STATE OF TEXAS S
COUNTY OF FORT BEND

# THIRD AMENDMENT TO ZOLL MASTER AGREEMENT BETWEEN FORT BEND COUNTY AND ZOLL DATA SYSTEMS, INC.

THIS THIRD AMENDMENT ("Third Amendment") is entered into by and between Fort Bend County, Texas ("County"), a political subdivision of the state of Texas, and ZOLL Data Systems, Inc. ("ZOLL"), a Delaware corporation duly authorized to conduct business in the state of Texas. County and ZOLL are hereinafter collectively referred to as the "Parties" and each individually a "Party."

WHEREAS, the Parties previously entered into the ZOLL Master Agreement ("Master Agreement"), on or about October 8, 2019, as amended by the first amendment to the Master Agreement dated March 2, 2021, and as amended by the second amendment to the Master Agreement dated March 22, 2022. The Master Agreement and subsequent amendments are hereinafter collectively referred to as the "Agreement." The Agreement is incorporated fully by reference as if set-forth verbatim below; and

WHEREAS, the Parties desire to amend the Agreement by execution of this Third Amendment to the Agreement as set forth below:

#### **AMENDMENTS**

- 1. **Scope of Services.** ZOLL shall continue to provide product and/or services as described in the Agreement and as provided in Exhibit "A" attached hereto and incorporated by reference for all intents and purposes. The Agreement is modified to update the ZOLL Billing line item quantity by an additional \$20,617.76 for payment of ZOLL's subscription services in accordance with the Agreement and Exhibit "A."
- 2. **Term.** The term of the Agreement shall not renew and expires no later than September 30, 2022, unless sooner terminated in accordance with the Agreement. Additionally, the Agreement may only renewed or extended upon written agreement by the Parties.
- 3. **Modifications.** Except as modified herein, the Agreement remains in full force and effect and has not been otherwise modified or amended.
- 4. **Conflict.** If there is a conflict among documents, the most recently executed document will prevail with regard to the conflict.
- 5. Understanding, Fair Construction. By execution of this Third Amendment, the Parties acknowledge that they have read and understood each provision, term and obligation contained in this Third Amendment. This Third Amendment, although drawn by one Party,

shall be construed fairly and reasonably and not more strictly against the drafting Party than the nondrafting Party.

6. Severability. If any provision of this Agreement is determined to be invalid, illegal, or unenforceable, the remaining provisions remain in full force, if the essential terms and conditions of this Agreement for each Party remain valid, binding, and enforceable.

| FORT BEND COUNTY, TEXAS                          | ZOLL DATA SYSTEMS, INC.             |  |  |
|--|-------------------------------------|--|--|
| COUNTY Judge KP George                           | Sandy King                          |  |  |
| KP George,                                       | Authorized Agent – Signature        |  |  |
| County Judge                                     | Sandy King                          |  |  |
| Date: September 27, 2022                         |                                     |  |  |
| O VA   | Authorized Agent – Printed Name     |  |  |
| ATTEST:  | Date: 9/16/2022                     |  |  |
| Laura Richard, County Clerk                      |                                     |  |  |
| REVIEWED:  |                                     |  |  |
| Robyn Doughtie                                   |                                     |  |  |
| Robyn Doughtie, Director                         |                                     |  |  |
| Fort Bend County Information Technology          |                                     |  |  |
|  |                                     |  |  |
| AUDITOR'S C                                      | CERTIFICATE                         |  |  |
| I hereby certify that funds are available        |                                     |  |  |
| accomplish and pay the obligation of Fort Bend ( | County, Texas under this Agreement. |  |  |

Robert E. Sturdivant, County Auditor

# **EXHIBIT A**

(Follows Behind)

## ZOLL DATA SYSTEMS

11802 Ridge Parkway Suite 400 Broomfield, CO 80021

**NEW REMIT TO ADDRESS – Effective 7/1/2022 DEPT# 42374** PO Box 650823 Dallas, TX 75265-0823

## INVOICE

BILL TO:

Fort Bend County Robyn Doughtie 301 Jackson, Suite 533 Richmond, TX 77469

SOLD TO:

Fort Bend County 500 Liberty St

Richmond, TX 77469-3500

| Invoice     | Customer | Invoice    | Contract    | PO     | Payment | Invoice Due |
|-------------|----------|------------|-------------|--------|---------|-------------|
| Number      | Number   | Date       | Number      | Number | Terms   | Date        |
| INV00119908 | 147191   | 07/01/2022 | A-S00007973 | 210603 | Net 30  | 07/31/2022  |

| Charge Description                       | Service Period          | Qty   | Unit Price       | Total     |
|--|-------------------------|-------|------------------|-----------|
| Hosted ePCR Premium (Per PCR/Month)      | 08/01/2022 - 08/31/2022 | 2,917 | 1.16             | 3,397.49  |
| Hosted ePCR Managed Services (Per Month) | 08/01/2022 - 08/31/2022 | 1     | 350.00           | 350.00    |
| ZOLL Billing                             | 08/01/2022 - 08/31/2022 | 1,893 | 4.25             | 8,045.25  |
|  |                         |       | Subtotal:        | 11,792.74 |
|  |                         |       | Discount:        | 0.00      |
|  |                         | [     | Tax:             | 0.00      |
|  |                         | 1     | Gross Amount:    | 11,792.74 |
|  |                         |       | Invoice Balance: | 11,792.74 |

### PLEASE NOTE NEW REMIT TO ADDRESS ABOVE

#### Please remit to address above

If you have any questions on this invoice, or need information on your account in general, please email Accountsreceivable@zoll.com, or call 303-801-1856.

We appreciate your business and look forward to assisting with any questions or concerns.

From:

**ZOLL Data Systems** 

Sent:

Mon, 1 Aug 2022 12:15:11 -0700 (PDT)

To:

ITApps.AP.EMS@FortBendCountyTX.gov; APAuditor@fortbendcountytx.gov

Subject:

Invoice INV00122148 is attached

Attachments:

INV00122148\_147191\_08012022.pdf

Dear Robyn Doughtie.

Your invoice INV00122148 is available:

Invoice Due Date: 08/31/2022

Invoice Total Amount: 11,792.74 USD

Please do not reply to this email

If you have any questions, please contact us at accounts receivable@zoll.com or 303-801-1856

Thank you for your business!



This canali delivinaria fixen paradar of the organization (proportion to the principle) conf. Do not discharge in the proportion of the proportion of the senter and know the proportion is able. Please provided analysis tractic is the II Service Desk.

### **CERTIFICATE OF INTERESTED PARTIES**

FORM **1295** 

1 of 1

|   |  |  |   |                    | 1011                             |  |  |
|---|--|--|---|--------------------|----------------------------------|--|--|
|   | 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.          | CEI  | OFFICE USE ONLY CERTIFICATION OF FILING |                    |                                  |  |  |
| 1 | Name of business entity filing form, and the city, state and count   | e of business entity filing form, and the city, state and country of the business entity's place |   |                    | Certificate Number:              |  |  |
|   | of business. ZOLL Data Systems, Inc  |  | 2022                                    | 2-934886           |                                  |  |  |
|   | Fort Collins, CO United States   |  | Date                                    | Filed:             |                                  |  |  |
| 2 | Name of governmental entity or state agency that is a party to th  | ne contract for which the form is  | 09/16/2022                              |                    |                                  |  |  |
| _ | being filed.   |  |   |                    |                                  |  |  |
|   | Fort Bend County   | у  |   |                    | Date Acknowledged:<br>09/27/2022 |  |  |
| 3 | Provide the identification number used by the governmental enti-<br>description of the services, goods, or other property to be provided |  | y the c                                 | ontract, and prov  | vide a                           |  |  |
|   | 210603   |  |   |                    |                                  |  |  |
|   | Hosted Software System   |  |   |                    |                                  |  |  |
| 4 |  |  |   |                    | ature of interest                |  |  |
|   | Name of Interested Party   | City, State, Country (place of busin   | iess)                                   | (check applicable) |                                  |  |  |
|   |  |  |   | Controlling        | Intermediary                     |  |  |
|   |  |  |   |                    |                                  |  |  |
|   |  |  |   |                    |                                  |  |  |
|   |  |  |   |                    |                                  |  |  |
|   |  |  |   |                    |                                  |  |  |
|   |  |  |   |                    |                                  |  |  |
|   |  |  |   |                    |                                  |  |  |
|   |  |  |   |                    |                                  |  |  |
|   |  |  |   |                    |                                  |  |  |
|   |  |  |   |                    |                                  |  |  |
|   |  |  |   |                    |                                  |  |  |
| 5 | Check only if there is NO Interested Party.  |  |   |                    |                                  |  |  |
| 6 | UNSWORN DECLARATION  |  |   |                    |                                  |  |  |
|   | My name is   | name is, and my date of birth is   |   |                    |                                  |  |  |
|   | My addrage is  |  |   |                    |                                  |  |  |
|   | My address is(street)  | (city) (s  | state)                                  | (zip code)         | (country)                        |  |  |
|   | I declare under penalty of perjury that the foregoing is true and correct  | ct.  |   |                    |                                  |  |  |
|   | Executed inCounty  | y, State of . on the   | (                                       | day of             | , 20 .                           |  |  |
|   |  | , 5, 4, 4, 6   |   | (month)            | (year)                           |  |  |
|   |  |  |   |                    |                                  |  |  |
|   | Signature of authorized agent of contracting business entity (Declarant)   |  |   |                    |                                  |  |  |