

DIMS ORDER FORM

Order Form No.:	10032019163600
Customer Name:	Williamson County Court at Law # 2
Project Name:	DIMS platform
Customer Contact:	Kathy Pierce
Datagain Contact:	Vivek Jha, (203) 514-1141, vivek@datagainservices.com
Order Form Date:	10/03/2019
Order Form Expiration Date:	03/03/2020

ONE TIME COST – Product Setup and Training

Item	Description	Line Amount
DIMS Configuration	System set-up configuration, data migration and end-user training. Invoice to be issued upon signing of this Order Form.	\$0
Customization		\$0
Total One Time Costs		\$0

YEARLY COST – DIMS Subscription Fees

- Annual Product Subscription License(s).
- Subscription dates (12-month duration),
- Unlimited User Licenses
- Limited for exclusive use by client

Dockets	Licensed (Yes/No)	Line Amount
Co-occurring Court		
DUI Court		
Adult Court		
Juvenile Court		
Mental Health Court		
Veteran's Court	Yes	\$1800
Family Drug Court		
Tribal Court		
Recovery Management		
MAT		
TOTAL		\$1800

PAYMENT TERMS:

- Payment terms are NET 30
- Yearly Invoice will be issued.

GENERAL NOTES:

- The pricing, discounts and inclusions shown in this Order Form are subject to revocation if a signed Order Form is not received by Datagain before the close of business on the Order Expiration Date set forth above.
- Purchased Services shall automatically renew at the end of the current term.
- Annual Subscription shall include software license, Hosting (Amazon Web Services), Reporting Licenses, Updates, Upgrades, Maintenance and Support as defined in the Master Subscription Agreement.
- Additional work or services requested, such as customizations, localization tasks or interoperability with third-party systems, shall be billed as Time & Materials (based on current-year hourly rate) and will require a separate Work Order.

By signing below, I represent that I am validly authorized to enter into this Order Form and related Master Subscription Agreement and accept their terms and conditions.

Datagain

Sign: Name: Vivek JhaTitle: Project ManagerDate: 10/03/2019

Client

Sign: _____

Name: _____

Title: _____

Date: _____



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