

ORDER OVERVIEW

Order #:

Expiry Date: 3/31/2025

Rep Name: Dan Elliott

Rep Email: dan.elliott@eunasolutions.com

County of Fort Bend TX

Richmond, TX 77469

USA

Subscription Term (# Years): 1

Currency: USD

ORDER DETAILS AND PRICING

Solution	Recurring Services SKU	
Procurement	Bonfire Site License	
	Sub-Total	55,000

Solution	One-Time Services SKU	
Procurement	Implementation	
	Sub-Total	1,000

PAYMENT INFORMATION AND CONTRACT TERMS

Accounts Payable Contact:

Name: _____

Email: _____

Customer Signature: KP George

Name: KP George

Title: County Judge

Acceptance Date: March 12, 2025

Terms and Conditions

Unless otherwise stipulated in Order Notes and Terms of Payment, the Customer hereby agrees to order the products and/or services outlined above at the prices indicated, and acknowledges it has read, understands and agrees to be bound by the terms and conditions detailed at <https://dir.texas.gov/contracts/dir-tso-4363> (the "Agreement").

In the event of an inconsistency between this Order Form, any governing agreement, purchase order, or invoice, the Order Form shall govern as it pertains to this transaction

All remittance advice and invoice inquiries can be directed to billing@eunasolutions.com. Please feel free to contact us if you have any questions.

Thank you for your business.

Order Notes and Terms of Payment

Order Notes:

- Annual subscription begins on acceptance date
- Applicable taxes extra

Terms of Payment:

Software

- Due 100% upon Acceptance Date of Order Form (Net 30) and annually in advance for future years

Services

- Due 100% upon Acceptance Date of Order Form (Net 30)



Euna Solutions, Inc. (USA)
363 W. Erie St., Floor 7
Chicago, IL 60654

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

Complete Nos. 1 - 4 and 6 if there are interested parties.
Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.

OFFICE USE ONLY CERTIFICATION OF FILING

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.

EUNA Solutions, Inc
Chicago, IL United States

Certificate Number:
2025-1268094

Date Filed:
02/11/2025

Date Acknowledged:
03/11/2025

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

Fort Bend County TX

3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.

25-IT-100472
Bonfire R.246175 Contract 25-IT-100472

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary

5 Check only if there is NO Interested Party.



6 UNSWORN DECLARATION

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)

I declare under penalty of perjury that the foregoing is true and correct.

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

Signature of authorized agent of contracting business entity
(Declarant)