



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

"Exhibit A"

Quote: San Rafael City High School District

To	From
San Rafael City High School District	Shonnel Oson
Chris Posedel	9246 Lightwave Ave
310 Nova Albion Way	San Diego, CA 92026
San Rafael, CA 94903	E-mail: sosen@avidcenter.org

Summary

Total Amount:	\$23,575.00	Quote ID:	QUO-03872-T4X6K6
Shipping Method:	FedEx	Date:	4/10/2015
Payment Terms:	Net 30		
Total Number of Sites:	4	Number of Combo Sites:	
Number of New Sites:	1	Number of Elementary Sites:	1
Number of Existing Sites:	3	Number of Secondary Sites:	3
Number of SI:	13	Number of Elementary Libraries:	
Number of Memberships:	2	Number of Secondary Libraries:	1
Number of AVID Weekly:	2		

Details

Site	Product ID	Product	Quantity	Price	Sub Total
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Site:					
	Co-ADL Year 1	AVID District Leadership	1.00	\$6,300.00	\$6,300.00
		Ship To: Lauren Inman 310 Nova Albion Way, San Rafael, CA 94903			

Site	Product ID	Product	Quantity	Price	Sub Total
Site: San Rafael High School					
	AVID WEEKLY	AVID Weekly Subscriptions	1.00	\$509.00	\$509.00
Program Level: Secondary					
	MEMBERSHIP SECONDARY	AVID Membership Fees Secondary	1.00	\$3,585.00	\$3,585.00
	Summer Institute Registration	AVID Summer Institute Registration Fee	8.00	\$699.00	\$5,592.00

Site: Terra Linda High School					
	AVID WEEKLY	AVID Weekly Subscriptions	1.00	\$509.00	\$509.00
Program Level: Secondary					
	MEMBERSHIP SECONDARY	AVID Membership Fees Secondary	1.00	\$3,585.00	\$3,585.00
	Summer Institute Registration	AVID Summer Institute Registration Fee	5.00	\$699.00	\$3,495.00

Pre Freight Amount	\$23,575.00
Total Tax	\$0.00
Total	\$23,575.00

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

Date