

AMENDMENT NO. 1

MAR 17 2023

CONTRACT TITLE: AEPA 022E LED Lighting

CONTRACTOR

SUPPLIER ID

CONTRACT NO.

Facility Solutions Group Inc.
224 Washington St
Perth Amboy, NJ 08861

1000038316

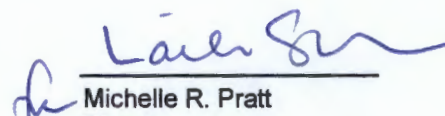
4400010967

By mutual agreement, Contract 4400010967 is renewed for one (1) year, effective March 01, 2023, through February 29, 2024, at existing prices, terms, and conditions. This is the first renewal option of three (3).

All other price, terms and conditions remain unchanged.

ACCEPTANCE:

BY: <u>Alyssa Cignarella</u>	<u>Inside Sales</u>
Signature	Title
<u>Alyssa Cignarella</u>	<u>3/13/2023</u>
Printed Name	Date


Michelle R. Pratt
Director

MRP/pak

DISTRIBUTION:
Facility Solutions Group Inc.
bernie.erickson@fsgj.com
FCPS - Procurement Services

3/20/23
FD

AEPA #22-D LED Lighting

EXTENSION OF AGREEMENT

made by and between

Facility Solutions Group, Inc. (Vendor)

and

Fairfax County Public Schools (Member)

AEPA has approved the extension of this Agreement. The Member and Vendor hereby agree to extend the Agreement for an additional contract term, which will begin immediately upon the expiration of the previous contract term. Upon the execution from authorized officers of the Member and the Vendor, this Agreement is hereby extended. This extension shall be subject to the same Terms and Conditions as contained in the original AEPA solicitation, and subject to the Bylaws, Policies and Procedures of AEPA in addition to the Member Terms and Conditions.

☐ Contract Term: March 1, 2023, through February 29, 2024

The Vendor hereby agrees to provide complete information of any deleted and new products or prices as allowed under headings (Product Addition/Discontinuation) and (New Catalogs/Price Changes) of the AEPA solicitation.

Member

Authorized Signature *Laura Sue* Title Director
Typed Name *MR* Michelle R. Pratt Date *3/17/2023*

Vendor

Authorized Signature *Alyssa Cignarella* Title Inside Sales
Typed Name Alyssa Cignarella Date 3/13/2023

Discontinue: We, the Vendor, desire to discontinue the contract.

Authorized Signature _____ Title _____
Typed Name _____ Date _____