

Euna Renewal Order Form

Prepared for:

Mendocino County, CA

Prepared by:

Euna Solutions, Inc.
Kat Solove
kat.solove@eunasolutions.com

PRICE QUOTE

Quote Expiry Date: 27 November, 2025

Subscription Term: 1 years
Subscription Start Date: 1/10/2026

Annual Subscriptions		
Solution	Description	Quantity
	Grant Seeker	1
	Recurring Annual Fees:	\$23,220.00
	Year 1 Total:	\$23,220.00

ORDER NOTES

Fees By Year:

- Year 1 – \$23,220.00

Total Contract Value – \$23,220.00

Terms of Payment:

NOTE THAT THIS IS NOT AN INVOICE

- Annual Subscriptions
 - Annual subscription begins on subscription start date
 - Due 100% upon in advance subscription start date (Net 30) Order Form Acceptance Date (Net 30) and annually in advance for future years
- One-Time Services
 - Due 100% upon Order Form Acceptance Date (Net 30)
- Applicable sales tax extra

Professional Services Fees Schedule: N/A

Additional Notes:

ACCEPTANCE

Mendocino County, CA

Signature: _____



Name: John Haschak

Title: Chair, Mendocino County Board of Supervisors

Acceptance Date: 12/16/2025

For Customer Invoicing Purposes:

Tax ID # _____

Is this purchase tax exempt?
our records.

☐ Yes ☐ No. If Yes, please include your tax exempt form for

Contact Information for Notices and Invoices:

Name:

Email:

Terms and Conditions

This is a 1-year subscription extension of the original MSA signed by Mendocino County, CA with AmpliFund signed on 1/10/2023.

All remittance advice and invoice inquiries can be directed to billing@eunasolutions.com.

IN WITNESS WHEREOF

DEPARTMENT FISCAL REVIEW:

By: *Xuyun Mallela*
DEPARTMENT HEAD

Date: 11/18/2025

Budgeted: ☒ Yes ☐ No

Budget Unit: 1950

Line Item: 86-2227

Org/Object Code: GT

Grant: ☒ Yes ☐ No

Grant No.: CALOES PrepareCA Grant

CONTRACTOR/COMPANY NAME

By: *Emily Naufel*
SIGNATURE

11/19/2025 EST

Date: _____

NAME AND ADDRESS OF CONTRACTOR:

StreamLink Software Inc.
DBA Euna Solutions
1155 Perimeter Center W, Unit 500
Sandy Springs, GA 30338

COUNTY OF MENDOCINO

By: *John Haschak*
JOHN HASCHAK, Chair
BOARD OF SUPERVISORS

Date: 12/16/2025

By signing above, signatory warrants and represents that he/she executed this Agreement in his/her authorized capacity and that by his/her signature on this Agreement, he/she or the entity upon behalf of which he/she acted, executed this Agreement

ATTEST:

DARCIE ANTLE, Clerk of said Board

By: *Arcy*
Deputy 12/16/2025

I hereby certify that according to the provisions of Government Code section 25103, delivery of this document has been made.

DARCIE ANTLE, Clerk of said Board

By: *Arcy*
Deputy 12/16/2025

COUNTY COUNSEL REVIEW:

APPROVED AS TO FORM:

By: *Lui Paul*
COUNTY COUNSEL

Date: 11/18/2025

INSURANCE REVIEW:

By: *Darcie Antle*
Risk Management

Date: 11/18/2025

EXECUTIVE OFFICE/FISCAL REVIEW:

By: *Darcie Antle*
Deputy CEO or Designee

Date: 11/18/2025

Signatory Authority: \$0-25,000 Department; \$25,001- 50,000 Purchasing Agent; \$50,001+ Board of Supervisors

Exception to Bid Process Required/Completed ☐ _____

Mendocino County Business License: Valid ☐

Exempt Pursuant to MCC Section: _____