



**AVID Center HQ**  
 9246 Lightwave Ave  
 Suite 200  
 San Diego, CA 92123  
 Phone: (858) 380-4800  
 Fax: 1-800-915-6897

## Quote: Santa Rosa City Schools

To	From
Santa Rosa City Schools	Pamela Specht
Cindy Deuel	E-mail: pspecht@avidcenter.org
211 Ridgway Avenue	Phone: 858-380-4725
Santa Rosa, CA 95401	

## Summary

Total Amount:	<b>\$18,954.00</b>	Quote ID:	QUO-08998-K3B6P5
Shipping Method:	FedEx	Date:	4/21/2017
Payment Terms:	Net 30		

Number of SI:		Number of Elementary Libraries:	
Number of Memberships:	3	Number of Middle Libraries:	
Number of AVID Weekly:	3	Number of High Libraries:	

## Details

Site	Product ID	Product	Quantity	Price	Sub Total
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Site:					
	Co-ADL Year 1	AVID District Leadership	1.00	\$6,000.00	\$6,000.00

Ship To:  
 Matthew Pollack  
 2480 Sebastopol Road,  
 Santa Rosa, 95407

Site	Product ID	Product	Quantity	Price	Sub Total
Site: Elsie Allen High School					
	AVID WEEKLY	AVID Weekly Subscription	1.00	\$519.00	\$519.00
Program Level: Secondary					
	MEMBERSHIP SECONDARY	AVID Membership Fees	1.00	\$3,799.00	\$3,799.00
Site: Lawrence Cook Middle School					
	AVID WEEKLY	AVID Weekly Subscription	1.00	\$519.00	\$519.00
Program Level: Secondary					
	MEMBERSHIP SECONDARY	AVID Membership Fees	1.00	\$3,799.00	\$3,799.00
Site: Montgomery High School					
	AVID WEEKLY	AVID Weekly Subscription	1.00	\$519.00	\$519.00
Program Level: Secondary					
	MEMBERSHIP SECONDARY	AVID Membership Fees	1.00	\$3,799.00	\$3,799.00

Pre Freight Amount	\$18,954.00
Total Tax	\$0.00
<b>Total</b>	<b>\$18,954.00</b>

By signing below, Client hereby agrees to purchase all items listed on this Quote, subject to and in accordance with the AVID Standard Terms and Conditions, this Quote, and any Exhibits attached hereto, all of which comprise the AVID College Readiness System Services and Products Agreement.

Purchase Order is not required.

If Client checks the box above, Client hereby confirms that the Client does not require a Purchase Order for payment of any related invoice(s); in which case AVID Center will proceed to the fulfill services and/or products and invoice Client according to this approved Quote.

If Client does not check the box above, Client agrees to provide AVID Center with a valid Purchase Order in a timely manner, in which case AVID Center will not invoice Client until Client provides and AVID Center receives a valid copy of the Purchase Order; AVID Center will not fulfill any services or products until such Purchase Order is received.

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
Title

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Date