



SUBSCRIPTION RENEWAL AGREEMENT

NOTE: Longer subscriptions protect against price increases by locking in your rate.

FULL SUBSCRIBER NAME:

Stevenson Fire Department (WA)

(The name of the entity that is subscribing, hereinafter "Subscriber")

RENEWAL SUBSCRIPTION COMMENCEMENT DATE:

October 16, 2019

Your most recent subscription to IamResponding expires (or expired) on the day before the above date. This renewal agreement extends your most recent IamResponding agreement, on all of the same terms and conditions that you agreed to in your prior agreement (those are expressly adopted and incorporated herein), other than the length and cost of the agreement, which will now be as selected below:

1. This renewal subscription starts on the Renewal Subscription Commencement Date indicated above, and ends one, three or five year(s) from the Commencement Date, depending on the option selected in paragraph 2(a) below. Subscriber's access to IaR shall not be provided by ESMC until ESMC has received this signed Subscription Agreement from Subscriber.

2. a) Length and Base Subscription Fee (*In this section, you must check one box*):

The subscription length and cost selected by Subscriber is as follows:

One-year Subscription

\$300

Three-year Subscription

Paid annually, at \$300/year

Paid up-front, for a total of \$900

Five-year Subscription

Paid annually, at \$300/year

BEST OVERALL VALUE → Paid up-front, for a total of \$1,425 (5% discount from annual payment rate)

b) Telephone Call Costs: \$5/year.

This is paid annually, together with your annual Base Subscription Fee. If you have selected a multi-year Term, paid up front, then the amount due up front is \$5, times the number of years of your selected Term (\$10 for a 2-year agreement; \$15 for a 3-year agreement; \$25 for a 5-year agreement).

Subscription Agreement to IamResponding.com (KGF)

Please return by facsimile to: (315) 314-7748

Or mail to: Emergency Services Marketing Corp., Inc. P.O. Box 93, Dewitt, NY 13214-0093

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3. Subscriber warrants that the person signing this Agreement has the authority to enter into this Subscription Agreement on behalf of the Subscriber.

Subscribing Entity's Name: _____

Printed Name of Authorized Signor: _____

Date: _____

Signature: _____

Emergency Services Marketing Corp., Inc.

By: _____ Date: _____
Daniel R. Seidberg, President

Please return this ENTIRE agreement to us; not just the signature page!

***All checks should be made payable to: Emergency Services Marketing Corp., Inc.
Federal Tax ID Number: 20-5787005
US Funds Only***

PLEASE HELP US CONTAIN YOUR COSTS BY USING THIS FROM AS YOUR INVOICE

IamResponding.com

Emergency Service Marketing Corp., Inc.
 P.O. Box 93
 Dewitt, New York 13214-0093
 Phone: (315) 701-1372 Fax: (315) 314-7748

Self Made Invoice

Date: _____

To (insert your department name and billing address):

DESCRIPTION	AMOUNT
<p>Please select <u>ONE</u> applicable payment option below:</p> <p><input type="checkbox"/> One-Year Term (\$300 Base Fee + \$5 Telephone Fee = \$305)</p> <p><input type="checkbox"/> Three-Year Term, Paid Annually (\$300 Base Fee + \$5 Telephone Fee= \$305)</p> <p><input type="checkbox"/> Three-Year Term, Paid Up-Front (\$900 Base Fee + \$15 Telephone Fee = \$915)</p> <p><input type="checkbox"/> Five-Year Term, Paid Annually (\$300 Base Fee + \$5 Telephone Fee = \$305)</p> <p><input type="checkbox"/> Five-Year Term, Paid Up-Front (\$1,425 Base Fee + \$\$25 Telephone Fee = \$1,450)</p>	
	Total :

Please update your billing contact information!

Billing Contact Name: _____ Billing Contact Email: _____ Billing Contact Phone: _____ Billing Contact Fax: _____ Billing Address: _____ _____	<p>All payments in US funds ONLY</p> <p>Make checks payable to: Emergency Services Marketing Corp., Inc. (Tax ID #: 20-5787005)</p> <p>Thank you for your business!</p>
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