



Price Quotation

Quote: 3472961
 Reference: 605190
 Date: 10/13/2010
 Expires: 11/13/2010

To: Mr. Chris Jackson
 City of Columbus Transportation Division
 109 N Front St
 Room 300
 Columbus, OH 43215

From: Michael Palatiello
 DLT Solutions
 13861 Sunrise Valley Drive
 Suite 400
 Herndon, VA 20171

Phone: (614) 645-2499
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 Email: michael.palatiello@dlt.com

#	Part No.	Description	Qty	Contract	Unit Price	Ext. Price
1	9701-0149NR1	AutoCAD Raster Design 2011 Subscription Renewal - 1 Year Contract #: 110000252773 End Date: 1/3/2011 PoP: 1/4/2011 through 1/3/2012	2	OH	\$247.01	\$494.02
2	9701-0431NR1	AutoCAD Civil 3D 2011 Subscription Renewal - 1 Year Contract #: 110000252773 End Date: 1/3/2011 PoP: 1/4/2011 through 1/3/2012	14	OH	\$945.29	\$13,234.06
3	9701-0220NR1	AutoCAD Map 3D 2011 Subscription Renewal - 1 Year Contract #: 110000252773 End Date: 1/3/2011 PoP: 1/4/2011 through 1/3/2012	2	OH	\$565.27	\$1,130.54

Total: **\$14,858.62**

Mandatory reactivation fees will apply if not renewed by the expiration date of Subscription contract

Want to save 5 to 10% on your subscription contract? Ask your rep how.

Ohio contract #: 534042
 Expires: 4/1/2012
 Federal Tax ID#: 54-1599882
 DUNS Number: 78-646-8199
 Payment Terms: Net 30
 FOB: Destination
 DLT accepts VISA/MC/AMEX



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<u>PLEASE REMIT</u> <u>PAYMENT TO:</u>	ACH: DLT Solutions SunTrust Bank ABA # 061000104 Acct # 1000032705898	<u>-OR-</u>	Mail: DLT Solutions PO Box 102549 Atlanta, GA 30368
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Customer orders subject to applicable sales tax in: CA, CO, CT, DC, FL, GA, HI, IL, IN, KS, KY, LA, MA, MD, MI, MO, MS, NC, NM, NJ, NV, NY, OH, OK, PA, RI, SC, TN, TX, VA, WA, WI

The terms and conditions of the Manufacturer's standard commercial license and subscription agreement are made a part of this quotation and shall govern purchaser's use of any Manufacturer product. Contact the DLT Sales Rep if further information is required.

Documentation to be submitted to validate Invoice for payment:

- a. Authorized Services shall be invoiced with a corresponding time report for the period of performance identifying names, days, and hours worked.
- b. Authorized reimbursable expenses shall be invoiced with a detailed expense report, documented by copies of supporting receipts.
- c. Authorized Education or Training shall be invoiced with a Report identifying date and name of class completed, and where applicable the name of attendees.