

**STATEMENT OF WORK #3**  
**BETWEEN**  
**DELTA DENTAL PLAN OF INDIANA, Inc.**  
**AND**  
**BRAVIA SERVICES LLC**

This Statement of Work # 3 and any attachment(s) hereto ("SOW") between Delta Dental Plan of Indiana, Inc. ("Customer") and Bravia Services LLC (Contractor") effective June 2, 2023 ("Agreement").

Scope of Services and Project Deliverables

Now, therefore, in consideration of their mutual promises, Contractor agrees to perform this SOW as follows:

**A. Project Overview**

- 1. Description of Services:** Business administration support services for the HIV Dental Insurance RFP 23-74487.
- 2. SOW Term.** This SOW shall begin January 1,2024, and shall end December 31 ,2029.
- 3. Work Location.** Work against this SOW shall be performed at the following location: Contractor premises.
- 4. Equipment Resources.** Tools for this engagement (personal computers, phone land lines, office space, etc.) shall be provided by: Contractor
- 5. Responsibilities of Each Party.** Contractor and Customer agree that each party is responsible for fulfilling certain key responsibilities in order to achieve a successful outcome of the SOW. The key responsibilities of each party are detailed as follows:

<u>Customer Responsibilities</u>	<u>Contractor Responsibilities</u>
Provide necessary business administration services requirements for services to be provided.	Provide necessary business administration support as outlined by Customer.

- 6. Key Personnel.** Following is a list of key personnel to be used on this SOW.

<u>Customer Key Personnel</u>	<u>Contractor Key Personnel</u>
JJ Nelson	Douglas Heath

7. **Relevant Documents.** The following relevant documents are incorporated by reference into this SOW and attached as the following exhibits:

Exhibit A: Delta Dental Commitment Letter

Exhibit B:

Exhibit C:

8. **Customer Final Inspection and Acceptance.** Customer shall inspect all Deliverables completed by Contractor under this SOW. Customer must provide written acceptance that the Deliverables have been completed by Contractor as required by Customer under this SOW. If the completed Deliverables have not been accepted by Customer, Contractor agrees to provide all necessary materials and services required at no additional cost to Customer until Customer provides written acceptance.

**B. Payment Terms and Conditions.**

1. **Pricing Schedule.** The cost for such Deliverables shall not exceed \$20,000.00, inclusive of all expenses unless expressly authorized by Customer.
2. **Expenses.** Travel and travel-related expenses against this SOW shall not exceed \$0. Contractor shall only invoice Customer for travel and travel-related expenses which have been authorized by the Customer in advance in writing. There shall be no travel or travel-related expenses for this SOW.
3. **Invoice.** Contractor may tender an invoice upon the Customer's written acceptance of each Deliverable. Customer will pay all invoices submitted in accordance with the terms of this SOW within thirty (30) days of the date of receipt of the invoice.
4. **Acknowledgment.** Contractor acknowledges the following with their signature below:

DELTA DENTAL PLAN OF INDIANA

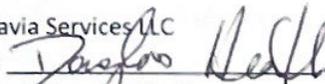
By: \_\_\_\_\_

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

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

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

Bravia Services LLC

By: 

Name: Douglas Heath

Title: President

Date: 6/2/2023