

Ohio Department of Developmental Disabilities

## AGREEMENT FOR PURCHASE OF GOODS AND/OR SERVICES AMENDMENT

The **Original Agreement for Purchase of Goods and/or Services effective December 21, 2022** was entered into between the Ohio Department of Developmental Disabilities (Agency), on behalf of the following:

<b>Developmental Center / Central Office Division:</b> Northwest Ohio Developmental Center	<b>Address (Street, City, State, Zip)</b> 1101 S Detroit Ave Toledo, Ohio 43614
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And

<b>Contractor's Name:</b> Asset Protection Corporation	<b>Address (Street, City, State, Zip)</b> 5211 Renwyck Drive Toledo, Ohio 43615	<b>OAKS Supplier ID:</b> 9072
<b>Type of Service:</b> Parts and labor to install 9 CO Duct Detectors at NODC		

The following information replaces the existing language in the original contract.

### CONTRACT MODIFICATIONS:

#### SECTION C. COMPENSATION

- Set forth on the **contractor's quote # 22QC219 dated January 12, 2023** is the price to be paid for the products and/or services being purchased hereunder. The maximum compensation under this agreement is forty-six thousand six hundred and twenty dollars and zero cents (\$46,620.00).

#### SECTION D. GOODS AND/OR SERVICES

- Attached hereto are the products and/or services to be purchased hereunder from Asset Protection Corporation (Contractor) by Northwest Ohio Developmental Center, under the Contractor's **quote #22QC219 dated January 12, 2023**.

All other terms and conditions of the original contract remain in force as originally agreed upon.

**IN WITNESS WHEREOF**, the parties hereto have caused this Amendment to be executed by their duly authorized officers, this effective upon date of final signature.

Asset Protection Corporation  
Ken Elrod, Contractor Division Manager

Ohio Department of Developmental Disabilities  
Kimberly Hauck, Director

By: \_\_\_\_\_

By: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_

Ohio Department of Developmental Disabilities  
Sara Lawson, Deputy Director

Northwest Ohio Developmental Center  
Trina Kincaid, Superintendent

By: \_\_\_\_\_

By: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_