



Company Address 180 Montgomery St.  
Suite 750  
San Francisco, CA 94104  
United States

Please send any billing questions to [accounting@seesaw.me](mailto:accounting@seesaw.me)

Bill To Name Yonkers Public School District  
Created Date 8/11/2021  
Expiration Date 9/30/2021  
Quote Number 00037216

### Contract Summary

Contract Start Date 9/1/2021

Contract End Date 8/31/2022

# of Students 5,000.00

Contract Notes 5000 Seesaw for Schools licenses for K-2 students.

Grand Total USD 49,750.00

5000 Seesaw Lessons subscriptions for K-2 students.

3 Seesaw led professional development sessions.

### Contract Details

Product	Quantity	Sales Price	Total Price	Invoice Date
Seesaw for Schools	5,000.00	USD 5.50	USD 27,500.00	9/1/2021
Volume Discount (5,000 - 9,999)	5,000.00	USD -0.825	USD -4,125.00	9/1/2021
Content	5,000.00	USD 4.675	USD 23,375.00	9/1/2021
Professional Development - Starter Bundle	1.00	USD 3,000.00	USD 3,000.00	9/1/2021

### Admin Sponsor (e.g. Principal, Director of Instructional Tech, etc.)

Decided to purchase (or renew) Seesaw. Will be included in conversations about our partnership progress.

Name: \_\_\_\_\_

Email: \_\_\_\_\_

Title: \_\_\_\_\_

Phone: \_\_\_\_\_

### Seesaw Lead

Responsible for Seesaw training and adoption. Main Seesaw point of contact throughout the contract.

Name: \_\_\_\_\_

Email: \_\_\_\_\_

Title: \_\_\_\_\_

Phone: \_\_\_\_\_

### Tech Lead (Who can help set up your school?)

Lead for Seesaw's technical implementation. Point of contact for technical issues or updates.

Name: \_\_\_\_\_

Email: \_\_\_\_\_

Title: \_\_\_\_\_

Phone: \_\_\_\_\_

### Billing Contact - Accounts Payable (Who will pay the invoice?)

Receives invoices. Point of contact on payment-related matters.

Name: \_\_\_\_\_

Email: \_\_\_\_\_



Title: \_\_\_\_\_

Phone: \_\_\_\_\_

School Address

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip / Post Code: \_\_\_\_\_

If you are purchasing professional development sessions, they must be scheduled and delivered within 1 year of the contract start date. Sessions not used by this time will expire.

This contract, including the number of students and amount, is a non-adjustable binding agreement. By signing, your school or district agrees to pay the full amount quoted per the payment schedule above. Please make sure you have proper payment authorization (including a PO # if required) before signing.

Terms of Service: <https://web.seesaw.me/terms-of-service>

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Email: \_\_\_\_\_

PO Number (if required): \_\_\_\_\_

Accepted By: \_\_\_\_\_