



## Customer Acceptance Form

**Order #:** Q-13469  
**Date:** April 22, 2024  
**Expires On:** June 30, 2024

492 Old Connecticut Path  
 Framingham, Massachusetts 01701  
 Phone: (508) 532-8953

**Ship To**  
 Yonkers NY ("Customer")  
 104 South Broadway  
 Yonkers, New York,  
 10701 United States

**Bill To**  
 Motorola Solutions  
 500 W. Monroe St.  
 Chicago, Illinois  
 60661 United States

SALESPERSON	EMAIL	PAYMENT METHOD
Joseph Braun	joseph.braun@motorolasolutions.com	Net 30

<b>INITIAL LICENSE TERM:</b>	60.0 month term beginning on 7/1/2024
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### Annual License Fees

Product Description	Unit Price	QTY	Annual Fee
Rave Panic Button Bundle	\$55,350.00	1.00	\$55,350.00
<b>Annual License Fees TOTAL:</b>			\$55,350.00

### Setup Fees

One-Time Service Description	One-Time Fee	
Safety & Protection Set-Up Fee	\$2,000.00	
<b>One-Time Professional Service Fees TOTAL:</b>		\$2,000.00

### TOTAL FEES:

	# of Months	Cost Per Year	Total Contract
<b>Annual Fees:</b>	60.0	\$55,350.00	\$276,750.00
<b>One-Time Fees (Set Up &amp; Integration):</b>			\$2,000.00
<b>Total Fees:</b>			\$278,750.00
<b>Fees Payable Net 30:</b>			\$57,350.00

### ACCEPTANCE

Please sign and date this Customer Acceptance Form to indicate your acceptance of this proposal as an authorized representative of Customer. Payment will be due Net 30 from the date Customer signs this Customer Acceptance Form. If Customer's internal procedures require that a purchase order be issued as a condition to payment of any Fees due to Rave, Customer will timely issue such purchase order to Rave. This Customer Acceptance Form is governed by the Master License and Services Agreement found at <https://www.getrave.com/terms-of-service/current.pdf>. Any requested changes to the terms by Customer will impact price proposal above. The effective date will be the date Customer signs this Customer Acceptance Form ("Effective Date").

**SPECIAL CONDITIONS**  
NONE

**Rave Wireless, Inc.**  
Signature:

\_\_\_\_\_

Date:

\_\_\_\_\_

Name (Print):

\_\_\_\_\_

Title:

\_\_\_\_\_

**Motorola Solutions**  
Signature:

\_\_\_\_\_

Date:

\_\_\_\_\_

Name (Print):

\_\_\_\_\_

Title:

\_\_\_\_\_

**Billing Contact Information**  
First Name:

\_\_\_\_\_

Last Name:

\_\_\_\_\_

Email:

\_\_\_\_\_

Phone:

\_\_\_\_\_

Please sign and email to Joseph Braun at [joseph.braun@motorolasolutions.com](mailto:joseph.braun@motorolasolutions.com)

THANK YOU FOR YOUR BUSINESS!