



GSA CivicPlus Statement of Work

Labor Category	GSA Hourly Rate with IFF	Hours	Total Cost
Website Consultant	\$149.01	0	\$0.00
Project Manager	\$135.86	24	\$3,260.64
Network Consultant	\$135.86	0	\$0.00
Wireless Network Technician	\$135.86	0	\$0.00
Programmer	\$131.48	26	\$3,418.48
Graphic Designer	\$109.57	46	\$5,040.22
Writer	\$109.57	0	\$0.00
Server and Network Technician	\$109.57	42	\$4,601.94
Trainer	\$109.57	12	\$1,314.84
PC Technician	\$89.41	0	\$0.00
Content Developer	\$80.64	126	\$10,160.64
Subtotal			\$27,796.76
.00Discount			(\$3,312.76)
Total Fees Year 1			\$ 24,484.00

Project Implementation and Deployment

- CivicEngage Central First Year Annual Hosting and Security
- SSL Management – CP provided 1 per domain
- DNS and Domain Setup and Hosting <https://www.levycounty.org>
- Premium Implementaton \$24,484.00
- 250x Pages Content Development
- 4x 3 Hour Blocks Virtual Training, up to 12 attendees
- 1x Agendas & Minutes Migration – 100 Meeting – PDF
- AudioEye Managed

Total Initial Term Fees \$24,484.00

Renewal Term Annual Services

\$9,958.20

1. Performance and payment under this Statement of Work (“SOW”) by and between Levy County, Florida (“Customer”) and CivicPlus (“CivicPlus”) shall be subject to the terms & conditions of the Agreement by and between the General Services Administration and CivicPlus and the terms and conditions of the CivicPlus Master Services Agreement and the applicable Solution and Services terms and conditions located at <https://www.civicplus.help/hc/en-us/p/legal-stuff>.
2. This SOW shall remain in effect beginning at signing and continuing for one year. This SOW may be renewed for an additional 1-year Renewal Term upon mutual agreement of the Parties.
3. The Total Initial Term Fees will be invoiced as follows: 100% upon signing.
4. Renewal Term Annual Services shall be invoiced on the first day of each Renewal Term. Annual services, including but not limited to hosting, support and maintenance services, shall be subject to a 5% annual increase beginning in Year 2 of service. fee.



Acceptance

We, the undersigned, agreeing to the conditions specified in this document, understand and authorize the provision of services outlined in this SOW.

Authorized Client Signature

CivicPlus

By:

By:

Name:

Name:

Title:

Title:

Date:

Date:

Organization Legal Name:

Billing Contact:

Title:

Billing Phone Number:

Billing Email:

Billing Address:

Mailing Address: (If different from above)

PO Number: (Info needed on Invoice (PO or Job#) if required)