



Stenograph®

Stenograph, L.L.C.
596 W. Lamont Road
Elmhurst, IL 60126

June 16, 2016

CCL142

Diana Alexander
Wise County of Texas
271st District Court
101 North Trinity
DECATUR, TX 76234

**Protect your income and
livelihood during this tough
economy for less than \$1 a day.**

Dear Stenograph Customer;

The service coverage on your Stenograph writer is about to expire. By continuing to protect your machine with a Writer Protection Plan, you are also protecting your livelihood and your source of income. Ensure you are protected for as little as a dollar a day.

There are 2 Protection Plan options available. Details of the plans are attached. To complete your renewal, log in at www.stenograph.com and renew your plan online; see enclosed sheet for online instructions. You can also complete the form below and fax or mail it to us.

For additional information on our plans, please call 1-800-323-4247, press 1 then 2.

AVAILABLE PLANS	RENEWAL PRICE	TAX AT THIS ADDRESS	TOTAL
DIAMANTE			
BASIC NO LOANER	269.00	0.00	269.00
BASIC W/ LOANER*	379.00	0.00	379.00

* Stenograph recommended

Customer No.: 83293	E-mail:
Name Wise County of Texas	
Contract No. MQ081081	Agreement Dates : 08/28/16 - 08/27/17
Number of Writers Covered:	2
Type of Writer: Serial Number:	Type of Writer: Serial Number:
DIAMANTE Z08944	DIAMANTE Z08961

83293: MQ081081	(Check 1) <input checked="" type="checkbox"/> BASIC W/ LOANER (Stenograph recommended)
FOUR EASY WAYS TO RENEW:	<input type="checkbox"/> BASIC NO LOANER
Online at www.stenograph.com	Total = \$ <u>379.00</u>
Call: 1-800-323-4247 (Credit Card Payment)	# of Writers x \$ <u>2</u>
Fax: 1-630-532-5700 (Credit Card Payment)	Grand Total = \$ <u>758.00</u>
Mail a check in the enclosed envelope	
Check Enclosed (Payable to Stenograph, L.L.C.)	<input type="checkbox"/> Visa <input type="checkbox"/> American Express
	<input type="checkbox"/> MasterCard <input type="checkbox"/> Discover
Exp. Date: _____	
Signature: _____	Date: _____

Renewal price reflects a \$100 discount off of the contract list price. Any plan renewed after the contract or warranty expiration date will be subject to the full list price and any reactivation fees. Certain terms and conditions apply.

Your payment of this invoice indicates acceptance of and renews the terms of your Original Support Agreement.

PRICES ARE SUBJECT TO CHANGE WITHOUT NOTICE. NO REFUNDS OR CANCELLATIONS ARE ACCEPTED.

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

Complete Nos. 1 - 4 and 6 if there are interested parties.
Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.

**OFFICE USE ONLY
CERTIFICATION OF FILING**

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.

Wise County of Texas
Decatur, TX United States

Certificate Number:
2016-72096

Date Filed:
06/16/2016

Date Acknowledged:
7-25-16

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

271st District Court

3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.

MQ081081
2) Diamante writing machine Protection Plans

4	Name of Interested Party	City, State, Country (place of business)	Nature of Interest (check applicable)	
			Controlling	Intermediary

5 Check only if there is NO interested Party.

6 AFFIDAVIT I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.



AFFIX NOTARY STAMP / SEAL ABOVE

Kimberly Quatro
Signature of authorized agent of contracting business entity

Sworn to and subscribed before me, by the said Kimberly Quatro this the 16th day of June, 20 16, to certify which, witness my hand and seal of office.

Lisa Balderstone Lisa Balderstone Notary
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath