# Maryville City Schools
**520 S Washington Street**
**Maryville, TN 37804**

**BOARD OF EDUCATION** **5:30 PM, MARCH 23, 2026**
**REGULAR MEETING** **MONTGOMERY RIDGE INTERMEDIATE SCHOOL**

**I. CALL TO ORDER** **CHAIR ELDER**
**MOMENT OF SILENCE**
**PLEDGE OF ALLEGIANCE** Bella Morris – seventh grade

**II. UPDATE FROM MONTGOMERY RIDGE INTERMEDIATE SCHOOL** Kevin Myers, Principal

**III. REPORT ON SCOPE** Jennifer Abernathy

**IV. ADOPT AGENDA**

**V. COMMENTS FROM THE PUBLIC ON AGENDA ITEMS**

**VI. CONSENT AGENDA ITEMS**

1. Approve Minutes of February 23, 2026, meeting (Attachment)
2. Ratify Executive Committee approval for Radon Consultants of East Tennessee for mitigation work at Maryville High School - $32,697.85 – Funding Source: Maintenance & Repair-Building (Attachment A1)
3. Ratify Executive Committee approval for Maryville High School Key Club overnight to Gatlinburg, Tennessee for the District Convention – Funding Source: Kiwanis Club of Maryville and Maryville High School Key Club (Attachment A2)
4. Ratify Executive Committee approval for Maryville High School Mock Trial Team overnight to Nashville, Tennessee for competition – Funding Source: Donations (Attachment A3)
5. Ratify Executive Committee approval for Maryville High School Symphonic Band overnight to Nashville, Tennessee – Funding Source: MHS Band Booster and fundraising (Attachment A4)
6. Approve Maryville High School Tennis Team overnight to Hendersonville, Tennessee to compete in Tennis Invitation – Funding Source: parents (Attachment A5)
7. Approve the certification of Adoption for Wellness textbooks (Attachment A6)
8. Approve Maryville Junior High School trip to Dollywood – Funding Source: students (Attachment A7)

**VII. AGENDA**

1. Consider changes to Board Policy 5.303 – Personal and Professional Leave – first reading (Attachment B1)
2. Consider three-year contract renewal from Sidepath for VMWare Cloud Foundation- $48,447.36 -Funding Source: Technology/Software (Attachment B2)
3. Consider iPad purchases from Apple – $1,697,229.50 - Funding Source: Regular Instruction-Equipment (Attachment B3)
4. Consider purchase of textbooks for Wellness from Goodheart-Willcox Publisher- $57,204.50 - Funding Source: Textbooks (Attachment B4)

## VIII. REPORTS FROM DIRECTOR OF SCHOOLS

## IX. RECOGNITION OF STAFF AND STUDENTS

## X. COMMENTS FROM BOARD MEMBERS

## XI. ADJOURN

**Upcoming meeting dates:**
April 20, 2026, 5:30 p.m., Maryville Junior High School
May 18, 2026, 5:30 p.m., Central Office Multi-Purpose Room

# MARYVILLE CITY SCHOOLS

*Mike Winstead*
**Director of Schools**

520 S Washington Street
Maryville, Tennessee 37804

**February 24, 2026**
**Maryville City School Board**
**Executive Committee Meeting**

Approve contract with Radon Consultants of East Tennessee for mitigation work at Maryville High School – Funding Source: Maintenance & Repair – Building (GP)

APPROVED:

Director of Schools _____ Date 02/24/2026

Chair, Board of Education _____ Date 02/24/2026

Maryville Board of Education
Nick Black Candy Morgan Julie Elder Isaac Simerly Bart Stinnett

# ESTIMATE

**Radon Consultants of East Tennessee**
9105 Goldleaf Circle
Knoxville, TN 37923

tnradon@yahoo.com
+1 (865) 806-8984
www.RadonConsultantsofEastTennessee.com

**Bill to**
Joshua Oliver
Maryville City Schools
Maryville High School
825 Lawrence Avenue
Maryville, TN 37803

**Ship to**
Joshua Oliver
Maryville City Schools
Maryville High School
825 Lawrence Avenue
Maryville, TN 37803

**Estimate details**
Estimate no.: 1137
Estimate date: 02/24/2026

| # | Date | Product or service | Description | Qty | Rate | Amount |
|---|---|---|---|---|---|---|
| 1. | | **ASD- Active Sub Slab Depressirization System Installation** | ASD- Active Sub Slab Depressurization System Installation Interior System Option- Classroom S01. Suction point access in adjacent Janitorial Closet. Horizontally core drilled in back of wall under classroom S01 slab. Piping will turn and continue straight up thru the ceiling, fan will be in ceiling attic space. | 1 | $8,500.00 | $8,500.00 |
| 2. | | **ASD- Active Sub Slab Depressirization System Installation** | ASD- Active Sub Slab Depressurization System Installation Interior System Option- Classroom 265. Suction point will be near the left side wall, piping will continue straight up thru the Drama storage room and continue up roof. Fan will be in attic space above the Drama storage room. | 1 | $9,500.00 | $9,500.00 |
| 3. | | **SMD- Sub Membrane Depressurization System Installation** | Exterior SMD with Existing Vapor Barrier- Perforated Piping will be installed under the two crawlspaces under the existing Vapor Barrier. PVC Piping will be secured to the above floor joists in the two crawlspaces and turn and exit behind the HVAC system in the courtyard. Fan will be on the exterior of the building and exhaust will run up to the roofline. | 1 | $10,500.00 | $10,500.00 |
| 4. | | **Electrical Wiring** | Electrical Hook up | 3 | $1,000.00 | $3,000.00 |

| | | | | | |
|---|---|---|---|---|---|
| 5. | **Initial Test Site Set Up** | Test Set Up- Singular Site | 1 | $150.00 | $150.00 |
| 6. | **Radon Air Test** | Air Test Kits Deployed | 4 | $19.95 | $79.80 |
| 7. | **Quality Assurance** | Quality assurance testing of laboratory and test kits | 9 | $19.95 | $179.55 |
| 8. | **Initial Site Pick Up** | Pick Up Kits- Singular Site | 1 | $150.00 | $150.00 |
| 9. | **Air Test Kits Results** | Labs fees & Report | 13 | $14.50 | $188.50 |
| 10. | **Radon Reporting** | Creating Radon Report & OM&M Plan | 1 | $450.00 | $450.00 |
| | | **Total** | | | **$32,697.85** |

**Accepted date** **Accepted by**

# MARYVILLE CITY SCHOOLS

*Mike Winstead*
**Director of Schools**

520 S Washington Street
Maryville, Tennessee 37804

**February 24, 2026**
**Maryville City School Board**
**Executive Committee Meeting**

Approve Maryville High School Key Club overnight to Gatlinburg, Tennessee – Funding Source: Kiwanis Club of Maryville and MHS Key Club

APPROVED:

Director of Schools_____ Date 02/24/2026

Chair, Board of Education_____ Date 02/24/2026

Maryville Board of Education
Nick Black Candy Morgan Julie Elder Isaac Simerly Bart Stinnett

# FIELD TRIP REQUEST FORM

**Maryville City Schools**

School: Maryville High School Grade/Course/Team/Organization: Key Club

Coordinating Teacher(s): Jennifer Sobota & Rachel Minzyk

Trip Date: Friday, March 20 – Sunday, March 22 (During Spring Break) Destination: Gatlinburg, TN

Cost Per Student: $225 Cost Per Adult: $0

Number of Attending Students: 4 Number of Attending Adults: 1 (Parent Chaperone- Annapurna Rayasam)

Departure Time: Friday, March 20 (Check in @ 4 PM) Return Time: Sunday, March 22 (Check out @ 12 PM)

Is this an overnight trip? Yes *overnight trips require board approval

Funding Source: Kiwanis Club of Maryville and MHS Key Club Student payment: $175

*for trips requiring board approval

Is a school nurse required to attend? YES ☐ NO ☒

Transportation: ☐ Walk ☒ Cars ☐ Bus ☐ SPED Bus Buses #_1__

Bus Service Provider: N/A

Trip Justification: To attend the Key Club Kentucky Tennessee District Convention. Members will attend sessions on leadership and service. Additionally, they will run and vote for district office.

Trip Coordinator's Signature: *Jennifer Sobota & Rachel Minzyk*

Principal's Signature: Heather Luther

Director of Schools Signature: [signature] Date: 2/20/26

School Board Approval, as applicable: approved -gh- Date: 2/24/26

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To Be Completed After Approval:

PO#:_____ Please Initial Below:

Cafe Manager: _____ Clinic (Meds): _____ Office (Perm. Slip): _____

Website/Calendar: _____

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**CUT AND RETURN TOP PORTION TO OFFICE FOR APPROVAL**

**COMPLETE BOTTOM HALF & RETURN TO BOOKKEEPER AFTER TRIP**

Grade:_____ Department/Team:

Coordinating Teacher(s):

Field Trip Destination: _____

Final Count of Students Paying: _____

Final Count of Students Waived: _____

Final Count of Adults Paying: _____ Signature of Person Verifying: _____

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**FOR BOOKKEEPER TO COMPLETE:**

Amount Donated: _____

Total Paid by Students: _____

Total Paid by Adults:

**MARYVILLE CITY SCHOOLS**

*Mike Winstead*
**Director of Schools**

520 S Washington Street
Maryville, Tennessee 37804

**February 24, 2026**
**Maryville City School Board**
**Executive Committee Meeting**

Approve Maryville High School Mock Trial Team overnight to Nashville Tennessee – Funding Source: Donations

APPROVED:

Director of Schools _____ Date 02/24/2026

Chair, Board of Education _____ Date 02/24/2026

Maryville Board of Education
Nick Black Candy Morgan Julie Elder Isaac Simerly Bart Stinnett

# FIELD TRIP REQUEST FORM

**Maryville City Schools**

School: Maryville High School

Grade/Course/Team/Organization: MHS Mock Trial

Coordinating Teacher(s): Thad Higgins

Trip Date: March 20- 21

Destination: Nashville- State Competition

Cost Per Student: $0

Cost Per Adult: $0

Number of Attending Students: 10

Number of Attending Adults: 2

Departure Time: TBD

Return Time: 9PM

Is this an overnight trip? Yes

*overnight trips require board approval

Funding Source: Donations

Student payment:

*for trips requiring board approval

Is a school nurse required to attend? YES ☐ NO ☒

Transportation: ☐ Walk ☑ Cars ☐ Bus ☐ SPED Bus School Van

Bus Service Provider:

Trip Justification: To compete in the state mock trial competition

Trip Coordinator's Signature: Thad Higgins

Principal's Signature: Heather Utter

Director of Schools Signature: [signature] Date: 2/20/26

School Board Approval, as applicable: approved -AA- Date: 2/24/26

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To Be Completed After Approval:

PO#:_____ Please Initial Below:

Cafe Manager: _____ Clinic (Meds): _____ Office (Perm. Slip): _____

Website/Calendar: _____

---

**CUT AND RETURN TOP PORTION TO OFFICE FOR APPROVAL**

**COMPLETE BOTTOM HALF & RETURN TO BOOKKEEPER AFTER TRIP**

Grade:_____ Department/Team:

Coordinating Teacher(s):

Field Trip Destination: _____

Final Count of Students Paying: _____

Final Count of Students Waived: _____

Final Count of Adults Paying: _____ Signature of Person Verifying: _____

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**FOR BOOKKEEPER TO COMPLETE:**

Amount Donated: _____

Total Paid by Students: _____

Total Paid by Adults: _____

**MARYVILLE CITY SCHOOLS**

*Mike Winstead*
**Director of Schools**

520 S Washington Street
Maryville, Tennessee 37804

**February 24, 2026**
**Maryville City School Board**
**Executive Committee Meeting**

Approve Maryville High School Symphonic Band overnight to Nashville, Tennessee – Funding Source: MHS Band Booster and fundraising

APPROVED:

Director of Schools _____ Date 02/24/2026

Chair, Board of Education _____ Date 02/24/2026

Maryville Board of Education
Nick Black Candy Morgan Julie Elder Isaac Simerly Bart Stinnett

Booster organization funding

# FIELD TRIP REQUEST FORM
## Maryville City Schools

School: MHS Grade/Course/Team/Organization: 8-12 Symphonic Band
Coordinating Teacher(s): Jonathan Leichman and Sean Copeland
Trip Date: April 10th, 2026 Destination: Gaylord Opryland Resort & Convention Center
Cost Per Student: $200 Cost Per Adult: $200 Total Cost; $50 per student + adults for actual field trip fee
Number of Attending Students: 86 Number of Attending Adults: 15
Departure Time: 8:00 AM Return Time: 12:00 Midnight on 4/11/2026
Is this an overnight trip? ☑ Yes ☐ No *overnight trips require board approval
Funding Source: MHS Band Booster + Fundraising *for trips requiring board approval MCS Funding
Is a school nurse required to attend? ☐ Yes ☑ No
Transportation: ☐ Walk ☐ Cars ☑ Bus ☐ SPED Bus Number of Buses 2 Charter Buses
Bus Service Provider: Rocky Top School Buses, LLC
Trip Justification: Selected and Featured TMEA Conference Performing Ensemble
Trip Coordinator's Signature: [signature]
Principal's Signature: [signature]
Director of Schools Signature: [signature] Date: 2/20/26
School Board Approval, as applicable: approved - jr. Date: 2/24/26

To Be Completed After Approval:
PO#: _____
Please Initial Below:
Cafe Manager: _____ Clinic (Meds): _____ Office (Perm. Slip): _____ Website/Calendar: _____

**CUT AND RETURN TOP PORTION TO OFFICE FOR APPROVAL**
**COMPLETE BOTTOM HALF & RETURN TO BOOKKEEPER AFTER TRIP**

Grade: _____ Department/Team: _____
Coordinating Teacher(s): _____
Field Trip Destination: _____
Final Count of Students Paying: _____
Final Count of Students Waived: _____
Final Count of Adults Paying: _____
Signature of Person Verifying: _____

**FOR BOOKKEEPER TO COMPLETE:**
Amount Donated: _____
Total Paid by Students: _____
Total Paid by Adults: _____

# FIELD TRIP REQUEST FORM

**Maryville City Schools**

School: Maryville High School

Grade/Course/Team/Organization: MHS Tennis

Coordinating Teacher(s): Christian Burns

Trip Date: 4/9/26 - 4/11/26

Destination: Hendersonville, Tennessee

Cost Per Student: $0

Cost Per Adult: $0

Number of Attending Students: 16

Number of Attending Adults: 3

Departure Time: 4/9/26 After School

Return Time: 4/11/26 in the Afternoon

Is this an overnight trip? Yes

*overnight trips require board approval

Funding Source: Tennis

Student payment:

*for trips requiring board approval

Is a school nurse required to attend? YES ___ NO _X_

Transportation: ☐ Walk ☐ XCars ☐ Bus ☐ SPED Bus Buses _

Bus Service Provider: **Players are traveling in their parents car, Players are staying with their parents in hotel rooms, Players / Parents have paid for their own hotel room. Players will need to be excused from classes on 4/10/26.**

Trip Justification: To compete in the Hendersonville High School Tennis Invitational

Trip Coordinator's Signature: Christian Burns

Principal's Signature: _____

Director of Schools Signature: _____ Date: 3/5/26

School Board Approval, as applicable: _____ Date: _____

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To Be Completed After Approval:

PO#:_____ Please Initial Below:

Cafe Manager: _____ Clinic (Meds): _____ Office (Perm. Slip): _____

Website/Calendar: _____

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**CUT AND RETURN TOP PORTION TO OFFICE FOR APPROVAL**

**COMPLETE BOTTOM HALF & RETURN TO BOOKKEEPER AFTER TRIP**

Grade:_____ Department/Team:

Coordinating Teacher(s):

Field Trip Destination: _____

Final Count of Students Paying: _____

Final Count of Students Waived: _____

Final Count of Adults Paying: _____ Signature of Person Verifying: _____

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**FOR BOOKKEEPER TO COMPLETE:**

Amount Donated: _____

Total Paid by Students: _____

Total Paid by Adults: _____

TN Department of Education

**Return by June 30 via email to:**
**academics.instruction@tn.gov**

## Certification of Adoption by Local Board of Education

The MARYVILLE CITY SCHOOLS Board of Education approved the City, County, or Special School District adoption of the textbooks as indicated on the attached Local Adoption Report Abstract during the meeting of the board on 04/20/26.

Month, Day, Year

If the LEA has chosen to adopt any materials not on contract, then we do hereby certify the following:

- ☐ The LEA's unique needs require adopting materials not on the state's official list.
- ☐ The materials adopted by this LEA were screened by a review committee, appointed in accordance with T.C.A. § 49-6-2207 and were determined to be aligned to the standards by evaluating the materials using the screening instrument approved by the Textbook and Instructional Materials Quality Commission.
- ☐ The adoption abstract, this certification of adoption, and the local panels' reviews will be posted to the LEA's website within 30 days of local board approval.
- ☐ All materials adopted by this LEA that are not on contract have been approved by waiver (if any waivers were granted, you must attach them to this form).
- ☐ The LEA agrees to furnish any materials requested by TDOE for review.

4/20/26
**Date**

**Chairman, Board of Education**

3/10/26
**Date**

**Director of Schools**

**ED-2153**

**ED-5099: District Selection from State-Approved Materials List**

Form ED-5099 creates an official record of district adopted materials. In submitting this form, the district is ensuring that the materials selected adhere to the following state statutes governing the selection and adoption of instructional materials in the state of Tennessee: T.C.A. § 49-6-2206 (Prohibition of Common Core) and T.C.A. § 49-6-1019 (Prohibited Content).

**Directions**: To complete this form, fill in your name on row 8 and your district's textbook manager on row 7. Then use the drop down menus to complete the remaining elements.
If you have an approved waiver, use the second tab on this form. Waiver selections must be hand entered. Submit documentation of the waiver approval along with this document.

The adoption list of approved materials is hyperlinked in row 3. This form is to be submitted along with ED-2153 to **Academics.Instruction@tn.gov** by June 30, 2025.

**Summary Adoption List Schedule D Science**

| | |
|---|---|
| **System Name:** | Maryville |
| **State System Number:** | 52 |
| **Intent to Purchase:** | Yes |
| **District Textbook Manager:** | Maria Greene |
| **Submitted By:** | Maria Greene |

| Publisher | Book Title | Grade(s)/Course(s) | District Notes |
|---|---|---|---|
| Goodheart Wilcox | Essential Health HS + Human Dev/Relationships | | |

# FIELD TRIP REQUEST FORM
## Maryville City Schools

School: MJHS Grade/Course/Team/Organization: Academic Deans
Coordinating Teacher(s): Strom, Hollander
Trip Date: May 18 Destination: Dollywood
Cost Per Student: $50 Cost Per Adult: 0
Number of Attending Students: 100-125 Number of Attending Adults: 7
Departure Time: 8:30A Return Time: 7:00PM
Is this an overnight trip? ☐ Yes ☒ No *overnight trips require board approval
Funding Source: Students *for trips requiring board approval
Is a school nurse required to attend? ☐ Yes ☒ No
Transportation: ☐ Walk ☐ Cars ☒ Bus ☐ SPED Bus Number of Buses 2-3
Bus Service Provider: Rocky Top
Trip Justification: Students who have been on the Deans List all Year.
Trip Coordinator's Signature: Brittany Strom
Principal's Signature:
Director of Schools Signature: Date: 3/11/26
School Board Approval, as applicable: Date:

To Be Completed After Approval:
PO#:
Please Initial Below:
Cafe Manager: _____ Clinic (Meds): _____ Office (Perm. Slip): _____ Website/Calendar: _____

CUT AND RETURN TOP PORTION TO OFFICE FOR APPROVAL
COMPLETE BOTTOM HALF & RETURN TO BOOKKEEPER AFTER TRIP

Grade: _____ Department/Team: _____
Coordinating Teacher(s): _____
Field Trip Destination: _____
Final Count of Students Paying: _____
Final Count of Students Waived: _____
Final Count of Adults Paying: _____
Signature of Person Verifying: _____

**FOR BOOKKEEPER TO COMPLETE:**
Amount Donated: _____
Total Paid by Students: _____
Total Paid by Adults: _____

# Maryville City Board of Education

| Monitoring: | Descriptor Term: | Descriptor Code: | Issued Date: |
|---|---|---|---|
| **Review: Biennially, in September** | **Personal and Professional Leave** | **5.303** | **04/20/26** |
| | | Rescinds: **5.303** | Issued: **02/11/19** |

Personal and professional leave shall be granted in accordance with the laws of the State of Tennessee and the rules and regulations of the State Board of Education.

## PERSONAL LEAVE

### Certified Personnel

Certified personnel shall earn two (2) days of personal leave with pay per school year *and authorized to carry over five (5) days from year to year. Any personal leave days remaining above five (5) at the end of a year shall be credited to sick leave.* Any personal leave remaining unused *at separation from employment* ~~the end of a year~~ shall be credited to sick leave.[1]

### Classified Personnel

Classified personnel earn one (1) day personal leave with pay per school year *and authorized to carry over five (5) days from year to year. Any personal leave days remaining above five (5) at the end of a year shall be credited to sick leave.* Any personal leave remaining unused *at separation from employment* ~~the end of a year~~ shall be credited to sick leave.

Personal leave may be taken subject to the prior approval of the immediate supervisor

### Guidelines

Personal leave shall be used for personal reasons. Subject to the following conditions, personal leave may be taken at the discretion of the employee:

1. Except in an emergency, each employee shall give the principal/supervisor at least one day's notice in writing of intent to take leave;

2. *Employees shall give their principal/supervisor two weeks advance notice for personal leave request of more than two consecutive days.*

3. The approval of the Director of Schools shall be required:[2]

    a. If more than ten percent (10%) of the teachers in any given school request its use on the same day;

    b. If requested during any prior established student examination period;

    c. If requested on the day immediately preceding or following a holiday or vacation period;

d. If requested during the first week or last two weeks of the school year;

e. If personal leave is requested for days scheduled for professional development or in-service training, according to a school calendar adopted by the Board prior to the commencement of the school year; or

f. If personal leave is requested for days scheduled for parent-teacher conferences, according to a school calendar adopted by the Board prior to the commencement of the school year.

## PROFESSIONAL LEAVE[3]

Leave from the regular job assignment may be granted for a limited number of days for professional activities. Such activities may include participation in required or recommended professional growth activities, supervision of field trips, or participation in activities as a representative of the System.

*Employees attending activities and events involving their own children do not qualify for professional leave unless they are serving in an official capacity as a supervisor or chaperone.*

Leave requests for participation in meetings sponsored by professional organizations, business and industry, or other employee organizations may be approved at the discretion of the Director of Schools.

Compensation from sources other than the school system for individuals on professional leave shall not exceed reasonable expenses. In the event an individual receives compensation in excess of reasonable expenses, personal leave (or vacation) shall be used or other financial arrangements approved.

Legal References

1. TCA 49-5-711(a); TRR/MS 0520-01-02-.04(3)
2. TCA 49-5-711(c)(1)
3. TCA 49-5-205

Cross References

Short Term Leaves of Absence 5.300

sidepath

# Quotation

22892 Mill Creek Drive
Laguna Hills, CA 92653
Phone (949)748-8700; Fax (949)748-8706
www.sidepath.com

Date: 03/10/26
Quotation #: SIDQ58451
Valid Until: 04/09/26
Prepared By: Dave Reboja
Project ID: SIDPROJECT54734

**Bill To:**

Maryville City Schools
Attn: Danielle Hope
833 Lawrence Avenue
Maryville, TN 37803

Phone: (865) 238-5386
Email: danielle.hope@maryville-schools.org

**Ship To:**

Maryville City Schools
Attn: Danielle Hope
833 Lawrence Avenue
Maryville, TN 37803

Phone: (865) 238-5386
Email: danielle.hope@maryville-schools.org

| Qty | Item Code | Description | Unit Price | Ext. Price |
|---|---|---|---|---|
| **VMware Cloud Foundation (VCF). 3 Years (04/21/2026 to 04/20/2029)** | | | | **62656559** |
| 96 | VCF-CLD-FND-A | Year 1: VMware Cloud Foundation<br>Start Date: 04/21/2026<br>End Date: 04/20/2027 | $168.22 | $16,149.12 |
| 96 | VCF-CLD-FND-A | Year 2: VMware Cloud Foundation<br>Start Date: 04/21/2027<br>End Date: 04/20/2028 | $168.22 | $16,149.12 |
| 96 | VCF-CLD-FND-A | Year 3: VMware Cloud Foundation<br>Start Date: 04/21/2028<br>End Date: 04/20/2029 | $168.22 | $16,149.12 |
| **Payment Schedule** | | | | |
| | | Payment 1: $16,149.12 due Net 30 after invoice date<br>Payment 2: $16,149.12 due 04/21/2027<br>Payment 3: $16,149.12 due 04/21/2028 | | |

Payment Terms from Ship Date: Net 30

Pricing does not include Sales Tax or Shipping/Handling unless specifically stated in quote.

CA Shipments: CA Electronic Waste Recycling (eWaste) Fee will apply to monitors, laptops or tablets.

| Product Total | $48,447.36 |
|---|---|

Unless you have a separate written agreement that specifically applies to this order, your order will be subject to and governed by Sidepath's Purchasing Terms and Conditions, which are located at: www.sidepath.com/terms. The Purchasing Terms and Conditions are incorporated herein by reference and available in hard copy upon your request.

Note: Sidepath will collect sales tax for orders shipped to these states: AZ, CA, GA, HI, MA, NV, NY, NC, TX, VA and WA. For orders shipped outside of these states, it will be the customer's responsibility to report the tax as Sales & Use Tax.

Please contact me if I can be of further assistance.

**THANK YOU FOR YOUR BUSINESS!**

Accepted by:_____ Title:_____ Date:_____ PO:_____

If you have any questions regarding this quotation, please contact:
Guillermo Amaya | (714)904-7161 | guillermo@sidepath.com

*This document is proprietary and confidential and is intended solely for the recipient.*
*No part of this document may be disclosed in any manner to a third party who is not affiliated with the recipient.*

# Apple Inc. Education Price Quote

**Customer:**
Andy Lombardo
MARYVILLE CITY SCHOOLS
Email: andy.lombardo@maryville-schools.org

**Apple Inc:**
Jean Hesson
Email: jean_hesson@apple.com

**Apple Quote:**
2214242838

**Quote Date:**
March 02, 2026

**Quote Valid Until:**
March 22, 2026

**Quote Comments:**

| Item # | Details | Qty | Unit List Price | Extended List Price |
|---|---|---|---|---|
| 1 | **iPad Wi-Fi 128GB-Silver (Packaged in a 10-pack), Logitech Rugged Combo 4 Touch Case, w/ 4YR AppleCare+ for Schools (no service fees)**<br>Part Number: BCU73LL/A<br><br>**iPad Wi-Fi 128GB - Silver (Packaged in a 10-pack)**<br>Part Number: MD6L4LL/A<br>Quantity: 3210<br><br>**4-Year AppleCare+ for Schools - iPad (no service fees)**<br>Part Number: S7832LL/A<br>Quantity: 3210<br><br>**Logitech Rugged Combo 4 Touch Case with Integrated Smart Connector Keyboard for iPad (A16) - Blue**<br>Part Number: HQ6P2ZM/A<br>Quantity: 3210 | 321 | $5,129.50 | $1,646,569.50 |
| 2 | **Apple TV 4K Wi-Fi + Ethernet with 128GB storage**<br>Part Number: MN893LL/A | 340 | $149.00 | $50,660.00 |

| | |
|---|---|
| **Education List Price Total** | **$1,697,229.50** |
| Additional Tax | $0.00 |
| Estimated Tax | $0.00 |
| Total Tax | $0.00 |
| **Extended Total Price*** | **$1,697,229.50** |

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Goodheart-Willcox Publisher
18604 West Creek Drive • Tinley Park, IL 60477-6243
Phone: 1.800.323.0440 Fax: 1.888.409.3900
www.g-w.com • custserv@g-w.com

# QUOTE

**Quote No.** #QT15012751
**Quote Date** 2/27/2026

**Bill To**
MARYVILLE CITY SCHOOL DISTRICT
833 LAWRENCE AVE
MARYVILLE TN 37803-4857
United States

**Ship To**
HEATHER LEDBETTER
MARYVILLE CITY SCHOOL DISTRICT
833 LAWRENCE AVE
MARYVILLE TN 37803-4857
United States

| Customer Account No. | Date | Expires | Sales Rep | Shipping Method |
|---|---|---|---|---|
| 0003780302 | 2/27/2026 | 10/31/2026 | Mandi Gaskin | FedEx Ground |

| Quantity | Item | List Price | Disc. % | Net Rate | Amount |
|---|---|---|---|---|---|
| 450 | **9798897373932 CCL ESSENTIAL HEALTH HS 8YR EM (2025)** | $152.60 | 25% | $114.45 | $51,502.50 |
| 60 | **9798891183285 BDL ESS HEAL HS/HUMAN DEV REL TXT(2025)** | $122.48 | 25% | $91.86 | $5,511.60 |
| 20 | **9798897373956 OIR ESSENTIAL HEALTH HS 8YR EM (2025)** Complimentary teacher resources with purchase ($16k value) | $928.00 | 100% | $0.00 | $0.00 |
| 20 | **9798891183506 OIR HUMAN DEVELOP REL HS 6YR EM (2025)** | $400.00 | 100% | $0.00 | $0.00 |

**Shipping Charges are good for 30 days from date of quote.**

**Free items available only with purchase of student items direct from Goodheart-Willcox.**

**Notes:**

| | |
|---|---|
| **Subtotal** | $57,014.10 |
| **Shipping Cost** | $190.40 |
| **Estimated Tax** | $0.00 |
| **Total** | $57,204.50 |

**Please send tax exemption certificates to taxcert@g-w.com.**

BDL Bundle
BSK BrightSpace Packet
BSL BrightSpace License
CCL Common Cartridge License
CCK Common Cartridge Packet
CUR Curriculum Center
EBI Ebook Instructor
EBS Ebook Student
LM Lab Manual
OG Observation Guide
OIR Online Instructor Resource
OLS Online Learning Suite
OSC Online Student Center
OT Online Textbook
PP PowerPoint
RCD Instructor's Resource CD
SDG Software Design Guide
SG Study Guide
SHP Shop Manual
TAW Teacher's Annotated Workbook
TE Teacher's Edition
TSE Exam View Test Software
TXT Textbook
WB Workbook

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