

SUNGARD® PUBLIC SECTOR

Village of Orland Park, IL (ORLA)

Investment Summary - Click2Gov

October 20, 2008

Applications	License Fees	Installation Fees	Training Fees	Annual Maintenance Fees
K2-Click2Gov-CX	\$ 14,500.00	\$ 2,000.00	\$ -	\$ 2,900.00
KL-One Point Core	\$ 3,350.00	\$ 2,000.00	\$ -	\$ 670.00
DC-Verisign Global Digital Certificate	\$ 1,200.00	\$ -	\$ -	\$ -
Totals	\$19,050.00	\$4,000.00	\$ -	\$3,570.00
License Fees	\$19,050.00			
Installation Fees:	\$4,000.00			
Training Fees:	\$ -			
Annual Maintenance Fees:	\$3,570.00			
Hardware Appliance		TBD		
Total	\$26,620.00			

Payment Terms:

1. License fees and Hardware are due at contract execution date, signed quote or receipt of purchase order.
2. Installation Fees are due upon completion.
3. Annual Maintenance will be due 120 days from execution of SunGard Public Sector quote.
4. Travel, out of pocket and living expenses are not included in above pricing and will be invoiced as incurred.

Notes:

1. It shall be the responsibility of the Customer to provide a web server to run the applicable Licensed Programs herein.
2. Customer shall be responsible for obtaining a valid registered domain name and IP address from an appropriate ISP service.
3. Core Module includes Weblogic for up to 2 CPU's. Additional processor \$1,250 & \$250 to the annual maintenance costs.
4. VeriSign requires an annual renewal of its Digital Encryption Module.
5. Pricing is for the application as-is. Any modifications or conversions will incur additional costs.

6. There is no testing and acceptance period. The SunGard Public Sector application warranty period is 120 days after the delivery date. "Delivery Date" means for each Component System, the date on which SunGard Public Sector first ships the Component System to the Delivery Address F.O.B. SunGard Public Sector's place of shipment.
7. This quote constitutes a Supplement to the existing Software License and Services Agreement signed by SunGard Public Sector Inc. and Customer. Except as provided herein, all terms of the Agreement remain in full force and effect.
8. Licensed Programs may be used in machine-readable object code form only. Source Code is not provided.
9. Unless otherwise provided for herein, warranty, modification retrofit and maintenance offerings by SunGard Public Sector for its Licensed Program(s) do not apply to any third party hardware or third party software supplied under this Supplement. SunGard Public Sector does not make any warranties nor provide any source code for any non-SunGard Public Sector products unless otherwise provided herein. The return and refund policy of each individual third party hardware or third party software supplier shall prevail unless otherwise provided herein.
10. Scheduled Resource Changes: For training and on-site project management sessions which are cancelled at the request of Customer within fourteen (14) days of the scheduled start date, Customer is responsible for entire price of the training or on-site project management plus incurred expenses.
11. Additional hardware and/or third-party software may be required. For hardware specifications and information, please contact Shelly May at SPS VAR - smay@spsvar.com or (772) 871-9125.
12. Applicable taxes are not included in the above fees and if applicable, will be added to the amount in the payment invoices.
13. Please indicate that your purchase order is per the terms and conditions of this proposal dated **October 20, 2008**.

The pricing, terms and conditions in this quote will be honored provided this quote is fully executed by January 20, 2009.

Village of Orland Park
 14700 Ravinia Ave
 Orland Park, IL 60462

Authorized Signature

Date

Printed Name

Source PB 092508

Account Auto-Enablement

- Internet user can obtain PIN without having to contact the agency

SUNGARD[®] *Customer Information Systems*
HTE INC.

Home
Sign On
Forgot PIN?
Create PIN
Email Us

Fill in the fields directly from your Utility bill.

Account ID: *

Bill Date: eg. MMDDYY

Due Date: eg. MMDDYY

Total Amount Due: *

Cycle and Route Number: - *

Previous Balance:

Last Payment Amount:

* Account ID must be entered exactly as it appears on your monthly statement (configurable). Cycle and Route in on the upper left-hand corner of your bill

Submit Clear

Each agency can select what data is needed to validate the citizen (mostly)

Account Inquiry

SUNGARD[®] *Customer Information Systems*
HTB INC.

- Home
- Account Information ▶
- Payment History
- Make Payments
- Consumption
- Billing History
- Service Summary
- Edit Account
- Master Account Maintenance
- Select Account
- Email Us
- Log Off

Account Number: 000115370-000115580
Customer: TEST, NAME 40
Location Address: 462 DIVISION AVE ,
ORMOND BEACH FL
Phone Number: (800) 727-8088

Account Status: ACTIVE **Payments are allowed**
Account Balance: \$47.17 *
Amount Past Due: \$0.00
Your [Last Bill](#) was sent on 12/15/2003 in the amount of \$47.17 due on 01/04/2004.
Your last payment was received on 12/11/2003 in the amount of \$-56.88.

* Transactions that have been authorized but not yet posted may be included.

[Configurable text/html options here (bottom)]

Configurable description text by status

Configurable Text

Payment History

SUNGARD[®]
HTE INC.

Customer Information Systems

- Home
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Account Number: 000158480-000259590
Customer: NAME, TEST 10
Location Address: 261 TROPICAL LN ,
ORMOND BEACH FL
Phone Number: (386) 671-9404

Account Balance: \$37.19
Amount Past Due: \$0.00
Your [Last Bill](#) was sent on 12/17/2003 in the amount of \$37.19 due on 01/06/2004.

Payment Date	Amount	Payment Type	Status
12/04/2003	\$37.19	Payment	Applied

“Last Bill” is link to summary of charges

Status changes upon settlement

Consumption

SUNGARD[®]
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Customer Information Systems

- Home
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Account Number: 000158480-000259590
Customer: NAME, TEST 10
Location Address: 261 TROPICAL LN ,
ORMOND BEACH FL
Phone Number: (386) 671-9404

[Configurable text/html options here (T)]

Select meter to view Consumption Report:

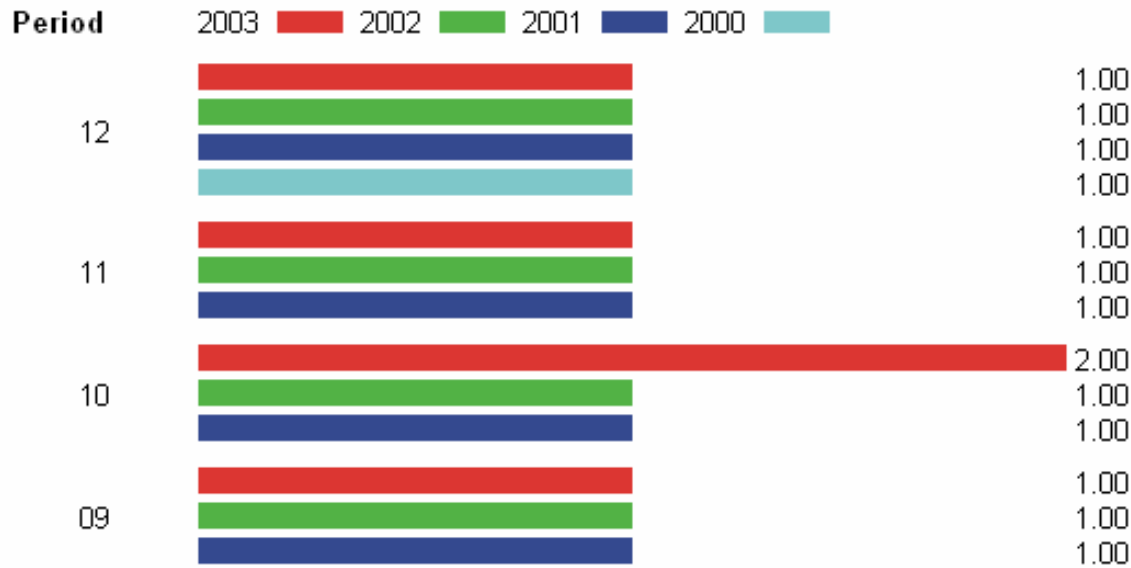
Service Description	Meter Number
REFUSE PICKUP CHARGE	non-metered
RECYCLING PROGRAM	non-metered
STORMWATER DRAINAGE	non-metered
SEWER SERVICE CHARGE	non-metered
WATER SERVICE CHARGE	<u>93057757</u>

Metered services
are links to
additional
information

Consumption Graphs


Account Number: 000158480-000259590
Customer: NAME, TEST 10
Location Address: 261 TROPICAL LN ,
ORMOND BEACH FL
Phone Number: (386) 671-9404

View Graph By: [Year \(Row View\)](#) [Year \(Column View\)](#)
Service Description: WATER SERVICE CHARGE
Meter Number: 93057757



Links provide
different graphed
views of data

Billing History



Customer Information Systems

- Home
- Account Information
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- Master Account Maintenance
- Select Account
- Email Us
- Log Off

Account Number: 000158480-000259590
Customer: NAME, TEST 10
Location Address: 261 TROPICAL LN ,
ORMOND BEACH FL
Phone Number: (386) 671-9404

[Configurable text/html options here (T)]

Bill Date	Due Date	Balance Forward	Current Charges	Total Amount Due
12/17/2003	01/06/2004	\$0.00	\$37.19	\$37.19
11/20/2003	12/10/2003	\$0.00	\$37.19	\$37.19
10/16/2003	11/05/2003	\$0.00	\$37.19	\$37.19
09/19/2003	10/09/2003	\$0.00	\$37.19	\$36.07
08/24/2003	09/13/2003	\$0.00	\$37.19	\$37.19
07/19/2003	08/08/2003	\$0.00	\$37.19	\$37.19

System shows 36 months of billing history

User selects link to see summary of charges

Electronic Billfold/Digital Wallet

SUNGARD[®] *Customer Information Systems*
HTE INC.

Account Number: 000115370-000115580
Customer: TEST, NAME 40
Location Address: 462 DIVISION AVE ,
ORMOND BEACH FL
Phone Number: (800) 727-8088

Notification Options:

Notify me by email on change.
 Notify me by email when a transaction is posted.

Billfold

Account Type	Account Number			
Visa	*****7434	<input type="button" value="Pay"/>	<input type="button" value="Edit"/>	<input type="button" value="Remove"/>
Visa	*****0000	<input type="button" value="Pay"/>	<input type="button" value="Edit"/>	<input type="button" value="Remove"/>

Select a payment type to add

- Information is saved for future use
- Can receive email notification upon use
- Can receive email notification upon changes

Entered

Customer Information Systems

Please fill in the fields below with your card information. Please remember that the cardholder name must appear exactly as it does on your credit card. Also, be sure to use the billing address of the credit card which may be different from your home address.

Account Information

Card Type

Select a card type *

Payment Amount

\$7375.45

Card Number (No dashes or spaces)

*

Expiration

Select month 2005 *

Card Security Code

*

Cardholder Name

First Name

*

MI

Last Name

*

Credit Card Billing Street Address

*

City

*

State or Province

Select a state *

Postal Code: (no dashes)

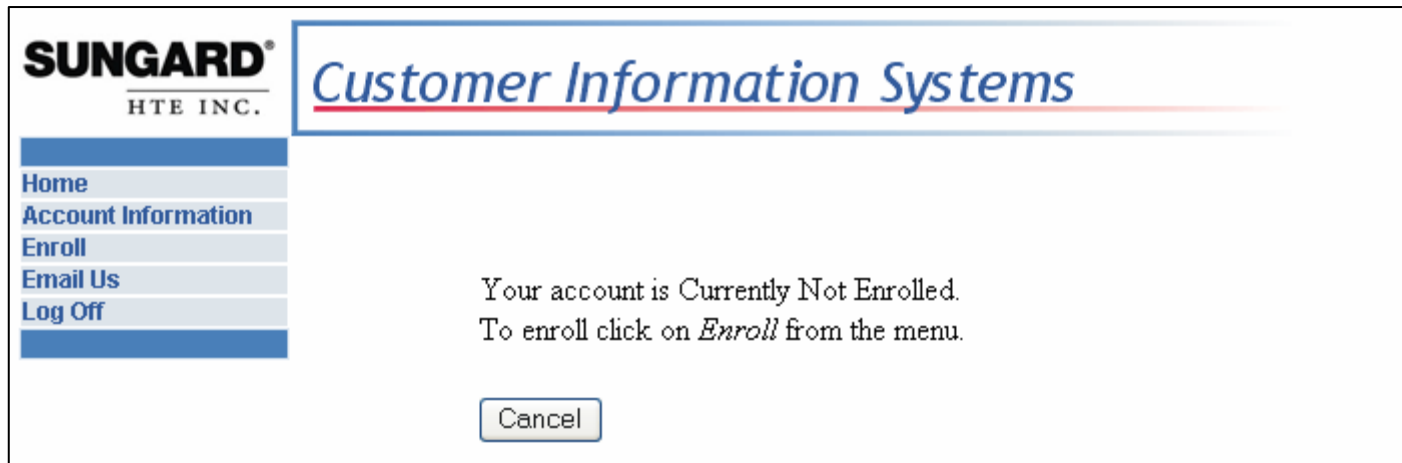
*

Save this card information in my billfold.

* indicates required information

Complete payment form and submit to process. May also store for future use

Auto-Pay Account Add



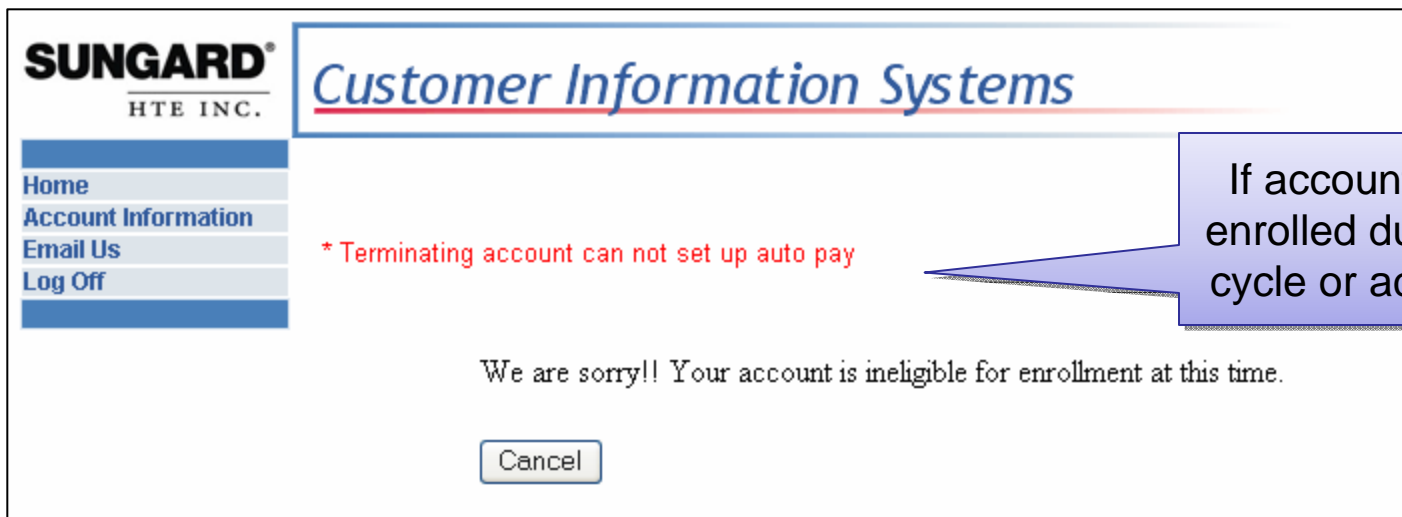
SUNGARD
HTE INC.

Customer Information Systems

- Home
- Account Information
- Enroll
- Email Us
- Log Off

Your account is Currently Not Enrolled.
To enroll click on *Enroll* from the menu.

Cancel



SUNGARD
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Customer Information Systems

- Home
- Account Information
- Email Us
- Log Off

* Terminating account can not set up auto pay

We are sorry!! Your account is ineligible for enrollment at this time.

Cancel

If account can not be enrolled due to process cycle or account status

Choose Auto-Pay Method

SUNGARD
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Customer Information Systems

Home
Account Information
Email Us
Log Off

Please choose an item from your billfold or press the 'Other ACH' or 'Other CC' button to enter new tender for AutoPay

Billfold

<input type="radio"/> Visa	*1111
<input type="radio"/> Visa	*0000
<input type="radio"/> Electronic Check	*6789

Enroll Other ACH Other CC

Auto-Pay Enrollment Agreement

SUNGARD
HTE INC.

Customer Information Systems

Home
Account Information
Email Us
Log Off

Print

"I agree to the terms and conditions outlined herein. I hereby authorize [City/Agency name] to charge the indicated credit card for services provided. I agree that this is a Periodic charge that will be made according to my billing cycle, and in order to terminate the recurring billing process I must either terminate the account or submit in writing my request to terminate recurring credit card authorizations.

I agree not to dispute [City/Agency name] recurring billing with my credit card issuer as long as the amount in question was for services rendered.

I guarantee and warrant that I am legal card holder for this credit card, and that I am legally authorized to enter into this recurring billing agreement with [City/Agency name]"

Accept

OK Cancel