

Quote Number 00006150 Price Valid Thru 7/31/2018

Contact and Address Information

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Cincinnati, Ohio 45241 Billing Address 6950 N East Prairie Rd United States Lincolphysiod II 60712

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Product	Quantity	Sales Price	Total Price
netTrekker	1,250.00	USD 1.76	USD 2,200.00
Maintenance	1.00	USD 220.00	USD 220.00
BrainPOP	3.00	USD 2,395.00	USD 7,185.00
BrainPOP Jr.	3.00	USD 0.00	USD 0.00
BrainPOP ESP	3.00	USD 0.00	USD 0.00
BrainPOP ESL	1.00	USD 695.00	USD 695.00
Discount	1.00	USD -788.00	USD -788.00
Discount	1.00	USD -2,694.96	USD -2,694.96

Order Total USD 6,817.04

Subscription Start 8/1/2018 Subscription End 7/31/2019

One year subscription renewal. 10% BPOP Discount for small school. One Time 38% BPOP Discount to move towards current pricing.

Professional Learning expires 1 year from date of purchase or concurrent with the Subscription End Date cited on quote, whichever is earlier. A minimum 3-week lead time is required to calendar Professional Learning delivery dates.

Maintenance Fee is for services to review and support user accounts, administer integrations with other applications (learning management systems, federated search tools, assessment products, and others, if any), setup third party content integrations, provide content concierge services, deliver product navigation webinars, and provide technical and product support and ongoing account management. For future budgeting purposes, a 5% increase in price may apply to next year's annual subscription renewal of icurio or netTrekker.

Return Instructions

Sign and return this form via email, mail or fax to the Company Address above. A PO or check payable to Knovation, Inc. MUST accompany this order form to start or renew the subscription.

By signing this order form I am agreeing to all <u>Terms and Conditions</u> of this order. Knovation, Inc. is the sole source provider of netTrekker & icurio. Federal Tax ID#: 31-1675899. <u>Knovation Product Terms of Use</u>

Signature:	Date:
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Please Note Our NEW ADDRESS Effective 2/6/17

Name (Print):	Title:	Email:			
Knovation Product Administrator at your school or District:					
Name (Print):	Title:	Email:			