

COMMONWEALTH OF MASSACHUSETTS ~ STANDARD CONTRACT FORM



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

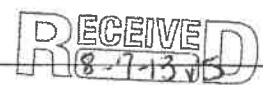
|   |                          |   |                  |
|---|--------------------------|---|------------------|
| <b>CONTRACTOR LEGAL NAME:</b> SECURUS TECHNOLOGIES, INC<br>(and d/b/a):   |                          | <b>COMMONWEALTH DEPARTMENT NAME:</b> Franklin County Sheriff's Office<br><b>MMARS Department Code:</b> SDF  |                  |
| <b>Legal Address: (W-9, W-4, T&amp;C):</b> 14651 Dallas Parkway 6 <sup>th</sup> Fl, Dallas, TX 75254  |                          | <b>Business Mailing Address:</b> 160 Elm Street, Greenfield, MA 01301   |                  |
| <b>Contract Manager:</b> Sherri Turowsky  |                          | <b>Billing Address (if different):</b>  |                  |
| <b>E-Mail:</b> STurowsky@securustech.net  |                          | <b>Contract Manager:</b> Paul Gervais   |                  |
| <b>Phone:</b> 972-277-0300  | <b>Fax:</b> 972-277-0514 | <b>E-Mail:</b> paul.gervais@fcs.state.ma.us   |                  |
| <b>Contractor Vendor Code:</b> VC7000090409   |                          | <b>Phone:</b> 413-774-4014  | <b>Fax:</b> 2147 |
| <b>Vendor Code Address ID (e.g. "AD001"):</b> AD_001<br>(Note: The Address Id Must be set up for EFT payments.)   |                          | <b>MMARS Doc ID(s):</b>   |                  |
|   |                          | <b>RFR/Procurement or Other ID Number:</b>  |                  |
| <p align="center"><u>NEW CONTRACT</u></p> <p><b>PROCUREMENT OR EXCEPTION TYPE:</b> (Check one option only)</p> <p><input type="checkbox"/> <u>Statewide Contract</u> (OSD or an OSD-designated Department)</p> <p><input type="checkbox"/> <u>Collective Purchase</u> (Attach OSD approval, scope, budget)</p> <p><input type="checkbox"/> <u>Department Procurement</u> (includes State or Federal grants <u>815 CMR 2.00</u>) (Attach RFR and Response or other procurement supporting documentation)</p> <p><input type="checkbox"/> <u>Emergency Contract</u> (Attach justification for emergency, scope, budget)</p> <p><input type="checkbox"/> <u>Contract Employee</u> (Attach <u>Employment Status Form</u>, scope, budget)</p> <p><input type="checkbox"/> <u>Legislative/Legal or Other:</u> (Attach authorizing language/justification, scope and budget)</p>   |                          | <p align="center"><u>X CONTRACT AMENDMENT</u></p> <p>Enter Current Contract End Date <u>Prior</u> to Amendment: <u>June 30, 2016</u></p> <p>Enter Amendment Amount: \$ _____ (or "no change")</p> <p><b>AMENDMENT TYPE:</b> (Check one option only. Attach details of Amendment changes.)</p> <p><input type="checkbox"/> <u>Amendment to Scope or Budget</u> (Attach updated scope and budget)</p> <p><input type="checkbox"/> <u>Interim Contract</u> (Attach justification for Interim Contract and updated scope/budget)</p> <p><input type="checkbox"/> <u>Contract Employee</u> (Attach any updates to scope or budget)</p> <p><input type="checkbox"/> <u>Legislative/Legal or Other:</u> (Attach authorizing language/justification and updated scope and budget)</p> |                  |
| <p>The following <b>COMMONWEALTH TERMS AND CONDITIONS (T&amp;C)</b> has been executed, filed with CTR and is incorporated by reference into this Contract.</p> <p><input checked="" type="checkbox"/> Commonwealth Terms and Conditions    <input type="checkbox"/> Commonwealth Terms and Conditions For Human and Social Services</p>   |                          |   |                  |
| <p><b>COMPENSATION:</b> (Check ONE option): The Department certifies that payments for authorized performance accepted in accordance with the terms of this Contract will be supported in the state accounting system by sufficient appropriations or other non-appropriated funds, subject to intercept for Commonwealth owed debts under 815 CMR 9.00.</p> <p><input checked="" type="checkbox"/> <u>Rate Contract</u> (No Maximum Obligation. Attach details of all rates, units, calculations, conditions or terms and any changes if rates or terms are being amended.)</p> <p><input type="checkbox"/> <u>Maximum Obligation Contract</u> Enter Total Maximum Obligation for total duration of this Contract (or <u>new Total</u> if Contract is being amended). \$ _____</p>   |                          |   |                  |
| <p><b>PROMPT PAYMENT DISCOUNTS (PPD):</b> Commonwealth payments are issued through EFT 45 days from invoice receipt. Contractors requesting accelerated payments must identify a PPD as follows: Payment issued within 10 days ___% PPD; Payment issued within 15 days ___% PPD; Payment issued within 20 days ___% PPD; Payment issued within 30 days ___% PPD. If PPD percentages are left blank, identify reason: ___agree to standard 45 day cycle ___ statutory/legal or Ready Payments (G.L. c. 29, § 23A); ___ only initial payment (subsequent payments scheduled to support standard EFT 45 day payment cycle. See <u>Prompt Pay Discounts Policy</u>.)</p>  |                          |   |                  |
| <p><b>BRIEF DESCRIPTION OF CONTRACT PERFORMANCE or REASON FOR AMENDMENT:</b> (Enter the Contract title, purpose, fiscal year(s) and a detailed description of the scope of performance or what is being amended for a Contract Amendment. Attach all supporting documentation and justifications.) This amendment is executed to invoke the first of four one year contract extensions as stipulated in the original contract. The overall purpose of the contract is for the Contractor to provide coinless inmate telephone system for the Franklin County Sheriff's Office.</p>  |                          |   |                  |
| <p><b>ANTICIPATED START DATE:</b> (Complete ONE option only) The Department and Contractor certify for this Contract, or Contract Amendment, that Contract obligations:</p> <p><input type="checkbox"/> 1. may be incurred as of the <u>Effective Date</u> (latest signature date below) and <u>no</u> obligations have been incurred <u>prior</u> to the <u>Effective Date</u>.</p> <p><input checked="" type="checkbox"/> 2. may be incurred as of <u>July 1, 2016</u>, a date <u>LATER</u> than the <u>Effective Date</u> below and <u>no</u> obligations have been incurred <u>prior</u> to the <u>Effective Date</u>.</p> <p><input type="checkbox"/> 3. were incurred as of _____, 20____, a date <u>PRIOR</u> to the <u>Effective Date</u> below, and the parties agree that payments for any obligations incurred prior to the <u>Effective Date</u> are authorized to be made either as settlement payments or as authorized reimbursement payments, and that the details and circumstances of all obligations under this Contract are attached and incorporated into this Contract. Acceptance of payments forever releases the Commonwealth from further claims related to these obligations.</p>  |                          |   |                  |
| <p><b>CONTRACT END DATE:</b> Contract performance shall terminate as of <u>June 30, 2017</u>, with no new obligations being incurred after this date unless the Contract is properly amended, provided that the terms of this Contract and performance expectations and obligations shall survive its termination for the purpose of resolving any claim or dispute, for completing any negotiated terms and warranties, to allow any close out or transition performance, reporting, invoicing or final payments, or during any lapse between amendments.</p>  |                          |   |                  |
| <p><b>CERTIFICATIONS:</b> Notwithstanding verbal or other representations by the parties, the "Effective Date" of this Contract or Amendment shall be the latest date that this Contract or Amendment has been executed by an authorized signatory of the Contractor, the Department, or a later Contract or Amendment Start Date specified above, subject to any required approvals. The Contractor makes all certifications required under the attached <u>Contractor Certifications</u> (incorporated by reference if not attached hereto) under the pains and penalties of perjury, agrees to provide any required documentation upon request to support compliance, and agrees that all terms governing performance of this Contract and doing business in Massachusetts are attached or incorporated by reference herein according to the following hierarchy of document precedence, the applicable <u>Commonwealth Terms and Conditions</u>, this Standard Contract Form including the <u>Instructions and Contractor Certifications</u>, the Request for Response (RFR) or other solicitation, the Contractor's Response, and additional negotiated terms, provided that additional negotiated terms will take precedence over the relevant terms in the RFR and the Contractor's Response only if made using the process outlined in <u>801 CMR 21.07</u>, incorporated herein, provided that any amended RFR or Response terms result in best value, lower costs, or a more cost effective Contract.</p> |                          |   |                  |
| <p><b>AUTHORIZING SIGNATURE FOR THE CONTRACTOR:</b></p> <p>X: _____ Date: _____<br/>(Signature and Date Must Be Handwritten At Time of Signature)</p> <p>Print Name: _____</p> <p>Print Title: _____</p>  |                          | <p><b>AUTHORIZING SIGNATURE FOR THE COMMONWEALTH:</b></p> <p>X: <u>Paul Gervais</u> Date: <u>6/21/16</u><br/>(Signature and Date Must Be Handwritten At Time of Signature)</p> <p>Print Name: <u>Paul Gervais</u></p> <p>Print Title: <u>CFO</u></p>  |                  |

# COMMONWEALTH OF MASSACHUSETTS ~ STANDARD CONTRACT FORM



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

|  |   |
|--|---|
| <b>CONTRACTOR LEGAL NAME:</b> SECURUS TECHNOLOGIES, INC<br>(and d/b/a):  | <b>COMMONWEALTH DEPARTMENT NAME:</b> SDF -- SHERIFF'S DEPARTMENT<br>FRANKLIN<br><b>MMARS Department Code:</b> SDF   |
| <b>Legal Address: (W-9, W-4,T&amp;C):</b> 14651 Dallas Parkway 6th Fl, Dallas, TX 75254  | <b>Business Mailing Address:</b> 160 Elm Street, Greenfield, MA 01301   |
| <b>Contract Manager:</b> Sherrl Turowsky   | <b>Billing Address (if different):</b>  |
| <b>E-Mail:</b> <a href="mailto:sturovsky@securustech.net">sturovsky@securustech.net</a>  | <b>Contract Manager:</b> Paul Gervais   |
| <b>Phone:</b> 972-277-0300 <b>Fax:</b> 972-277-0514  | <b>E-Mail:</b> <a href="mailto:Paul.Gervais@fcs.state.ma.us">Paul.Gervais@fcs.state.ma.us</a>   |
| <b>Contractor Vendor Code:</b> VC7000090409  | <b>Phone:</b> 413-774-4014 Ext. 2147 <b>Fax:</b> 413-774-3525   |
| <b>Vendor Code Address ID (e.g. "AD001"):</b> AD 001<br>(Note: The Address Id Must be set up for EFT payments.)  | <b>MMARS Doc ID(s):</b><br><b>RFR/Procurement or Other ID Number:</b>   |
| <input checked="" type="checkbox"/> <b>NEW CONTRACT</b><br><b>PROCUREMENT OR EXCEPTION TYPE: (Check one option only)</b><br><input type="checkbox"/> <b>Statewide Contract</b> (OSD or an OSD-designated Department)<br><input type="checkbox"/> <b>Collective Purchase</b> (Attach OSD approval, scope, budget)<br><input type="checkbox"/> <b>Department Procurement</b> (includes State or Federal grants 815 CMR 2.00)<br>(Attach RFR and Response or other procurement supporting documentation)<br><input type="checkbox"/> <b>Emergency Contract</b> (Attach justification for emergency, scope, budget)<br><input type="checkbox"/> <b>Contract Employee</b> (Attach Employment Status Form, scope, budget)<br><input type="checkbox"/> <b>Legislative/Legal Exemption or Other:</b> (Attach authorizing language/justification, scope and budget)   | <input type="checkbox"/> <b>CONTRACT AMENDMENT</b><br>Enter Current Contract End Date <u>Prior</u> to Amendment: ____ , 20 ____<br>Enter Amendment Amount: \$ _____. (or "no change")<br><b>AMENDMENT TYPE: (Check one option only. Attach details of Amendment changes.)</b><br><input type="checkbox"/> <b>Amendment to Scope or Budget</b> (Attach updated scope and budget)<br><input type="checkbox"/> <b>Interim Contract</b> (Attach justification for Interim Contract and updated scope/budget)<br><input type="checkbox"/> <b>Contract Employee</b> (Attach any updates to scope or budget)<br><input type="checkbox"/> <b>Legislative/Legal Exemption or Other:</b> (Attach authorizing language/justification and updated scope and budget) |
| The following <b>COMMONWEALTH TERMS AND CONDITIONS (T&amp;C)</b> has been executed, filed with CTR and is incorporated by reference into this Contract.<br><input checked="" type="checkbox"/> Commonwealth Terms and Conditions <input type="checkbox"/> Commonwealth Terms and Conditions For Human and Social Services  |   |
| <b>COMPENSATION: (Check ONE option):</b> The Department certifies that payments for authorized performance accepted in accordance with the terms of this Contract will be supported in the state accounting system by sufficient appropriations or other non-appropriated funds, subject to intercept for Commonwealth owed debts under 815 CMR 9.00.<br><input checked="" type="checkbox"/> <b>Rate Contract</b> (No Maximum Obligation. Attach details of all rates, units, calculations, conditions or terms and any changes if rates or terms are being amended.)<br><input type="checkbox"/> <b>Maximum Obligation Contract</b> Enter Total Maximum Obligation for total duration of this Contract (or <i>new</i> Total if Contract is being amended). \$ _____   |   |
| <b>PROMPT PAYMENT DISCOUNTS (PPD):</b> Commonwealth payments are issued through EFT 45 days from invoice receipt. Contractors requesting accelerated payments must identify a PPD as follows: Payment issued within 10 days ____ % PPD; Payment issued within 15 days ____ % PPD; Payment issued within 20 days ____ % PPD; Payment issued within 30 days ____ % PPD. If PPD percentages are left blank, identify exemption: ___ statutory/legal or Ready Payments (G.L. c. 29, § 23A); ___ federal grant/trust; ___ initial payment (subsequent payments must be scheduled to support payee cash flow needs and standard EFT 45 day payment cycle. See Prompt Pay Discounts Policy.)  |   |
| <b>BRIEF DESCRIPTION OF CONTRACT PERFORMANCE or REASON FOR AMENDMENT:</b> To provide coinless inmate telephone system for the Franklin County Sheriff's Office (SDF) for the term of (3) three years with option for additional four (1) year contracts at the discretion of the SDF to renew. Securus Technologies Inc. will pay SDF a commission rate of 48% monthly using the formula stated in the Bristol County RFP Cost and Commission Proposal. The Bristol County Sheriff's Department RFP is part of the contract.   |   |
| <b>ANTICIPATED START DATE: (Complete ONE option only)</b> The Department and Contractor certify for this Contract, or Contract Amendment, that Contract obligations:<br>___ 1. may be incurred as of the <b>Effective Date</b> (latest signature date below subject to any required approvals) and <b>no</b> obligations have been incurred <b>prior</b> to the <b>Effective Date</b> .<br><input checked="" type="checkbox"/> 2. may be incurred as of <u>September 1, 2013</u> , a date <b>LATER</b> than the <b>Effective Date</b> below and <b>no</b> obligations have been incurred <b>prior</b> to the <b>Effective Date</b> .<br>___ 3. were incurred as of _____, 20____, a date <b>PRIOR</b> to the <b>Effective Date</b> below, and the parties agree that payments for any obligations incurred prior to the <b>Effective Date</b> are authorized to be made either as settlement payments or as authorized reimbursement payments, and that the details and circumstances of all obligations under this Contract are attached and incorporated into this Contract. Acceptance of payments forever releases the Commonwealth from further claims related to these obligations.  |   |
| <b>CONTRACT END DATE:</b> Contract performance shall terminate as of <u>June 30, 2016</u> with no new obligations being incurred after this date unless the Contract is properly amended, provided that the terms of this Contract and performance expectations and obligations shall survive its termination for the purpose of resolving any claim or dispute, for completing any negotiated terms and warranties, to allow any close out or transition performance, reporting, invoicing or final payments, or during any lapse between amendments.   |   |
| <b>CERTIFICATIONS:</b> Notwithstanding verbal or other representations by the parties, the " <b>Effective Date</b> " of this Contract or Amendment shall be the latest date that this Contract or Amendment has been executed by an authorized signatory of the Contractor, the Department, or a later Contract or Amendment Start Date specified above, subject to any required approvals. The Contractor makes all certifications required under the attached <b>Contractor Certifications</b> (incorporated by reference if not attached hereto) under the pains and penalties of perjury, agrees to provide any required documentation upon request to support compliance, and agrees that all terms governing performance of this Contract and doing business in Massachusetts are attached or incorporated by reference herein according to the following hierarchy of document precedence, the applicable <b>Commonwealth Terms and Conditions</b> , this Standard Contract Form including the <b>Instructions and Contractor Certifications</b> , the Request for Response (RFR) or other solicitation, the Contractor's Response, and additional negotiated terms, provided that additional negotiated terms will take precedence over the relevant terms in the RFR and the Contractor's Response only if made using the process outlined in <u>801 CMR 21.07</u> , incorporated herein, provided that any amended RFR or Response terms result in best value, lower costs, or a more cost effective Contract. |   |
| <b>AUTHORIZING SIGNATORY FOR THE CONTRACTOR:</b><br>X: <u>Robert Piken</u> , Date: <u>7/13/13</u><br>(Signature and Date Must Be Handwritten At Time of Signature)<br>Print Name: <u>Robert Piken</u><br>Print Title: <u>COO</u>   | <b>AUTHORIZING SIGNATORY FOR THE COMMONWEALTH:</b><br>X: <u>Paul Gervais</u> , Date: <u>7/31/13</u><br>(Signature and Date Must Be Handwritten At Time of Signature)<br>Print Name: <u>Paul Gervais</u><br>Print Title: <u>CFO</u>  |



# Securus Technologies, Inc.

## MA\_Franklin County Jail

Prepared : February 14, 2014

|     |                          |                | Franklin County Jail -<br>06011 |            |
|-----|--------------------------|----------------|---------------------------------|------------|
| No. | Destination Class        | Customer Type  | Per call                        | Per Minute |
| 1   | Local                    | Collect        | 3.00                            | 0.10       |
| 2   | IntraLATA Intrastate     | Collect        | 3.00                            | 0.10       |
| 3   | InterLATA Intrastate     | Collect        | 3.00                            | 0.10       |
| 4   | InterLATA Interstate (1) | Collect        | 0.00                            | 0.25       |
| 5   | IntraLATA Interstate (1) | Collect        | 0.00                            | 0.25       |
| 6   | Local                    | AdvanceConnect | 3.00                            | 0.10       |
| 7   | IntraLATA Intrastate     | AdvanceConnect | 3.00                            | 0.10       |
| 8   | InterLATA Intrastate     | AdvanceConnect | 3.00                            | 0.10       |
| 9   | InterLATA Interstate (1) | AdvanceConnect | 0.00                            | 0.21       |
| 10  | IntraLATA Interstate (1) | AdvanceConnect | 0.00                            | 0.21       |
| 11  | Local                    | Prepaid Cards  | 0.00                            | 0.50       |
| 12  | IntraLATA Intrastate     | Prepaid Cards  | 0.00                            | 0.50       |
| 13  | InterLATA Intrastate     | Prepaid Cards  | 0.00                            | 0.50       |
| 14  | InterLATA Interstate     | Prepaid Cards  | 0.00                            | 0.21       |
| 15  | International            | Prepaid Cards  | varies by country               |            |
| 16  | Local                    | Debit          | n/a                             | n/a        |
| 17  | IntraLATA Intrastate     | Debit          | n/a                             | n/a        |
| 18  | InterLATA Intrastate     | Debit          | n/a                             | n/a        |
| 19  | InterLATA Interstate     | Debit          | n/a                             | n/a        |
| 20  | IntraLATA Interstate     | Debit          | n/a                             | n/a        |
| 21  | International            | Debit          | n/a                             | n/a        |

**Notes:**

(1) New FCC interstate rates effective on February 11, 2014

**InmateAccounts**  
**Keefe Commission**  
 July 2004 through December 2015  
 Franklin County Sheriff's Office

Title            Inmate Telephone Commission  
 Purpose        Commission earned by inmate use of telephone system  
 Basis            Federal Telecommunications Act of 1996; 103 CMR 498.10  
 Account        Inmate Fund Account

| Date                     | Memo           | Amount           |
|--------------------------|----------------|------------------|
| 09/03/2013               | July 2013      | 6,669.10         |
| 10/01/2013               | Aug 2013       | 6,260.20         |
| 10/31/2013               | September 2013 | 7,237.59         |
| 12/03/2013               | OCTOBER 2013   | 8,710.52         |
| 12/30/2013               | November 2013  | 8,771.58         |
| 01/31/2014               | December 2013  | 8,426.44         |
| 03/03/2014               | January 2014   | 7,262.98         |
| 03/31/2014               | February 2014  | 5,703.84         |
| 05/02/2014               | March 2014     | 4,929.28         |
| 05/30/2014               | April 2014     | 3,582.00         |
| 07/01/2014               | May 2014       | 3,561.50         |
| 07/29/2014               | June 2014      | 4,269.99         |
| <b>Fiscal 2014 Total</b> |                | <b>75,385.02</b> |
| 08/29/2014               | July 2014      | 5,716.60         |
| 10/03/2014               | August 2014    | 4,743.67         |
| 10/31/2014               | September 2014 | 5,580.79         |
| 12/01/2014               | October 2014   | 5,425.57         |
| 12/29/2014               | Nov 2014       | 5,508.04         |
| 02/04/2015               | December 2014  | 6,112.01         |
| 03/02/2015               | January 2015   | 6,032.72         |
| 03/30/2015               | February 2015  | 6,055.38         |
| 04/28/2015               | March 2015     | 6,680.92         |
| 05/27/2015               | April 2015     | 7,007.08         |
| 06/30/2015               | May 2015       | 6,169.51         |
| 07/28/2015               | June 2015      | 5,406.76         |
| <b>Fiscal 2015 Total</b> |                | <b>70,439.05</b> |
| 08/31/2015               | July 2015      | 6,546.79         |
| 09/29/2015               | August 2015    | 6,255.47         |
| 10/27/2015               | September 2015 | 5,804.88         |
| 11/30/2015               | October 2015   | 6,096.57         |
| 12/30/2015               | November 2015  | 5,471.10         |
| 01/29/2016               | December 2015  | 5,244.34         |
| 02/29/2016               | January 2016   | 4,789.20         |
| 04/05/2016               | February 2016  | 5,865.52         |
| 05/02/2016               | March 2016     | 6,780.90         |

**InmateAccounts**  
**Keefe Commission**  
**July 2004 through December 2015**

|                                |                  |
|--------------------------------|------------------|
| 05/31/2016 April 2016          | 5,357.03         |
| 07/05/2016 May 2016            | 5,477.13         |
| 08/01/2016 June 2016           | 5,253.70         |
| <b>Fiscal 2016 Total</b>       | <b>68,942.63</b> |
| <hr/>                          |                  |
| 08/30/2016 July 2016           | 4,252.59         |
| <b>Fiscal 2017 (YTD) Total</b> | <b>4,252.59</b>  |

## SECURUS INMATE PHONE RATE ADJUSTMENTS

Effective September 26, 2016 SECURUS increased the amount charged per phone call. The increase applies to the per minute rate and is as follows:

### IN-STATE Rate only (non-prepaid calling cards):

The first minute will cost \$3.21. All additional minutes are 21 cents per minute. The amount charged per minute increased from 10 cents to 21 cents per minute.

### IN-STATE Prepaid Phone Card Rate:

All minutes for calls within Massachusetts increased to 61 cents per minute.

### INTERSTATE Rates (calls outside of Massachusetts):

No changes have been made.

Interstate Prepaid Phone Cards remain at 21 cents per minute.

Interstate Collect Calls remain at 25 cents per minute.