AGREEMENT between the Small Business Development Center (hereinafter "SBDC') and			
made and entered into this day of,,,			
STAFF COUNSELOR, who agrees to render services for the SBDC.			
I as STAFF COUNSELOR, understand that I will not:			
 Recommend the purchase of goods and/or services, which I have an interest in or represent. Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR. Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director. 			
I as STAFF COUNSELOR, understand that I will:			
 Agree to hold strictly confidential all information obtained during the course of my engagement with the client. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy. 			
IN WITNESS HEREOF, the parties affix their signatures on the day above written.			
Signature Signature			
Phone 440. 906.7456 Phone 216.321.1633			

AGREEMENT between the Small Business Development Center (hereinafter "SBDC') and			
Colette Hart (hereinafter the 'STAFF COUNSELOR'.) The agreement is			
made and entered into this day of			
STAFF COUNSELOR, who agrees to render services for the SBDC.			
I as STAFF COUNSELOR, understand that I will not:			
 Recommend the purchase of goods and/or services, which I have an interest in or represent. Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR. Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director. 			
I as STAFF COUNSELOR, understand that I will:			
 Agree to hold strictly confidential all information obtained during the course of my engagement with the client. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy. 			
IN WITNESS HEREOF, the parties affix their signatures on the day above written.			
STAFF COUNSELOR	SBDC		
Signature Coll	Signature Kutu Van Mue		
Printed Name Colette Hort Printed Name Kathe, Van Dulke			
1 . 0	Address 2340 Lee Rel		
BU308	Cleveland Hts OH 44118		
Phone 216 3875.9715	Phone 216.321.1633		
Cleveland, OH 44120			

AGREEMENT between the Small Business Development Center (hereinafter "SBDC") and			
Meyhun Sulin (hereinafter the 'STAFF COUNSELOR'.) The agreement is			
made and entered into this day of OCK, 2018 by and between the SBDC and			
STAFF COUNSELOR, who agrees to render services for the SBDC.			
I as STAFF COUNSELOR, understand that I will not:			
 Recommend the purchase of goods and/or services, which I have an interest in or represent. Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client. 			
 Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR. Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director. 			
I as STAFF COUNSELOR, understand that I will:			
1. Agree to hold strictly confidential all information obtained during the course of my engagement			
with the client. 3. Agree to reveal promptly to the client all significant matters that come to my attention pertaining			
to the business of my client 4. Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy.			
IN WITNESS HEREOF, the parties affix their signatures on the day above written.			
STAFF COUNSELOR SBDC			
Signature Management Signature	Signature Hall Van Diffe		
Printed Name MEGHAN SALKA)	Printed Name Kate Van Dyke		
Address 1860 E. 18Th ST.	Address 1340 Lee 1201		
BU 308, CHEVE, OH 44115	Cleveland Hts OH 44118		
Phone 2/6-687-4750	Phone 216.321.1633		

	AGREEMENT between the Small Business Developme	ent Center (hereinafter "SBDC') and
	Jay Schach (hereinafte	er the 'STAFF COUNSELOR'.) The agreement is
		2018 by and between the SBDC and
	STAFF COUNSELOR, who agrees to render services for	or the SBDC.
	I as STAFF COUNSELOR, understand that I will not:	
	 Recommend the purchase of goods and/or service Accept fees or commissions from third parties who recommendation to the SBDC client. 	es, which I have an interest in or represent. have supplied goods and/or services on my
	 Accept fees or commissions from the SBDC client Accept the private engagement of my services at a to, the term of my engagement as STAFF COUN permission of the SBDC subcenter director. 	any time during, or within 90 days subsequent
	I as STAFF COUNSELOR, understand that I will:	
	Agree to hold strictly confidential all information of with the client.	btained during the course of my engagement
	 Agree to reveal promptly to the client all significan to the business of my client 	t matters that come to my attention pertaining
	Acknowledge receipt of the SBDC guidelines, and	agree to abide by all provisions of that policy.
	IN WITNESS HEREOF, the parties affix their signatures	s on the day above written.
	STAFF COUNSELOR	SBDC
	Signature Signature	Signature Addulan Dylu
	Printed Name JAY H. SCHACH	Printed Name Kutie Van Dhke
	Address 1860 F. 18TA ST	Address 2340 Lee Rel
A	BU308 CLEVELAND, OH 44115	Cleveland Hts DH 44118
	Phone 216-687-4765	Phone 216.321.1633

AGREEMENT between the Small Business Development Center (hereinafter "SBDC') and		
Katte Van Dyle (hereinafter		
made and entered into this day ofday	Lany 2019 by and between the SBDC and	
STAFF COUNSELOR, who agrees to render services fo	r the SBDC.	
I as STAFF COUNSELOR, understand that I will not:		
 Recommend the purchase of goods and/or services, which I have an interest in or represent. Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client. 		
 Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR. Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director. 		
I as STAFF COUNSELOR, understand that I will:		
Agree to hold strictly confidential all information obtained during the course of my engagement with the client.		
Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client		
4. Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy.		
IN WITNESS HEREOF, the parties affix their signatures on the day above written.		
STAFF COUNSELOR	SBDC	
Signature Late Van Dighe	Signature Kata Van Dyne	
Printed Name Katie Van Dylce	Printed Name Kathe Vam Dylle	
Address 2340 Lee Rel	Address 340 Lee Rd	
Cleveland Hts OH 44118	Cleveland Hts of 44118	
Phone	Phone 216,321.1633	

AGREEMENT between the Small Business Development Center (hereinafter "SBDC") and			
I, as STAFF COUNSELOR, understand that I will not:			
 Recommend the purchase of goods and/or services, which I have an interest in or represent. Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR. Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director. 			
I, as STAFF COUNSELOR, understand that I will:			
 Agree to hold strictly confidential all information obtained during the course of my engagement with the client. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client. Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy. 			
IN WITNESS HEREOF, the parties affix their signatures on the day above written.			
STAFF COUNSELOR	SBDC Center: 17086 #		
Printed Name Luis Cartagene	Printed Name Sason Estremera		
N. Pudgerille, Off 44039	Address 2011 Clark Ave Cleveland, OH 44109		
Phone _216-854-4093	Phone 216-281-4422		

AGREEMENT between the Small Business Development Center (hereinafter "SBDC") and Chicky Center (hereinafter the "STAFF COUNSELOR"). The agreement is made and entered into this day of,			
I, as STAFF COUNSELOR, understand that I will not:			
 Recommend the purchase of goods and/or services, which I have an interest in or represent. Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR. Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director. 			
I, as STAFF COUNSELOR, understand that I will:			
 Agree to hold strictly confidential all information obtained during the course of my engagement with the client. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client. Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy. 			
STAFF COUNSELOR Signature Printed Name Address Address Address Phone (316) 281 - 442 Phone Phone Phone Printed Name SBDC Center: SBDC Center: SBDC Center: Printed Name Address Address Address Address Address Address Phone P			

AGREEMENT between the Small Business Development Center (hereinafter "SBDC") and			
Sason Estremera (hereinafter the "STAFF COUNSELOR"). The agreement is			
	de and entered into this day of		
and	STAFF COUNSELOR, who agrees to render services	for the SBDC.	
l, as	STAFF COUNSELOR, understand that I will not:		
1.	Recommend the purchase of goods and/or services	s, which I have an interest in or represent.	
	Accept fees or commissions from third parties who recommendation to the SBDC client.	have supplied goods and/or services on my	
3.	Accept fees or commissions from the SBDC client fo	or my services as STAFF COUNSELOR.	
	 Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director. 		
l, as	STAFF COUNSELOR, understand that I will:		
	. Agree to hold strictly confidential all information obtained during the course of my engagement with the client.		
	Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client.		
3.	Acknowledge receipt of the SBDC guidelines, and a	gree to abide by all provisions of that policy.	
IN WITNESS-HEREOF, the parties affix their signatures on the day above written.			
		CI A	
STA	FF COUNSELOR	SBDC Center: 1 1000 #	
Sign	patura de la secono dela secono de la secono del secono dela secono de la secono de la secono dela secono de la secono de	Signature	
Prin	ted Name Sason Estremer	Printed Name Salon Estremera	
Add	ress 2511 Clark Aue	Address 25/1 Clark Ave	
C	leveland OH 44109	Cleveland, OH HHIOG	
Pho	ne 216-281-4422	Phone 216-281-4427	

AGREEMENT between the Small Business Development Center (hereinafter "SBDC") and			
I, as STAFF COUNSELOR, understand that I will not:			
 Recommend the purchase of goods and/or services, which I have an interest in or represent. Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR. 			
 Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director. 			
I, as STAFF COUNSELOR, understand that I will:			
Agree to hold strictly confidential all information of the client.	obtained during the course of my engagement with		
Agree to reveal promptly to the client all significant the business of my client.	nt matters that come to my attention pertaining to		
3. Acknowledge receipt of the SBDC guidelines, and a	agree to abide by all provisions of that policy.		
STAFF COUNSELOR Signature Printed Name Address Lin w 98 st Cleveland OH 44102 Phone (216) 414 - 9328	on the day above written. SBDC Center: 17088 # Signature Printed Name Daton Estremera Address 2011 Clark Ave Cleveland, OH LILLIOG Phone 210-281 (1477		

AGREEMENT between the Small Business Development Center (hereinafter "SBDC") and THE COUNTY (hereinafter the "STAFF COUNSELOR"). The agreement is made and entered into this LOT day of by and between the SBDC and STAFF COUNSELOR, who agrees to render services for the SBDC.			
I, as STAFF COUNSELOR, understand that I will not:			
 Recommend the purchase of goods and/or services, which I have an interest in or represent. Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR. Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director. 			
I, as STAFF COUNSELOR, understand that I will:			
 Agree to hold strictly confidential all information obtained during the course of my engagement with the client. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client. Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy. 			
IN WITNESS HEREOF, the parties affix their signatures on the day above written.			
Signature Signature	SBDC Center: #		
Printed Name GEORGE TIMENTEL	Printed Name <u>Jason Estremera</u>		
Address 2511 Claric Ave	Address 2511 Clark Ave		
Cleveland, of 44109	Cleveland, OH 44109		
Phone 216-659-1637	Phone 216-281-4427		

AGREEMENT between the Small Business Development Center (hereinafter "SBDC") and		
I, as STAFF COUNSELOR, understand that I will not:		
 Recommend the purchase of goods and/or services, which I have an interest in or represent. Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR. Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director. Jason Estremera. 		
I, as STAFF COUNSELOR, understand that I will:		
 Agree to hold strictly confidential all information obtained during the course of my engagement with the client. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client. Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy. 		
IN WITNESS HEREOF, the parties affix their signatures on the day above written.		
Signature Stoplan Dolan Si	ignature Salan Estremera	
	ddress 2011 Clark Ave Cleveland, OH HH109	
Phone 216.223.8670 P	hone 210-281-4427	

	AGREEMENT between the Small Business Developmen	nt Center (hereinafter "SBDC') and
P. C. Graph	DONNA DWAMS (hereinafte	r the 'STAFF COUNSELOR'.) The agreement is
	made and entered into this day of	क्रिप् <u>वेदी G</u> by and between the SBDC and
	STAFF COUNSELOR, who agrees to render services for	or the SBDC.
	I as STAFF COUNSELOR, understand that I will not:	
	 Recommend the purchase of goods and/or services Accept fees or commissions from third parties who recommendation to the SBDC client. Accept fees or commissions from the SBDC client of the Accept the private engagement of my services at an to, the term of my engagement as STAFF COUNS permission of the SBDC subcenter director. 	have supplied goods and/or services on my for my services as STAFF COUNSELOR. ny time during, or within 90 days subsequent
	I as STAFF COUNSELOR, understand that I will:	
	 Agree to hold strictly confidential all information obwith the client. Agree to reveal promptly to the client all significant to the business of my client Acknowledge receipt of the SBDC guidelines, and an acknowledge receipt of the SBDC guidelines. 	matters that come to my attention pertaining
	IN WITNESS HEREOF, the parties affix their signatures	on the day above written.
	STAFF COUNSELOR	SBDC .
	Signature	Signature
	Printed Name Down Dry 54 5	Printed Name
	Address 3930 Respect the	Address
	•	
	Phone 016 172-3/67	Phone

AGREEMENT between the Small Business Develo	opment Center (hereinafter "SBDC') and
	nafter the 'STAFF COUNSELOR'.) The agreement is
made and entered into this day of	by and between the SBDC and
STAFF COUNSELOR, who agrees to render service	tes for the SBDC.
I as STAFF COUNSELOR, understand that I will no	
Accept fees or commissions from the SBDC cl Accept the private engagement of my services	who have supplied goods and/or services on my
I as STAFF COUNSELOR, understand that I will:	
Agree to reveal promptly to the client all signification to the business of my client	n obtained during the course of my engagement cant matters that come to my attention pertaining and agree to abide by all provisions of that policy.
IN WITNESS HEREOF, the parties affix their signature	res on the day above written.
Staff COUNSELOR Signature Printed Name Bridget King Address 1137 Genesee Ave Mayfield Hts, OH 44124	Signature Printed Name DANA Address
Phone 216-374-7295	Phone 2/

AGREEMENT between the Small Business Developr	ment Center (hereinafter "SBDC") and
H	fter the 'STAFF COUNSELOR'.) The agreement is
made and entered into this 3 day of 3AN U	ary, 2019 by and between the SBDC and
STAFF COUNSELOR, who agrees to render services	
I as STAFF COUNSELOR, understand that I will not:	
 Recommend the purchase of goods and/or service. Accept fees or commissions from third parties wherecommendation to the SBDC client. Accept fees or commissions from the SBDC client. Accept the private engagement of my services at to, the term of my engagement as STAFF COUN permission of the SBDC subcenter director. 	no nave supplied goods and/or services on my
I as STAFF COUNSELOR, understand that I will:	
 Agree to hold strictly confidential all information of with the client. Agree to reveal promptly to the client all significant to the business of my client Acknowledge receipt of the SBDC guidelines, and 	nt matters that come to my attention pertaining
IN WITNESS HEREOF, the parties affix their signature	s on the day above written.
Signature Sunsmud Printed Name Alima Samad Address 1820 Wellesley Cleveland OH 44112	Signature Down Day S Printed Name Down Day S Address 9930 Respect Av Clause OH 44115
Phone 2166595337	Phone 3/6 8/23/68

AGREEMENT between the Small Business Developme	ent Center (hereinafter "SBDC") and
Alex Simon (hereinal	ter the "STAFF COUNSELOR"). The agreement is
	ober , 2018 by and between the SBDC
and STAFF COUNSELOR, who agrees to render service	•
I, as STAFF COUNSELOR, understand that I will not:	
1. Recommend the purchase of goods and/or servi	•
Accept fees or commissions from third parties w recommendation to the SBDC client.	ho have supplied goods and/or services on my
3. Accept fees or commissions from the SBDC clien:	t for my services as STAFF COUNSELOR.
	any time during, or within 90 days subsequent to, the
term of my engagement as STAFF COUNSELOR w	rith an SBDC client without express permission of the
SBDC subcenter director.	
I, as STAFF COUNSELOR, understand that I will:	
	obtained during the course of my engagement with
the client.	
	ant matters that come to my attention pertaining to
the business of my client.	
3. Acknowledge receipt of the SBDC guidelines, and	dagree to abide by all provisions of that policy.
IN WITNESS HEREOF, the parties affix their signature	s on the day above written.
STAFF COUNSELOR	SBDC Center: #
Singer Mr. A. Singer	Simon M. 1/12
Signature Mr. Am	Signature // / / / / / / / / / / / / / / / / /
Printed Name Alex Simon	- Printed Name Nathaniel Word
Address 2121 Euclid Ave.	- Address - 2121 Enclid Ave
Cleveland, OH	Clevelal 04 44115
Phone 216-543-5191	Phone 216-523-7347
Fillule	Priorie

AGREEMENT between the Small Business Development Center (hereinafter "SBDC") and		
(hereinafter the 'STAFF COUNSELOR'.) The agreement is		
made and entered into this day of day of day of	by and between the SBDC and	
STAFF COUNSELOR, who agrees to render services for	r the SBDC.	
I as STAFF COUNSELOR, understand that I will not:		
 Recommend the purchase of goods and/or services, which I have an interest in or represent. Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR. Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director. 		
I as STAFF COUNSELOR, understand that I will:		
 Agree to hold strictly confidential all information obtained during the course of my engagement with the client. Agree to reveal promptly to the client all significant matters that come to my attention pertaining 		
to the business of my client 4. Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy.		
IN WITNESS HEREOF, the parties affix their signatures on the day above written.		
Signature	Signature M/	
Printed Name Nate Ward	Printed Name Alex Simon	
Address 7121 English Are	Address 2121 Euclid Ava	
Clevelal OH 44115	Cleveland OH 44115	
Phone 7.16 - 523 - 2347	Phone 216-543-5191	

Form 250 A

AGREEMENT between the Small Business Development Center (hereinafter 'SBDC') and

Tim Grisay (hereinafter the 'STAFF COUNSELOR'). The agreement
is made and entered into this <u>した</u> day of <u>Octob い</u> , <u>248</u> by and between the SBDC and
STAFF COUNSELOR, who agrees to render services for the SBDC.
I, as STAFF COUNSELOR, understand that I shall not:
1. Recommend the purchase of goods and/or services in which I have an interest or represent.
Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client.
3. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR.
 Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without an express
permission of the SBDC subcenter director.
I, as STAFF COUNSELOR, understand that I shall:
 Agree to hold strictly confidential all information obtained during the course of my engagement with the client.
2. Agree to reveal promptly to the client all significant matters that come to my attention
pertaining to the business of the client. 3. Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy.
IN WITNESS HEREOF, the parties affix their signatures on the day above written.
STAFF COUNSELOR SBDC - Suector
Signature Signature Solary Com Consumble
Printed Name Jim Griggy Printed Name Thay And JASIONOWSK,
Address 526 S. Main St Address 536 S. Mais St. Suite 601
Alcon, OH 44311 Athon, Ohio 443/1
Phone 330 375 2111 Phone 330 - 375 - 2111 X 4341

AGREEMENT between the Small Business Development Center (hereinafter 'SBDC') and	
Thay And Jasionousifi (hereinafter the 'STAFF COUNSELOR'). The agreement	
is made and entered into this day of,	
I, as STAFF COUNSELOR, understand that I shall not:	
 Recommend the purchase of goods and/or services in which I have an interest or represent. Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR. Accept the private engagement of my services at any time during, or within 90 days subsequent 	
to, the term of my engagement as STAFF COUNSELOR with an SBDC client without an express permission of the SBDC subcenter director.	
I, as STAFF COUNSELOR, understand that I shall:	
 Agree to hold strictly confidential all information obtained during the course of my engagement with the client. 	
 Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of the client. Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy. 	
IN WITNESS HEREOF, the parties affix their signatures on the day above written.	
STAFF COUNSELOR SBDC - Showmand SABA	
Printed Name 20/ARY AND JAS, ONOWSH, Printed Name Samuel De Stazios	
Address 536. & Main St. Pritz 601 Address 166 S. High Street Rm 202	
Atron, Ohio 44311 - AKRON, OH 44308	
Phone 330-975-2111 x4341 Phone (330) 375-2133	

Form 250 A

AGREEMENT between the Small Business Development Center (hereinafter 'SBDC') and
Susan K. Mc GANN (hereinafter the 'STAFF COUNSELOR'). The agreement
is made and entered into this <u>15t</u> Say of <u>October</u> , <u>solo</u> by and between the SBDC and STAFF COUNSELOR, who agrees to render services for the SBDC.
Las STAFF COUNSELOR understand that I shall not:

- I, as STAFF COUNSELOR, understand that I shall not:
 - 1. Recommend the purchase of goods and/or services in which I have an interest or represent.
 - 2. Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client.
 - 3. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR.
 - 4. Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without an express permission of the SBDC subcenter director.

I, as STAFF COUNSELOR, understand that I shall:

- 1. Agree to hold strictly confidential all information obtained during the course of my engagement with the client.
- 2. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of the client.
- 3. Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy.

IN WITNESS HEREOF, the parties affix their signatures on the day above written.

STAFF COUNSELOR	SBDC - Suctor
Signature Man & Myana	Signature Mary Com Casionous he
Printed Name Susan K. McGANN	Printed Name Mary Hay JASCONOWSKI
Address 526 S. Main St.	Address 536 S. Mail St. Suite 601
AKron, 04 44311	Atron, Ofio 44311
Phone 336 - 678 - 8108	Phone 330-375-3111 × 4341

Form 250 A

AGREEMENT between the Small Business Development Center (hereinafter 'SBDC') and -aura Roes (hereinafter the 'STAFF COUNSELOR'). The agreement _day of Act is made and entered into this _____ , 30/8 by and between the SBDC and STAFF COUNSELOR, who agrees to render services for the SBDC. I, as STAFF COUNSELOR, understand that I shall not: 1. Recommend the purchase of goods and/or services in which I have an interest or represent. 2. Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client. 3. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR. 4. Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without an express permission of the SBDC subcenter director. I, as STAFF COUNSELOR, understand that I shall: 1. Agree to hold strictly confidential all information obtained during the course of my engagement with the client. 2. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of the client. 3. Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy.

IN WITNESS HEREOF, the parties affix their signatures on the day above written.

STAFF COUNSELOR	SBDC - Suestor
Signature Hura B. Bes	Signature May am Jasionowski
Printed Name Laura R. Rees	Printed Name Many flan JASioNowski
Address 526 S. Main St.	Address 526 S. Main St. Suite 601
Akron, OH 44311	Ataon, Ohio 44311
Phone 330. 375. 2111 x 4349	Phone 330-375-2111 x 4341

AGREEMENT between the Small Business Development Center (hereinafter 'SBDC	") and
BRIAN WALARS (hereinafter the 'STAFF COUNSELOR'). The	e agreement
is made and entered into this day of	
STAFF COUNSELOR, who agrees to render services for the SBDC.	the SBDC and
STAFF COUNSELOR, who agrees to render services for the SBDC.	
I, as STAFF COUNSELOR, understand that I shall not:	
1. Recommend the purchase of goods and/or services in which I have an interest or r	epresent.
2. Accept fees or commissions from third parties who have supplied goods and/or se	
recommendation to the SBDC client. 3. Accept fees or commissions from the SBDC client for my services as STAFF COUNSE.	FLOR
4. Accept the private engagement of my services at any time during, or within 90 day	
to, the term of my engagement as STAFF COUNSELOR with an SBDC client without	an express
permission of the SBDC subcenter director.	
I, as STAFF COUNSELOR, understand that I shall:	
1. Agree to hold strictly confidential all information obtained during the course of my	/ engagement
with the client. 2. Agree to reveal promptly to the client all significant matters that come to my atter	ntion
pertaining to the business of the client.	TCOTT
3. Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of	of that policy.
IN WITNESS HEREOF, the parties affix their signatures on the day above written.	
STAFF COUNSELOR SBDC - Auto +	
- aprillar	
Signature Signature Mary Com Carron	oushe'
Printed Name Printed Name May And JA	sionowsy.
Address 536 S. Main St. Suite 66/Address 536 S. Main St	t- Suite 601
Atton, Ofice Astron, Ohio 4	4311
Phone 330 - 275 - 2/// x 4/34/3 Phone 330 - 375 - 2/	11 × 4341

AGREEMENT between the Small Business Development Center (hereinafter "SBDC') and	
Holly Bolinger (hereinafter the 'STAFF COUNSELOR'.) The agreement is	
made and entered into this 11 day of October 2018	by and between the SBDC and
STAFF COUNSELOR, who agrees to render services for the SBDC.	
I as STAFF COUNSELOR, understand that I will not:	
1. Recommend the purchase of goods and/or service	s, which I have an interest in or represent.
 Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR. Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director. 	
as STAFF COUNSELOR, understand that I will:	
 Agree to hold strictly confidential all information obtained during the course of my engagement with the client. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy. 	
IN WITNESS HEREOF, the parties affix their signatures on the day above written.	
STAFF COUNSELOR	SBDC
Signature Horly K. Balunger	Signature /////
Printed Name Holly Bolinger	Printed Name Victor C. Pavona
Address 5775 Foxboro Ave NW Canton, OH 44718	Address 6000 Frank Ave NW North Canton, OH 44720
Phone 330-966-2755	Phone _330-244-3295

AGREEMENT between the Small Business Development Center (hereinafter "SBDC') and		
Victor C. Pavona (hereinafter the 'STAFF COUNSELOR'.) The agreement is		
made and entered into this 11 day of October 2018 by and between the SBDC and		
STAFF COUNSELOR, who agrees to render services for the SBDC.		
I as STAFF COUNSELOR, understand that I will not:		
1. Recommend the purchase of goods and/or services, which I have an interest in or represent.		
 Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR. Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director. 		
I as STAFF COUNSELOR, understand that I will:		
 Agree to hold strictly confidential all information obtained during the course of my engagement with the client. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy. 		
IN WITNESS HEREOF, the parties affix their signatures on the day above written.		
STAFF COUNSELOR SBDC		
Signature Signature Signature		
Printed Name Victor C.Pavona Printed Name Victor C. Pavona		
Address 2365 Covington Rd Akron, OH 44313 Address 6000 Frank Ave NW North Canton, OH 44720		

Phone 330-244-3295

Phone <u>330-867-7474</u>

AGREEMENT between the Small Business Development Center (hereinafter "SBDC') and			
Amy Schwitzgable (hereinafter the 'STAFF COUNSELOR'.) The agreement is			
made and entered into this 11 day of October 2018	by and between the SBDC and		
STAFF COUNSELOR, who agrees to render services for the SBDC.			
I as STAFF COUNSELOR, understand that I will not:			
1. Recommend the purchase of goods and/or services	, which I have an interest in or represent.		
 Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR. Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director. 			
I as STAFF COUNSELOR, understand that I will:			
 Agree to hold strictly confidential all information obtained during the course of my engagement with the client. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy. 			
IN WITNESS HEREOF, the parties affix their signatures on the day above written.			
Signature any Shwitzable	Signature Signature		
Printed Name Amy Schwitzgable	Printed Name Victor C. Pavona		
Address 2639 Demington Ave NW Canton, OH 44708	Address 6000 Frank Ave NW North Canton, OH 44720		

Phone <u>330-244-3295</u>

Phone <u>330-232-5514</u>

William Beisel (hereinaf	ter the "STAFF COUNSELOR"). The agreement is	
made and entered into this 1st day of Octobe	2018 by and between the SBDC	
and STAFF COUNSELOR, who agrees to render service	es for the SBDC.	
I, as STAFF COUNSELOR, understand that I will not:		
1. Recommend the purchase of goods and/or service	ces, which I have an interest in or represent.	
2. Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client.		
3. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR.		
4. Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the		
SBDC subcenter director. I, as STAFF COUNSELOR, understand that I will:		
Agree to hold strictly confidential all information obtained during the course of my engagement with the client.		
 Agree to reveal promptly to the client all significant 	ant matters that come to my attention pertaining to	
the business of my client.		
3. Acknowledge receipt of the SBDC guidelines, and	d agree to abide by all provisions of that policy.	
IN WITNESS HEREOF, the parties affix their signature	es on the day above written.	
STAFF COUNSELOR	SBDC Center: Kent State Tuscarawas #103	
Signature While I	_ Signature Acces Alully	
Printed Name William H. Beisel	Printed Name Steve Schillig /	
Address 330 University Drive NE	Address 1776 Tech Park Drive NE, Suite 103	
New Philadelphia, OH 44663	New Philadelphia, OH 44663	
Phone 330.308.7437	Phone 330.308.7479	
-		
	74	

Greg Brokaw	 ·	er (hereinafter "SBDC") and STAFF COUNSELOR"). The agreement is
made and entered into this 1st and STAFF COUNSELOR, who agree	day of <u>UCIODEF</u> s to render services for the	<u>2018</u> by and between the SBDC
•		- 350c.
I, as STAFF COUNSELOR, understan	d that I will not:	
1. Recommend the purchase of go	oods and/or services, whic	ch I have an interest in or represent.
		supplied goods and/or services on my
recommendation to the SBDC of 3. Accept fees or commissions from		services as STAFF COUNSELOR.
 Accept fees or commissions from the Accept the private engagement 	t of my services at any tim	e during, or within 90 days subsequent to, the
term of my engagement as STA	AFF COUNSELOR with an S	BDC client without express permission of the
SBDC subcenter director.		
I, as STAFF COUNSELOR, understan	d that I will:	
Agree to hold strictly confident	tial all information obtaine	ed during the course of my engagement with
the client.		
	e client all significant mati	ers that come to my attention pertaining to
the business of my client. 3. Acknowledge receipt of the SB	DC guidelines, and agree t	o abide by all provisions of that policy.
, , , , , , , , , , , , , , , , , , ,		
IN WITNESS HEREOF, the parties at	ffix their signatures on the	
STAFF COUNSELOR	SBD	C Center: Kent State Tuscarawas #103
Signature Klerch	Sign	nature Athan Soluth
Printed Name Greg Brokaw	Prin	ited Name Steve Schillig
Address 5804 Fairfax St NW		Iress 1776 Tech Park Drive NE, Suite 103
North Canton, OH 447		ew Philadelphia, OH 44663
·		
Phone 330.413.9619	Pho	ne <u>330.308.7479</u>

ade and entered into this 1st day of October ad STAFF COUNSELOR, who agrees to render services as STAFF COUNSELOR, understand that I will not:		
as state coolasteor, understand that I will hot.		
Recommend the purchase of goods and/or services		
Accept fees or commissions from third parties who recommendation to the SBDC client.	have supplied goods and/or services on my	
Accept fees or commissions from the SBDC client fo	or my services as STAFF COUNSELOR.	
Accept the private engagement of my services at arterm of my engagement as STAFF COUNSELOR with SBDC subcenter director.		
as STAFF COUNSELOR, understand that I will:		
Agree to hold strictly confidential all information ob the client.	otained during the course of my engagement with	
Agree to reveal promptly to the client all significant the business of my client.	t matters that come to my attention pertaining to	
3. Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy.		
WITNESS HEREOF, the parties affix their signatures o	on the day above written.	
AFF COUNSELOR	SBDC Center: Kent State Tuscarawas #103	
gnoture	Signature South & Solully	
inted Name Anne Daily	Printed Name Steve Schillig	
Idress PO Box 13828	Address 1776 Tech Park Drive NE, Suite 103	
Fairlawn, OH 44334	New Philadelphia, OH 44663	
one 330.760.7478	Phone 330.308.7479	

AGREEMENT serveen the Small Business Development Report of the Charles	
The transfer of the transfer o	er the 'STAFF COUNSELOR'.) The agreement is
STAFF COUNSELOR, who agrees to render services	for the SBDC.
I as STAFF COUNSELOR, understand that I will not:	
 Recommend the purchase of goods and/or service. Accept fees or commissions from third parties who recommendation to the SBDC client. Accept fees or commissions from the SBDC client. Accept the private engagement of my services at to, the term of my engagement as STAFF COUN permission of the SBDC subcenter director. 	o have supplied goods and/or services on my t for my services as STAFF COUNSELOR. any time during, or within 90 days subsequent
I as STAFF COUNSELOR, understand that I will:	
 Agree to hold strictly confidential all information of with the client. Agree to reveal promptly to the client all significant to the business of my client Acknowledge receipt of the SBDC guidelines, and 	nt matters that come to my attention pertaining
IN WITNESS HEREOF, the parties affix their signature	s on the day above written.
Signature Sold Dunkle Printed Name Balan Dunkle Address 84955 Beaver Bay Ro Scio OH 43988	Signature Access Adalas Printed Name Steve Schillig, Director Address Address Development Center at Kent State University at Tuscarawas 1776 Tech Park Drive NE
Phone	PhoNew Philadelphia, OH 44663

AGREEMENT between the Small Bus Tim Hefty			R"). The agreement is
made and entered into this 1st	_day of October	, 2018	_by and between the SBDC
and STAFF COUNSELOR, who agrees	to render services for the	SBDC.	
I, as STAFF COUNSELOR, understand	I that I will not:		
1. Recommend the purchase of go	ods and/or services, which	I have an intere	st in or represent.
2. Accept fees or commissions from third parties who have supplied goods and/or services on my			
recommendation to the SBDC cl 3. Accept fees or commissions from		rvices as STAFF	COUNSELOR.
Accept the private engagement			
term of my engagement as STAI			
SBDC subcenter director.			
I, as STAFF COUNSELOR, understand	d that I will:		
1. Agree to hold strictly confidenti	al all information obtained	during the cour	se of my engagement with
the client.			mu attention portaining to
Agree to reveal promptly to the the business of my client.	client all significant matte	s that come to r	ny attention pertaining to
Acknowledge receipt of the SBD	OC guidelines, and agree to	abide by all prov	visions of that policy.
IN WITNESS HEREOF, the parties aff	ix their signatures on the d	av ahove writte	n.
	_		
STAFF COUNSELOR	SRDC	Center: None	State Tuscarawas #103
Signature	Signat	ure New	1 Heluly
Printed Name Tim Hefty	Printe	d Name Steve	Schillig
Address 330 3rd Street NW	Addre	ss 1776 Tech	Park Drive NE, Suite 103
Canton, OH 44702		Philadelphia,	
Phone 330.418.0407	Phone	330.308.747	9
FIIORE			

AGREEMENT between the Small Business Development Center (hereinafter "SBDC") and Jeanne Keenan (hereinafter the "STAFF COUNSELOR"). The agreement is			
made and entered into this 1st day of October			
and STAFF COUNSELOR, who agrees to render services for the SBDC.			
I, as STAFF COUNSELOR, understand that I will not:			
1. Recommend the purchase of goods and/or services, which I have an interest in or represent.			
Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client.			
3. Accept fees or commissions from the SBDC client			
	any time during, or within 90 days subsequent to, the		
term of my engagement as STAFF COUNSELOR wi SBDC subcenter director.	th an SBDC client without express permission of the		
I, as STAFF COUNSELOR, understand that I will:			
Agree to hold strictly confidential all information the client.	obtained during the course of my engagement with		
2. Agree to reveal promptly to the client all significa	nt matters that come to my attention pertaining to		
the business of my client.			
3. Acknowledge receipt of the SBDC guidelines, and	agree to abide by all provisions of that policy.		
IN WITNESS HEREOF, the parties affix their signatures	on the day above written.		
STAFF COUNSELOR	SBDC Center: Kent State Tuscarawas #103		
Signature Jame Beenan Printed Name Jeanne Keenan	Signature Aufun Stolally		
Printed Name Jeanne Keenan	***************************************		
Address 6559 Wild Rose Lane	Address 1776 Tech Park Drive NE, Suite 103		
Westerville, OH 43082	New Philadelphia, OH 44663		
Phone 740.502.2999	Phone 330.308.7479		

	einafter the "STAFF COUNSELOR"). The agreement is
made and entered into this 1st day of Oc	tober 2018 by and between the SBDC
and STAFF COUNSELOR, who agrees to render s	ervices for the 3BDC.
I, as STAFF COUNSELOR, understand that I will n	not:
1. Recommend the purchase of goods and/or	services, which I have an interest in or represent.
	ies who have supplied goods and/or services on my
recommendation to the SBDC client. Accept fees or commissions from the SBDC	client for my services as STAFF COUNSELOR.
4. Accept the private engagement of my service	ces at any time during, or within 90 days subsequent to, the
term of my engagement as STAFF COUNSEL SBDC subcenter director.	LOR with an SBDC client without express permission of the
I, as STAFF COUNSELOR, understand that I will:	
the client.	nation obtained during the course of my engagement with
2. Agree to reveal promptly to the client all sign	gnificant matters that come to my attention pertaining to
the business of my client.	and agree to shide by all provisions of that policy
3. Acknowledge receipt of the SBDC guideline	es, and agree to abide by all provisions of that policy.
ff at a comment	saturas on the day above written
IN WITNESS HEREOF, the parties affix their sign	
STAFF COUNSELOR	SBDC Center: Kent State Tuscarawas #103
7 11 ((Signature Attend Arbelly
Signature MMC	
- a Muls	Printed Name Steve Schillig
Printed Name Cynthia Miller	Printed Name Steve Schillig
Signature Cunthia Miller	
Printed Name Cynthia Miller Address 113 Wade Drive	Printed Name Steve Schillig Address 1776 Tech Park Drive NE, Suite 103
Printed Name Cynthia Miller Address 113 Wade Drive Dover, OH 44622	Printed Name Steve Schillig Address 1776 Tech Park Drive NE, Suite 103 New Philadelphia, OH 44663
Printed Name Cynthia Miller Address 113 Wade Drive Dover, OH 44622	Printed Name Steve Schillig Address 1776 Tech Park Drive NE, Suite 103 New Philadelphia, OH 44663
Printed Name Cynthia Miller Address 113 Wade Drive Dover, OH 44622	Printed Name Steve Schillig Address 1776 Tech Park Drive NE, Suite 103 New Philadelphia, OH 44663

AGREEMENT between the Small Business Developmen	t Center (hereinafter "SBDC") and		
Other Call William	r the "STAFF COUNSELOR"). The agreement is		
made and entered into this 1st day of October	, 2018 by and between the SBDC		
and STAFF COUNSELOR, who agrees to render services	for the SBDC.		
I, as STAFF COUNSELOR, understand that I will not:			
1. Recommend the purchase of goods and/or services, which I have an interest in or represent.			
2. Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client.			
3. Accept fees or commissions from the SBDC client f	or my services as STAFF COUNSELOR.		
 Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director. 			
I, as STAFF COUNSELOR, understand that I will:			
 Agree to hold strictly confidential all information obtained during the course of my engagement with the client. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to 			
the business of my client.			
3. Acknowledge receipt of the SBDC guidelines, and a	agree to abide by all provisions of that policy.		
IN WITNESS HEREOF, the parties affix their signatures on the day above written.			
STAFF COUNSELOR	SBDC Center: Kent State Tuscarawas #103		
Signature Ative Arluly	Signature A SUM		
Printed Name Steve Schillig	Printed Name William H. Beisel		
Address 1776 Tech Park Drive NE, Suite 103	Address 330 University Dr. NE		
New Philadelphia, OH 44663	New Philadelphia, OH 44663		
Phone 330.308.7479	Phone 330.308.7437		

	einafter the "STAFF COUNSELOR"). The agreement is	
made and entered into this 1st day of Oc	stober, 2018by and between the SBDC	
and STAFF COUNSELOR, who agrees to render s	ervices for the SBDC.	
I, as STAFF COUNSELOR, understand that I will n	not:	
1. Recommend the purchase of goods and/or	services, which I have an interest in or represent.	
Accept fees or commissions from third parti recommendation to the SBDC client.	ies who have supplied goods and/or services on my	
3. Accept fees or commissions from the SBDC	client for my services as STAFF COUNSELOR.	
	ces at any time during, or within 90 days subsequent to, the OR with an SBDC client without express permission of the	
I, as STAFF COUNSELOR, understand that I will:		
1. Agree to hold strictly confidential all inform the client.	ation obtained during the course of my engagement with	
2. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to		
2. Agree to reveal promptly to the client all sig	nificant matters that come to my attention pertaining to	
the business of my client.	· · · · · · · · · · · · · · · · · · ·	
the business of my client.	nificant matters that come to my attention pertaining to s, and agree to abide by all provisions of that policy.	
the business of my client.	· · · · · · · · · · · · · · · · · · ·	
the business of my client.	s, and agree to abide by all provisions of that policy.	
the business of my client. 3. Acknowledge receipt of the SBDC guidelines	s, and agree to abide by all provisions of that policy.	
the business of my client. 3. Acknowledge receipt of the SBDC guidelines. IN WITNESS HEREOF, the parties affix their signs. STAFF COUNSBLOR	atures on the day above written. SBDC Center: Kent State Tuscarawas #103	
the business of my client. 3. Acknowledge receipt of the SBDC guidelines. IN WITNESS HEREOF, the parties affix their signs. STAFF COUNSBLOR Signature Wheels	s, and agree to abide by all provisions of that policy. atures on the day above written. SBDC Center: Kent State Tuscarawas #103 Signature Ature Schilling	
the business of my client. 3. Acknowledge receipt of the SBDC guidelines. IN WITNESS HEREOF, the parties affix their signs. STAFF COUNSBLOR Signature Wheel Signature Michaela Slankard	s, and agree to abide by all provisions of that policy. atures on the day above written. SBDC Center: Kent State Tuscarawas #103 Signature Alally Printed Name Steve Schillig	
the business of my client. 3. Acknowledge receipt of the SBDC guidelines. IN WITNESS HEREOF, the parties affix their signs. STAFF COUNSBLOR Signature Michaela Slankard	s, and agree to abide by all provisions of that policy. atures on the day above written. SBDC Center: Kent State Tuscarawas #103 Signature Ature Schilling	
the business of my client. 3. Acknowledge receipt of the SBDC guidelines. IN WITNESS HEREOF, the parties affix their signs. STAFF COUNSBLOR Signature Wheel Signature Michaela Slankard	s, and agree to abide by all provisions of that policy. atures on the day above written. SBDC Center: Kent State Tuscarawas #103 Signature Alally Printed Name Steve Schillig	
the business of my client. 3. Acknowledge receipt of the SBDC guidelines. IN WITNESS HEREOF, the parties affix their signs. STAFF COUNSALOR Signature Wheel Signature Michaela Slankard Address 739 Township Road 350	s, and agree to abide by all provisions of that policy. atures on the day above written. SBDC Center: Kent State Tuscarawas #103 Signature Steve Schillig Printed Name Steve Schillig Address 1776 Tech Park Drive NE, Suite 103	
the business of my client. 3. Acknowledge receipt of the SBDC guidelines. IN WITNESS HEREOF, the parties affix their signs. STAFF COUNSBLOR Signature Michaela Slankard Printed Name Michaela Slankard Address 739 Township Road 350 Sullivan, OH 44880	s, and agree to abide by all provisions of that policy. atures on the day above written. SBDC Center: Kent State Tuscarawas #103 Signature Steve Schillig Printed Name Steve Schillig Address 1776 Tech Park Drive NE, Suite 103 New Philadelphia, OH 44663	
the business of my client. 3. Acknowledge receipt of the SBDC guidelines. IN WITNESS HEREOF, the parties affix their signs. STAFF COUNSBLOR Signature Michaela Slankard Printed Name Michaela Slankard Address 739 Township Road 350 Sullivan, OH 44880	s, and agree to abide by all provisions of that policy. atures on the day above written. SBDC Center: Kent State Tuscarawas #103 Signature Steve Schillig Printed Name Steve Schillig Address 1776 Tech Park Drive NE, Suite 103 New Philadelphia, OH 44663	

AGREEMENT between the Small Business Development Deanna Spencer (hereinaft	nt Center (hereinafter "SBDC") and er the "STAFF COUNSELOR"). The agreement is		
made and entered into this 1stday of October			
and STAFF COUNSELOR, who agrees to render services for the SBDC.			
I, as STAFF COUNSELOR, understand that I will not:			
	o have supplied goods and/or services on my		
I, as STAFF COUNSELOR, understand that I will:			
 Agree to hold strictly confidential all information obtained during the course of my engagement with the client. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client. Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy. 			
IN WITNESS HEREOF, the parties affix their signatures			
STAFF COUNSELOR	SBDC Center: Kent State Tuscarawas #103		
Signature Dealines & Denies	Signature Semi Aluly		
Printed Name Deanna Spencer	Printed Name Steve Schillig		
Address 1776 Tech Park Drive NE, Suite 103	Address 1776 Tech Park Drive NE, Suite 103		
New Philadelphia, OH 44663	New Philadelphia, OH 44663		
Phone 330.308.7522	Phone 330.308.7479		

AGREEMENT between the Small Business Development	nt Center (hereinafter "SBDC') and	
Michael E Vachon (hereinafte	the 'STAFF COUNSELOR'.) The agreement is	
made and entered into this7_ day ofDecemb	per_,2018 by and between the SBDC and	
STAFF COUNSELOR, who agrees to render services for	or the SBDC.	
I as STAFF COUNSELOR, understand that I will not:		
 Recommend the purchase of goods and/or service Accept fees or commissions from third parties who recommendation to the SBDC client. Accept fees or commissions from the SBDC client of the Accept the private engagement of my services at all to, the term of my engagement as STAFF COUNS permission of the SBDC subcenter director. 	have supplied goods and/or services on my for my services as STAFF COUNSELOR. ny time during, or within 90 days subsequent	
I as STAFF COUNSELOR, understand that I will:		
 Agree to hold strictly confidential all information ob with the client. Agree to reveal promptly to the client all significant to the business of my client Acknowledge receipt of the SBDC guidelines, and 	matters that come to my attention pertaining	
IN WITNESS HEREOF, the parties affix their signatures on the day above written.		
Signature Meeden 5. Jack	Signature Ative Ahlly	
Printed Name Michael E Vachon	Printed Name Steve Schillig	
Address 6779 Old Zoarville Rd NE	Address1776 Tech Park Drive NE	
Zoarville, OH 44656	New Philadelphia, OH 44663	
Phone330.432.7734	Phone330.308.7479	

 Recommend the purchase of goods and/or services, which I have an interest in or represent. Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client. Accept fees or commissions from the SBDC dient for my services as STAFF COUNSELOR. Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director. I as STAFF COUNSELOR, understand that I will: Agree to hold strictly confidential all information obtained during the course of my engagement with the client. Agree to reveal promptly to the client all significant matters that come to my attention portaining to the business of my client Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy. IN WITNESS HEREOF, the parties affix their signatures on the day above written. 	AGREEMENT between the Small Business Development Center (hereinafter "SBDC") and		
 Agree to hold strictly confidential all information obtained during the course of my engagement with the client. Agree to reveal promptly to the client all significant matters that come to my attention portaining to the business of my client Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy. IN WITNESS HEREOF, the parties affix their signatures on the day above written. STAFF COUNSELOR Signature Signature Signature Printed Name Stave Schillig, Director 	 Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR. Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express 		
STAFF COUNSELOR Signature Signature Signature Signature Signature Stave Schillig, Director	 Agree to hold strictly confidential all information obtained during the course of my engagement with the client. Agree to reveal promptly to the client all significant matters that come to my attention portaining to the business of my client 		
Signature Signature Signature Asked Printed Name Printed Name Steve Schillig, Director	IN WITNESS HEREOF, the parties affix their signatures on the day above written.		
NEW FRANKLIN, OH 44319 Kent State University at Tuscerawas 1778 Tech Park Drive NE Phone 330 472 - 5446 Phone Bushess Development Center at Kent State University at Tuscerawas 1778 Tech Park Drive NE	Signature That Islace Printed Name KATHY VITALE Address 607 W. NIMISICARD. NEW FRANKLIN, OH 44319	Printed Name Stave Schillig, Director Addressmall Business Development Center at Kent State University at Tuscarawas 1776 Tech Park Drive NE	

STAFF COUNSELOR AGREEMENT Form 250A

Nicholas Volinchak	(he	ereinafter the "	STAFF COUNSELOR'.) The agreement
made and entered into this	12 day of	November ,	2018 by and between the SBDC and
STAFF COUNSELOR, who agi	rees to render se	rvices for the	SBDC.
l as STAFF COUNSELOR, und	lerstand that I wi	Il not:	
 Accept fees or commission recommendation to the S Accept fees or commission Accept the private engage 	ns from third part BDC client. ns from the SBD ment of my servi ement as STAFF	ties who have C client for my ices at any tim COUNSELOR	ich I have an interest in or represent. supplied goods and/or services on my y services as STAFF COUNSELOR. ne during, or within 90 days subsequent R with an SBDC client without express
as STAFF COUNSELOR, und	erstand that I wil	l:	
with the client. Agree to reveal promptly to the business of my clie	o the client all si	gnificant matte	d during the course of my engagement ers that come to my attention pertaining e to abide by all provisions of that policy.
I WITNESS HEREOF, the part	ties affix their sig	natures on th	ne day above written.
gnature	It	Sign	nature Stave Alally
inted Name Nicholas W. V	olinchak	Prin	nted Name Steve Schillig
Idress 1393 Cross Cove	· 特别。6	Add	dress 1776 Tech Park Drive NE
Austintown, OH 44515		<u> </u>	New Philadelphia, OH 44663
hone 330.610.2567		Pho	one 330,308,7479

STAFF COUNSELOR AGREEMENT Form 250A

AGREEMENT between the Small Business Development Center (hereinafter "SBDC") and			
	r the 'STAFF COUNSELOR'.) The agreement is		
made and entered into this day of day of day	// , <u>2019</u> by and between the SBDC and		
STAFF COUNSELOR, who agrees to render services for the SBDC.			
I as STAFF COUNSELOR, understand that I will not:			
 Recommend the purchase of goods and/or services, which I have an interest in or represent. Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR. Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director. 			
I as STAFF COUNSELOR, understand that I will:			
Agree to hold strictly confidential all information obtained during the course of my engagement with the client.			
Agree to reveal promptly to the client all significant to the business of my client	matters that come to my attention pertaining		
 Acknowledge receipt of the SBDC guidelines, and 	agree to abide by all provisions of that policy.		
IN WITNESS HEREOF, the parties affix their signatures on the day above written.			
STAFF COUNSELOR SBDC			
Signature (Au) un / Luc	Signature Pelleck		
Printed Name Angela Carration Printed Name Lissa Jollide			
Address 1046 Wesh, whist	Address 1060 University		
Bjerrle On 43723	Hthers, OH 45701		
Phone 740- 405 - 4330	Phone 740-593-0473		

AGREEMENT between the Small Business Developmen	nt Center (hereinafter "SBDC") and
	er the "STAFF COUNSELOR"). The agreement is
made and entered into this	
and STAFF COUNSELOR, who agrees to render services	s for the SBDC.
I, as STAFF COUNSELOR, understand that I will not:	
1. Recommend the purchase of goods and/or service	•
Accept fees or commissions from third parties who recommendation to the SBDC client.	o have supplied goods and/or services on my
. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR.	
 Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director. 	
I, as STAFF COUNSELOR, understand that I will:	
L. Agree to hold strictly confidential all information obtained during the course of my engagement with the client.	
2. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client.	
3. Acknowledge receipt of the SBDC guidelines, and a	agree to abide by all provisions of that policy.
IN WITNESS HEREOF, the parties affix their signatures	on the day above written.
STAFF COUNSELOR	SBDC Center: #
Signature	Signature Pelluh
Printed Name Francis Con	Printed Name 1554 Jollick
Address 10h0 Unwersity Athens, 0#45701 Phone 740-593-0474	Address Dhiblancershy Aturns OH 45701
Phone 740-593-0474	Phone 740-593-0493
v.	

AGREEMENT.between the Small Business Development Center (hereinafter "SBDC") and			
I, as STAFF COUNSELOR, understand that I will not:			
 Recommend the purchase of goods and/or services, which I have an interest in or represent. Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR. Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director. 			
I, as STAFF COUNSELOR, understand that I will:			
 Agree to hold strictly confidential all information obtained during the course of my engagement with the client. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client. Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy. 			
IN WITNESS HEREOF, the parties affix their signatures on the day above written.			
Signature Signature Signature Salked Printed Name Lissa Jossick Address 10hio University Athens, DH 45701 Phone 740.593-0473	Athens, UH 45701		

AGREEMENT between the Small Business Development (hereinafter made and entered into this day of and STAFF COUNSELOR, who agrees to render services	r the "STAFF COUNSELOR"). The agreement is	
I, as STAFF COUNSELOR, understand that I will not:		
 Recommend the purchase of goods and/or services, which I have an interest in or represent. Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR. Accept the private engagement of my services at any time during, or within 90 days subsequent to, th term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director. 		
I, as STAFF COUNSELOR, understand that I will:		
 Agree to hold strictly confidential all information obtained during the course of my engagement with the client. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client. Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy. 		
IN WITNESS HEREOF, the parties affix their signatures of	on the day above written.	
STAFF COUNSELOR Signature Printed Name Address Address Athons OH OH OH OH OH OH OH OH OH O		

AGREEMENT between the Small Business Development Center (hereinafter "SBDC") and			
I, as STAFF COUNSELOR, understand that I will not:			
 Recommend the purchase of goods and/or services, which I have an interest in or represent. Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR. Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director. 			
I, as STAFF COUNSELOR, understand that I will:			
 Agree to hold strictly confidential all information obtained during the course of my engagement with the client. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client. Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy. 			
IN WITNESS HEREOF, the parties affix their signatures of	on the day above written.		
Staff Counselor Signature Cindy Vetorhies Printed Name Cindy Vetorhies Address 4900 Brick Church Rd Cambridge, Dh. 43735 Phone 140-588-1331	SBDC Center: 1/2 # Signature Dollick Printed Name Libsa Jollich Address Johns University Phone 70-593-0473		

STAFF COUNSELOR AGREEMENT Form 250A

AGREEMENT between the Small Business Development Center (hereinafter "SBDC") and			
Timber Beaumont (hereinafter the 'STAFF COUNSELOR'.) The agreement is			
made and entered into this 14^{th} day of $Fextion 1000$, 2019 by and between the SBDC and			
STAFF COUNSELOR, who agrees to render services for the SBDC.			
I as STAFF COUNSELOR, understand that I will not:			
 Recommend the purchase of goods and/or services, which I have an interest in or represent. Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR. 			
 Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director. 			
I as STAFF COUNSELOR, understand that I will:			
 Agree to hold strictly confidential all information obtained during the course of my engagement with the client. 			
 Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client 			
 Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy. 			
IN WITNESS HEREOF, the parties affix their signatures on the day above written.			
STAFF COUNSELOR SBDC			
Signature Signature Stricio X Veig			
Printed Name I mothy A DOAUMON Printed Name Patricia K. VEISZ			
Address 2810 Solom Hatch & Address Juniversity plaza			
Aow (er, 04 444/8 youngotown, on 44555			
Phone 330-719-4841 Phone 330-941-2142			

STAFF COUNSELOR AGREEMENT Form 250A

AGREEMENT between the Small Business Development Center (hereinafter "SBDC") and			
Timber Beaumont (hereinafter the 'STAFF COUNSELOR'.) The agreement is			
made and entered into this 14^{th} day of $Fextion 1000$, 2019 by and between the SBDC and			
STAFF COUNSELOR, who agrees to render services for the SBDC.			
I as STAFF COUNSELOR, understand that I will not:			
 Recommend the purchase of goods and/or services, which I have an interest in or represent. Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR. 			
 Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director. 			
I as STAFF COUNSELOR, understand that I will:			
 Agree to hold strictly confidential all information obtained during the course of my engagement with the client. 			
 Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client 			
 Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy. 			
IN WITNESS HEREOF, the parties affix their signatures on the day above written.			
STAFF COUNSELOR SBDC			
Signature Signature Stricio X Veig			
Printed Name I mothy A DOAUMON Printed Name Patricia K. VEISZ			
Address 2810 Solom Hatch & Address Juniversity plaza			
Aow (er, 04 444/8 youngotown, on 44555			
Phone 330-719-4841 Phone 330-941-2142			

AGREEMENT between the Small Business Developme	ent Center (hereinafter "SBDC') and
Ellen Chittester (hereinafte	er the 'STAFF COUNSELOR'.) The agreement is
made and entered into this 31 day of Janu	1019 by and between the SBDC and
STAFF COUNSELOR, who agrees to render services f	
I as STAFF COUNSELOR, understand that I will not:	
 Recommend the purchase of goods and/or services. Accept fees or commissions from third parties who recommendation to the SBDC client. Accept fees or commissions from the SBDC client. Accept the private engagement of my services at a to, the term of my engagement as STAFF COUNTED permission of the SBDC subcenter director. 	for my services as STAFF COUNSELOR. any time during, or within 90 days subsequent
I as STAFF COUNSELOR, understand that I will:	
 Agree to hold strictly confidential all information of with the client. Agree to reveal promptly to the client all significan to the business of my client Acknowledge receipt of the SBDC guidelines, and IN WITNESS HEREOF, the parties affix their signatures	t matters that come to my attention pertaining agree to abide by all provisions of that policy.
	on the day above minding
Signature Printed Name Even Chitester Address 133 Prestwick Dr. Voungstown On 44512	Signature Patricia K. Veish Printed Name PATRICIA K. VEISZ Address ONE UNIVERSITY PLA JOUNG STOWN, OH 4456
Phone (814) 591 - 8141	Phone 330.941,2140

Form 250A

AGREEMENT between the Small Business Development Center (hereinafter "SBDC') and _____

Kirhard Fisher (hereinafter	the 'STAFF COUNSELOR'.) The agreement is	
made and entered into this 31 day of 30 nual	1, 200 by and between the SBDC and	
STAFF COUNSELOR, who agrees to render services for	the SBDC.	
I as STAFF COUNSELOR, understand that I will not:		
 Recommend the purchase of goods and/or services. Accept fees or commissions from third parties who have recommendation to the SBDC client. Accept fees or commissions from the SBDC client for the Accept the private engagement of my services at an accept the transfer of the territories. 	ave supplied goods and/or services on my or my services as STAFF COUNSELOR. y time during, or within 90 days subsequent	
to, the term of my engagement as STAFF COUNSE permission of the SBDC subcenter director.	ELOR with an SBDC client without express	
I as STAFF COUNSELOR, understand that I will:		
 Agree to hold strictly confidential all information obtained during the course of my engagement with the client. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy. 		
IN WITNESS HEREOF, the parties affix their signatures of	on the day above written.	
Signature Fully A Faher Printed Name Lichard & Fisher	Signature Patricia K. Veiss Printed Name Parricia K. Veisz	
44512 Boardman, OH	Address ONE UNIVERSITY PLAZA YOUNG STOWN, OH 44555	
Phone (330) 469-8469	Phone 330.941.2140	

STAFF COUNSELOR AGREEMENT Form 250A

AGREEMENT between the Small Business Development Center (hereinafter "SBDC') and		
	Derck Gomez (hereinaft	er the 'STAFF COUNSELOR'.) The agreement is
	made and entered into this 22 day of Jan	vary 2019 by and between the SBDC and
	STAFF COUNSELOR, who agrees to render services	for the SBDC.
	I as STAFF COUNSELOR, understand that I will not:	
	 Recommend the purchase of goods and/or service. Accept fees or commissions from third parties who recommendation to the SBDC client. Accept fees or commissions from the SBDC client. Accept the private engagement of my services at to, the term of my engagement as STAFF COUN permission of the SBDC subcenter director. 	o have supplied goods and/or services on my t for my services as STAFF COUNSELOR. any time during, or within 90 days subsequent
I as STAFF COUNSELOR, understand that I will:		
 Agree to hold strictly confidential all information obtained during the course of my engagement with the client. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy. 		
IN WITNESS HEREOF, the parties affix their signatures on the day above written.		
	Signature Printed Name Desek Come 2	Signature Patricia K. Vein PKV Printed Name Patri Cla K VIISZ
	Address 133 Prestwick D1. Youngstaun OH 44512	Address I university playa youngotown in 44555 Phone 330-941-2145
	Phone 330-402-8540	Phone 300-171-2170

Form 250A

AGREEMENT between the Small Business Development Center (hereinafter "SBDC") and Jason Heyman,

Strategize. LLC (hereinafter the 'S'	AFF COUNSELOR'.) The agreement is	
made and entered into this day of	2019 by and between the SBDC and	
STAFF COUNSELOR, who agrees to render services for the S	BDC.	
I as STAFF COUNSELOR, understand that I will not:		
 Recommend the purchase of goods and/or services, which Accept fees or commissions from third parties who have services are commendation to the SBDC client. 		
 Accept fees or commissions from the SBDC client for my s Accept the private engagement of my services at any time to, the term of my engagement as STAFF COUNSELOR permission of the SBDC subcenter director. 	during, or within 90 days subsequent	
I as STAFF COUNSELOR, understand that I will:		
Agree to hold strictly confidential all information obtained with the client.	during the course of my engagement	
3. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client		
Acknowledge receipt of the SBDC guidelines, and agree to the SBDC guidelines.	o abide by all provisions of that policy.	
IN WITNESS HEREOF, the parties affix their signatures on the	day above written.	
STAFF COUNSELOR SBD		
Signature Signa	ture Patricia K. Veisy	
Printed Name Jason Heyman, Strategizelle Printe	d Name PATRICIA K. VEISZ	
Address 224 W wood ST Apt 10C, Youngstown, Address	/	
OH 47502	DUNGSTOWN, OH 44555	
Phone 724,622_0864 Phone	330,941.2140	

AGREEMENT between the Small Business Development Center (hereinafter "SBDC") and			
erck Gomez (hereinafte	er the 'STAFF COUNSELOR'.) The agreement is		
made and entered into this 22 day of January 2019 by and between the SBDC and			
STAFF COUNSELOR, who agrees to render services for	or the SBDC.		
I as STAFF COUNSELOR, understand that I will not:			
 Recommend the purchase of goods and/or services, which I have an interest in or represent. Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR. Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director. 			
I as STAFF COUNSELOR, understand that I will:			
 Agree to hold strictly confidential all information obtained during the course of my engagement with the client. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy. 			
IN WITNESS HEREOF, the parties affix their signatures on the day above written.			
Signature Printed Name Derek Come Z Address 133 Prestwick D1 Youngstaun OH 44512	Signature Patricia K. Vein Printed Name Patri Cla K. Vein Address I university playa Juniversity playa Juniversity playa		
Phone 330-402-8540	Phone 330-941-2145		

STAFF COUNSELOR AGREEMENT Form 250A

ACREEMENT between the Small Business F	Development Center (hereinefter "SPDC") and	
- 1 · · ·	Development Center (hereinafter "SBDC') and	
- 221	(hereinafter the 'STAFF COUNSELOR'.) The agreement is	
made and entered into this 12nd day of	France, 19 by and between the SBDC and	
STAFF COUNSELOR, who agrees to render	services for the SBDC.	
I as STAFF COUNSELOR, understand that I	will not:	
Accept fees or commissions from third p recommendation to the SBDC client.	l/or services, which I have an interest in or represent. parties who have supplied goods and/or services on my BDC client for my services as STAFF COUNSELOR.	
Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director.		
I as STAFF COUNSELOR, understand that I	will:	
 Agree to hold strictly confidential all information obtained during the course of my engagement with the client. 		
3. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client Output Description:		
4. Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy.		
IN MITNESS HERESE II /I' (f II		
IN WITNESS HEREOF, the parties affix their signatures on the day above written.		
STAFF COUNSELOR	SBDC	
Signature	Signature Patricia K. Veiz	
Printed Name Solution	Printed Name Patricia K. Veisz	
Address 529 hobosette Ave	Address 1 University plays	
Sharon, PA 16146	yrungotrun, OR 44555	
Phone 774-977 - 0753	Phone 330-941-2140	

(hereinafter the 'STAFF COUNSELOR'.) The agreement is made and entered into this Advances of goods and/or services for the SBDC. I as STAFF COUNSELOR, who agrees to render services for the SBDC. I as STAFF COUNSELOR, understand that I will not: 1. Recommend the purchase of goods and/or services, which I have an interest in or represent. 2. Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client. 3. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR. 4. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR. 4. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR. 4. Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director. I as STAFF COUNSELOR, understand that I will: 1. Agree to hold strictly confidential all information obtained during the course of my engagement with the client. 3. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client 4. Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy. IN WITNESS HEREOF, the parties affix their signatures on the day above written. STAFF COUNSELOR Signature Printed Name P	ACREMENT between the Small Business Davidson	ant Contar (harris offer HODDON and London			
made and entered into this Aday of Staff Counselor, who agrees to render services for the SBDC. I as STAFF COUNSELOR, understand that I will not: 1. Recommend the purchase of goods and/or services, which I have an interest in or represent. 2. Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client. 3. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR. 4. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR. 4. Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director. I as STAFF COUNSELOR, understand that I will: 1. Agree to hold strictly confidential all information obtained during the course of my engagement with the client. 3. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client 4. Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy. IN WITNESS HEREOF, the parties affix their signatures on the day above written. STAFF COUNSELOR Signature Signature Printed Name Address 1. Whit Address 1	57 1 /	AGREEMENT between the Small Business Development Center (hereinafter "SBDC') and			
STAFF COUNSELOR, who agrees to render services for the SBDC. I as STAFF COUNSELOR, understand that I will not: 1. Recommend the purchase of goods and/or services, which I have an interest in or represent. 2. Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client. 3. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR. 4. Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director. I as STAFF COUNSELOR, understand that I will: 1. Agree to hold strictly confidential all information obtained during the course of my engagement with the client. 3. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client 4. Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy. IN WITNESS HEREOF, the parties affix their signatures on the day above written. STAFF COUNSELOR Signature Signature Signature Printed Name Address Printed Name Printed Name Address					
1. Recommend the purchase of goods and/or services, which I have an interest in or represent. 2. Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client. 3. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR. 4. Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director. I as STAFF COUNSELOR, understand that I will: 1. Agree to hold strictly confidential all information obtained during the course of my engagement with the client. 3. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client 4. Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy. IN WITNESS HEREOF, the parties affix their signatures on the day above written. STAFF COUNSELOR Signature Signature Printed Name Printed Name Printed Name Address	made and entered into this 12nd day of brus	by and between the SBDC and			
 Recommend the purchase of goods and/or services, which I have an interest in or represent. Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR. Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director. I as STAFF COUNSELOR, understand that I will: Agree to hold strictly confidential all information obtained during the course of my engagement with the client. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy. IN WITNESS HEREOF, the parties affix their signatures on the day above written. Staff Counselor Signature Signature Signature Address July July Address July July Address July July Address July July 	STAFF COUNSELOR, who agrees to render services f	or the SBDC.			
 Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR. Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director. I as STAFF COUNSELOR, understand that I will: Agree to hold strictly confidential all information obtained during the course of my engagement with the client. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy. IN WITNESS HEREOF, the parties affix their signatures on the day above written. STAFF COUNSELOR Signature Signature Printed Name Fath Clark Velist Address I whome fath Clark Velist Address I whome fath Clark Velist Address I whome fath Clark Velist 	I as STAFF COUNSELOR, understand that I will not:				
1. Agree to hold strictly confidential all information obtained during the course of my engagement with the client. 3. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client. 4. Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy. IN WITNESS HEREOF, the parties affix their signatures on the day above written. STAFF COUNSELOR Signature Printed Name Address Printed Name Printed Name Address	 Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR. Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express 				
with the client. 3. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client 4. Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy. IN WITNESS HEREOF, the parties affix their signatures on the day above written. STAFF COUNSELOR Signature Signature Printed Name Printed Name Printed Name Printed Name Address Address	I as STAFF COUNSELOR, understand that I will:				
3. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client 4. Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy. IN WITNESS HEREOF, the parties affix their signatures on the day above written. STAFF COUNSELOR Signature Signature Printed Name Address Signature Printed Name Address Address					
4. Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy. IN WITNESS HEREOF, the parties affix their signatures on the day above written. STAFF COUNSELOR Signature Signature Printed Name Printed Name Printed Name Printed Name Address Support Address Addres	3. Agree to reveal promptly to the client all significan	nt matters that come to my attention pertaining			
Signature Signature Signature Signature Signature Printed Name Pri					
Signature Signature Signature Signature Signature Printed Name Pri					
Signature Signature Signature Signature Signature Printed Name Pri					
Signature Patrices K. Very per Printed Name Patrices K. Very per Printed Name Patrices K. Very per Address 529 Interpette Ave Address 1 University plays Shares PA 16146 Yungstman Ok 44555	IN WITNESS HEREOF, the parties affix their signatures on the day above written.				
Signature Patrices K. Very per Printed Name Patrices K. Very per Printed Name Patrices K. Very per Address 529 Interpette Ave Address 1 University plays Shares PA 16146 Yungstman Ok 44555	///				
Printed Name Patricia K. Veist Address 529 Intropette Ave Address 1 University pluja Sharan PA 16146 The agent of the Ave Address 1 University pluja The agent of the Ave Address 1 University pluja The agent of the Ave Address 1 University pluja The agent of the Ave Address 1 University pluja The agent of the Ave Address 1 University pluja The agent of the Ave Ave Address 1 University pluja The agent of the Ave Address 1 University pluja The agent of the Ave Ave Address 1 University pluja The agent of the Ave Ave Address 1 University pluja The agent of the Ave Ave Ave Ave Ave Ave Ave Ave Ave Av	STAFF COUNSELOR	Pi- Kal and			
Address 529 hotosette Ave Address 1 University plays Sharan, PA 16146 Yrungothun, Ok 44555	Signature	Signature Talucia J. Very pt			
Sharon, PA 96146 yrungotrum, OK 44555	Printed Name Color Salucer	Printed Name Patricia K. Velst			
Shoron, PA 16146 Yrungstrum, OK 44555 Phone 774-977-0753 Phone 330-941-2140	Address 529 Intrajette Ave	Address 1 University plays			
Phone 774-977-0753 Phone 330-941-2140	Sharan, PA 16146	Yrungotrun, Ok 44555			
	Phone 774-977 - 0753	Phone 330-941-2140			

AGREEMENT between the Small Business Development Center (hereinafter "SBDC') and
I as STAFF COUNSELOR, understand that I will not:
 Recommend the purchase of goods and/or services, which I have an interest in or represent. Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR. Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director.
I as STAFF COUNSELOR, understand that I will:
 Agree to hold strictly confidential all information obtained during the course of my engagement with the client. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy.
IN WITNESS HEREOF, the parties affix their signatures on the day above written.
Signature Mouse Nous Printed Name Mouse HASSIS Printed Name Mouse HASSIS Address One University Plaza Young Foun, OH 44555 Phone 330-941-2145 Phone 330-941-2145

STAFF COUNSELOR AGREEMENT Form 250A

AGREEMENT between the Small Business Development Center (hereinafter "SBDC') and ______

Joseph M. Scott (hereinafter the 'STAFF COUNSELOR'.) The agreement is

made and entered into this 22 day of January, 2019 by and between the SBDC and

Recommend the purchase of goods and/or services, which I have an interest in or represent. Accept fees or commissions from third parties who have supplied goods and/or services on my

Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR.
 Accept the private engagement of my services at any time during, or within 90 days subsequent

STAFF COUNSELOR, who agrees to render services for the SBDC.

I as STAFF COUNSELOR, understand that I will not:

recommendation to the SBDC client.

to, the term of my engagement as STAFF COU permission of the SBDC subcenter director.	JNSELOR with an SBDC client without express		
I as STAFF COUNSELOR, understand that I will:			
with the client. 3. Agree to reveal promptly to the client all significate to the business of my client	with the client. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client		
IN WITNESS HEREOF, the parties affix their signatures on the day above written.			
STAFF COUNSELOR	SBDC		
Signature Juseph M. Scutt	Signature tatricia Kileisy		
Printed Name Joseph M. Switt	Printed Name PATRICIA K.VEISZ		
Address 204 Robbies Run	Address ONE UNIVERSITY PLAZA		
Cartland OH 44410	JOHNG STOWN, OH 44555		
Phone 330 - 423 - 7976	Phone 330.941.2140		

Form 250A

AGREEMENT between the Small Business Development Center (hereinafter "SBDC') and

Levi	Smith		r the 'STAFF COUNSELOR'.) The agreement is
made and entered into this			
		to render services for	
I as STAFF Co	OUNSELOR, unders	tand that I will not:	
 Recommend the purchase of goods and/or services, which I have an interest in or represent. Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR. Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director. 			
I as STAFF Co	OUNSELOR, unders	tand that I will:	
 Agree to hold strictly confidential all information obtained during the course of my engagement with the client. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy. 			
IN WITNESS HEREOF, the parties affix their signatures on the day above written.			
	Lay I SE		Signature Patricial Very Printed Name PATRICIA K. VETSZ Address ONE UNIVERSITY PLAZI VOUNCOSTOWN, OH 44555
Phone 33	50-610-096	2/	Phone 330.941.2140

Form 250A

(hereinafter the 'STAFF COUNSELOR'.) The agreement is

AGREEMENT between the Small Business Development Center (hereinafter "SBDC') and _

made and entered into this 30 TH day of TANUA	124, 2019 by and between the SBDC and	
STAFF COUNSELOR, who agrees to render services for the SBDC.		
I as STAFF COUNSELOR, understand that I will not:		
 Recommend the purchase of goods and/or services, which I have an interest in or represent. Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR. Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director. 		
I as STAFF COUNSELOR, understand that I will:		
 Agree to hold strictly confidential all information ob with the client. Agree to reveal promptly to the client all significant to the business of my client Acknowledge receipt of the SBDC guidelines, and IN WITNESS HEREOF, the parties affix their signatures	matters that come to my attention pertaining agree to abide by all provisions of that policy.	
Signature Fatricia K. VEISZ Printed Name PATRICIA K. VEISZ Address 6816 TANGLEWOOD DR. VOUNGSTOWN, OH 44512 Phone 330.758.1628	Signature <u>fatureia</u> K. Veisz Printed Name <u>PATRICIA K. VEISZ</u> Address <u>ONE UNIVERSITY PLAZA</u> JOUNG STOWN, OH 44535 Phone <u>330.941.2140</u>	

AGREEMENT between the Small Business Devel	opment Center (hereinafter "SBDC') and		
Maria Vinue (here	inafter the 'STAFF COUNSELOR'.) The agreement is		
made and entered into this day of	unuary, 2019 by and between the SBDC and		
STAFF COUNSELOR, who agrees to render servi	9		
I as STAFF COUNSELOR, understand that I will n	ot:		
 Accept fees or commissions from third parties recommendation to the SBDC client. Accept fees or commissions from the SBDC of Accept the private engagement of my service. 	ervices, which I have an interest in or represent. s who have supplied goods and/or services on my client for my services as STAFF COUNSELOR. s at any time during, or within 90 days subsequent OUNSELOR with an SBDC client without express		
I as STAFF COUNSELOR, understand that I will:			
 Agree to hold strictly confidential all information obtained during the course of my engagement with the client. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy. 			
IN WITNESS HEREOF, the parties affix their signatures on the day above written.			
STAFF COUNSELOR	SBDC		
Signature Win Vins	Signature Patricia K. Veig A		
Printed Name Maria Vince	Printed Name Patricia K. Versa		
Address 5036 Alva Ave NW	Address / / / / / / / / / / / / / / / / / /		
Warren, OH 44483	youngstown onio 44554		
Phone (336) 883-3707	Phone 330-941-2145		

STAFF COUNSELOR AGREEMENT Form 250A

Oli Mereinafter the 'STAFF COUNSELOR'.) The agreement is

AGREEMENT between the Small Business Development Center (hereinafter "SBDC') and

1110			
made and entered into this 11th day of OCTOPEC, 2018 by and between the SBDC and			
STAFF COUNSELOR, who agrees to render services for	the SBDC.		
I as STAFF COUNSELOR, understand that I will not:			
 Recommend the purchase of goods and/or services, Accept fees or commissions from third parties who h recommendation to the SBDC client. 			
Accept fees or commissions from the SBDC client for	r my services as STAFF COUNSELOR.		
 Accept the private engagement of my services at any to, the term of my engagement as STAFF COUNSE permission of the SBDC subcenter director. 			
I as STAFF COUNSELOR, understand that I will:			
Agree to hold strictly confidential all information obta with the client.	nined during the course of my engagement		
Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client			
Acknowledge receipt of the SBDC guidelines, and a	gree to abide by all provisions of that policy.		
IN WITNESS HEREOF, the parties affix their signatures on the day above written.			
STAFF COUNSELOR	SBDC A. IA.		
1000100120100V	Signature Herrica K- / Rusy		
Olympia Strategy	organization of the state of th		
Printed Name RUSTAL MUDINCHOLE	Printed Name #ATRICIA K-VEISE		
Address 1393 Cross cove	Address DAVE UNIVERSITY PL		
Austintown, onto 44515	YOUNG SOWN, OH44555		
Phone 330,941, 2140	Phone 330.941.2145		

Form 250A

AGREEMENT	between the Sm	all Business Development Center (hereinafter "SBDC') and
Joseph	Bever	_ (hereinafter the 'STAFF COUNSELOR'.) The agreement is
made effective 15th day of October 2018 by and between the SBDC and		
STAFF COUNSELOR, who agrees to render services for the SBDC.		

I as STAFF COUNSELOR, understand that I will not:

- 1. Recommend the purchase of goods and/or services, which I have an interest in or represent.
- 2. Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client.
- 3. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR.
- 4. Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director.

I as STAFF COUNSELOR, understand that I will:

- Agree to hold strictly confidential all information obtained during the course of my engagement with the client.
- Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client
- 4. Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy.

STAFF COUNSELOR	SBDC
Signature Joseph Bever	Signature M. T. Southards
Address c/o KSU - CAE, POB 5190 (Aero &	Address c/o KSU - CAE, POB 5190 (Aero &
Tech Bldg), Kent, OH 44242-0001	Tech Bldg), Kent, OH 44242-0001
Phone 330-672-2892	Phone <u>330-672-0793</u>

Form 250A

AGREEMENT between the Small Business Development Center (hereinafter "SBDC") and

<u>Sydney Bihn</u> (hereinafter the 'STAFF COUNSELOR'.) The agreement is made effective <u>14th</u> day of <u>January 2019</u> by and between the SBDC and STAFF COUNSELOR, who agrees to render services for the SBDC.

I as STAFF COUNSELOR, understand that I will not:

- 1. Recommend the purchase of goods and/or services, which I have an interest in or represent.
- 2. Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client.
- Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR.
- Accept the private engagement of my services at any time during, or within 90 days subsequent
 to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express
 permission of the SBDC subcenter director.

I as STAFF COUNSELOR, understand that I will:

STAFF COLINSELOR

- Agree to hold strictly confidential all information obtained during the course of my engagement with the client.
- Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client
- 4. Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy.

SBDC

CIAIT COCITCLEOIT	0000
Signature Lydry Bell	Signature & T herether
Printed Name Sydney Bihn (Student Assistant)	Printed Name W. T. Southards
Address c/o KSU - CAE, POB 5190 (Aero &	Address c/o KSU - CAE, POB 5190 (Aero
Tech Bldg), Kent, OH 44242-0001	& Tech Bldg), Kent, OH 44242-0001
Phone <u>330-672-2892</u>	Phone <u>330-672-0793</u>

Form 250A

AGREEMENT between the Small Business Development Center (hereinafter "SBDC') and

<u>Michael R. Fisch, PhD</u> (hereinafter the 'STAFF COUNSELOR'.) The agreement is made effective <u>1st</u> day of <u>October 2018</u> by and between the SBDC and STAFF COUNSELOR, who agrees to render services for the SBDC.

I as STAFF COUNSELOR, understand that I will not:

- 1. Recommend the purchase of goods and/or services, which I have an interest in or represent.
- Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client.
- 3. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR.
- 4. Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director.

I as STAFF COUNSELOR, understand that I will:

STAFE COUNSELOD

- Agree to hold strictly confidential all information obtained during the course of my engagement with the client.
- 3. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client
- 4. Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy.

IN WITNESS HEREOF, the parties affix their signatures effective on the day above written.

CIAII COCIICEECII	<u> </u>
Signature M. J. L. R. F.	Signature WT Southern
Printed Name Michael R. Fisch, PhD (Faculty)	Printed Name W. T. Southards
Address c/o KSU - CAE, POB 5190 (Aero &	Address c/o KSU - CAE, POB 5190 (Aero
Tech Bldg), Kent, OH 44242-0001	& Tech Bldg), Kent, OH 44242-0001
Phone <u>330-672-9338</u>	Phone <u>330-672-0793</u>

CBDC

Form 250A

AGREEMENT between the Small Business Development Center (hereinafter "SBDC") and

<u>Mark Heiferling</u> (hereinafter the 'STAFF COUNSELOR'.) The agreement is made effective <u>1st</u> day of <u>October 2018</u> by and between the SBDC and STAFF COUNSELOR, who agrees to render services for the SBDC.

I as STAFF COUNSELOR, understand that I will not:

- 1. Recommend the purchase of goods and/or services, which I have an interest in or represent.
- Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client.
- Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR.
- Accept the private engagement of my services at any time during, or within 90 days subsequent
 to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express
 permission of the SBDC subcenter director.

I as STAFF COUNSELOR, understand that I will:

- 1. Agree to hold strictly confidential all information obtained during the course of my engagement with the client.
- 3. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client
- Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy.

IN WITNESS HEREOF, the parties affix their signatures effective on the day above written.

Signature

Signature

Signature

Signature

Signature

Mark Heiferling (Part-time Faculty)

Address c/o KSU - CAE, POB 5190 (Aero & Address c/o KSU - CAE, POB 5190 (Aero & Tech Bldg), Kent, OH 44242-0001

Phone 440-247-3434

Phone 330-672-0793

Form 250A

AGREEMENT between the Small Business Development Center (hereinafter "SBDC') and

<u>Kim Holizna</u> (hereinafter the 'STAFF COUNSELOR'.) The agreement is made effective <u>1st</u> day of <u>October 2018</u> by and between the SBDC and STAFF COUNSELOR, who agrees to render services for the SBDC.

I as STAFF COUNSELOR, understand that I will not:

- 1. Recommend the purchase of goods and/or services, which I have an interest in or represent.
- 2. Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client.
- 3. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR.
- 4. Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director.

I as STAFF COUNSELOR, understand that I will:

- Agree to hold strictly confidential all information obtained during the course of my engagement with the client.
- 3. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client
- 4. Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy.

STAFF COUNSELUK	2BDC
Signature Kumlay Kogna	Signature W/ South
Printed Name Kim Holizna (Part-time faculty)	Printed Name W. T. Southards
Address c/o KSU - CAE, POB 5190 (Aero &	Address c/o KSU - CAE, POB 5190 (Aero
Tech Bldg), Kent, OH 44242-0001	& Tech Bldg), Kent, OH 44242-0001
Phone 216-577-1235	Phone 330-672-0793

STAFF COUNSELOR AGREEMENT Form 250A

AGREEMENT between the Small Business Development Center (hereinafter "SBDC") and

Anthony Mirando (hereinafter the 'STAFF COUNSELOR'.) The agreement is made effective 1st day of January 2019 by and between the SBDC and STAFF COUNSELOR, who agrees to render services for the SBDC.

I as STAFF COUNSELOR, understand that I will not:

- Recommend the purchase of goods and/or services, which I have an interest in or represent.
- Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client.
- 3. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR.
- Accept the private engagement of my services at any time during, or within 90 days subsequent
 to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express
 permission of the SBDC subcenter director.

I as STAFF COUNSELOR, understand that I will:

TARE COLLEGE! OD

- 1. Agree to hold strictly confidential all information obtained during the course of my engagement with the client.
- 3. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client
- 4. Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy.

STAFF COUNSELOR	380C
Signature	Signature WI Southur
Printed Name Anthony Mirando (Faculty AED)	Printed Name W. T. Southards
Address c/o KSU - AED, POB 5190 (College of College of Architecture & Environmental Design,	Address c/o KSU - CAE, POB 5190 (Aero & Tech Bidg), Kent, OH 44242-0001
Kent. OH 44242-0001	
Phone <u>440-4881741</u>	Phone 330-672-0793

Form 250A

AGREEMENT between the Small Business Development Center (hereinafter "SBDC") and

<u>Tony Pagliaroli</u> (hereinafter the 'STAFF COUNSELOR'). The agreement is made effective <u>1st</u> day of <u>October 2018</u> by and between the SBDC and STAFF COUNSELOR, who agrees to render services for the SBDC.

I as STAFF COUNSELOR, understand that I will not:

- Recommend the purchase of goods and/or services, which I have an interest in or represent.
- Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client.
- Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR.
- 4. Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director.

I as STAFF COUNSELOR, understand that I will:

- 1. Agree to hold strictly confidential all information obtained during the course of my engagement with the client.
- 3. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client
- 4. Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy.

IN WITNESS HEREOF, the parties affix their signatures effective on the day above written.

71110	
STAFF COUNSELOR!	SBDC
Signature MMW	Signature W1 Souther
Printed Name Tony Paglardii (Consultant)	Printed Name W. T. Southards
Address 865 Theresa Avenue	Address c/o KSU - CAE, POB 5190 (Aero
Hermitage, PA 16148-2810	& Tech Bldg), Kent, OH 44242-0001

Phone <u>724-981-1184</u> Phone <u>330-672-0793</u>

Form 250A

AGR	REEMENT between the Small Business Development Center (hereinafter "SBDC') and
11	fartin Findston (hereinafter the 'STAFF COUNSELOR'.) The agreement is
mad	e effective 15th day of October 2018 by and between the SBDC and
STA	FF COUNSELOR, who agrees to render services for the SBDC.
l as	STAFF COUNSELOR, understand that I will not:
1. 2.	Recommend the purchase of goods and/or services, which I have an interest in or represent. Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client.
3. 4.	Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR. Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express

I as STAFF COUNSELOR, understand that I will:

permission of the SBDC subcenter director.

- Agree to hold strictly confidential all information obtained during the course of my engagement with the client.
- 3. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client
- 4. Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy.

STAFF COUNSELUR	SBDC
Signature Man 186	Signature WT Mullim
Printed Name Martin Finkston	Printed Name W. T. Southards
Address c/o KSU - CAE, POB 5190 (Aero &	Address c/o KSU - CAE, POB 5190 (Aero &
Tech Bldg), Kent, OH 44242-0001	Tech Bldg), Kent, OH 44242-0001
Phone 330-672-2892	Phone 330-672-0793

Form 250A

AGREEMENT between the Small Business Development Center (hereinafter "SBDC") and

W. T. Southards (hereinafter the 'STAFF COUNSELOR'.) The agreement is made effective <u>1st</u> day of <u>October 2018</u> by and between the SBDC and STAFF COUNSELOR, who agrees to render services for the SBDC.

I as STAFF COUNSELOR, understand that I will not:

- 1. Recommend the purchase of goods and/or services, which I have an interest in or represent.
- 2. Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client.
- 3. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR.
- 4. Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director.

I as STAFF COUNSELOR, understand that I will:

- 1. Agree to hold strictly confidential all information obtained during the course of my engagement with the client.
- 3. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client
- 4. Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy.

STAFF COUNSELOR	SBDC
Signature W. I. Mouthum	Signature WI Southern
Printed Name W. T. Southards (Prof Staff)	Printed Name W. T. Southards
Address c/o KSU - CAE, POB 5190 (Aero &	Address c/o KSU - CAE, POB 5190 (Aero
Tech Bldg), Kent, OH 44242-0001	& Tech Bldg), Kent, OH 44242-0001
Phone 330-672-0793	Phone 330-672-0793

Form 250A

AGREEMENT between the Small Business Development Center (hereinafter "SBDC') and

<u>D. Blake Stringer, PhD</u> (hereinafter the 'STAFF COUNSELOR'.) The agreement is made effective <u>1st</u> day of <u>October 2018</u> by and between the SBDC and STAFF COUNSELOR, who agrees to render services for the SBDC.

I as STAFF COUNSELOR, understand that I will not:

- 1. Recommend the purchase of goods and/or services, which I have an interest in or represent.
- Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client.
- Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR.
- Accept the private engagement of my services at any time during, or within 90 days subsequent
 to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express
 permission of the SBDC subcenter director.

I as STAFF COUNSELOR, understand that I will:

STAFF SOUNDELOD

- 1. Agree to hold strictly confidential all information obtained during the course of my engagement with the client.
- Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client
- 4. Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy.

STAFF COUNSELOB	SBDC
Signature	Signature WT South
Printed Name D. Blake Stringer, PhD (Faculty) Address c/o KSU - CAE, POB 5190 (Aero &	Printed Name W. T. Southards Address c/o KSU - CAE, POB 5190 (Aero
Tech Bldg), Kent, OH 44242-0001	& Tech Bldg), Kent, OH 44242-0001
Phone <u>330-672-3953</u>	Phone <u>330-672-0793</u>

Form 250A

AGREEMENT between the Small Business Development Center (hereinafter "SBDC') and Jessica Tremayne-Farkas (hereinafter the 'STAFF COUNSELOR'.) The agreement is made and entered into this 1st day of October 2017 by and between the SBDC and STAFF COUNSELOR, who agrees to render services for the SBDC.

I as STAFF COUNSELOR, understand that I will not:

- 1. Recommend the purchase of goods and/or services, which I have an interest in or represent.
- Accept fees or commissions from third parties who have supplied goods and/or services on my 2. recommendation to the SBDC client.
- 3. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR.
- Accept the private engagement of my services at any time during, or within 90 days subsequent to the term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director.

I as STAFF COUNSELOR, understand that I will:

- Agree to hold strictly confidential all information obtained during the course of my engagement 1. with the client.
- 3. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client
- Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy. 4.

IN WITNESS HEREOF, the parties affix their signatures effective on the day above written.

STAFF COUNSELOR	SBDC
Signature Juna Junique tulas	Signature 4/1 Nouthern
Printed Name Jessica Tremayne-Farkas	Printed Name W. T. Southards
Address c/o KSU - CAE, POB 5190 (Aero &	Address c/o KSU - CAE, POB 5190 (Aero &
Tech Bldg), Kent, OH 44242-0001	Tech Bldg), Kent, OH 44242-0001
Phone 330-672-1498	Phone <u>330-672-0793</u>

Form 250A

AGREEMENT between the Small Business Development Center (hereinafter "SBDC') and

<u>Trent True</u> (hereinafter the 'STAFF COUNSELOR'.) The agreement is made effective <u>1st</u> day of <u>October 2018</u> by and between the SBDC and STAFF COUNSELOR, who agrees to render services for the SBDC.

I as STAFF COUNSELOR, understand that I will not:

- 1. Recommend the purchase of goods and/or services, which I have an interest in or represent.
- Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client.
- Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR.
- Accept the private engagement of my services at any time during, or within 90 days subsequent
 to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express
 permission of the SBDC subcenter director.

I as STAFF COUNSELOR, understand that I will:

STAFF COUNSELOR

- 1. Agree to hold strictly confidential all information obtained during the course of my engagement with the client.
- 3. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client
- 4. Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy.

SBDC

Signature	Signature Whather
Printed Name Trent True (Faculty)	Printed Name W. T. Southards
Address c/o KSU - CAE, POB 5190 (Aero &	Address c/o KSU - CAE, POB 5190 (Aero
Tech Bldg), Kent, OH 44242-0001	& Tech Bldg), Kent, OH 44242-0001
Phone 330-672-7494	Phone <u>330-672-0793</u>

Form 250A

AGREEMENT between the Small Business Development Center (hereinafter "SBDC') and

Amy Waples (hereinafter the 'STAFF COUNSELOR'.) The agreement is made effective 1st day of October 2018 by and between the SBDC and STAFF COUNSELOR, who agrees to render services for the SBDC.

I as STAFF COUNSELOR, understand that I will not:

- Recommend the purchase of goods and/or services, which I have an interest in or represent.
- Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client.
- Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR. 3.
- Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director.

I as STAFF COUNSELOR, understand that I will:

- 1. Agree to hold strictly confidential all information obtained during the course of my engagement with the client.
- Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client
- Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy.

IN WITNESS HEREOF, the parties affix their signatures effective on the day above written.

STAFF COUNSELOR	SBDC
Signature any Uples	Signature W/ Souther
Printed Name Amy Waples (Staff)	Printed Name W. T. Southards
Address c/o KSU - CAE, POB 5190 (Aero &	Address c/o KSU - CAE, POB 5190 (Aero
Tech Bldg), Kent, OH 44242-0001	& Tech Bldg), Kent, OH 44242-0001
Phone <u>330-672-9409</u>	Phone <u>330-672-0793</u>

AGREEMENT between the Small Business Development Center (hereinafter "SBDC") and
 Recommend the purchase of goods and/or services, which I have an interest in or represent. Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR. Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director.
I, as STAFF COUNSELOR, understand that I will:
 Agree to hold strictly confidential all information obtained during the course of my engagement with the client. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client. Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy.
IN WITNESS HEREOF, the parties affix their signatures on the day above written.
STAFF COUNSELOR Signature Signature Signature Printed Name Address 77 S High Street, Columbus, OH 43215 Address 77 S High Street, Columbus, OH 43215
Phone <u>614-466-6581</u> Phone <u>1-614-466-6581</u>

Form 250A

AGREEMENT between the Small Business Development Center (hereinafter "SBDC') and

Adam Zuckerman (hereinafter the 'STAFF COUNSELOR'.) The agreement is made effective 1st day of October 2018 by and between the SBDC and STAFF COUNSELOR, who agrees to render services for the SBDC.

I as STAFF COUNSELOR, understand that I will not:

- Recommend the purchase of goods and/or services, which I have an interest in or represent.
- Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client.
- Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR. 3.
- Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director.

I as STAFF COUNSELOR, understand that I will:

- Agree to hold strictly confidential all information obtained during the course of my engagement with the client.
- Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client
- Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy.

IN WITNESS HEREOF, the parties affix their signatures effective on the day above written.

STAFF COUNSELOR	SBDC
Signature Manual	Signature Will Southur
Printed Name Adam Zuckerman	Printed Name W. T. Southards
Address c/o KSU - CAE, POB 5190 (Aero &	Address c/o KSU - CAE, POB 5190 (Aero
Tech Bldg), Kent, OH 44242-0001	& Tech Bldg), Kent, OH 44242-0001
Phone <u>330-221-7503</u>	Phone <u>330-672-0793</u>

AGREEMENT between the Small Business Development	er the "STAFF COUNSELOR"). The agreement is			
made and entered into this1day ofOctobe	r , 2018 by and between the SBDC and			
STAFF COUNSELOR, who agrees to render services for	the SBDC.			
I, as STAFF COUNSELOR, understand that I will not:				
1. Recommend the purchase of goods and/or service	s, which I have an interest in or represent.			
2. Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client.				
3. Accept fees or commissions from the SBDC client f	or my services as STAFF COUNSELOR.			
4. Accept the private engagement of my services at a term of my engagement as STAFF COUNSELOR with				
SBDC subcenter director.				
I, as STAFF COUNSELOR, understand that I will:				
 Agree to hold strictly confidential all information o the client. 	btained during the course of my engagement with			
2. Agree to reveal promptly to the client all significan	t matters that come to my attention pertaining to			
the business of my client.				
3. Acknowledge receipt of the SBDC guidelines, and a	gree to abide by all provisions of that policy.			
IN WITNESS HEREOF, the parties affix their signatures of	on the day above written.			
STAFF COUNSELOR	SBDC Center: 999 #			
Signature /	Signature / / /			
Printed Name Mikhal Shimill	Printed Name James Laipply			
Address 77 S High Street, Columbus, OH 43215 Address 77 S High St, Columbus OH 43215				
Phone 614-466-5095	Phone <u>1-614-466-6581</u>			

AGREEMENT between the Small Business Development Center (hereinafter "SBDC") and				
 Recommend the purchase of goods and/or services, which I have an interest in or represent. Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR. Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director. 				
I, as STAFF COUNSELOR, understand that I will:				
 Agree to hold strictly confidential all information obtained during the course of my engagement with the client. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client. Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy. 				
IN WITNESS HEREOF, the parties affix their signatures of	n the day above written.			
STAFF COUNSELOR Signature	SBDC Center: 999 #			
Printed Name Iom Baintinidge	Printed Name James Laipply			
Address 77 S High Street, Columbus, OH 43215	Address 77 S High St, Columbus OH 43215			
Phone <u>614-728-3120</u>	Phone <u>1-614-466-6581</u>			

AGREEMENT between the Small Business Developmen THIEN BUI (hereinafte	ot Center (hereinafter "SBDC") ander the "STAFF COUNSELOR"). The agreement is			
made and entered into this 1 day of Octobe	r, <u>2018</u> by and between the SBDC and			
STAFF COUNSELOR, who agrees to render services for	the SBDC.			
I, as STAFF COUNSELOR, understand that I will not:				
L. Recommend the purchase of goods and/or services, which I have an interest in or represent.				
2. Accept fees or commissions from third parties who have supplied goods and/or services on my				
recommendation to the SBDC client.				
3. Accept fees or commissions from the SBDC client f				
4. Accept the private engagement of my services at a				
SBDC subcenter director.	h an SBDC client without express permission of the			
I, as STAFF COUNSELOR, understand that I will:				
1. Agree to hold strictly confidential all information of	btained during the course of my engagement with			
the client.				
2. Agree to reveal promptly to the client all significant	t matters that come to my attention pertaining to			
the business of my client.				
3. Acknowledge receipt of the SBDC guidelines, and a	gree to abide by all provisions of that policy.			
IN WITNESS HEREOF, the parties affix their signatures of	on the day above written.			
STAFF COUNSELOR	SBDC Center: 9997 / #			
~ M N	1/11/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1			
Signature / ffm/fm	Signature			
Printed Name THIEN BUI	Printed Name James Laipply			
Address 77 S High Street, Columbus, OH 43215	Address 77 S High St, Columbus OH 43215			
Phone <u>614 466 4996</u>	Phone <u>1-614-466-6581</u>			

AG	GREEMENT between the Small Business Developme Diane Hoenig (hereinaf	ter the "STAFF COUNSELOR"). The agreement is
	ade and entered into this <u>1</u> day of <u>Octoo</u>	ober
l, a	as STAFF COUNSELOR, understand that I will not:	
1. 2. 3. 4.	Accept the private engagement of my services at	ho have supplied goods and/or services on my
I, a	s STAFF COUNSELOR, understand that I will:	
 2. 3. 	the client. Agree to reveal promptly to the client all signification the business of my client.	obtained during the course of my engagement with ant matters that come to my attention pertaining to agree to abide by all provisions of that policy.
STA Sig Pri Ad	MITNESS HEREOF, the parties affix their signatures affix their signa	SBDC Center: Lead Center, 999 # Signature

1011112					
AGREEMENT between the Small Business Developmen	t Center (hereinafter "SBDC") and				
	er the "STAFF COUNSELOR"). The agreement is				
made and entered into this <u>1</u> day of <u>Octobe</u>					
STAFF COUNSELOR, who agrees to render services for	the SBDC.				
I, as STAFF COUNSELOR, understand that I will not:					
1. Recommend the purchase of goods and/or service	s, which I have an interest in or represent.				
2. Accept fees or commissions from third parties who have supplied goods and/or services on my					
recommendation to the SBDC client.					
3. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR.					
 Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director. 					
I, as STAFF COUNSELOR, understand that I will:					
Agree to hold strictly confidential all information of the client.	btained during the course of my engagement with				
2. Agree to reveal promptly to the client all significan	t matters that come to my attention pertaining to				
the business of my client.3. Acknowledge receipt of the SBDC guidelines, and a	gree to abide by all provisions of that policy.				
IN WITNESS HEREOF, the parties affix their signatures of	on the day above written.				
STAFF COUNSELOR	SBDC Center: 999 #				
Signature	Signature				
Printed Name Werdi Howell	Printed Name James Laipply				
Address 77 S High Street, Columbus, OH 43215	Address 77 S High St, Columbus OH 43215				
Phone 644-464-6811	Phone <u>1-614-466-6581</u>				
	*				

AGREEMENT between the Small Business Developme	ent Center (hereinafter "SBDC") and				
DOMINI WUNT (hereinaf	ter the "STAFF COUNSELOR"). The agreement is				
	per, <u>2018</u> by and between the SBDC and				
STAFF COUNSELOR, who agrees to render services for	or the SBDC.				
I, as STAFF COUNSELOR, understand that I will not:					
Recommend the purchase of goods and/or services, which I have an interest in or represent.					
Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client.					
3. Accept fees or commissions from the SBDC client	t for my services as STAFF COUNSELOR.				
 Accept the private engagement of my services at any time during, or within 90 days subsequent to, th term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director. 					
I, as STAFF COUNSELOR, understand that I will:					
1. Agree to hold strictly confidential all information the client.	obtained during the course of my engagement with				
. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client.					
. Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy.					
IN WITNESS HEREOF, the parties affix their signatures	s on the day above written.				
STAFF COUNSELOR	SBDC Center: 999 #				
Signature Danie G. Unit	Signature / - //////////				
Printed Name DOMINI G. HUNT Printed Name James Laipply					
Address 77.5 High Street, Columbus, OH 43215	Address 77 S High St, Columbus OH 43215				
Phone 614-728-4607	Phone <u>1-614-466-6581</u>				

AGREEMENT between the Small Business Development	
made and entered into this 1 day of October	
STAFF COUNSELOR, who agrees to render services for t	
I, as STAFF COUNSELOR, understand that I will not:	
 Recommend the purchase of goods and/or services Accept fees or commissions from third parties who recommendation to the SBDC client. Accept fees or commissions from the SBDC client for Accept the private engagement of my services at an term of my engagement as STAFF COUNSELOR with SBDC subcenter director. 	have supplied goods and/or services on my or my services as STAFF COUNSELOR. ny time during, or within 90 days subsequent to, the
I, as STAFF COUNSELOR, understand that I will:	
 Agree to hold strictly confidential all information of the client. Agree to reveal promptly to the client all significant the business of my client. Acknowledge receipt of the SBDC guidelines, and again the significant the business of my client. 	matters that come to my attention pertaining to gree to abide by all provisions of that policy.
· · · · · · · · · · · · · · · · · · ·	•
STAFF COUNSELOR Signature Affect	SBDC Center: 999 #
Printed Name CONNOR MCNAMARA	Printed Name James Laipply
Printed Name	Printed Name James Laippiy
Address 77 S High Street, Columbus, OH 43215	Address 77 S High St, Columbus OH 43215
Phone 1-614-995-1895	Phone <u>1-614-466-6581</u>

AGREEMENT between the Small Business Development Tecenial Mulisan (hereinafter made and entered into this 1 day of October STAFF COUNSELOR, who agrees to render services for the state of the state	r the "STAFF COUNSELOR"). The agreement is,2018 by and between the SBDC and			
I, as STAFF COUNSELOR, understand that I will not:				
 Recommend the purchase of goods and/or services, which I have an interest in or represent. Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client. Accept fees or commissions from the SBDC client for my services as STAFF COUNSELOR. Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director. 				
I, as STAFF COUNSELOR, understand that I will:				
 Agree to hold strictly confidential all information obtained during the course of my engagement with the client. Agree to reveal promptly to the client all significant matters that come to my attention pertaining to the business of my client. Acknowledge receipt of the SBDC guidelines, and agree to abide by all provisions of that policy. 				
IN WITNESS HEREOF, the parties affix their signatures on the day above written.				
Staff Counselor Signature Printed Name Secent al Muligar Address 77 S High Street, Columbus, OH 43215	SBDC Center: 999 # Signature			
Phone <u>6/4-752-7455</u> Phone <u>1-614-466-6581</u>				

AGREEMENT between the Small Business Development	er the "STAFF COUNSELOR"). The agreement is			
made and entered into this1day ofOctobe	r , 2018 by and between the SBDC and			
STAFF COUNSELOR, who agrees to render services for	the SBDC.			
I, as STAFF COUNSELOR, understand that I will not:				
1. Recommend the purchase of goods and/or service	s, which I have an interest in or represent.			
2. Accept fees or commissions from third parties who have supplied goods and/or services on my recommendation to the SBDC client.				
3. Accept fees or commissions from the SBDC client f	or my services as STAFF COUNSELOR.			
4. Accept the private engagement of my services at a term of my engagement as STAFF COUNSELOR with				
SBDC subcenter director.				
I, as STAFF COUNSELOR, understand that I will:				
 Agree to hold strictly confidential all information o the client. 	btained during the course of my engagement with			
2. Agree to reveal promptly to the client all significan	t matters that come to my attention pertaining to			
the business of my client.				
3. Acknowledge receipt of the SBDC guidelines, and a	gree to abide by all provisions of that policy.			
IN WITNESS HEREOF, the parties affix their signatures of	on the day above written.			
STAFF COUNSELOR	SBDC Center: 999 #			
Signature /	Signature / / /			
Printed Name Mikhal Shimill	Printed Name James Laipply			
Address 77 S High Street, Columbus, OH 43215 Address 77 S High St, Columbus OH 43215				
Phone 614-466-5095	Phone <u>1-614-466-6581</u>			

AG	GREEMENT between the Small Business Development Communication (hereinafted)			r "SBDC") and ELOR"). The agreement is	
ma	nade and entered into this 1 day of Octobe			by and between the SBDC and	
	TAFF COUNSELOR, who agrees to render services for			- '	
I, a	as STAFF COUNSELOR, understand that I will not:				
1.	Recommend the purchase of goods and/or services, which I have an interest in or represent.				
2.					
3.	. Accept fees or commissions from the SBDC client	for my services	as STA	AFF COUNSELOR.	
4.	 Accept the private engagement of my services at any time during, or within 90 days subsequent to, the term of my engagement as STAFF COUNSELOR with an SBDC client without express permission of the SBDC subcenter director. 				
I, a	as STAFF COUNSELOR, understand that I will:				
1.	Agree to hold strictly confidential all information of the client.	obtained during	g the co	ourse of my engagement with	
2.	Agree to reveal promptly to the client all significar the business of my client.	nt matters that	come	to my attention pertaining to	
3.	Acknowledge receipt of the SBDC guidelines, and a	agree to abide	by all p	provisions of that policy.	
IN	WITNESS HEREOF, the parties affix their signatures	on the day abo	ve wri	tten.	
ST/	TAFF COUNSELOR	SBDC Center	r: 9	99 / #	
Sig	gnature San L Beylin	Signature	/	AMM	
Pri	rinted Name Sara L. Zeigler	Printed Nam	e Jam	es Laipply	
Ad	ddress 77 S High Street, Columbus, OH 43215	Address 77.	S High	St, Columbus OH 43215	
Phe	none (614) 644-9759	Phone <u>1-61</u>	4- 4 66-	6581	