



2050 Gateway Place, Suite 100-302
 San Jose, CA 95110-1036
 Phone: (408) 498-4050
 Email: orders@zspace.com

Quote #: Q-29544

Created On: 3/7/2024
Quote Expires On: 4/6/2024
Expected Start Date: 4/1/2024
Prepared By: Nicholas Pinchok

Bill To:

Kent ISD
 1655 East Beltline NE
 Grand Rapids
 MI
 49525
 USA

Ship To:

Kent ISD
 1655 East Beltline NE
 Grand Rapids
 MI
 49525
 USA

Product Code	Product Description	QTY	List Price	Net Price	Total Price
HW-ZLS-03-01	zSpace Learning Station Inspire (includes Stylus, Stylus Sensor Module, StudioA3, & zView) w/ 1 yr warranty and configuration	30	USD 3,999.00	USD 3,999.00	USD 119,970.00
EDU-SW-VBD-02-12	SW License: Visible Body+ (including Biology and Human Anatomy) for zSpace	30	USD 500.00	USD 500.00	USD 15,000.00
EDU-SW-CON-01-12	SW License: VIVED Carpentry (per student license)	30	USD 125.00	USD 125.00	USD 3,750.00
EDU-SVC-RPD-00-02	Designed to train end users on the technology, hardware, software, and instructional application of zSpace. Includes one remote session (1 hour) of PD for a small group (1 - 6 participants with 1 participant/zSpace device).*	3	USD 360.00	USD 360.00	USD 1,080.00



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SVC-EWS-INS-36	This service contract as administered by Acer adds 2 years to the Base and Pro Laptop Limited Warranty and 3 years of Accidental Damage Protection starting at the date of the Manufacturer's Warranty. Repairs allowed are due to accidental damage up to the value of the product OR 1 replacement (if needed) during the term. Mail-in/ Carry-in service is provided with shipping paid both ways. Damage from misuse or abuse is excluded from coverage. Premium Battery Support includes 1 defective battery replacement per year. Available for purchase up to 365 days after the initial purchase of the product covered by the service contract. See the Acer Advantage Extended Service Plan for detailed terms and conditions at http://zspace.com/legal .	30	USD 229.00	USD 229.00	USD 6,870.00
TOTAL:					USD 146,670.00

Memo to Customer:

***Device-Specific Software:** All device-specific licenses will expire on 3/31/2025

****User-Specific Software:** All user-specific licenses will expire 365 days from the date of activation. All activations must occur by 3/31/2025

Tax is not included in this quote and are the responsibility of the customer.

Quotation is valid for 30 days. This quote, along with the terms and conditions of purchase and the software license(s) which may be viewed here <http://zspace.com/legal> , and on the attached documentation constitute the entire agreement between zSpace and the customer. If VIVED-Anatomy products are purchased, those specific products shall be fulfilled and services shall be provided directly by VIVED-Anatomy, Inc. zSpace provides no warranty with respect to the VIVED-Anatomy, Inc. products and services.

To place an offer to purchase based upon this quotation, please sign and return this form and your purchase order (if not using this form as purchase order) to:

zSpace, Inc.
2050 Gateway Place, Suite 100-302

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Phone: (408) 498-4050



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San Jose, Ca 95110-1036

DUNS: 799203257 CAGE: 5K3H4

Customer initial if using this form as a purchase order: _____ Sales Tax Resale Certificate #:

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zSpace

Signature: _____
 Printed Name: _____
 Title: _____
 Dated: _____

Signature: _____
 Printed Name: _____
 Title: _____
 Dated: _____

New Customer Account Form

Name _____ Fed Tax ID # _____

Buyer Name _____ Buyer Telephone # _____

Bill To Information

Ship To Information (For Shipments)

Contact Name: _____ Contact Name: _____

Contact Phone: _____ Contact Phone: _____

Contact Fax: _____ Contact Fax: _____

Billing e-mail _____ Receiving e-mail: _____

Street Address: _____ Street Address: _____

City: _____ City: _____

State: _____ State: _____

Zip / Postal Code: _____ Zip / Postal Code: _____

Country: _____ Country: _____

Technology Contact (For Setup/Install)

Software Renewal Contact

Contact Name: _____ Contact Name: _____

Contact Phone: _____ Contact Phone: _____

IT E-mail _____ E-mail: _____

Software License E-mail
(if not same as above) _____

Education/Curriculum Contact (For Professional Development)

Contact Name: _____

Contact Phone: _____

PLEASE ATTACH RESALE / SALES TAX EXEMPTION CERTIFICATE

email completed form to: orders@zspace.com

Required with return of quote/Purchase Order prior to completion of the sales order process.