



SERVICE ORDER #2

This Service Order is incorporated and made part of the Teletherapy Professional Development and Platform License Agreement (“Agreement”) as of the date of the last signature set forth on the signature page attached hereto (“Effective Date”) by and between PresenceLearning, Inc., (“Licensor”) and the undersigned customer (“Licensee”) Capitalized terms used herein and not defined shall have the meanings given to such terms in the Agreement. In the event of a conflict between this Service Order and the Agreement, unless specifically referenced herein, the Agreement shall govern.

Service Order Term: September 22, 2021 to June 30, 2022

<input type="checkbox"/> Annual Fee PLUS Monthly Usage Fee* <input type="checkbox"/> Prepaid**			
	NUMBER OF AUTHORIZED USERS	PER AUTHORIZED USER FEE	SUBTOTAL
Teletherapy Administrator	1	Included	Included
Teletherapy Essentials:			
<input checked="" type="checkbox"/> X SLP	10	\$2,100	\$21,000
<input type="checkbox"/> OT		\$	\$
<input type="checkbox"/> BMH		\$	\$
<input type="checkbox"/> OTHER		\$	\$
<input type="checkbox"/> Monthly Usage Fee***		\$	
Teletherapy Essentials Plus Psychoeducational Assessments	10	\$4,000	\$40,000
<input type="checkbox"/> Monthly Usage Fee***		\$	
Teletherapy Essentials Plus Achievement Assessments (Annual Fee)		\$	\$
TOTAL	21		\$61,000

ALL ABOVE FEES EXCLUDE APPLICABLE TAXES

* Annual Fee is nonrefundable and payable within thirty (30) days of signing of Service Order
 ** Payment is nonrefundable and payable within thirty (30) days of signing of Service Order
 *** Monthly Usage Fee will be charged in arrears for any month Licensee or Authorized Users access and/or use the Platform beginning the first day of the first calendar month of the Service Order Term. All monthly usage fee invoices will be due and payable thirty (30) days from date of invoice.

Agreed to:

Agreed to:

PresenceLearning, Inc.	Licensee: Alvord Unified School District
By: _____ _____ Authorized by Signature Date	By: _____ Authorized by Signature Date
Print Name: _____	Print Name: _____

