

 Date:
 8/28/2020

 Order Number:
 Q-285944

 Revision:
 2

 Order Form Expiration Date:
 11/25/2020

ORDER FORM

Please fax all pages to 1.877.519.9555 or email to orders@edmentum.com To Pay by Credit Card: Call 214.294.9901 or e-mail creditcardprocessing@edmentum.com

Customer and Billing Address

Customer No.: 507850
Customer Name: Qargi Academy
Billing Address: PO BOX 1674

Utqiagvik, AK 99723

Products and Services

Products	Qty	License Start Date	License End Date	License Term (Months)
EdOptions Academy Services	1	**	**	12

 Subtotal:
 \$100,000.00

 Estimated Tax:
 \$0.00

 Total US Funds:
 \$100,000.00

Order Notes

Special Education teacher for up to 25 students.

Invoicing and Payment Terms

The full amount of Your Order will be invoiced when accepted by Us. Payment is due 15 days after invoice date.

Terms and Conditions

For the purposes of this Order Form, "you" and "your" refer to Customer, and "we", "us" and "our" refer to edmentum Inc. and affiliates. This Order Form and any documents it incorporates (including the Standard Purchase and License Terms located at http://www.edmentum.com/standardterms and the documents it references) form the entire agreement between you and us ("Agreement"). You acknowledge that any terms and conditions in your purchase order or any other documents you provide that enhance our obligations or restrictions or contradict the Agreement do not have force and effect.

Purchase Order

You acknowledge that this Agreement is non-cancellable and you will submit a purchase order for the full amount of this Order Form. Your order will not be scheduled for delivery until you have submitted a purchase order referencing and conforming to this Order Form.

Acceptance

This offer will expire on the Order Form Expiration Date noted above unless we earlier withdraw or extend the offer in writing. I represent that I have read the terms and conditions included in this Agreement, that I am authorized to accept this offer and the Agreements terms and conditions on behalf of the customer identified above and that I do accept this offer on behalf of the customer who agrees to adhere to the Agreements terms and conditions. To the extent that either parties process does not require that I execute this Order Form, I accept, acknowledge and agree to the terms and conditions identified in and referenced in this Agreement as signified by my receipt, use or access of the products and/or services identified. Please fax all pages to 1.877.519.9555 or email to orders@edmentum.com.

Edmentum | P.O. Box 776725 | Chicago, IL 60677-6725 | www.edmentum.com



















^{**} Unless otherwise specified in this Order Form, the Start Date for your license(s) will be one of the following: (a) the day immediately following the expiration date of the prior license term or (b) the date in which we have accepted your order and have issued log-in credentials for your software license.

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Customer Signature:	
Name (Printed or Typed):	
Title:	
Date:	_

 ${\tt Edmentum~|~P.O.~Box~776725~|~Chicago,~IL~60677-6725~|~www.edmentum.com}$

















