



Assignment of Contract # 20150944A

City of Springfield Assignment of Contract Tracer Log

INSTRUCTIONS: Upon receipt, please initial and write in the date of receipt on this Tracer form. When your department has approved and signed the blanket contract, please initial and date in the forwarding section and deliver to the next department.

DEPARTMENT	DATE RECEIVED		DATE FORWARDED TO NEXT DEPT.	
	Initials	Date	Initials	Date
Office of Procurement			RW	10/23/2017
Police Department	gob	10-25-17	gob	10-25-17
City Comptroller	llh	10/27/17	llh	10/30/17
Law	PF	10-30-17	PF	10-30-17
CAFO	mm	11.1.17	mm	11.3.17
Mayor	ef	11/3/17	ef	11/3/17
Office of Procurement				11/6/17

Current Vendor #: 2602 Current Vendor Name: **Taser International, Inc.**

Current Contract #: 20150944

Note: All Open Purchase Orders and Contracts for the Current Vendor must be closed before the reassignment of the contract is processed.

New Vendor #: 17392 New Vendor Name: **Axon Enterprise, Inc.**

New Contract #: 20150944A

Bid #: 15-179 Contract Type: ☒ Blanket ☐ Lump Sum

Contract Description: Purchase of Tasers, Holsters and Accessories

Requesting Department: Police

**AMENDMENT TO CITY CONTRACT NO. 20150944,
as amended by
CITY CONTRACT NO. 20150944A**

**ASSIGNMENT OF CONTRACT FOR TASERS, HOLSTERS AND
ACCESSORIES**

WHEREAS, on or about March 3, 2015, the CITY OF SPRINGFIELD a municipal corporation within the County of Hampden, Commonwealth of Massachusetts, with its principal offices at 36 Court Street, Springfield, Massachusetts 01103, acting by and through Chief Procurement Officer, with the approval of the Police Department and the Mayor (hereinafter referred to as the "City"), entered into a "Contract for the Purchase of Tasers, Holsters and Accessories, referred to as City Contract No. 20150944 ("Agreement") with **Taser International, Inc.**, an Arizona corporation with a usual place of business at 17800 N. 85th Street, Scottsdale, Arizona 85255; and

WHEREAS, the Agreement called for the Purchase of Tasers, Holsters and Accessories, to provide supplies for the Springfield Police Department; and

WHEREAS, on or before April 4, 2017, as a result of the sale of Taser International, Inc. to Axon Enterprise, Inc., (hereinafter "Assignee"); and

WHEREAS, effective as of April 4, 2017, **Taser International, Inc.** as Assignor, wishes to assign, convey and transfer to **Axon Enterprise, Inc.**, as Assignee, all of rights, title, and interest in City Contract No. 20150944, and Assignee wishes to accept and obtain all such rights, title and interest, and the City wishes to acknowledge and consent to such assignment, subject to the terms and conditions of this Assignment of City Contract No. 20150944A.

NOW THEREFORE, the City, Assignor, and Assignee mutually agree to amend the Agreement as follows:

- 1) **Assignment.** Effective as of April 4, 2017, Taser International, Inc., as Assignor, hereby assigns, conveys, transfers and delivers to Axon Enterprise, Inc., as Assignee, all of Taser's rights, title and interest in, under and to City Contract No. 20150944 and 20150944A, including the contract balance through the expiration of the contract on February 28, 2018.
- 2) **Assumption.** Subject to Section 1 of this Assignment, Axon Enterprise Inc., as Assignee, hereby accepts the assignment of Taser's rights, titles and interests in, under, and to City Contract No. 20150944 and 20150944A, and hereby assumes, undertakes and agrees to perform and discharge all of Assignor's duties and obligations under the City Contract No. 20150944 and 20150944A, upon the terms and subject to the conditions contained therein.

- 3) Acknowledgment and Consent. The City of Springfield acknowledges and consents to this Assignment. By its execution of this Assignment, the City, the Assignor and the Assignee, acknowledge that they have received written notice of, and agree to be bound by, the terms and conditions hereof.
- 4) Ratification. Except as expressly modified or amended under this Assignment, all terms and conditions of City Contract No. 20150944 and 20150944A which are of a continuing nature, shall remain in full force and effect. City Contract No. 20150944 and 20150944A, as hereby modified, is ratified and confirmed in each and every respect.
- 5) Notices: Notices to **Axon Enterprise, Inc.**, shall be sent to:

Axon Enterprise, Inc.
P.O. Box 29661 Department 2018
Phoenix, Arizona 85038
Phone 800-978-2737
contracts@axon.com
www.axon.com
- 6) Governing Law. This Assignment shall be governed by, and construed and enforced in accordance with, the laws of the Commonwealth of Massachusetts.
- 7) Counterparts. This Assignment may be executed in any number of separate counterparts and all such executed counterparts shall constitute one agreement which shall be binding on Assignor, Assignee and the City.
- 8) Further Assurances. Assignor, Assignee and the City hereby agree to execute and acknowledge and deliver such other statements, certificates, affidavits, instruments, and other documents as may be reasonably requested by the other party in order to confirm, perfect, evidence or otherwise effectuate the assignment and assumption effected hereby.

(SIGNATURE PAGE FOLLOWS)

IN WITNESS WHEREOF, the City of Springfield, acting by and through its Police Commissioner, with the approval of its Mayor, and Assignor and Assignee, have executed this Amendment and Assignment as of the date first written above.

ASSIGNOR:

Taser International, Inc.

By: Joshua Isner
Its: EVP, Global Sales
Date signed: 10/19/17

ASSIGNEE:

Axon Enterprise, Inc.

By: Joshua Isner
Its: EVP, Global Sales
Date signed: 10/19/17

CITY OF SPRINGFIELD

Therese
Office of Procurement

Date signed: 10/24/17

Springfield Police Department

John B...
Police Commissioner

Date signed: 10-25-17

^{N/A}
^{LXL} Approved as to Appropriation:

John B...
Comptroller
Date signed: 10/27/17

Reviewed:

Ty J...
CAFO
Date signed: 11/2/17

Approved as to Form:

Rob Fort...
City Solicitor
Date signed: 10-30-17

Approved:

Domenic J. Sarno
DOMENIC J. SARNO
MAYOR
Date signed: 11/3/17

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "TASER INTERNATIONAL, INC.", CHANGING ITS NAME FROM "TASER INTERNATIONAL, INC." TO "AXON ENTERPRISE, INC.", FILED IN THIS OFFICE ON THE FOURTH DAY OF APRIL, A.D. 2017, AT 2:30 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID CERTIFICATE OF AMENDMENT IS THE FIFTH DAY OF APRIL, A.D. 2017 AT 12 O'CLOCK P.M.

A FILED COPY OF THIS CERTIFICATE HAS BEEN FORWARDED TO THE NEW CASTLE COUNTY RECORDER OF DEEDS.



3337819 8100
SR# 20172241145

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 202321717
Date: 04-04-17

State of Delaware
Secretary of State
Division of Corporations
Delivered 02:30 PM 04/04/2017
FILED 02:30 PM 04/04/2017
SR 20172241145 - File Number 3337819

**CERTIFICATE OF AMENDMENT
OF
CERTIFICATE OF INCORPORATION
OF
TASER INTERNATIONAL, INC.
(which is changing its name to Axon Enterprise, Inc.)**

TASER INTERNATIONAL, INC. (the "Company"), a corporation organized and existing under the General Corporation Law of the State of Delaware, hereby certifies as follows:

1. This Certificate of Amendment (the "Certificate of Amendment") amends the provisions of the Company's Certificate of Incorporation filed with the Secretary of State of the State of Delaware on January 5, 2001 (as amended on April 20, 2001 and December 31, 2004, the "Certificate of Incorporation").

2. Article 1 of the Certificate of Incorporation is hereby amended and restated in its entirety as follows:

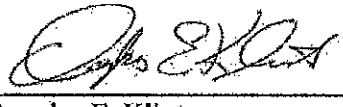
1. The name of the corporation is Axon Enterprise, Inc. (the "Corporation").

3. This Certificate of Amendment (and the amendment to the Certificate of Incorporation set forth herein) shall be effective at 12:00 p.m. Eastern Time on April 5, 2017.

4. This amendment was duly adopted in accordance with the provisions of Section 242 of the General Corporation Law of the State of Delaware.

5. All other provisions of the Certificate of Incorporation shall remain in full force and effect.

IN WITNESS WHEREOF, the Company has caused this Certificate of Amendment to be signed by Douglas E. Klint, its General Counsel and Corporate Secretary, on April 4, 2017.

By: 
Name: Douglas E. Klint
Title: General Counsel and Corporate Secretary

17392

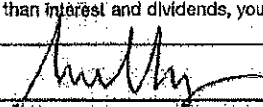
**Request for Taxpayer
Identification Number and Certification**

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

Print or type
See Specific Instructions on page 2.

1. Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. Axon Enterprise, Inc.	
2. Business name/disregarded entity name, if different from above	
3. Check appropriate box for federal tax classification; check only one of the following seven boxes: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input checked="" type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) _____ Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner. <input type="checkbox"/> Other (see instructions) _____	
4. Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) 5 Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>	
5. Address (number, street, and apt. or suite no.) 17800 North 85th Street	Requester's name and address (optional)
6. City, state, and ZIP code Scottsdale, Arizona 85255-9306	
7. List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN) Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a TIN</i> on page 3. Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.	Social security number [] [] [] - [] [] [] [] [] [] or Employer identification number [8] [6] - [0] [7] [4] [1] [2] [2] [7]
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Part II Certification Under penalties of perjury, I certify that: 1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and 2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and 3. I am 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 from FATCA reporting is correct. Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.	Signature of U.S. person  Date April 12, 2017
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General Instructions Section references are to the Internal Revenue Code unless otherwise noted. Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9 . Purpose of Form An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following: • Form 1099-INT (interest earned or paid) • Form 1099-DIV (dividends, including those from stocks or mutual funds) • Form 1099-MISC (various types of income, prizes, awards, or gross proceeds) • Form 1099-B (stock or mutual fund sales and certain other transactions by brokers) • Form 1099-S (proceeds from real estate transactions) • Form 1099-K (merchant card and third party network transactions) • Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition) • Form 1099-C (canceled debt) • Form 1099-A (acquisition or abandonment of secured property) Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN. 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? on page 2. By signing the filled-out form, you: 1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued), 2. Certify that you are not subject to backup withholding, or 3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and 4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See <i>What is FATCA reporting?</i> on page 2 for further information.
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OFFICE OF PROCUREMENT
36 COURT STREET - CITY HALL 3RD FLOOR
SPRINGFIELD MA 01103
PHONE (413)787-6284 FAX (413)787-6295

VENDOR MAINTENANCE FORM

GENERAL

To be completed by vendor:

Vendor #: _____

Business Name: Axon Enterprise, Inc.

D/B/A: _____

Purchase Order Send to Address:

Street: 17800 N. 85th Street

City: Scottsdale State: AZ Zip: 85255

Remit to Address:

Street: PO Box 290601 Department 2018

City: Phoenix State: AZ Zip: 85038

Federal ID #: 86-0741227 SS#: _____

Type of Service Provided to City? Technology _____ Contract Labor _____ Supplies X

Educational _____ Medical _____ Fleet _____ Service _____ Other _____

TERMS: Discount % _____ Days to Discount _____ Minimum Order _____ Days to Net 30

VENDOR CLASS: _____ Minority-Owned _____ Woman-Owned _____

PURCHASE ORDER DELIVERY METHOD

Please select a PRIMARY and SECONDARY delivery method for receiving the City of Springfield's Purchase Order:

PRIMARY: E-Mail X FAX _____ Regular Mail _____

SECONDARY: E-Mail _____ FAX X Regular Mail _____

CONTACT INFORMATION

Contact Name: contracts Title: _____

Telephone: 800-978-2737 Ext: _____ FAX: 480-991-0791

Email: contracts@axon.com

BUSINESS INFORMATION

Please Indication if you are: Corporation C Individual _____ Partnership _____

Limited Liability Company: _____ Limited Liability Partnership _____ Limited Partnership _____

Business Website:

www.axon.com

Please Return: In order for the City of Springfield to initiate timely payment to all new vendors a completed Vendor Maintenance Form along with the attached Request for Taxpayer Identification and Certification Form (W-9) must be completed and sent to the Procurement Office, Attn: Raemarie Walker at rwalker@springfieldcityhall.com