

CivicPlus

302 South 4th St. Suite 500 Manhattan, KS 66502

Statement of Work

Quote #: Q-76171-1

Date: 5/17/2024 11:04 AM

Expires On: 6/10/2024

Client:

City of Powder Springs, GA

Bill To:

Powder Springs GA - CivicEngage

SALESPERSON	Phone	EMAIL	DELIVERY METHOD	PAYMENT METHOD
Alexandra Kassem		alexandra.kassem@civicplus.com		Net 30

Discount(s)

QTY	PRODUCT NAME	DESCRIPTION	TOTAL
1.00	Accessibility Year 1 Annual Fee Discount	Year 1 Annual Fee Discount	USD -362.47

Recurring Service(s)

QTY	PRODUCT NAME	DESCRIPTION	TOTAL
1.00	AudioEye Managed	AudioEye Managed: https://cityofpowdersprings.org/	USD 6,662.47

Total Investment - Initial Term	USD 6,300.00
Annual Recurring Services (Subject to Uplift)	USD 6,300.00
Initial Term	6/10/2024 - 6/30/2025, Renewal
	Term 7/1 each calendar year
Initial Term Invoice Schedule	100% Invoiced upon Signature Date

Renewal Procedure	Automatic 1 year renewal term, unless 60 days notice provided prior to renewal date
Annual Uplift	5% to be applied in year 2

This Statement of Work ("SOW") shall be subject to the terms and conditions of the CivicPlus Master Services Agreement and the applicable Solution and Services terms and conditions located at https://www.civicplus.help/hc/en-us/p/legal-stuff (collectively, the "Binding Terms"), By signing this SOW, Client expressly agrees to the terms and conditions of the Binding Terms throughout the term of this SOW.

Acceptance

The undersigned has read and agrees to the following Binding Terms, which are incorporated into this SOW, and have caused this SOW to be executed as of the date signed by the Customer which will be the Effective Date:

For CivicPlus Billing Information, please visit https://www.civicplus.com/verify/

Authorized Client Signature	<u>CivicPlus</u>
By (please sign):	By (please sign):
aller Thurron	
Printed Name:	Printed Name:
Albert Thurman	
Title:	Title:
Mayor	
Date:	Date:
Jun 6, 2024	
Organization Legal Name:	
City of Power Springs	
Billing Contact:	
Kelly Axt	
Title:	
Dir Admin Serv / City Clerk	
Billing Phone Number:	
770-943-1666	
Billing Email:	
kaxt@cityofpowdersprings.org	
Billing Address:	
PO Box 46 Powder Springs, GA 30127	
Mailing Address: (If different from above)	
, , , , , , , , , , , , , , , , , , , ,	
PO Number: (Info needed on Invoice (PO or	.loh#) if required)
ADA Compliance	
ADA COMONANCE	