

DocuSign, Inc. 221 Main Street, Suite 1000 San Francisco, CA 94105 Offer Valid Through: Apr 29, 2021 Prepared By: Quote Number: Q-00592177

# **ORDER FORM**

# **Address Information**

#### Bill To:

UNT Health Science Center 1112 Dallas Dr, Suite 4000, Denton, TX, 75203 United States

Billing Contact Name: UNTHSC Billing Email Address: invoices@untsystem.edu Billing Phone:

940-369-5500

#### Ship To:

UNT Health Science Center 3500 Camp Bowie Blvd. Fort Worth, TX 76107 United States

# Shipping Contact Name:

Shipping Email Address:

Shipping Phone:

# **Order Details**

Order Start Date: Apr 29, 2021 Order End Date: Apr 28, 2022 Billing Frequency: Annual Payment Method: Check Payment Terms: Net 30 Currency: USD

# Products

Product Name	Start Date	End Date	Quantity	Net Price
eSignature Business Pro Edition - Envelope Subs.	Apr 29, 2021	Apr 28, 2022	5,400	\$15,043.48
Premier Support	Apr 29, 2021	Apr 28, 2022	1	\$2,256.52

Grand Total: \$17,300.00

# **Product Details**

eSignature Envelope Allowance: 5,400

# **Overage/Usage Fees**

eSignature Business Pro Edition - Envelope Subs. (Per Transaction): \$5.80

#### **Order Special Terms**

Both parties hereby agree that the following Order Forms identified by their Order Start Dates will be terminated upon the Order Start Date of this Order Form:

October 1, 2020 (Q-00484254)

A prorated credit for the prepaid portion of the remaining Term of all the above Order Forms will be applied toward payment for this Order Form.

For clarification, DocuSign has provided a one-time courtesy allotment of 400 Business Pro Edition Envelopes.

#### **Terms & Conditions**

This Order Form is governed by the terms Master Services Agreement available online at: <u>https://www.docusign.com/company/terms-and-conditions/msa</u> and the applicable Service Schedule(s) and Attachments for the DocuSign Services described herein available online at <u>https://www.docusign.com/company/terms-and-conditions/msa-service-schedules</u>.

#### **Billing Information**

Prices shown above do not include any state and local taxes that may apply. Any such taxes are the responsibility of the Customer and will appear on the final Invoice.

Is the contracting entity exempt from sales tax? **Please select Yes or No:** If yes, please send the required tax exemption documents immediately to taxexempt@docusign.com.

Invoices for this order will be emailed automatically from <u>invoicing@docusign.com</u>. Please make sure this email is on an approved setting or safe senders list so notifications do not go to a junk folder or caught in a spam filter.

#### Purchase Order Information

Is a Purchase Order (PO) required for the purchase or payment of the products on this Order Form?

Please select Yes or No:

If yes, please complete the following:

PO Number: 160567

PO Amount: \$

By signing this Agreement, I certify that I am authorized to sign on behalf of the Customer and agree to the Terms and Conditions of this Order Form and any documents incorporated herein.

Custome	r			
Signature				
Name: Job Title: Date:	5/4/2021	Date:	5/10/2021	

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#### **Declaration of Procurement Method**

The attached contract document has been issued as a result of either a sole source or proprietary justification approved by the University of North Texas System Procurement Department.

The approved justification form is on file with the UNT System Procurement Department records.