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Flock Safety + MA - Taunton PD

Flock Group Inc.
1170 Howell Mill Rd, Suite 210
Atlanta, GA 30318

MAIN CONTACT:
Will Kittle
william.kittle@flocksafety.com
7068305467

flock safety

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flock safety

EXHIBIT A

ORDER FORM

Customer:	MA - Taunton PD	Initial Term:	36 Months
Legal Entity Name:	MA - Taunton PD	Renewal Term:	24 Months
Accounts Payable Email:	dmccabe@tauntonpd.com	Payment Terms:	Net 30
Address:	23 Summer St Taunton, Massachusetts 02780	Billing Frequency:	Annual - First Year at Signing.
		Retention Period:	30 Days

Hardware and Software Products

Annual recurring amounts over subscription term

Item	Cost	Quantity	Total
Flock Safety Platform			**$45,000.00**
Flock Safety Flock OS			
FlockOS ™	Included	1	Included
Flock Safety LPR Products			
Flock Safety Falcon ®	Included	18	Included

Professional Services and One Time Purchases

Item	Cost	Quantity	Total
One Time Fees			
Flock Safety Professional Services			
Professional Services - Standard Implementation Fee	$650.00	12	$7,800.00

Subtotal Year 1:	$52,800.00
Annual Recurring Subtotal:	$45,000.00
Discounts:	$27,000.00
Estimated Tax:	$0.00
Contract Total:	$142,800.00

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Billing Schedule

Billing Schedule	Amount (USD)
Year 1	
At Contract Signing	$52,800.00
Annual Recurring after Year 1	$45,000.00
Contract Total	$142,800.00

*Tax not included

Discounts

Discounts Applied	Amount (USD)
Flock Safety Platform	$27,000.00
Flock Safety Add-ons	$0.00
Flock Safety Professional Services	$0.00

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Product and Services Description

Flock Safety Platform Items	Product Description	Terms
Flock Safety Falcon ®	An infrastructure-free license plate reader camera that utilizes Vehicle Fingerprint® technology to capture vehicular attributes.	The Term shall commence upon first installation and validation of Flock Hardware.

One-Time Fees	Service Description
Installation on existing infrastructure	One-time Professional Services engagement. Includes site & safety assessment, camera setup & testing, and shipping & handling in accordance with the Flock Safety Advanced Implementation Service Brief.
Professional Services - Standard Implementation Fee	One-time Professional Services engagement. Includes site and safety assessment, camera setup and testing, and shipping and handling in accordance with the Flock Safety Standard Implementation Service Brief.
Professional Services - Advanced Implementation Fee	One-time Professional Services engagement. Includes site & safety assessment, camera setup & testing, and shipping & handling in accordance with the Flock Safety Advanced Implementation Service Brief.

FlockOS Features & Description

Package: Essentials

FlockOS Features	Description
Community Cameras (Full Access)	Access to all privately owned Flock devices within your jurisdiction that have been shared with you.
Unlimited Users	Unlimited users for FlockOS
State Network (LP Lookup Only)	Allows agencies to look up license plates on all cameras opted in to the statewide Flock network.
Nationwide Network (LP Lookup Only)	Allows agencies to look up license plates on all cameras opted in to the nationwide Flock network.
Direct Share - Surrounding Jurisdiction (Full Access)	Access to all Flock devices owned by law enforcement that have been directly shared with you. Have ability to search by vehicle fingerprint, receive hot list alerts, and view devices on the map.
Time & Location Based Search	Search full, partial, and temporary plates by time at particular device locations
License Plate Lookup	Look up specific license plate location history captured on Flock devices
Vehicle Fingerprint Search	Search footage using Vehicle Fingerprint™ technology. Access vehicle type, make, color, license plate state, missing / covered plates, and other unique features like bumper stickers, decals, and roof racks.
Flock Insights/Analytics page	Reporting tool to help administrators manage their LPR program with device performance data, user and network audits, plate read reports, hot list alert reports, event logs, and outcome reports.
ESRI Based Map Interface	Flock Safety's maps are powered by ESRI, which offers the ability for 3D visualization, viewing of floor plans, and layering of external GIS data, such as City infrastructure (i.e., public facilities, transit systems, utilities), Boundary mapping (i.e., precincts, county lines, beat maps), and Interior floor plans (i.e., hospitals, corporate campuses, universities)
Real-Time NCIC Alerts on Flock ALPR Cameras	Alert sent when a vehicle entered into the NCIC crime database passes by a Flock camera
Unlimited Custom Hot Lists	Ability to add a suspect's license plate to a custom list and get alerted when it passes by a Flock camera

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By executing this Order Form, Customer represents and warrants that it has read and agrees all of the terms and conditions contained in the Terms of Service located at https://www.flocksafety.com/terms-and-conditions

The Parties have executed this Agreement as of the dates set forth below.

FLOCK GROUP, INC.

By: DocuSigned by: Mark Smith AC5C931454C24F3...

Name: Mark Smith

Title: General Counsel

Date: 12/19/2023

Customer: MA - Taunton PD

By: DocuSigned by: Edward Walsh 57A47CEBA75C4E4...

Name: Edward Walsh

Title: Chief of Police

Date: 12/19/2023

PO Number:

Form **W-9**
(Rev. March 2024)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Go to *www.irs.gov/FormW9* for instructions and the latest information.

Give form to the requester. Do not send to the IRS.

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See *Specific Instructions* on page 3.

1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)

Flock Group, Inc.

2 Business name/disregarded entity name, if different from above.

Flock Safety

3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes.

☐ Individual/sole proprietor ☑ C corporation ☐ S corporation ☐ Partnership ☐ Trust/estate

☐ LLC. Enter the tax classification (C – C corporation, S – S corporation, P – Partnership) . . . . .

Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner.

☐ Other (see instructions)

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any)

Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any)

(Applies to accounts maintained outside the United States.)

3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions . . . . . ☐

5 Address (number, street, and apt. or suite no.). See instructions.

PO BOX 121923 (Remittance) 1170 Howell Mill Rd NW Ste 210

Requester's name and address (optional)

6 City, state, and ZIP code

Dallas TX 75312-1923 Atlanta GA 30318

7 List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number

			–			–				

or

Employer identification number

8	2	–	0	5	9	4	8	7	5

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here **Signature of U.S. person** Payton Newby **Date** 4/10/2024

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/FormW9*.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

PURCHASE ORDER # 2503878

CITY OF TAUNTON

Mayor's Office

15 Summer Street, Taunton, MA 02780

ISSUED TO:
FLOCK GROUP INC.
FLOCK SAFETY
P.O. BOX 121923
DALLAS, TX 75312-1923

SHIP TO:
City of Taunton
23 Summer Street
Taunton, MA 02780

Note: Vendor's invoice must show number of units and unit price for each item.

Issue Date	Vendor No.	Requisition No.	Department
01/31/2025	30886	48780	POLICE

Item	Quantity	Description	Account Number	Unit Price	Extended Price
1	1	FLOCK Safety Falcon	01-210-5200-5599	$45,000.00	$45,000.00
		FLOCK Safety Falcon			

Please close PO#

TOTAL OF PURCHASE ORDER **$45,000.00**

Remarks _____

BUDGET DIRECTOR APPROVAL:

	YES	NO
$1,000 - $10,000 (3 quotes)?	☐	☐
OVER $10,000 (ADVERTISING)?	☐	☐
OVER $100,000 (Central Register)?	☐	☐
*Sole Source Vendor	☐	☐

*If Yes, explain. PLEASE TYPE

All purchases must be preapproved by Budget Director.

Department Copy Budget Director Copy Auditor Copy

REQUEST FOR QUOTES FORM

City of Taunton

PURCHASE DESCRIPTION (INCLUDE QUALITY REQUIREMENTS AND CONTRACT TERMS:			
Flock camera contract as negotiated by TPD and approved by City of Taunton legal department. Sole source vendor to tie into exsisting system.			
VENDORS CONTACTED 1	**Total Price Quote**	**Unit Price(s) (if applicable)**	**Notes**
1. Company: Flock Contact: _____ Address: _____ City/St/Zip: _____ Solicited by: _____ Date: _____ Phone: _____ Fax: _____	See attached, multi year contract.		See attached.
2. Company: _____ Contact: _____ Address: _____ City/St/Zip: _____ Solicited by: _____ Date: _____ Phone: _____ Fax: _____			
3. Company: _____ Contact: _____ Address: _____ City/St/Zip: _____ Solicited by: _____ Date: _____ Phone: _____ Fax: _____			

RECOMMENDATION: Andrew Sukeforth

Procurement Department: _____ Department: Police

Signature: 3/5/2024 Department Director Signature: _____

Date: 3/5/24