

**Payment Schedule**

to

**Contract Number PSC/[XXXXXX]**

for

**INH EDE Quality Assurance**

**Consulting Services**

[Vendor] is authorized to provide the Services under Contract PSC/[XXXXXX] at the Prices set forth hereunder in APPENDIX A, as incorporated into Contract PSC/[XXXXXX].

[Vendor] is authorized to provide Quality Assurance consulting services for the Information Networking Hub Expedited Data Exchange project for the Administrative Office of the Courts, Information Services Division

As provided in EXHIBIT E of ACQ-2015-1218-RFQQ, the following table provides for the guaranteed pricing authorized under PSC/[XXXXXX]. No price increases will be allowed through any term of Contract PSC/[XXXXXX].

**Pricing Table**

<b>Contract Term</b>	<b>Annual Fixed Fee</b>
Year 1	[\$XX,XXX.XX]
Year 2	[\$XX,XXX.XX]
Year 3	[\$XX,XXX.XX]
Year 4	[\$XX,XXX.XX]
Year 5	[\$XX,XXX.XX]

Under any term of PSC [XXXXXX], the annual fixed fee will be payable to Vendor as a pro-rated fee based on twelve (12) months at a rate of [\$XX,XXX.XX] per month. Additional invoice information is available under Section XX under Contract PSC/[XXXXXX].