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**ORDER FORM** 

**Order Type: Quote** Date: 13 Oct, 2023

Quote#: Q-199215 **Expires: 11 Nov. 2023** 

Sales Executive: Nikki Kirkpatrick

**Bill To Contact:** 

**BIII To: CITY OF PORT ST LUCIE** 121 SW PORT ST LUCIE BLVD PORT SAINT LUCIE, FL 34984-5099 USA

Solution ID: 6132304

**Ship To Contact:** 

Ship To: CITY OF PORT ST LUCIE 121 SW PORT ST LUCIE BLVD PORT SAINT LUCIE, FL 34984-5099 USA

Ship to Phone: Ship to Mobile:

**Contact: Megan McGuire** 

Email: mmaguire@cityofpsl.com

Payment Terms: Net 30 Days

**Currency: USD** 

**Customer PO Number:** 

**Shipping Terms: Shipping Point** Ship Method: FedEx Ground Freight Term: Prepay & Add

## **Order Notes:**

This order entered into between the Customer and Kronos Incorporated, a UKG company is subject to the terms and conditions of the Master Agreement Reference #18220 dated March 18th, 2019, between the Lead Agency (acting as "Owner") and Kronos Incorporated (as the "Contractor"), as amended (collectively referred to as the "US Communities Agreement #18220").

## **Software**

Item	License/Quantity	Total Price
ON PREMISE HISTORICAL REPORTING - MANAGERS FOR WORKFORCE CENTRAL - PER MANAGER	5	USD 5,000.00
Total Price		USD 5,000.00

## **Quote Summary**

Description	Total Price
Grand Total	USD 5,000.00



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CITY OF PORT ST LUCIE	Kronos Incorporated		
Signature:	Signature:		
Name:	Name:		
Title:	Title:		
Effective Date:	Effective Date:		
Invoice amount will reflect deposit received. All professional services are billed as delivered with payment due, in accordance with the Payment Term set out in this Order Form. Unless otherwise indicated above, this order is subject to the relevant Kronos Terms and Conditions executed between the parties. THIS ORDER IS SUBJECT TO APPLICABLE TAXES. THE ACTUAL TAX AMOUNT TO BE PAID BY CUSTOMER WILL BE SHOWN ON CUSTOMER'S INVOICE. Shipping and handling charges will be reflected on the final invoice. If you are tax exempt; please provide a copy of your "Tax Exempt Certificate" with your signed quote			

