



## SALES ORDER

Order Date: 04/03/2024

Start Date: 07/01/2024

Order #: 00093563

End Date: 06/30/2025

### Prepared For

Account Name: Warren County Sd

Agency Code: 21116

Primary Contact:

Email:

#### Customer Information

Warren County Sd  
6820 Market St  
Russell, PA 16345-3406  
United States

#### Bill-To Information

Warren County Sd  
6820 Market St  
Russell, PA 16345-3406  
United States

### NWEA Sales Point of Contact

MONICA COHEN

monica.cohen@nwea.org

609457058

### Products & Services

Product	Sales Price	Quantity	Total Price
MAP Growth K-12 Minimum License (up to 120 students)	\$1,740.00	1	\$1,740.00
MAP Growth Foundations Online	\$1,000.00	1	\$1,000.00
Virtual (2-hour session, up to 30 participants) MAP Growth- Applying Reports: Essential Reports for Teachers	\$1,260.00	1	\$1,260.00

Subtotal	\$4,000.00
Estimated Tax	\$0.00
<b>Grand Total</b>	<b>\$4,000.00</b>

### Invoicing Information

Unless otherwise specified, payment terms are Net 30. Remittance instructions will be included with your invoice.

Until this Sales Order is signed, the pricing is valid for 30 days from the Order Date listed at the top of this document. Please confirm the billing address or specify changes to your Sales Point of Contact.

For a copy of the latest NWEA division W-9, it is available at <https://support.hmhco.com/s/article/Billing-and-Invoices>. Click on "Requesting a W-9" and select "NWEA".

The Tax ID for NWEA, a division of Houghton Mifflin Harcourt Publishing Company, is 04-1456030.

**Terms and Conditions**

This Sales Order is between Customer and NWEA, a division of Houghton Mifflin Harcourt Publishing Company, and is subject to the HMH Standard PreK-12 Terms of Purchase located at <https://www.hmhco.com/terms-of-purchase> (the "Agreement") for the Products and Services listed above. By signing this Sales Order, you agree you have read, understand, and agree to the Agreement.

**Signature**

Customer  
Signature: \_\_\_\_\_

Customer  
Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_

Customer Title \_\_\_\_\_

ATTEST:

\_\_\_\_\_  
Secretary, Board of School Directors

\_\_\_\_\_  
Printed Name

