|------|
|----------|------|

| Name | Total |
|-------------------------|----------|
| Benoit, Melinda | \$ 16.50 |
| Cormier, Jerri N | \$ 16.50 |
| Pitre, Evette | \$ 16.50 |
| Riedel, Amber Elizabeth | \$ 16.50 |
| Trahan, Lisa Renee | \$ 16.50 |
| Grand Total | \$ 82.50 |

**Compliance Standard #6
Unresolved Findings
Gist State Jail - July 2021**

| Contract Review # | Finding # | Vendor Resolution Due Date | Vendor Resolution Actual Recd Date | Average Daily Salary | Total Sanction |
|-------------------|-----------|----------------------------------|---|----------------------|----------------|
| 2021-01-012 | #1 | 07/15/21 | 08/30/21 | \$184.00 | \$2,944.00 |
| 2021-01-012 | #2 | 07/15/21 | 08/30/21 | \$184.00 | \$2,944.00 |
| 2021-01-012 | #3 | 07/15/21 | 08/30/21 | \$184.00 | \$2,944.00 |

| | |
|---------------------------|--------------------|
| Total Withholding: | \$ 8,832.00 |
|---------------------------|--------------------|

| | |
|------------------------------------|--------------------|
| Adjusted Total Withholding: | \$ 5,000.00 |
|------------------------------------|--------------------|

Page 001 of 001

LNSTR-008-TE(2/93)

92043793✓

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Private Facility Contract Monitoring / Oversight Division
Fiscal Year 2022

TO: Dustin Hurst
Accounts Payable

FROM: Melody Miethe *MM*
Accountant III
Private Facilities - CMOD

DATE: November 29, 2021

SUBJECT: September 2021 ✓
Management & Training Corp.
Contract No: 696-PF-18-19-C160 ✓
Invoice Received: 10/4/2021 ✓
Payment Due: 11/3/2021 ✓

Enclosed is the invoice per diem payment for *Gist Facility*.

| Invoice # | Vendor | Man Days | Rate | Total |
|----------------|--------|----------|------------|-----------------|
| Gist-0921-01 ✓ | MTC | ✓ 2,976 | \$ ✓ 10.23 | \$ 30,444.48 ✓✓ |

The following adjustments have been made:

| Billing Adjustments | Date | Amount Withheld |
|------------------------------|-----------|-----------------|
| Contract Review #2021-07-027 | July 2021 | \$ 600.00 ✓ |

Total Withholdings: \$ 600.00

| Total amount to be paid: | | | | | \$ 29,844.48 ✓ |
|---------------------------------|---------|---------|--------|--------|-----------------------|
| Lonestar Coding | Index | PCA | AOBJ | AY | Amount |
| | 76970 ✓ | 63300 ✓ | 8483 ✓ | FY22 ✓ | \$29,844.48 ✓ |

Attachments
File

cc: Michael Bell, MTC
Jason Diehl, Budget
Mary Buasan, Budget

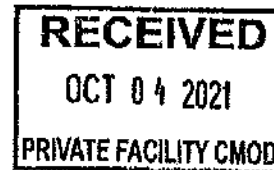
Pamela Barker, Management & Training Corp.
Erica Wehmeyer, Management & Training Corp.
Victor Joslin, Management & Training Corp.

I certify that the attached invoices have been audited for compliance with the currently approved contract prices, are free of mathematical errors, the services / goods were received and correspond in every particular way with the contract under which they were procured, and the invoices are true and unpaid.

Melody Miethe 11/29/21 ✓
Signature & Date

REFUSE INTEREST *ML* ✓

Gist State Jail
3295 Farm to Market 3514
Beaumont, TX 77705
PHONE (409) 727-8400



ATTN: TDCJ - Private Facility Contract Monitoring /
Oversight Division
Two Financial Plaza Suite 310
Huntsville, TX 77340

REMT TO: MANAGEMENT & TRAINING CORP.
500 N. Marketplace Dr.
P.O. Box 10
Centerville UT 84014

Inv. No. GIST-0921-01
Date: October 01, 2021

Contract 696-PF-18-19-C180

| DESCRIPTION | AMOUNT |
|---|--------------|
| GIST MAN DAYS PER ATTACHED COUNT FOR SEPTEMBER 2021 2,976 INMATES \$ 10.23 | \$ 30,444.48 |
| Total | \$ 30,444.48 |

Remittance Requested by Direct Deposit to:
Management & Training Corporation
ID# 87-0365322
Account# 982730939
Zions Bank
ABA Routing# 124000054

Michael Bell
Michael Bell, Vice President
Region III

MM
11/04/2021

#REF!

MONTHLY BILLING

Inv. No. GIST-0821-01

Date: October 01, 2021

| DAY | INMATE HEAD COUNT | HOSPITAL COUNT | RATE | TOTAL |
|-----------------------|----------------------|-------------------|----------|------------------|
| 9/1/2021 | 96 | | \$ 10.23 | \$ 982.08 |
| 9/2/2021 | 99 | | \$ 10.23 | \$ 1,012.77 |
| 9/3/2021 | 94 | | \$ 10.23 | \$ 961.62 |
| 9/4/2021 | 84 | | \$ 10.23 | \$ 961.62 |
| 9/5/2021 | 94 | | \$ 10.23 | \$ 961.62 |
| 9/6/2021 | 94 | | \$ 10.23 | \$ 961.62 |
| 9/7/2021 | 93 | | \$ 10.23 | \$ 951.39 |
| 9/8/2021 | 92 | | \$ 10.23 | \$ 941.16 |
| 9/9/2021 | 90 | | \$ 10.23 | \$ 920.70 |
| 9/10/2021 | 90 | | \$ 10.23 | \$ 920.70 |
| 9/11/2021 | 90 | | \$ 10.23 | \$ 920.70 |
| 9/12/2021 | 90 | | \$ 10.23 | \$ 920.70 |
| 9/13/2021 | 98 | | \$ 10.23 | \$ 1,002.54 |
| 9/14/2021 | 97 | | \$ 10.23 | \$ 992.31 |
| 9/15/2021 | 101 | | \$ 10.23 | \$ 1,033.23 |
| 9/16/2021 | 100 | | \$ 10.23 | \$ 1,023.00 |
| 9/17/2021 | 98 | | \$ 10.23 | \$ 1,002.54 |
| 9/18/2021 | 98 | | \$ 10.23 | \$ 1,002.54 |
| 9/19/2021 | 98 | | \$ 10.23 | \$ 1,002.54 |
| 9/20/2021 | 98 | | \$ 10.23 | \$ 1,002.54 |
| 9/21/2021 | 101 | | \$ 10.23 | \$ 1,033.23 |
| 9/22/2021 | 107 | | \$ 10.23 | \$ 1,094.61 |
| 9/23/2021 | 106 | | \$ 10.23 | \$ 1,084.38 |
| 9/24/2021 | 105 | | \$ 10.23 | \$ 1,074.15 |
| 9/25/2021 | 105 | | \$ 10.23 | \$ 1,074.15 |
| 9/26/2021 | 105 | | \$ 10.23 | \$ 1,074.15 |
| 9/27/2021 | 111 | | \$ 10.23 | \$ 1,135.53 |
| 9/28/2021 | 111 | | \$ 10.23 | \$ 1,135.53 |
| 9/29/2021 | 109 | | \$ 10.23 | \$ 1,115.07 |
| 9/30/2021 | 112 | | \$ 10.23 | \$ 1,145.76 |
| | 2,976 | 0 | 10.23 | \$ 30,444.48 |
| AVG. | 99 | | | |
| TOTAL MONTHLY BILLING | | | \$ | <u>30,444.48</u> |

Compliance Standard #13
Contract Review
Gist State Jail - July 2021

| Contract Review # | Finding | Total Over Caseload | Per Diem | Total Sanction |
|-------------------|--|---------------------|----------|----------------|
| 2021-07-027 | Finding #1 Contractor does not maintain Counselor to Inmate Caseload \geq 25 | 3 | \$200.00 | \$600.00 |

| | |
|---------------------|-----------------|
| Total | \$600.00 |
| Withholding: | |

STATE OF TEXAS PURCHASE VOUCHER

Page 001 of 001

| ARCHIVE REFERENCE NO | | AGENCY 696 - ACCOUNTS PAYABLE | | | | | | CURRENT DOCUMENT 92045367 | | | | | | | | | | | | |
|---|----------------------------------|---|-----------------------------|-----------------------------|---|-------------------------------------|--|-------------------------------------|--------|---|------|----------------------------------|-----|-----------|--------|---|--|--|--|--|
| | | EFF DATE 01/06/22 | DOC DATE 06/01/18 | DUE DATE 12/02/21 | DOC AGY 696 | DOCUMENT AMOUNT 33,357.78 | | | | | | | | | | | | | | |
| VENDOR NO / MC | | REQUESTED PAYMENT DATE | | | PDT | PCC | REQUISITION NO 696-2-PF1819C160- | | | | | | | | | | | | | |
| VENDOR NAME / ADDRESS MANAGEMENT & TRAINING CORP P O BOX 10 ****DIRECT DEPOSIT**** CENTERVILLE, UT 84014 | | | | | AGENCY USE TEXAS DEPARTMENT OF CRIMINAL JUST P.O. BOX 4018 HUNTSVILLE, TX 77342 | | | | | | | | | | | | | | | |
| SFX | REF DOC - SFX | M | TC | INDEX | PCA | AY | COBJ | AOBJ | AMOUNT | R | | | | | | | | | | |
| | APPN | FUND | INVOICE NUMBER | | DESCRIPTION | | | AGENCY USE | | | | | | | | | | | | |
| <div style="display: flex; justify-content: space-between;"> 001 225 76970 63300 22 7325 8483 33,357.78 </div> <div style="display: flex; justify-content: space-between;"> 13052 0014 GIST-1021-01 GIST FACILITY MTC </div> | | | | | | | | | | | | | | | | | | | | |
| <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>DATE</th> <th>DESCRIPTION OF GOODS OR SERVICES</th> <th>QTY</th> <th>UNIT COST</th> <th>AMOUNT</th> </tr> </thead> <tbody> <tr> <td colspan="5">10/31/21 TX GOVT CODE 493.009 AND 501.0931</td> </tr> </tbody> </table> | | | | | | | | | | | DATE | DESCRIPTION OF GOODS OR SERVICES | QTY | UNIT COST | AMOUNT | 10/31/21 TX GOVT CODE 493.009 AND 501.0931 | | | | |
| DATE | DESCRIPTION OF GOODS OR SERVICES | QTY | UNIT COST | AMOUNT | | | | | | | | | | | | | | | | |
| 10/31/21 TX GOVT CODE 493.009 AND 501.0931 | | | | | | | | | | | | | | | | | | | | |
| CONTACT | | INVOICE SERVICES | | | | (936) 437-6929 | | HD00219 | | | | | | | | | | | | |
| NAME | | PHONE | | | | EXT BY | | | | | | | | | | | | | | |
| <p>I approve this voucher for payment. The above goods or services correspond in every particular with the contract under which they were purchased. The invoice for the goods or services is correct.</p> <p>The payment complies with the General Appropriations Act.</p> | | | | | | | | | | | | | | | | | | | | |
| APPROVED: | | NAME | | | | TITLE | | DATE | | | | | | | | | | | | |
| APPROVED: | | NAME | | | | TITLE | | DATE | | | | | | | | | | | | |

92045367

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Private Facility Contract Monitoring / Oversight Division
Fiscal Year 2022

TO: Dustin Hurst
Accounts Payable

DATE: January 5, 2022

FROM: Melody Miethe
Accountant III
Private Facilities - CMOD

SUBJECT: October 2021
Management & Training Corp.
Contract No: 696-PF-18-19-C160
Invoice Received: 11/2/2021
Payment Due: 12/2/2021

Enclosed is the invoice per diem payment for Gist Facility.

| Invoice # | Vendor | Mon/Days | Rate | Total |
|--------------|--------|----------|----------|--------------|
| Gist-1021-01 | MTC | 3,286 | \$ 10.23 | \$ 33,615.78 |

The following adjustments have been made:

| Billing Adjustments | Date | Amount Withheld |
|-------------------------------|--------------|-----------------|
| Position Vacancy - Counselors | October 2021 | \$ 258.00 |

Total Withholdings: \$ 258.00

| Total amount to be paid: | | | | | \$ 33,357.78 |
|--------------------------|-------|------|------|-------------|--------------|
| Index | PCA | AOBJ | AY | Amount | |
| Lonestar Coding | | | | | |
| 76970 | 63300 | 8483 | FY22 | \$33,357.78 | |

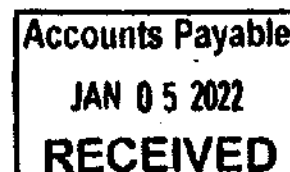
Attachments
File

cc: Michael Bell, MTC
Jason Diehl, Budget
Mary Buasan, Budget

Pamela Barker, Management & Training Corp.
Erica Wehmeyer, Management & Training Corp.
Victor Joslin, Management & Training Corp.

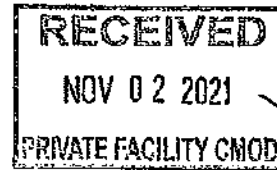
I certify that the attached invoices have been audited for compliance with the currently approved contract prices, are free of mathematical errors, the services / goods were received and correspond in every particular way with the contract under which they were procured, and the invoices are true and unpaid.

Melody Miethe 1/5/22
Signature & Date



REFUSE INTEREST MI-1

Gist State Jail
3295 Farm to Market 3514
Beaumont, TX 77705
PHONE (409) 727-8400



ATTN: TDCJ - Private Facility Contract Monitoring /
Oversight Division
Two Financial Plaza Suite 310
Huntsville, TX 77340

REMT TO: MANAGEMENT & TRAINING CORP.
500 N. Marketplace Dr.
P.O. Box 10
Centerville UT 84014

Inv. No. GIST-1021-01
Date: November 01, 2021

Contract 696-PF-18-19-C160

| DESCRIPTION | | AMOUNT |
|---|----------|--------------|
| GIST MANDAYS PER ATTACHED COUNT FOR OCTOBER 2021 3,286 INMATES | \$ 10.23 | \$ 33,615.78 |
| Total | | \$ 33,615.78 |

Remittance Requested by Direct Deposit to:
Management & Training Corporation
ID# 87-0365322
Account# 982730839
Zions Bank
ABA Routing# 124000054

Michael Bell
Michael Bell, Vice President
Region III

MM
12/9/21

#REF!

MONTHLY BILLING

Inv. No. GIST-1021-01

Date: November 01, 2021

| DAY | INMATE HEAD COUNT | HOSPITAL COUNT | RATE | TOTAL |
|------------|----------------------|-------------------|----------|--------------|
| 10/1/2021 | 110 | | \$ 10.23 | \$ 1,125.30 |
| 10/2/2021 | 110 | | \$ 10.23 | \$ 1,125.30 |
| 10/3/2021 | 110 | | \$ 10.23 | \$ 1,125.30 |
| 10/4/2021 | 110 | | \$ 10.23 | \$ 1,125.30 |
| 10/5/2021 | 104 | | \$ 10.23 | \$ 1,063.92 |
| 10/6/2021 | 104 | | \$ 10.23 | \$ 1,063.92 |
| 10/7/2021 | 107 | | \$ 10.23 | \$ 1,094.61 |
| 10/8/2021 | 104 | | \$ 10.23 | \$ 1,063.92 |
| 10/9/2021 | 104 | | \$ 10.23 | \$ 1,063.92 |
| 10/10/2021 | 104 | | \$ 10.23 | \$ 1,063.92 |
| 10/11/2021 | 104 | | \$ 10.23 | \$ 951.39 |
| 10/12/2021 | 93 | | \$ 10.23 | \$ 982.08 |
| 10/13/2021 | 98 | | \$ 10.23 | \$ 1,063.92 |
| 10/14/2021 | 104 | | \$ 10.23 | \$ 1,033.23 |
| 10/15/2021 | 101 | | \$ 10.23 | \$ 1,023.00 |
| 10/16/2021 | 100 | | \$ 10.23 | \$ 1,002.54 |
| 10/17/2021 | 98 | | \$ 10.23 | \$ 1,002.54 |
| 10/18/2021 | 98 | | \$ 10.23 | \$ 1,012.77 |
| 10/19/2021 | 99 | | \$ 10.23 | \$ 1,012.77 |
| 10/20/2021 | 99 | | \$ 10.23 | \$ 1,115.07 |
| 10/21/2021 | 109 | | \$ 10.23 | \$ 1,176.45 |
| 10/22/2021 | 115 | | \$ 10.23 | \$ 1,166.22 |
| 10/23/2021 | 114 | | \$ 10.23 | \$ 1,166.22 |
| 10/24/2021 | 114 | | \$ 10.23 | \$ 1,135.53 |
| 10/25/2021 | 111 | | \$ 10.23 | \$ 1,135.53 |
| 10/26/2021 | 111 | | \$ 10.23 | \$ 1,135.53 |
| 10/27/2021 | 111 | | \$ 10.23 | \$ 1,145.76 |
| 10/28/2021 | 112 | | \$ 10.23 | \$ 1,125.30 |
| 10/29/2021 | 110 | | \$ 10.23 | \$ 1,125.30 |
| 10/30/2021 | 110 | | \$ 10.23 | \$ 1,125.30 |
| 10/31/2021 | 110 | | \$ 10.23 | \$ 33,615.78 |
| | 3,286 | 0 | | |

AVG.

106

TOTAL MONTHLY BILLING

\$ 33,615.78

**Compliance Standard 1
Position Vacancy - Counselors
Gist State Jail**

| PCN # | Position Title | Date Vacated | Sanctions Began | Date Filled | 120 Day Pos | Avg Daily Salary | Adj Avg Daily FTE Salary | Oct-21 | |
|--------------|------------------------------------|-----------------|--------------------|----------------|-------------------|------------------------|--------------------------------|----------------|--------------------|
| | | | | | | | | Days Vacant | Amount Withheld |
| 582002030001 | Substance Abuse Counselor II - DWI | 07/01/21 | 10/29/21 | | 120 | \$129.00 | 1.00 | \$129.00 | 2 \$ 258.00 |
| TOTAL | | | | | | | | 2 | \$ 258.00 |

STATE OF TEXAS PURCHASE VOUCHER

Page 001 of 001

| | | | | | |
|----------------------|---|-----------------------------|-----------------------------|-----------------------|--|
| ARCHIVE REFERENCE NO | AGENCY 696 - ACCOUNTS PAYABLE | | | | CURRENT DOCUMENT 92046175 |
| | EFF DATE 01/21/22 | DOC DATE 06/01/18 | DUE DATE 12/31/21 | DOC AGY 696 | DOCUMENT AMOUNT 30,426.45 |
| VENDOR NO / MC | REQUESTED PAYMENT DATE | | POT | PCC | REQUISITION NO 696-2-PF1819C160- |

| | |
|--|---|
| VENDOR NAME / ADDRESS MANAGEMENT & TRAINING CORP P O BOX 10 ****DIRECT DEPOSIT**** CENTERVILLE, UT 84014 | AGENCY USE TEXAS DEPARTMENT OF CRIMINAL JUST P.O. BOX 4018 HUNTSVILLE, TX 77342 |
|--|---|

| | | | | | | | | | | |
|-----|---------------|------|----------------|-------|-------------|----|------|------|------------|---|
| SFX | REF DOC - SFX | M | TC | INDEX | PCA | AY | COBJ | AOBJ | AMOUNT | R |
| | APPN | FUND | INVOICE NUMBER | | DESCRIPTION | | | | AGENCY USE | |

001 225 76970 63300 22 7325 8483 30,426.45
13052 0014 GIST-1121-011 GIST FACILITY MTC

| DATE | DESCRIPTION OF GOODS OR SERVICES | QTY | UNIT COST | AMOUNT |
|------|----------------------------------|-----|-----------|--------|
|------|----------------------------------|-----|-----------|--------|

11/30/21 TX GOVT CODE 493.009 AND 501.0931

| | | | |
|--------------|------------------|----------------------|----------------|
| CONTACT NAME | INVOICE SERVICES | PHONE (936) 437-6929 | ENT BY HD00219 |
|--------------|------------------|----------------------|----------------|

I approve this voucher for payment. The above goods or services correspond in every particular with the contract under which they were purchased. The invoice for the goods or services is correct.
The payment complies with the General Appropriations Act.

APPROVED: NAME _____ TITLE _____ DATE _____

APPROVED: NAME _____ TITLE _____ DATE _____

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Private Facility Contract Monitoring / Oversight Division
Fiscal Year 2022

92046175✓

TO: Dustin Hurst
Accounts Payable

FROM: Melody Miethe
Accountant III
Private Facilities - CMOD

DATE: January 21, 2022

SUBJECT: November 2021 ✓
Management & Training Corp.
Contract No: 696-PF-18-19-C160 ✓
Invoice Received: 12/1/2021 ✓
Payment Due: 12/31/2021

Enclosed is the invoice per diem payment for *Gist Facility*.

| Invoice # | Vendor | Mo/Days | Rate | Total |
|----------------|--------|---------|------------|--------------|
| Gist-1121-01 ✓ | MTC | ✓ 3,165 | \$ 10.23 ✓ | \$ 32,377.95 |

The following adjustments have been made:

| Billing Adjustments | Date | Amount Withheld |
|----------------------------------|---------------|-----------------|
| Position Vacancy - Counselors | November 2021 | \$ 1,935.00 |
| Pre-employment Background Checks | November 2021 | \$ 16.50 |
| Total Withholdings: | | \$ 1,951.50 |

| Total amount to be paid: | | | | | \$ 30,426.45 ✓ |
|--------------------------|---------|---------|--------|--------|----------------|
| Lonestar Coding | Index | FCA | AOBJ | AY | Amount |
| | 76970 ✓ | 63300 ✓ | 8483 ✓ | FY22 ✓ | \$30,426.45 ✓ |

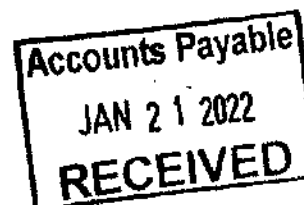
Attachments
File

cc: Michael Bell, MTC
Aspen Douglas, Budget
Mary Buasan, Budget

Pamela Barker, Management & Training Corp.
Erica Wehmeyer, Management & Training Corp.
Victor Joslin, Management & Training Corp.

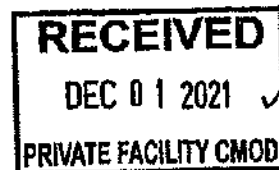
I certify that the attached invoices have been audited for compliance with the currently approved contract prices, are free of mathematical errors, the services / goods were received and correspond in every particular way with the contract under which they were procured, and the invoices are true and unpaid.

Melody Miethe 1/20/22 ✓
Signature & Date



REFUSE INTEREST M1-1 ✓

Gist State Jail
3295 Farm to Market 3514
Beaumont, TX 77705
PHONE (409) 727-8400



ATTN: TDCJ - Private Facility Contract Monitoring /
Oversight Division
Two Financial Plaza Suite 310
Huntsville, TX 77340

RENT TO: MANAGEMENT & TRAINING CORP.
500 N. Marketplace Dr.
P.O. Box 10
Centerville UT 84014

Inv. No. GIST-1121-01
Date: December 01, 2021

Contract 696-PF-18-19-C160

| DESCRIPTION | AMOUNT |
|--|--------------|
| GIST MANDAYS PER ATTACHED COUNT FOR NOVEMBER 2021 3,165 INMATES | \$ 32,377.95 |
| Total | \$ 32,377.95 |

Remittance Requested by Direct Deposit to:
Management & Training Corporation
ID# 67-0365322
Account# 982730939
Zions Bank
ABA Routing# 124000054

Michael Bell, Vice President
Region III

#REF!

MONTHLY BILLING

Inv. No. GIST-1121-01

Date: December 01, 2021

| DAY | INMATE HEAD COUNT | HOSPITAL COUNT | RATE | TOTAL |
|-----------------------|----------------------|-------------------|----------|---------------------|
| 11/1/2021 | 108 | | \$ 10.23 | \$ 1,084.38 |
| 11/2/2021 | 106 | | \$ 10.23 | \$ 1,084.38 |
| 11/3/2021 | 111 | | \$ 10.23 | \$ 1,135.53 |
| 11/4/2021 | 115 | | \$ 10.23 | \$ 1,176.45 |
| 11/5/2021 | 109 | | \$ 10.23 | \$ 1,115.07 |
| 11/6/2021 | 108 | | \$ 10.23 | \$ 1,104.84 |
| 11/7/2021 | 106 | | \$ 10.23 | \$ 1,084.38 |
| 11/8/2021 | 107 | | \$ 10.23 | \$ 1,094.61 |
| 11/9/2021 | 105 | | \$ 10.23 | \$ 1,074.15 |
| 11/10/2021 | 105 | | \$ 10.23 | \$ 1,074.15 |
| 11/11/2021 | 105 | | \$ 10.23 | \$ 1,074.15 |
| 11/12/2021 | 103 | | \$ 10.23 | \$ 1,053.69 |
| 11/13/2021 | 100 | | \$ 10.23 | \$ 1,023.00 |
| 11/14/2021 | 100 | | \$ 10.23 | \$ 1,023.00 |
| 11/15/2021 | 97 | | \$ 10.23 | \$ 992.31 |
| 11/16/2021 | 100 | | \$ 10.23 | \$ 1,023.00 |
| 11/17/2021 | 101 | | \$ 10.23 | \$ 1,033.23 |
| 11/18/2021 | 105 | | \$ 10.23 | \$ 1,074.15 |
| 11/19/2021 | 103 | | \$ 10.23 | \$ 1,053.69 |
| 11/20/2021 | 103 | | \$ 10.23 | \$ 1,053.69 |
| 11/21/2021 | 103 | | \$ 10.23 | \$ 1,053.69 |
| 11/22/2021 | 103 | | \$ 10.23 | \$ 1,053.69 |
| 11/23/2021 | 114 | | \$ 10.23 | \$ 1,166.22 |
| 11/24/2021 | 108 | | \$ 10.23 | \$ 1,104.84 |
| 11/25/2021 | 108 | | \$ 10.23 | \$ 1,104.84 |
| 11/26/2021 | 108 | | \$ 10.23 | \$ 1,104.84 |
| 11/27/2021 | 108 | | \$ 10.23 | \$ 1,104.84 |
| 11/28/2021 | 108 | | \$ 10.23 | \$ 1,104.84 |
| 11/29/2021 | 106 | | \$ 10.23 | \$ 1,084.38 |
| 11/30/2021 | 104 | | \$ 10.23 | \$ 1,063.92 |
| | 3,165 | 0 | 10.23 | \$ 32,377.95 |
| AVG. | 106 | | | |
| TOTAL MONTHLY BILLING | | | | <u>\$ 32,377.95</u> |

| PCN # | Position Title | Date Vacated | Sanctions Began | Date Filled | 120 Day Pos | Avg Daily Salary | FTE | Adj Avg Daily Salary | Nov-21 | |
|--------------|------------------------------------|--------------|-----------------|-------------|-------------|------------------|------|----------------------|-------------|-----------------|
| | | | | | | | | | Days Vacant | Amount Withheld |
| 582002030001 | Substance Abuse Counselor II - DWI | 07/01/21 | 10/29/21 | 11/16/21 | 120 | \$129.00 | 1.00 | \$129.00 | 15 | \$ 1,935.00 |
| 1 | SANCTION | | | | | | | | 15 | \$ 1,935.00 |

Criminal Justice
Pre-Employment Background Checks
November 2021

| Facility | Gist |
|---------------------------|--------------------|
| Billing Month/year | Nov/21 |
| <hr/> | |
| Row Labels | Sum of Cost |
| Hinch, Zoe Brandon | 16.5 |
| Grand Total | 16.5 |