

Notice of Material Change to the Vendor Contract

Pursuant to the terms of your awarded vendor contract, all vendors must notify Region 4 Education Service Center ("Region 4") when any material change in operations, that may adversely affect members, (i.e. assignment, bankruptcy, change of ownership, merger, etc.) is made. No material change may be made to the contract without the prior written approval of Region 4. Region 4 reserves the right to accept or reject any new party.

Fellowes, Inc. d/b/a ESI Ergonomic Solutions (vendor	company name) hereby provides notice of the following material change to
contract number: R221001 on this date N	November 1, 2023
	provide supporting documentation. Place your initials next to each item to sign the signature page with all require signatures, prior to submitting you
X Assignment	☐ Change in ownership (sale/purchase)
_ Indicate if you are assigning to your own subsidiary	Asset Purchase Agreement
Assumption Agreement	Other supporting documentation
x Other supporting documentation	_
	L Acquisition
☐ Bankruptcy	Asset Purchase Agreement
Official legal Notice of Bankruptcy Proceedings	Other supporting documentation
Other supporting documentation	
п.,	☐ Other
☐ Merger	Supporting documentation
Share Exchange Agreement	
Merger and Acquisition Agreement	
Asset Purchase Agreement Other supporting documentation	
Notes: Vendor may include any other notes regarding the Fellowes, Inc. d/b/a ESI Ergonomic Solutions will be char	
See Fellowes W-9 and Press Release.	

Upon approval of this notice, the awarded contract holder and/or subsequent assignee agree to and understand the following principles:

i. <u>Contract holder reference</u>. If the contract holder undergoes a merger, acquisition, or partial assignment, in which case they still maintain the contract, then all transactions made under the existing contract number (including purchase orders) must reference the name of the awarded contract holder. The exception to this requirement is if the contract holder no longer holds the contract or if the company has been acquired by another company and undergone a name change. Notice of the authorized name change, to the existing contract, must be provided and approved by Region 4.



In instances where the contract holder has acquired a separate and distinct company, and it is necessary to designate those certain purchases facilitated by the non-contract holder, then this designation may be made if, and only if, the contract holder is also referenced on the transaction.

- ii. <u>Maintenance of records</u>. Both the awarded contract holder and subsequent assignee agree to remain responsible for maintaining all auditable records, including documents kept in the ordinary course of business and sales invoices, related to OMNIA Partners, Public Sector and/or contract number pursuant to the statutory requirements identified in the vendor contract.
- iii. <u>Payments</u>. Both the awarded contract holder and subsequent assignee agree that all payments made by participating entities <u>must</u> be made directly to the contract holder, unless otherwise approved by Region 4. Accordingly, both parties acknowledge that in instances where it is necessary to designate the purchases facilitated by assignee, that the contract holder <u>must</u> also be referenced on the purchase order.
- iv. <u>Handling of Proprietary and/or Confidential Information</u>. In accord with the terms of the contract, both awarded vendor and assignee agree that at all times it will hold in strict confidence and not disclose to any third party Confidential and/or Proprietary information of Region 4, except as approved in writing by Region 4, and will use the Confidential Information for no purpose other than providing services under the contract. Both awarded vendor and assignee shall only permit access to Confidential Information to those of its employees or authorized representatives having a need to know and who have signed confidentiality agreements or are otherwise bound by confidentiality obligations at least as restrictive as those contained herein.

This document is to be construed in strict accordance with the terms and conditions outlined in the Region 4/vendor master agreement referenced herein. Both awarded vendor and assignee agree to uphold the vendor obligations set forth in the vendor agreement. This Agreement will become effective when signed by all parties.

AGREED AND ACCEPTED AS OF THE DATE FIRST SET FORTH ABOVE:

Company name of awarded vendor Fellowes, Inc. d/b/a ESI Ergonomic Solutions	Official name of assigned or added company Fellowes, Inc.
DocuSigned by: Melissa Fuller BY:	BY: May Way Ly 61672A40A3784AE
NAME: Melissa Fuller	NAME: Amy Maxey
TITLE: Vertical Markets Contract Manager	TITLE: Director of Vertical Markets
Region & Edyfation Service Center BY: Robert Eingumann	
NAME:	
TITLE: CFO	
DATE: 11/1/2023 1:26 PM CDT	

Form **W-9**

(Rev. October 2018) Department of the Treasury Internal Revenue Service

Request for Taxpayer Identification Number and Certification

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

Give Form to the requester. Do not send to the IRS.

	Name (as shown on your income tax return). Name is required on this line; do	not leave this line blank.														
	Fellowes, Inc.															
	2 Business name/disregarded entity name, if different from above															
ige 3.							certain entities, not individuals; see instructions on page 3):									
оп ра																
pe.	single-member LLC							Exempt payee code (if any) 5								
r ty		Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶														
Print or type. Specific Instructions on page	Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do n LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member is disregarded from the owner should check the appropriate box for the tax classification of its owner.						the LLC is									
ecif	☐ Other (see instructions) ►					(Ac	(Applies to accounts maintained outside the U.S.)									
Sp	5 Address (number, street, and apt. or suite no.) See instructions.		Request	er's	name	and	and address (optional)									
See	1789 Norwood Avenue															
	6 City, state, and ZIP code															
	Itasca, IL 60143															
	7 List account number(s) here (optional)															
Par	t I Taxpayer Identification Number (TIN)															
	your TIN in the appropriate box. The TIN provided must match the name			So	cial se	ecuri	ity n	umber								
	p withholding. For individuals, this is generally your social security numl nt alien, sole proprietor, or disregarded entity, see the instructions for P		ora				_[_						
entitie	s, it is your employer identification number (EIN). If you do not have a no		ta L								<u>L</u>					
<i>TIN</i> , la				or			-10			_		_				
	If the account is in more than one name, see the instructions for line 1. er To Give the Requester for guidelines on whose number to enter.	Also see What Name a	and [Em	ploye	ride	entif	ication	nun	nber	_	=				
	or to one the requestor for galactimes on whose hamber to enter.			3	6	-	0	7 7	/ C	6	7	0				
Pari	Certification									1			_			
	penalties of perjury, I certify that:								_				_			
	number shown on this form is my correct taxpayer identification number	er (or I am waiting for a	a numbe	r to	be is	ssue	d to	me):	and							
2. I am Sen	n not subject to backup withholding because: (a) I am exempt from bacl vice (IRS) that I am subject to backup withholding as a result of a failure onger subject to backup withholding; and	kup withholding, or (b)	I have n	ot k	oeen	notii	fied	by the	e Int	ernal	Reve ne th	enue iat I a	am			
3. I arr	a U.S. citizen or other U.S. person (defined below); and															
4. The	FATCA code(s) entered on this form (if any) indicating that I am exempt	t from FATCA reporting	g is corre	ect.												
Certifi	cation instructions. You must cross out item 2 above if you have been not	tified by the IRS that you	u are cur	ren	tly su	bjec	t to	backu	o wi	thhol	ding	beca	use			
acquis	we failed to report all interest and dividends on your tax return. For real esta ition or abandonment of secured property, cancellation of debt, contribution han interest and dividends, you are not required to sign the certification, bu	ns to an individual retire	ement arr	rang	geme	nt (IF	λA),	and ge	ener	ally, r	oaym	ents ater.				
Sign Here	Signature of U.S. person ▶	D	ate ►	ŝ	?. •	7.	2	3								
Ger	neral Instructions	• Form 1099-DIV (div	ridends,	inc	ludin	g the	ose	from s	toc	ks or	mut	ıal				
Sectio	n references are to the Internal Revenue Code unless otherwise	funds) • Form 1099-MISC (v	arious t	ype	s of i	псоі	me,	prizes	, av	vards	, or	gross	}			
Future	e developments. For the latest information about developments I to Form W-9 and its instructions, such as legislation enacted	proceeds) Form 1099-B (stock transactions by broken)		ual	fund	sale	s ar	nd cer	tain	othe	r					
after they were published, go to www.irs.gov/FormW9.		transactions by brokers) • Form 1099-S (proceeds from real estate transactions)														
Purp	pose of Form	• Form 1099-K (merc	hant car	rd a	and th	ird p	oart	y netw	ork	trans	saction	ons)				
nform	ividual or entity (Form W-9 requester) who is required to file an ation return with the IRS must obtain your correct taxpayer	 Form 1098 (home n 1098-T (tuition) 	nortgage	e int	teres	t), 1(98-	-E (stu	den	t loar	ı inte	rest)	,			
dentification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption		• Form 1099-C (canceled debt)														
axpay	ver identification number (ATIN), or employer identification number	• Form 1099-A (acqui														
(EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information		Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.														
	s include, but are not limited to, the following.	If you do not return	Form V	V-9	to th	e red	que	ster w	ith a	TIN,	you	migh	ıt			
Form 1099-INT (interest earned or paid)		If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.														



FELLOWES ANNOUNCES THE EXTENSION OF ITS BRAND INTO CONTRACT FURNITURE

ITASCA, Ill. – Feb. 23, 2023 – <u>Fellowes</u>, a family-owned company which has offered a broad range of workplace products since 1917, has announced today its brand expansion into its Contract Interiors business. Both Trendway and ESI brands will transition to the Fellowes Brand in the first half of 2023.

Furthermore, during the course of 2023, Fellowes will be expanding its brand beyond workspace products to a broader range of WorkLife solutions—including modular walls, select furniture, business machines, commercial air purification systems and commercial-grade workspace products and capabilities. "Our goal is to operate as one company, with the same standard across all touchpoints of our brand", said John Fellowes, President & CEO, Fellowes.

- ONE source for any WorkLife need, from modular walls, tables and specialty chairs to air purifiers and office supplies
- ONE set of standards across all touchpoints, that puts your needs first
- ONE efficient, streamlined system that saves our client's time
- ONE trusted partner that will stick with you every step of the way

At NeoCon 2022, Fellowes' company theme was "It's Beginning," foreshadowing these changes. Accompanying this announcement, Fellowes is announcing its 2023 theme of "ONE Fellowes. Unleashing What's Next" which will focus on the reintroduction of its brand, services, and capabilities to its valued market partners.

About Fellowes

Celebrating its 106th year under the private ownership and executive leadership of the Fellowes family, Fellowes is a global leader and trusted partner that provides product solutions to fulfill a broad range of WorkLife needs. Throughout its history, Fellowes has been grounded in its purpose to "serve at the intersection of family, innovation, quality and care." Headquartered in Itasca, Illinois, USA, Fellowes operates from 24 locations across the globe. For more information, please visit Fellowes.com.

For inquiries, Contact:

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