

### CLERK'S OFFICE SUBSCRIPTION INVOICES

BOT Meeting Date								
4/28/2021								
<b>Invoice Date</b>	<b>Invoice Number</b>	<b>Vendor</b>	<b>Acct. #</b>	<b>Description</b>	<b>Period Ending</b>			<b>Amount</b>
4/6/2021	CMS0022824	General Code	101-259-928	Laserfiche SW Assurance Plan	6/27/2022			\$ 8,904.00
							<b>TOTAL</b>	<b>\$8,904.00</b>



**Please Note Our New Remit Address**

General Code, CMS  
P.O. Box 772511  
Detroit MI 48277-2511  
(800)836-8834 x212 \* Fax(585)328-8189  
accounting@generalcode.com

Invoice No: CMS0022824  
Invoice Date: 4/6/2021  
Due Date: 5/6/2021  
Terms: Net 30  
PO:

**Charter Township of Pittsfield**  
**Ms. Lyn Sebestyen**  
**6201 W. Michigan Avenue**  
  
**Ann Arbor MI 48108**

**Customer No:** PI3604  
**Maintenance Period Ends:** 6/27/2022

Qty	Description: Laserfiche SW Assurance Plan	Amount
39	Rio Named Full Users (25 Tier)	\$7,722.00
39	LF RIO Records Management Full	\$780.00
1	Laserfiche Import Agent Rio LS	\$330.00
2	Laserfiche RIO Scanconnect LSA	\$72.00

APPROVED  
ACCT#  
DATE

101-25A-928  
4/8/21

Interest will be charged on all past due  
accounts at 1.5% monthly.

This order is subject to General Code's Term and Conditions which are  
available at [www.generalcode.com/TCdocs](http://www.generalcode.com/TCdocs)

Subtotal \$8,904.00  
S&H Charges \$0.00  
Tax \$0.00  
Payment/Credit:  
Total Due \$8,904.00

**Thank you for choosing General Code. We appreciate your business.**

**Voucher Form (if required)**

**Claimant's Certification**

I do solemnly declare and certify under penalties of the law that the within bill is correct in all its particulars;  
that the articles have been furnished or services rendered as stated therein; that no bonus has been given or received  
by any persons within knowledge of this claimant in connection with the above claim; that the amount therein stated is  
justly due and owing; and that the amount charged is a reasonable one.

4/6/2021

Accounting Administrator

Account Charged \_\_\_\_\_ Payment Record: Check # \_\_\_\_\_ Dated \_\_\_\_\_

Department Approval \_\_\_\_\_

Date \_\_\_\_\_