



Price Quote

Account Name	Fayette County Public Schools	Created Date	10/17/2023
Quote Number	00025086	Expiration Date	11/17/2023
		Billing Preference	Standard Billing
		Invoice Payment Terms	Upon Receipt
Billing Contact	Laura Roche Youngworth	Prepared By	Edgar Serrano
Billing Address	P.O. Box 55490	Email	edgar.serrano@avantassessment.com
Billing City State Zip	Lexington, KY 40555		
Billing Email	laura.roche@fayette.kyschools.us		

Product	Quantity	List Price	Discount Price	Extended List	Extended Discount
Avant STAMP 3Se - RLS - Language TBD (Except Hebrew)	105.00	\$74.90	\$19.90	\$7,864.50	\$2,089.50
Avant STAMP 4S - Language TBD (Except Hebrew)	899.00	\$79.90	\$19.90	\$71,830.10	\$17,890.10
Avant STAMP 4Se - Language TBD (Except Hebrew)	85.00	\$79.90	\$19.90	\$6,791.50	\$1,691.50

Total Price \$21,671.10

Please sign and return this Price Quote to confirm the purchase.

- **Standard Billing** – I agree to be invoiced upon Avant’s receipt of signed Price Quote or Purchase Order. If tests taken exceed the order quantity, I agree to be invoiced for the additional tests at the rate stated on this quote at the time the overage is incurred. If tests taken are fewer than the order quantity, I understand that a Test Credit will be issued to my account for any unused test. Test Credits are valid until June 30 of the following school year. *Example: For an order placed during the 2023-2024 School Year, tests would be valid until June 30, 2025.*
- I have reviewed the Price Quote and agree to the cost and terms listed therein.
- I agree to be invoiced according to the terms outlined in this quote.
- I have confirmed that the Billing Contact and associated information is accurate and up-to-date.

Accepted by (signature): *Brooke Stinson* Date: 10-19-23

Printed Name: Brooke Stinson BUS

Title: Director of Assessment

ES

(mew)
11-6-23



Price Quote

Account Name	Fayette County Public Schools	Created Date	10/17/2023
Contact Name	Laura Roche Youngworth	Expiration Date	11/17/2023
Quote Number	00025087	Billing Preference	Standard Billing
		Invoice Payment Terms	Upon Receipt
Billing Contact	Laura Roche Youngworth	Prepared By	Edgar Serrano
Billing Address	P.O. Box 55490	Email	edgar.serrano@avantassessment.com
Billing City State Zip	Lexington, KY 40555		
Billing Email	laura.roche@fayette.kyschools.us		

Product	Quantity	List Price	Discount Price	Extended List	Extended Discount
Avant STAMP 3Se - RLS - Language TBD (Except Hebrew)	100.00	\$74.90	\$18.90	\$7,490.00	\$1,890.00
Avant STAMP 4S - Language TBD (Except Hebrew)	821.00	\$79.90	\$19.90	\$65,597.90	\$16,337.90
Avant STAMP 4Se - Language TBD (Except Hebrew)	90.00	\$79.90	\$19.90	\$7,191.00	\$1,791.00

Total Price \$20,018.90

Please sign and return this Price Quote to confirm the purchase.

- **Standard Billing** – I agree to be invoiced upon Avant’s receipt of signed Price Quote or Purchase Order. If tests taken exceed the order quantity, I agree to be invoiced for the additional tests at the rate stated on this quote at the time the overage is incurred. If tests taken are fewer than the order quantity, I understand that a Test Credit will be issued to my account for any unused test. Test Credits are valid until June 30 of the following school year. *Example: For an order placed during the 2023-2024 School Year, tests would be valid until June 30, 2025.*
- I have reviewed the Price Quote and agree to the cost and terms listed therein.
- I agree to be invoiced according to the terms outlined in this quote.
- I have confirmed that the Billing Contact and associated information is accurate and up-to-date.

Accepted by (signature): Brooke Stinson Date: 10-19-23

Printed Name: Brooke Stinson

Title: Associate Director of Assessment Literacy

Handwritten initials: STL, mac, 11-6-23