

Pearson Clinical Assessment
 PO Box 599700
 San Antonio, TX 78259
 Phone: 866-313-6194
 FAX: 866-313-6197
 Federal ID No: 41-0850527

Quote / Proforma Invoice

Account Number: 1054870
Document Number: 100841
Document Date: 27-JUN-2018
Expiration Date: 31-DEC-2018

Customer: YONKERS PUBLIC SD

Bill To: YONKERS PUBLIC SD
 1 LARKIN CTR
 YONKERS, NY 10701

Ship To: YONKERS PUBLIC SD
 1 LARKIN CTR
 YONKERS, NY 10701

Line	Product	Qty	Units	Number of Students	Unit Price	Discount %	Amount
1.1	1402699786 - WSS ANNUAL SUB RENEWAL	1	YEAR	1604	8.00		\$12,832.00

Payment Terms: Net 30

Subtotal: \$12,832.00
 Charges: \$0.00
 Taxes: \$0.00
 (US Dollar) Total: \$12,832.00

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