FORM SALES ORDER No. 3

This	sales	order	will be	used	when a	customer	orders	Business	VoiceEdge.
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Sale Order – Buisness VoiceEdge Services

CUSTOMER INFORMATION						
Account Name:	AccountName123	Email:	PC Email@yahoo.com			
Primary Contact:	Primary Contact123	Address1:	PC_101 Market			
Title:	PC_Manager	Address2:				
Phone:		City:	PC_Philadelphia			
Cell:		State:	PA			
Fax:		Zip Code:	19103			

SUMMARY OF CHARGES

Service Term(Months): 12

Site Name	Monthly Recurring Charges	Standard Installation Fees	Activation Fees	
Phila	\$0.00	\$0.00	\$0.00	
SUMMARY OF TOTAL CHARGES*	\$0.00	\$0.00	\$0.00	

^{*} Applicable federal, state and local taxes and fees may apply; usage fees not included. For Specific information, see service location detail pages, attached hereto and incorporated here in reference. Additional orders (adding or deleting seats) may change the "per seat" pricing.

GENERAL COMMENTS

AGREEMENT

- 1. This Comcast Enterprise Services Sales Order Form ("Sales Order") shall be effective upon acceptance by Comcast. This Sales Order is made a part of the Comcast Enterprise Services Master Services Agreement, entered between Comcast and the undersigned. Unless otherwise indicated herein, capitalized words shall have the same meaning as in the Agreement.
- 2. New telephone numbers are subject to change prior to the install. Customers should not print their new number on stationery or cards until after the installation is complete.
- 3. Notwithstanding the notice provision in the Business Services Customer Terms and Conditions, all legal notices will be sent to the Primary Contact listed above and/or to the Primary Contact identified on the SOA for each Service location as applicable
- 4. Modifications: All modifications to the Agreement, if any, must be captured in a written Amendment, executed by an authorized Comcast Senior Vice President and the Customer. All other attempts to modify the Agreement shall be void and non-binding on Comcast. Customer by signing below, agrees and accepts the terms and conditions of this Agreement.
- 5. IF CUSTOMER IS SUBSCRIBING TO COMCAST'S BUSINESS DIGITAL VOICE SERVICE, CUSTOMER, BY SIGNING BELOW, ACKNOWLEDGES RECEIPT AND UNDERSTANDING OF THE FOLLOWING 911 NOTICE:

E911 ACKNOWLEDGEMENT

Comcast Voice Services, including, but not limited to, Comcast Business Voice Edge Service, ("Voice Services") may have the E911 limitations specified below:

• In order for 911 calls to be properly directed to emergency services using the Voice Services, Comcast must have the correct service address and, where applicable, location details ("Registered Service Location"). Registered Service Location may include, subject to any character limitations, location details such as a floor and/or office number, in addition to street address, for each telephone number and extension used by the Customer. If the Voice Services or any Voice Services device is moved to a different location without Customer providing updated Registered Service Location information, 911 calls may be directed to the wrong emergency authority, may transmit the wrong address, emergency responders may be unable to locate the emergency on the premises and/or the Voice Services (including 911) may fail altogether. Customer's use of a telephone number not associated with its geographic location, or a failure to allot sufficient time for a Registered Service Location change to be processed may also increase

Customer Initials: Page 1 of 3 6/12/2020 11:04 AM



Sale Order – Buisness VoiceEdge Services

Itnese risks.

- Customer is solely responsible for informing Comcast of initial Registered Service Locations for each telephone number and extension and of all changes to Registered Service Locations for the Voice Services, including subsequent moves, additions or deletions of stations. Customer will inform Comcast of changes to any Registered Service Location for each telephone number and extension by calling Comcast at 1-855-368-0600 or by opening a trouble ticket in the Comcast Care Center Portal. The contact number or method for making such updates are subject to change from time to time.
- The Voice Services use electrical power in the Customer's premises, as well as the Customer's underlying broadband service. If there is an electrical power outage or underlying broadband service outage, 911 calling may be interrupted. Similarly, calls using the Voice Services, including calls to 911, may not be completed if there is a problem with network facilities, including network congestion, network/equipment failure, or another technical problem.
 If the Registered Service Location provided in conjunction with the use of Comcast Equipment is deemed to be in an area that is not supported for 911 calls. Customer will not have direct access to either basic 911 or F911. In this case, Customer 911 calls will be sent to an emergency call center. A

calls, Customer will not have direct access to either basic 911 or E911. In this case, Customer 911 calls will be sent to an emergency call center. A trained agent at the emergency call center will ask for the caller's name, telephone number and location, and then will contact the local emergency authority for that area in order to send help.

BY SIGNING BELOW, I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THE 911 LIMITATIONS OF THE VOICE SERVICES.

By signing below, Customer agrees and accepts to the terms and conditions of this Agreement. The Comcast Business Terms and Conditions, and related policies can be found at http://business.comcast.com/terms-conditions-smb.

CUSTOMER USE ONLY	COMCAST USE ONLY (by Authorized representative)				
Signature:	Signature:	Sales Rep:	Toni Gavrilovski		
		Sales Rep	toni gavrilovski@cable.co		
Name:	Name:	Email:	mcast.com		
Title:	Title:	Region:	Florida Region		
Date:	Date:	Division:	Central Division		

Customer Initials: Page 2 of 3 6/12/2020 11:04 AM



Sale Order – Buisness VoiceEdge Services

SERVICE LOCATION DETAIL							
	Custome	r Informat	ion				
Location Name: Phila Business Phone:							
Company Name:			Cell Phone:				
Contact Name:		-	Fax Number:				
	Site Address123	-	Email:				
Address2:		-		Standard			
Address2: Site Type: Standard City: Philadelphia Emergency 911 911 N Market ALY N							
State:		. "	Information: APT 20000Building 1Floor 4Room 100				
		•					
Zip: 19104 Philadelphia, PA 19104							
	Billing	Informatio	n				
Date Of Quote:			Service Term:	12			
Bute of Quote.	The terms set forth in this agreement a	-					
Billing Contact	-		-	12345			
_	Billing Address 1	-	•	2151232456			
Address2:		-		2151231231			
	Billing Philadelphia	-		BillingContac	tEmail@val	hoo com	
State:		-	Lillall.	Diningoontac	ALTHUM (C, y C)	100,00111	
State.		-					
	Voice	Selection					
			Unit	Unit			
Voic	e Selections	Quantity	Price(MRC)	Price(NRC)	Total MRC	Total NRC	
Unified Communication Seats		0	\$0.00	\$0.00	\$0.00	\$0.00	
	Equipmo	ent Selection	on				
			Unit	Unit			
Equipm	nent Selections	Quantity	Price(MRC)	Price(NRC)	Total MRC	Total NRC	
Voice Gateway		0	\$0.00	\$0.00	\$0.00	\$0.00	
Summary Of Charges							
Aggregate Monthly Recurring Charges							
Monthly Recurring Charges:					\$0.00		
Promotional Discount:							
Promotion Option:							
Promotion Description:							
Total Business VoiceEdge Monthly Recurring Charge*: \$0.00							
*Applicable federal, state and local taxes & fees may apply; usage fee not included. Additional orders (adding or deleting seats) may change the							
"per seat" pricing							
Business VoiceEdge Standard Installation Fees							
Customer Training:	Online				#N/A		
Total Activation Charges:					\$0.00		
Site Installation Charges: \$0.00							
Total Business VoiceEdge Standard Installation Fees:					\$0.00		

Customer Initials: Page 3 of 3 6/12/2020 11:04 AM