



### FULCRUM ORDER AND SOFTWARE AS A SERVICE AGREEMENT

Exhibit C  
SOW Form

This Statement of Work Number \_ is dated as of \_\_\_\_\_, 202\_ (the "SOW Effective Date") and is entered by and between Spatial Networks, Inc., a Delaware corporation ("SNI") and the customer identified below ("Customer").

Statement of Work

This SOW is subject to the Terms that were attached to the Initial Order. Capitalized terms not defined in this SOW have the respective meanings set forth in the Terms.

**Party Information**

Spatial Networks, Inc. 360 Central Ave Ste 200 Saint Petersburg FL 33701-3892 USA <a href="mailto:billing@fulcrumapp.com">billing@fulcrumapp.com</a>	Customer Name: Customer Address:  E-mail address: Entity type/jurisdiction: [Delaware corporation]
--	--

**Contact Information**

<b>SNI Contact:</b>		<b>Customer Contact:</b>	
Contact Name:		Contact Name:	
Contact Title:		Contact Title:	
Contact Email:		Contact Email:	
Contact Phone:		Contact Phone:	

Professional Services to be provided are:

Timelines:

The rates for Professional Services Fees are as set forth below:

Hours of Services:

Professional Services will be provided during SNI’s standard business hours of 8 am through 5 pm, Eastern Time, Monday through Friday, excluding SNI’s standard holidays. In the event that Customer requests any Professional Services be performed outside of the foregoing hours, on any Saturday or Sunday or on any SNI holiday (any such time, "Non-Standard Hours"), the Professional Services Fees set forth above shall be multiplied by one hundred fifty percent (150%); provided that if Customer



## FULCRUM ORDER AND SOFTWARE AS A SERVICE AGREEMENT

has purchased a Block, Non-Standard Hours shall be deducted from such Block at a rate of one and a half (1.5) hours per hour worked during any Non-Standard Hours.

Assumptions:

1. Customer reasonably cooperates with SNI, including regarding information about Customer's environment.
2. Customer meets timelines that are agreed to by the Parties

This Statement of Work is hereby accepted and agreed to by duly authorized representatives of SNI and Customer, effective as of the SOW Effective Date.

**CUSTOMER:**

\_\_\_\_\_

By: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

**SNI:**

SPATIAL NETWORKS, INC.

By: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_