



Obermeyer Biomedical™ Service Agreement · 1 Year

Account Name: Wise County EMS
Address: 1101 Ross Ave.
City, State, Zip: Decatur, TX 76234
Start Date: 10/01/2019
Expiration Date: 9/31/2020

This Obermeyer Biomedical Agreement Includes:

- 1 AED Inspection
- Cleaning the Unit
- Labor and Travel
- Service Documentation

Obermeyer Biomedical agrees to service the equipment listed on the Agreement.

Price of Contract Coverage is \$6035.00 in one annual installment.

Bryan Obermeyer
Contract Administrator

[Signature]
Customer Signature

08/12/2019
Date Accepted

08/05/2019
Date Offered

none
Purchase Order Number

Rep: Bryan Obermeyer

Unit	Serial #	Inspection Price	Start Date	End Date
AED	14089830	\$85.00	10/1/2018	9/31/2019
AED	14089831	\$85.00	10/1/2018	9/31/2019
AED	14089832	\$85.00	10/1/2018	9/31/2019
AED	34057976	\$85.00	10/1/2018	9/31/2019
AED	34057977	\$85.00	10/1/2018	9/31/2019
AED	37353432	\$85.00	10/1/2018	9/31/2019
AED	37353433	\$85.00	10/1/2018	9/31/2019
AED	37353434	\$85.00	10/1/2018	9/31/2019
AED	37353435	\$85.00	10/1/2018	9/31/2019
AED	37353436	\$85.00	10/1/2018	9/31/2019
AED	37353437	\$85.00	10/1/2018	9/31/2019
AED	37353438	\$85.00	10/1/2018	9/31/2019
AED	37353439	\$85.00	10/1/2018	9/31/2019
AED	37353440	\$85.00	10/1/2018	9/31/2019
AED	37353441	\$85.00	10/1/2018	9/31/2019
AED	37353442	\$85.00	10/1/2018	9/31/2019
AED	37353443	\$85.00	10/1/2018	9/31/2019
AED	37353444	\$85.00	10/1/2018	9/31/2019
AED	37353445	\$85.00	10/1/2018	9/31/2019
AED	37353446	\$85.00	10/1/2018	9/31/2019
AED	37353447	\$85.00	10/1/2018	9/31/2019
AED	37353448	\$85.00	10/1/2018	9/31/2019
AED	38323082	\$85.00	10/1/2018	9/31/2019
AED	38323083	\$85.00	10/1/2018	9/31/2019
AED	38323084	\$85.00	10/1/2018	9/31/2019
AED	38323085	\$85.00	10/1/2018	9/31/2019
AED	38323086	\$85.00	10/1/2018	9/31/2019
AED	38323087	\$85.00	10/1/2018	9/31/2019
AED	38323088	\$85.00	10/1/2018	9/31/2019
AED	38323089	\$85.00	10/1/2018	9/31/2019
AED	38323090	\$85.00	10/1/2018	9/31/2019
AED	38323091	\$85.00	10/1/2018	9/31/2019
AED	38323092	\$85.00	10/1/2018	9/31/2019
AED	38323093	\$85.00	10/1/2018	9/31/2019
AED	38323094	\$85.00	10/1/2018	9/31/2019
AED	38323095	\$85.00	10/1/2018	9/31/2019
AED	38323096	\$85.00	10/1/2018	9/31/2019
AED	38323097	\$85.00	10/1/2018	9/31/2019
AED	38323098	\$85.00	10/1/2018	9/31/2019
AED	38323099	\$85.00	10/1/2018	9/31/2019
AED	38227196	\$85.00	10/1/2018	9/31/2019
AED	38227197	\$85.00	10/1/2018	9/31/2019
AED	38515769	\$85.00	10/1/2018	9/31/2019
AED	38515770	\$85.00	10/1/2018	9/31/2019

AED	38515771	\$85.00	10/1/2018	9/31/2019
AED	38515772	\$85.00	10/1/2018	9/31/2019
AED	38515773	\$85.00	10/1/2018	9/31/2019
AED	38515774	\$85.00	10/1/2018	9/31/2019
AED	38515775	\$85.00	10/1/2018	9/31/2019
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AED	38515781	\$85.00	10/1/2018	9/31/2019
AED	38515782	\$85.00	10/1/2018	9/31/2019
AED	38515783	\$85.00	10/1/2018	9/31/2019
AED	38515784	\$85.00	10/1/2018	9/31/2019
AED	38515785	\$85.00	10/1/2018	9/31/2019
AED	38515786	\$85.00	10/1/2018	9/31/2019
AED	38515787	\$85.00	10/1/2018	9/31/2019
AED	38515788	\$85.00	10/1/2018	9/31/2019
AED	38515789	\$85.00	10/1/2018	9/31/2019
AED	38515790	\$85.00	10/1/2018	9/31/2019
AED	38515791	\$85.00	10/1/2018	9/31/2019
AED	38515792	\$85.00	10/1/2018	9/31/2019
AED	38515793	\$85.00	10/1/2018	9/31/2019
AED	38515794	\$85.00	10/1/2018	9/31/2019
AED	38515795	\$85.00	10/1/2018	9/31/2019
AED	38515796	\$85.00	10/1/2018	9/31/2019
AED	38515797	\$85.00	10/1/2018	9/31/2019
Total		\$6,035.00	8	



OBERMEYER BIOMEDICAL TECHNICAL SERVICE AGREEMENT TERMS AND CONDITIONS

OBERMEYER BIOMEDICAL

AED PERFORMANCE INSPECTION SERVICES

Inspection is to verify calibration setting in the AED output measurement is within manufactures AED product specifications.

AED PERFORMANCE INSPECTION DOCUMENTATION

Following each verification performance inspection, Obermeyer Biomedical will provide Customer with written documentation.

ELECTRODE REPLACEMENT

The customer is responsible for Electrode Replacement when the Electrode Pads expire.

BATTERY RECYCLING

AED battery's failing to meet AED Manufactures recommendations should be removed from daily operations of the AED and properly replaced in accordance to Manufactures recommendations. Obermeyer Biomedical will receive the old battery's for proper recycling. The Customer is responsible for the replacement of bad non-functioning batteries with new batteries.

ACCEPTANCE-LENGTH OF AGREEMENT

To receive the desired service, on the terms described herein, please indicate CUSTOMER's acceptance by signing this Agreement on Page 1.

SERVICE INVOICING

The cost of services performed by Obermeyer Biomedical shall be payable by Customer within thirty (30) days of Customer's receipt of Obermeyer Biomedical invoice.

TERMINATION

This agreement can be canceled by either party by giving at least thirty (90) days of the prior written notice to each other.

ACCEPTANCE-LENGTH OF AGREEMENT

To receive service, on the terms described herein, please indicate customer's acceptance by signing this Agreement indicated on Page 1 and returning a copy to Obermeyer Biomedical.

PERFORMANCE EXCLUSIONS

Service delivered by Obermeyer Biomedical here under shall be subject to and conditional upon floods, strikes, other labor disturbances (regardless of the reasonableness of the demands of labor), riots, fires, accidents, wars (present and future), embargoes, delays of carriers, inability to obtain raw materials, failures of normal sources of supply, restraints of government of any other cause (whether similar or dissimilar to the foregoing) beyond Obermeyer Biomedical's reasonable control.

SEVERABILITY OF PROVISIONS

The invalidity, in whole or in part, of any of the foregoing paragraphs, where determined to be illegal, invalid, or unenforceable by a court or authority of competent jurisdiction, will not affect or impair the enforceability of the remainder of the Agreement. All costs and expenses incurred by the prevailing party related to this document including reasonable attorney's fees, shall be reimbursed by the other party.

GOVERNING LAW

This Agreement shall be construed and interpreted in accordance with the laws of the State of Texas.

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

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.
Obermeyer Biomedical
Bedford, TX United States

Certificate Number:
2019-525415

Date Filed:
08/05/2019

Date Acknowledged:

8-13-19

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.
Wise County EMS

3 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.
08052019
AED Service

4 Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
		Controlling	Intermediary
Obermeyer, Bryan	Bedford, TX United States	X	

5 Check only if there is NO Interested Party.

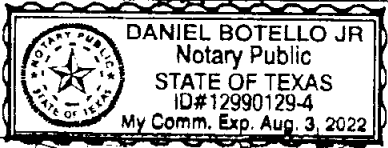
6 UNSWORN DECLARATION

My name is Bryan Obermeyer and my date of birth is _____

My address is 1212 Dora Street Bedford TX 76202 Tarrant
(street) (city) (state) (zip code) (country)

I declare under penalty of perjury that the foregoing is true and correct.

Executed in Tarrant County State of Texas on the 25 day of August 2019
(month) (year)



Bryan Obermeyer
Signature of authorized agent of contracting business entity (Declarant)