STATE OF TEXAS
COUNTY OF FORT BEND

Sixth Amendment to Agreement for Inmate Food Service Pursuant to Fort Bend County RFP 15-058

THIS SIXTH AMENDMENT OF THE AGREEMENT FOR INMATE FOOD SERVICE PURSUANT TO FORT BEND COUNTY RFP 15-058 (the "Amendment"), is made and entered into by and between the FORT BEND COUNTY, TEXAS, a body politic, acting herein by and through its Commissioners Court ("County"), and Aramark Correctional Services, LLC ("Aramark" or "Contractor"), a Delaware limited liability company authorized to conduct business in the State of Texas, having its principal place of business located at 2400 Market Street, Philadelphia, PA 19103.

WHEREAS, on or about July 2, 2015, the parties entered into an AGREEMENT FOR INMATE FOOD SERVICE PURSUANT TO FORT BEND COUNTY RFP 15-058 (as amended, the "Agreement"), which was amended on October 28, 2015, August 1, 2017, June 26, 2018, October 1, 2019, and October 1, 2020, all documents incorporated by reference; and

WHEREAS, the parties desire to amend said Agreement as hereinafter set forth, effective as of October 1, 2021.

NOW, THEREFORE, in consideration of the foregoing and of the mutual promises in the Agreement and for other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the parties agree as set forth below. Capitalized terms used but not defined in this Amendment have the meanings ascribed to such terms in the Agreement.

- 1. **Term:** In accordance with Section 9B of the Agreement, the Parties mutually agree to extend the term from October 1, 2021 through September 30, 2022.
- 2. **Pricing:** In accordance with Exhibit C of the Agreement, the parties agree that the price per meal charged to the County by Aramark for the Inmate Meal shall be changed as set forth on Attachment A as a result of changes in the Consumer Price Index. This price shall be effective from October 1, 2021 through September 30, 2022, and shall supersede in all respects any prior price per meal.
- 3. **Maximum Compensation**: Contractor further agrees that the Maximum Compensation for performance of Services pursuant to this Agreement will not exceed \$1,609,532.00 for service provided October 1, 2021, through September 30, 2022. Maximum Compensation will be as stated for each service year as long as the average daily population of inmates during the term of the Agreement does not exceed one thousand (1000) inmates in custody. In no case shall the amount paid by County under this Agreement exceed the Maximum Compensation without an approved change order and certification of additional funds by the Fort Bend County Auditor.
- 4. **Effect of Amendment:** Except as specifically set forth herein, all other terms and provisions of the Agreement shall remain unaffected by this Amendment and shall continue in full force and effect.

IN WITNESS WHEREOF, the parties hereto have caused this Sixth Amendment to be signed by their duly authorized representatives the day and year first written above.

Aramark Correctional Services, LLC

DocuSigned by:

Michael Santoso

By:

Michael Santoro
Vice President, Finance
10/4/2021

County of Fort Bend State of Texas

y. <u>|</u> | | | | |

County Judge KP George

Attachment A

Fort Bend, Texas Effective October 1, 2021 through September 30, 2022

		Calculated		
<u>Population</u>		Inmate		
Low	<u>High</u>	<u>Price</u>		
100	149	\$	5.857	
150	199	\$	4.184	
200	249	\$	3.348	
250	299	\$	2.846	
300	349	\$	2.511	
350	399	\$	2.272	
400	449	\$	2.093	
450	499	\$	1.953	
500	549	\$	1.842	
550	599	\$	1.751	
600	649	\$	1.675	
650	699	\$	1.610	
700	749	\$	1.555	
750	799	\$	1.537	
800	849	\$	1.522	
850	899	\$	1.508	
900	949	\$	1.486	
950	999	\$	1.461	
1,000	1,049	\$	1.434	
1,050	1,099	\$	1.426	
1,100	1,149	\$	1.407	
1,150	1,199	\$	1.389	
1,200	1,249	\$	1.374	
1,250	1,299	\$	1.359	
1,300	1,349	\$	1.339	

^{*}The population will be determined by dividing total inmate meals served per week by 21.

Trustee meals: \$2.94 per meal

Staff Meals: \$3.00 per meal

Walk-in Staff Meals: \$2.50 per meal

A la carte items, as determined by SO Staff: Priced by item at Aramark's actual cost + 10%

CERTIFICATE OF INTERESTED PARTIES

FORM **1295**

1 of 2

	Complete Nos. 1 - 4 and 6 if there are interested parties. Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.	OFFICE USE ONLY CERTIFICATION OF FILING
1	Name of business entity filing form, and the city, state and country of the business entity's place	Certificate Number:
	of business.	2021-810600
	Aramark Correctional Services, LLC	
	Philadelphia, PA United States	Date Filed:
2	Name of governmental entity or state agency that is a party to the contract for which the form is being filed.	10/07/2021
	Fort Bend County Jail	Date Acknowledged: 10/12/2021

Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.

RFP 15-058 Food Service

4 Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
		Controlling	Intermediary
Aramark Services, Inc.	Philadelphia, PA United States	X	
Barttrum, James T.	Philadelphia, PA United States	Х	
Adams, Mark R.	Philadelphia, PA United States	Х	
Deitz, Robert N.	Philadelphia, PA United States	×	
Elchenko, Michael	Philadelphia, PA United States	×	
Faigus, Katherine	Philadelphia, PA United States	×	
Fast, Tamsin	Philadelphia, PA United States	х	
Santoro, Michael	Philadelphia, PA United States	×	
Tarangelo, James J.	Philadelphia, PA United States	Х	
Baureis, Maureen	Philadelphia, PA United States	×	
Fleming, Paige E.	Philadelphia, PA United States	Х	
Iaconelli, Blase B.	Philadelphia, PA United States	х	
Rambo, Robert T.	Philadelphia, PA United States	×	

CERTIFICATE OF INTERESTED PARTIES

FORM **1295**

					2 of 2		
	Complete Nos. 1 - 4 and 6 if there are interested parties. Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.			OFFICE USE ONLY CERTIFICATION OF FILING			
1	Name of business entity filing form, and the city, state and country of the business entity's place of business. Aramark Correctional Services, LLC		Certificate Number: 2021-810600 Date Filed:				
2	•	party to the contract for which the form is 10/0			0/07/2021 ate Acknowledged: 0/12/2021		
3	Provide the identification number used by the governmental entit description of the services, goods, or other property to be provide RFP 15-058 Food Service			the contract, and pro	ovide a		
4	Name of Interested Party City, State, Country		/ (place of busine	ess) (check a	Nature of interest (check applicable)		
				Controlling	Intermediary		
					<u> </u>		
5	Check only if there is NO Interested Party.						
6	UNSWORN DECLARATION						
	My name is, and my date of birth is _				·		
	My address is(street)	(city)		ate) (zip code)	(country)		
	I declare under penalty of perjury that the foregoing is true and correct	t.					
	Executed inCounty	/, State of	, on the _	day of(month)			
		Signature of authori	ized agent of cont	tracting business entity	,		