Cellebrite Inc. 8065 Leesburg Pike, Suite T3-302 Vienna, VA 22182 USA

Tel. +1 800 942 3415 Fax. +1 201 848 9982 Tax ID#: 22-3770059 DUNS: 033095568 CAGE: 4C9Q7 Company Website: http://www.cellebrite.com



Quote

Quote# Date:

Q-396384-1 Jun 06, 2024

Billing Information

Calumet City Police Department 1200 Pulaski Rd Calumet City, Illinois 60409 United States

Contact: Kevin Rapacz Phone: +1 7088682500 **Delivery Information**

Calumet City PD/ CSF, LTD P.O. Box 166560 Chicago, IL 60616 United States

Contact: Kevin Rapacz **Phone:** +1 7088682500 Wire To:

Bank Routing Number: 021000021 Account Number: 761020590 Account Name: Cellebrite Inc.

Check Remittance (Only for NA):

Cellebrite Inc., PO BOX 23551

New York, NY, 10087-3551

End Customer: Calumet City Police Department

Customer ID	Good Through	Payment Terms	Currency	Sales Rep
SF-00073662	Jul 06, 2024	Net 30	USD	Sean Leahy

Product Code	Product Name	Qty	Start Date	End Date	Serial Number	Net Price\Unit	Net Price
B-TRN-03-040	In-Person/Virtual CCO +CCPA Inseyets (5 days)	2				4,500.00	9,000.00
U-TRN-02-118	In-Person/Virtual (CCO) - Cellebrite Certified Operator Inseyets (2 days)	2	Jun 06, 2024	Jun 05, 2025		0.00	0.00
U-TRN-02-119	In-Person/Virtual (CCPA) - Certified Physical Analyst Inseyets (3 days)	2	Jun 06, 2024	Jun 05, 2025		0.00	0.00

SubTotal	USD 9,000.00
Shipping & Handling	USD 0.00
Sales Tax	USD 0.00
Total	USD 9,000.00

Comments:

Terms and Conditions:

- This Quote/Proforma Invoice/Tax Invoice, together with the terms and conditions and license agreement listed below that are incorporated by reference to this Quote/Proforma Invoice (together, the "Agreement"), constitute an offer by Cellebrite. By signing this the Quote/Proforma Invoice, issuing a purchase order (or other ordering document) in connection with this the Quote/Proforma Invoice, or downloading and/or using the products identified in this the Quote/Proforma Invoice/Tax Invoice, the customer agrees to be bound by the terms of this Agreement. Any additional or different terms or conditions contained in any customer document, purchase order or other ordering document will not be binding upon Cellebrite unless expressly accepted in a document signed by a Cellebrite authorized signatory.
- Quote is subject to regulatory approval.
- Freight Terms: FCA (NJ)
- Limited Warranty: Hardware:12 Months; Software:60 days; Touch Screen:30 days
- General: The following terms shall apply to any product at http://legal.cellebrite.com/us/index.html
- EULA: All Cellebrite Software is licensed subject to the end user license agreement available at https://legal.cellebrite.com/End-User-License-Agreement.html
- Advanced Services (CAS): The following terms apply to Cellebrite Advanced Services at https://legal.cellebrite.com/CB-us-us/index.html
- Premium: The following terms shall apply only to Cellebrite Premium at http://legal.cellebrite.com/intl/PremiumUS.htm
- Pathfinder: The following terms apply to Cellebrite Pathfinder at https://legal.cellebrite.com/PF-Addendum.htm
- Training Services: The following terms apply to Cellebrite Training Services at http://legal.cellebrite.com/intl/Training.htm
- SaaS: The following terms apply to Cellebrite SaaS Services at https://legal.cellebrite.com/SaaS.htm
- Endpoint SaaS: The following terms apply to Cellebrite Cellebrite Endpoint SaaS at https://legal.cellebrite.com/Endpoint-SAAS.html

In the event of any dispute as to which terms apply, Cellebrite shall have the right to reasonably determine which terms apply to a given purchase order.

Please indicate the invoice number when remitting payment

Customer Name: Calumet City Police Department

*SALES TAX DISCLAIMER: Cellebrite Inc. is required to collect Sales and Use Tax for purchases made from the following certain U.S. States. Orders are accepted with the understanding that such taxes and charges shall be added, as required by law. Where applicable, Cellebrite Inc. will charge sales tax unless you have a valid sales tax exemption certificate on file with Cellebrite Inc. Cellebrite Inc. will not refund tax amounts collected in the event a valid sales tax certificate is not provided. If you are exempt from sales tax, you must provide us with your sales tax exempt number and fax a copy of your sales tax exempt certificate to Cellebrite Inc.

Please include the following information on your PO for Cellebrite UFED purchase:

- Please include the ORGINAL QUOTE NUMBER (For example Q-XXXXX) on your PO
- CONTACT NAME & NUMBER of individual purchasing and bill to address
- E-MAIL ADDRESS of END USER for monthly software update as this is critical for future functionality

I, the undersigned, hereby confirm that I am authorized to sign this Quote/Proforma Invoice on behalf the customer identified above, and I hereby approve that my signature is legally binding upon the customer identified above.

Signature: Effective Date:

Name (Print): Title:

Please sign and email to Sean Leahy at sean.leahy@cellebrite.com