



INVOICE

Flock Group Inc dba Flock Safety
www.flocksafety.com

Invoice Number INV-50937
Invoice Date: 10/30/2024
Due Date: 11/29/2024
Payment Terms: Net 30
PO#:

Bill To: IL - Champaign PD
Champaign, Illinois, 61820

Ship To: IL - Champaign PD
82 East University Avenue
Champaign, Illinois 61820

Billing Company Name: IL - Champaign PD
Billing Contact Name: Terri Weems
Billing Email Address: teri.weems@champaignil.gov

Payment Terms: Net 30
Contracted Billing Structure: Annual - First Year at Signing

Notes: IL- Champaign - PD Wing Expansion: Year 1 of 12 Month Term

ITEMS	QTY	UNIT PRICE	SALES TAX	TOTAL
Professional Services - Wing Implementation Fee	1	\$500.00	\$0.00	\$500.00
Flock Safety Wing TM LPR	7	\$1,500.00	\$0.00	\$10,500.00

Unless otherwise noted on the Order Form, the Term shall commence upon first installation and validation of Flock Hardware.
Link to Location of Services:

Subtotal: \$11,000.00
Sales Tax: \$0.00
Credit: \$0.00
Payments: \$0.00
Balance Due: \$11,000.00

If you have questions about your invoice or need to update your billing contact information, please email billing@flocksafety.com or call 866-901-1781, option 3.



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Payment Remittance Information

Pay by Check:

Payable to: Flock Group Inc
Memo: INV-50937
Mail to: PO Box 121923
Dallas, TX 75312-1923

If paying by check, please include the remittance slip below.

Pay by ACH:

Account Legal Name: Flock Group Inc.
Account Number: 3302113966
Account Type: Checking
Routing / SWIFT Code: 121140399 / SVBKUS6S

If paying by ACH, please include your invoice number in the memo section of the ACH transfer request.

Please be aware that failure to pay the invoice by the due date may result in an interest penalty or disconnection of service, as specified in your contract.

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Detach and Return with Payment

Make Checks Payable to: Flock Group Inc

If sending via Flock Group Inc
USPS: PO Box 121923
Dallas, TX 75312-1923

Or

If sending via Flock Group Inc
UPS, FedEx or 891923
USPS: 1501 North Plano Rd. ste 100
Richardson, TX 75081

Account: IL - Champaign PD

Invoice #: INV-50937

Amount Due: **\$11,000.00**

Amount Enclosed: \$ _____