

Sales Contact Information DEAN; SHAUN 715-720-2000 shaun@com-sys.com

## **eSign Fax Cover Sheet**

To: AT&T Automated Fax Handling Service From:

**Fax:** 877-374-4632 or 877-eSignFax **Total Pages:** 1

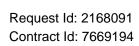
(Excluding Fax Cover Sheet)

Or with Copiers / Scanners w/ email, Send To: esign@att.com

## To sign via fax:

- 1. Sign Only the Signature Page with Signature, Title and Date.
- 2. Fax Only two(2) Pages:
  - a. eSign Fax Cover Page This Page first, then,
  - b. Signature Page with Contract Id: 7669194 (see Picture below)







Contract Id: 7669194



## **Customer Signature Page**

Customer		AT&T				
City of Manitowoc Street Address: 900 QUAY ST City: MANITOWOC State/Province: WI Zip Code: 542204543 Country: US		AT&T Corp.				
Customer Contact (for notices)		AT&T Contact (f	or notices)			
Name: Steven Corbeille Title: Finance Director/Treasurer Street Address: 900 Quay St City: Manitowoc State/Province: WI Zip Code: 54220 Country: US Telephone: 9206866961 Fax: Email: scorbeille@manitowoc.org Customer Account Number or Maste		Street Address: City: State/Province: Zip Code: Country:				
AT&T Solution Provider or Representative Information (if applicable)						
Name: SHAUN DEAN  Agent Street Address: 103 N. Bridge Street	Company Name: COMMUNICATION SYS INTERNATIONAL, INC. City: Chippewa Falls	TEMS	State: WI	Zip Code: 54729	Country: United States	
Telephone: 715-720-2000	Fax:		Email: shaun@com- sys.com	Agent Code: 15328		

Customer signature serves as a signature of each document listed below. Edits to appended documents, as originally presented by AT&T, are rejected. Listed documents become effective upon execution of all documents identified by Contract ID below.

Documents Appended:	Contract IDs:	
MASTER_AGREEMENT click here for details or http://serviceguide.att.com/masteragreement/		
AT&T_MANAGED_INTERNET_SERVICE_PRICING_SCHEDULE_CONTRACT_ID_7669192.pdf	7669192	
AT&T_IP_FLEXIBLE_REACH_PRICING_SCHEDULE_CONTRACT_ID_7669193.pdf	7669193	

If Customer is purchasing Voice Over IP services, the following additional language applies:

The undersigned, on behalf of Customer, acknowledges that Customer has received and understands the advisories concerning the circumstances under which E911 service may not be available, as stated in the AT&T Business Voice over IP Services Service Guide found at <a href="http://serviceguidenew.att.com/sg\_flashPlayerPage/BVOIP">http://serviceguidenew.att.com/sg\_flashPlayerPage/BVOIP</a>. Such circumstances include, but are not limited to, relocation of the end user's CPE, use of a non-native or virtual telephone number, failure in the broadband connection, loss of electrical power, and delays that may occur in updating the Customer's location in the automatic location information database.

Customer
(by its authorized representative)
By:
By.
Name:
Title:
Date: