



# Sales Order Form

50 E Business Way  
Suite 300  
Cincinnati, OH 45241  
[www.hobsons.com](http://www.hobsons.com)

**Sold To:** Brick Memorial High School  
**Name:** Carrie Gomes  
**Address:** 2001 Lanes Mill Rd, Brick, NJ 08724-1493  
**Email:** cgomes@brickschools.org  
**Phone:** (732) 785-3090  
**Naviance ID:** 22669uspu

**Order Date:** May 24, 2017

**Valid Until:** 7/31/2017  
**Quote Number:** Q184203  
**Contract Start Date:** 7/1/2017  
**Contract End Date:** 6/30/2018  
**Contract Term (In Months):** 12  
**Currency:** USD

**Hobsons Contact:**  
**Name:** Tom Millman  
**Email:** tom.millman@hobsons.com  
**Phone:** (703) 859-7570

**Purchase Order:**  
**Payment Term:** Net 30

Product or Service	Quantity	Unit	Start Date	Term (In Months)	Sub-Total
AchieveWorks	1,625	Enrollment	7/1/2017	12	1,706.25
Naviance eDocs	400	SrEnrollment	7/1/2017	12	550.00
Naviance for High School	1,625	Enrollment	7/1/2017	12	3,737.50
Naviance On-Demand Training	1	School	7/1/2017	12	1,000.00

Sub Total:	6,993.75
Discount:	1,000.00
Total Price:	5,993.75

<b>Notes: (if applicable)</b>	Subscription to Naviance eDocs is based on enrollment of Senior class only.
<b>Comments:</b>	All figures quoted are exclusive of sales tax.

Please complete or update the following information:

Account Contacts	Name	Email Address
Primary	Kevin Mcnight	kmcknight@brickschools.org
Billing	Carrie Gomes	cgomes@brickschools.org
<b>Payment Method:</b>	Purchase Order # Check Wire Transfer #	<b>Paying by credit or debit card?</b> Credit Card # Card Holder Name: Expiration Date (MM/YY): Billing Zip Code: Security Code: Country:
<b>CEEB Code:</b>	310148	

Unless separate invoice and payment terms are specified, Hobsons will issue invoices once per year, with the first taking place upon execution of the order form and then annually thereafter throughout the term of the contract.

The services are delivered in accordance with applicable terms that can be found at <https://succeed.naviance.com/auth/signin?tos=1#/tos>. By signing below, you agree to be bound by such terms and that such terms are made a part of this contract.

Please complete the contact and payment information as indicated, then sign below to indicate your acceptance. By signing this contract, you are stating that you are authorized by your institution to make this purchase. If a Purchase Order is required for payment to be issued, please indicate below. If you have selected professional services, travel expenses for on-site professional services will be billed separately following your session(s).

\_\_\_\_\_ Yes, a Purchase Order is required. It will be sent to Hobsons by \_\_\_\_\_.

Upon execution by Authorized Signatory, Client hereby agrees to the Terms of Service which will become effective together with this Order Form as of the Signature Date below.


  
 Signature \_\_\_\_\_ Printed Name and Position \_\_\_\_\_ Signature Date \_\_\_\_\_

**Purchase Order & Order Forms:**  
 Naviance, Inc.  
 50 E. Business Way, Suite 300  
 Cincinnati, OH 45241

**Remit To:**  
 Naviance, Inc.  
 P.O. Box 504571  
 St. Louis, MO 63150-4571

**IF YOU CHOOSE TO FAX, THEN PLEASE CLICK ON THE 'SIGN ON PAPER' BUTTON FOLLOWED BY 'PRINT AND FAX' BUTTON AND FAX YOUR SIGNED ORDER FORM TO THE NUMBER PROVIDED ON THE COVERPAGE OF THE DOWNLOADED DOCUMENT**