# Exhibit A Quotation of Service Fremont-II Colocation Facility 48233 Warm Springs Boulevard, Fremont CA 94539

## **Hurricane Electric**

760 Mission Court Fremont, CA 94539

Order Type: X

Date: 09/12/11

**Prepared for:** Pogoseat, Inc. **Primary Contact:** Evan Owens

Term: 3 years New

Upgrade Other (describe) Prepared by: J'Nae Zwaschka for Matt Leber Phone: 510-580-4193 Fax: 512-267-2779

**New Contract** 

Service Set-Up Charges			
Description of Services	Quantity	Unit Price	Extended Price
Full Cabinet one time set-up fee	1	\$500	\$500
Total One-Time Set-Up Charges			\$500

### **Monthly Service Rates**

Description of Services	Quantity	<b>Unit Price</b>	<b>Extended Price</b>
100Mbps 100 Base T Internet Bandwidth Port	100 Mbps	\$1 /Mbps	\$100
Colocation Space (Full 7' Locking Cabinet)	1 Full	\$500	\$500
Monthly Recurring Service Charges			\$600

### **Additional Terms**

# This Port is a Full Flat Rate 100Mbps 100 Base T Internet Bandwidth Connection.

Customer request of more than 64 IPv4 IP addresses will cost \$1/month per IPv4 IP address. Address requests are subject to customer providing proper justification according to ARIN guidelines.

#### Special good if ordered within 30 days.

Initial Payment	Set-up	Monthly Service Charges		Total*	
Includes	\$500		\$600	\$1,100	
*payable upon signing					
Authorization					
Client Signature		Date	Company		

Name & Title (please print)

Contact email

#### **Terms & Conditions**

*Quotation of Services is not binding without an approved Internet Services and Co-Location Agreement. This Quotation of Services is valid for thirty (30) days. Services and prices subject to change without notice. This Quotation of Services is confidential information.* 

# **Payment Information**

Check #		(attached)		
Purchase Order #		(attached)		
Credit Card (circle one)	Visa	Master Card	AmEx	
Other (describe):				
For Credit Ca Accou	rd Orders: nt Number:			
Expi	ration Date:			
		· •	the back of VISA and M/C Cards) (CV the front of American Express Card)	C Code)
Nar	ne on Card:			
Billin	ng Address:			
	Signature:			
Com	pany Name:			
Inv	oice Email:			
Ple	ase CHECK	the box below that r	epresents which services you will be using:	
	•		lectric Internet Services to charge thly basis, for services rendered.	
	-	card above one-time	lectric Internet Services to charge only, for services rendered, in the . Please invoice after initial payment.	