



**CivicPlus**

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

**Order Form**

**Quote #:**

Q-50742-1

**Date:**

9/20/2023 10:16 AM

**Expires On:**

12/19/2023

**Client:**

City of Greenfield, IN

**Bill To:**

SALESPERSON	Phone	EMAIL	DELIVERY METHOD	PAYMENT METHOD
Carlie Anderson		carlie.anderson@civicplus.com		Net 30

QTY	PRODUCT NAME	DESCRIPTION	PRODUCT TYPE	TOTAL
1.00	Archive Social - Standard	Social Media Archiving Subscription - Unlimited Accounts & Up To 3.5k Records Per Month - Includes Risk Management Analytics (RMA) and Web Snapshots	Renewable	USD 8,386.00
1.00	ArchiveSocial Year 1 Annual Fee Discount	Year 1 Annual Fee Discount	Renewable	USD -1,198.00
1.00	ArchiveSocial Provisioning Fee - Standard	ArchiveSocial Account Activation and Setup	One-time	USD 1,000.00

List Price - Year 1 Total	USD 9,386.00
Total Investment - Initial Term	USD 8,188.00
Annual Recurring Services - Year 2	USD 7,188.00

Initial Term & Renewal Date	100% invoiced on 10/1/2023.  Initial Term: Beginning at acceptance of online form (10/1/2023) and ending on 11/30/2024. Renewal Term: December 1st of each calendar year.
Initial Term Invoice Schedule	100% Invoiced upon Acceptance Date

This Order Form sets forth the commercially binding terms of the Client's (as defined above) usage of the ArchiveSocial services (the "Services"). By accepting this Order Form, which may be evidenced by your return of this completed Order

Form, written acceptance (e-mail is sufficient), or Client's access and use of the Services, you, on behalf of the Client, are representing that you are authorized to bind the Client listed herein to the pricing and term stated in this Order Form

Please note that if you plan to issue a purchase order, we request you include the following language on the front of the PO:

*ArchiveSocial's maximum liability under this purchase order is limited to the total amount of fees received during the 12-month period preceding the event giving rise to the liability, except that such limitation of liability will not apply to ArchiveSocial's indemnification for intellectual property infringement or personal injury.*

Organization Legal Name:

\_\_\_\_\_

Billing Contact:

Title:

\_\_\_\_\_

Billing Phone Number:

\_\_\_\_\_

Billing Email:

\_\_\_\_\_

Billing Address:

\_\_\_\_\_

Mailing Address: (If different from above)

\_\_\_\_\_

PO Number: (Info needed on Invoice (PO or Job#) if required)