









Project Document

Actual Start Date:	01-01-2024
Project ID#:	6

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Client Name: Quickbase

Project Name: Maron Residence Status: In-Progress

Sample of Project and Related Tasks

		Sample of Pro	Ject and	Relateu Ta	2K2			
	Task	Assign To	Milestone	Start	Project Phase	Priority	# of Hours Allocating	# of Activities
Not St	arted							
	Review Meeting with Team	Chris Baker			Planning	High	10	1
	Post Webinar Review	Chris Baker			Planning	High	10	0
	Beta Testing	Chris Baker			Planning	Medium		0
	Regression Testing	Brian Boylan				Medium	15	1
	User Acceptance Testing	Brian Boylan				Medium	10	0
f	Implementation	Brian Boylan				Medium	5	0
4	Post Implementation Review	Brian Boylan				Medium	5	0
				TOTAL DAYS:			55	
In-Pro	gress							
4	Webinar	Chris Baker		01-08-2024	Post Project	High	10	3
	Email Recording	Christine Boylan		01-12-2024	Design	High	225	0





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	Task	Assign To	Milestone	Start	Project Phase	Priority	# of Hours Allocating	# of Activities
	Client Requirements Review	Christine Boylan		01-12-2024	Design	High	225	0
	Scheduling Calls	Christine Boylan		01-12-2024	Design	High	225	0
	Scheduling Calls 2	Christine Boylan		01-12-2024	Design	High	225	0
1	Kick Off Meeting	Christine Boylan		01-12-2024	Design	High	225	0
	Scheduling Calls3	Christine Boylan		01-12-2024	Design	High	225	0
				TOTAL DAYS:			1,360	
Comp	leted							
	Prepare Demo info	Chris Baker		01-01-2024	Planning	High	10	0
47%	Schedule Webinar	Chris Baker		01-01-2024	Planning	High	10	0
	Practice Session	Chris Baker		01-01-2024	Planning	High	10	2
	Requirements Gathering	Chris Baker		01-01-2024	Planning	High	10	0
	Project Design	Chris Baker		01-01-2024	Planning	High	10	0
	Project Quote	Chris Baker		01-02-2024	Planning	High	10	0





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Task	Assign To	Milestone	Start	Project Phase			# of Activities
Project Approval	Chris Baker		01-03-2024	Planning	High	10	0
			TOTAL DAYS:			70	
			GRAND TOTAL			1,485	

575

Approved By



3505 Veterans Highway Suite O Ronkonkoma, NY 11779 (631) 617-5060

Credit Card Recurring Payment Authorization Form

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4655 1/2 Hollywood Blvd, Los Angeles, California 90027

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You authorize regularly scheduled charges to your Visa, MasterCard, American Express or Discover card. You will be charged each billing period for the total amount due for that period.

Please complete the informat	ion below:
I	authorize Juiced Technologies, Inc. to charge my credit card indicated
below on or around the 1st of each r	month for payment of my monthly hosted services.
Billing Address	
City, State, Zip	
Phone#	_
Email	<u> </u>
Credit Card Type:	
Cardholder Name	
Card Number	
Expiration Date	
CVV (3 digit number on back of Visa	/MC, 4 digits on front of AMEX)
Signature	Date

I authorize the above named business to charge the credit card indicated in this authorization form according to the terms outlined above. If the above noted payment dates fall on a weekend or holiday, I understand that the payments may be executed on the next business day. I understand that this authorization will remain in effect until I cancel it in writing, and I agree to notify the business in writing of any changes in my account information or termination of this authorization at least 15 days prior to the next billing date. This payment authorization is for the type of bill indicated above. I certify that I am an authorized user of this credit card and that I will not dispute the scheduled payments with my credit card company provided the transactions correspond to the terms indicated in this authorization form.