

SHIMADZU SCIENTIFIC INSTRUMENTS, INC.
 7060 KOLL CENTER PARKWAY
 STE. 328
 PLEASANTON, CA 94566
 Phone: 925-417-2090

Fax: 925-462-7348

SA NUMBER 0000116289
 Customer Number D0001164
 Type Quote

Location of Equipment

Green Grower Labs
 124 E Rowan Ave
 Suite B100
 Spokane, WA 99207-1214

Contact: MATT HEIST
 Phone: 509-981-2266

Billing Address

D0001164

Green Grower Labs
 124 E Rowan Ave
 Suite B100
 Spokane, WA 99207-1214

<u>Model</u>	<u>Serial Number</u>	<u>Coverage Plan</u>	<u>Coverage Price</u>
DIS LC-2010C VER.3 115V	C21255111751	PREMIUM PM	\$3,678.00
LC-2040C with Sample Cooler and UV Detector	L21505200147	PREMIUM PM	\$6,403.00
HS-10, 120v, short transfer line	C12225300014	PREMIUM PM	\$3,056.00
DIS FID-2010 115V		PREMIUM PM	\$950.00
FID-2010 115V		PREMIUM PM	\$950.00
HS-10, 120v, short transfer line	C12225400246	PREMIUM PM	\$3,056.00
CONTRACT TRAVEL		Travel Zone C (151-200 miles)	\$550.00
		SUBTOTAL:	\$18,643.00
		DISCOUNT:	\$0.00
		TOTAL PRICE:	\$18,643.00

PREMIUM PM SERVICE AGREEMENT

*Premium PM visits, when performed under this Agreement, will include necessary cleaning, adjustments, verification, lubrication and parts replacement, subject to the "Conditions of Service" of this agreement. Labor and selected consumables parts will be included during the Premium PM visit at no additional cost to the buyer.

This agreement is for a 12 month effective period.

****SINGLE INVOICE**CREDIT CARD****

Upon approval please forward a signed copy of your agreement quotation with a copy of your purchase order directly to:
 NCACentral@shimadzu.com.
 Renewal Agreement for_SA#98159

MATT HEIST
 509-981-2266
 greengrowerlabs@gmail.com

NOTE:

***Kindly verify if everything that we have on file is up-to-date (location of instrument, billing address, components listed).
 If revision is needed, please inform us by sending an email to NCACentral@shimadzu.com.

***Please reference the SA number on your PO.

PLEASE SEND INVOICE TO: greengrowerlabs@gmail.com

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PRICES WILL REMAIN IN EFFECT FOR 30 DAYS FROM THE QUOTATION DATE

REGION	EFFECTIVE DATES	Purchase Order:
25NCA	4/28/2023 - 4/27/2024	

SHIMADZU SCIENTIFIC INSTRUMENTS, INC.	CUSTOMER
SUBMITTED BY: <u>Matt Heist</u>	APPROVED BY: <u>Matt Heist</u>
DATE SUBMITTED: <u>3/31/23</u>	TITLE: <u>Lab Director</u>
AUTHORIZED BY: <u>Matt Heist</u>	DATE APPROVED: <u>3/31/23</u>
DATE AUTHORIZED: <u>3/31/23</u>	

NOTE: Please sign and return this quote
with hard copy of the Purchase Order for processing.

The description of the terms & conditions are provided on the
attached sheets. Through signature and/or purchase order, buyer
agrees to comply with these terms & conditions