Heartland

Heartland Payment Systems dba Heartland School Solutions One Heartland Way Jeffersonville, IN 47130

Phone: 800-724-9853, Option 8

THIS IS NOT AN INVOICE. Please complete this form & return it by Email or mail to confirm your annual support services for the 2019-2020 school year.

If mailing, send to:
787 Elmgrove Rd Bldg 1, Rochester, NY 14624

Annual Support Quote	05/28/2019
Ailliadi Gabboit dage	10,20,20.0

Bill To:					Billing Contact Inf	ormation:		
Alpine County USD				First: Last:				
HSS-Markleeville				Email Address:				
43 Hawkside Dr				Phone Number:				
Markleeville, CA 96120-9522					Job Title:			
		tion is incorre	ect, please make o	corrections abo	ve. Please write in the			
Customer # Contract #		Loca	ation (if applicable) Terms Invoice Date			oice Date		
2574630-117308 NKD_0000058		NKD_00000582		Markleeville CA Net 30			07/01/2019	
=	s Are Accurate		Use this space to	o indicate change	es:			
Coverage Start Date	Coverage End Date	Produc	t Code	ltem	Description	Quantity	Annual Unit Price	Extended Price
08/01/2019	07/31/2020	HSS0366	SUP: N	NK Menu Plannir	g Annual	1	249.00	249.00
						Pre-Invoice Ord	er Quote Total	249.00
Authorized Cies	a Cinnot vec							
Authorized Signer			Date					
Job Title								
Is PO required ?		O # if available	,)					

Fax: 877-736-7013 HSSSupportinvoices@e-hps.com