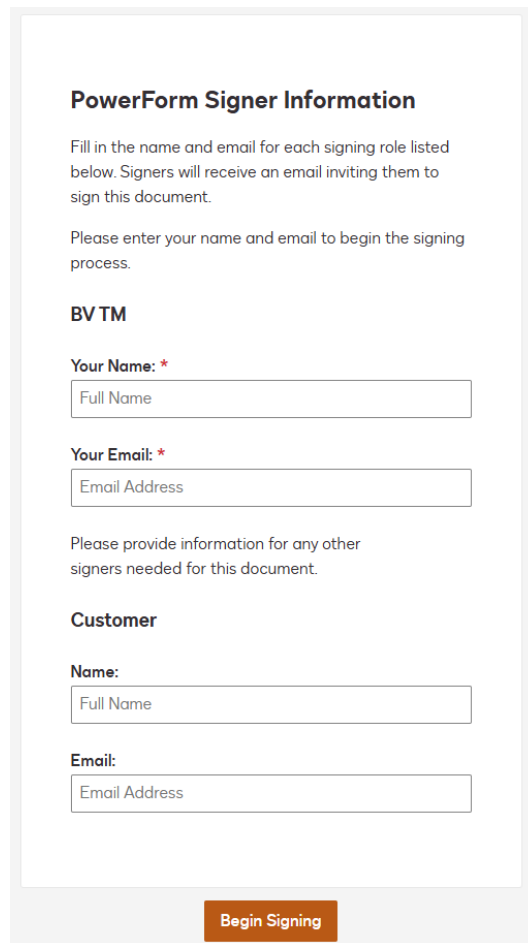


DocuSign Process for PNS Quote (List Price)

To initiate a quote, click the PowerForm link on Bionet.

<https://na2.docusign.net/Member/PowerFormSigning.aspx?PowerFormId=53aa3754-d919-4730-9312-ef55685121e7&env=na2&acct=99c9a173-6504-4e9f-a6b1-92a3713cdcd8&v=2>

In the PowerForm landing page, enter your name and email address and the name and email address of your customer contact who will be receiving the quote. Then click the “Begin Signing” button.



PowerForm Signer Information

Fill in the name and email for each signing role listed below. Signers will receive an email inviting them to sign this document.

Please enter your name and email to begin the signing process.

BV TM

Your Name: *

Full Name

Your Email: *

Email Address

Please provide information for any other signers needed for this document.

Customer

Name:

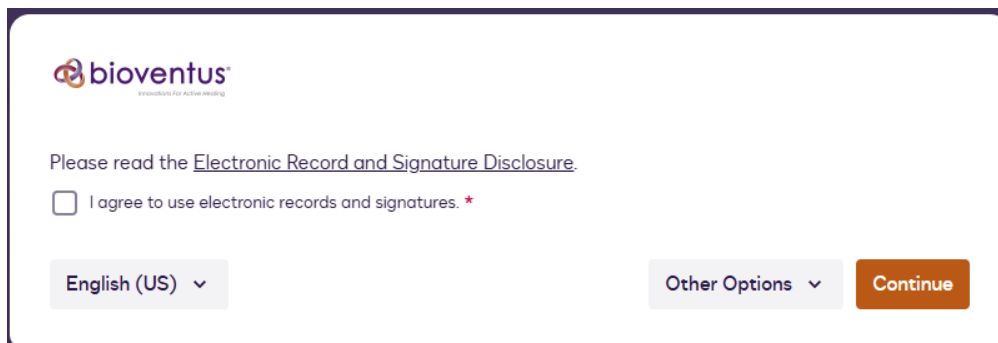
Full Name

Email:

Email Address

Begin Signing

You may be prompted to agree to use electronic records and signatures – please click the checkbox and then the Continue button.



 **bioventus**
Innovations For Active Healing

Please read the [Electronic Record and Signature Disclosure](#).

☐ I agree to use electronic records and signatures. *

English (US) ▾

Other Options ▾

Continue

Once the Quote document appears, you will need to fill in the name of the Customer (this is the facility name, not an individual contact's name) and the facility address. The Customer will be able to edit both fields if any corrections are needed.

The customer contact name is already populated with the contact's name you filled in on the PowerForm landing page.

Lastly, fill in the price for the implant procedure pack. Only values ranging from 15500 and 17000 will be accepted. Do not include a dollar sign, comma, or decimal. The dollar sign is already on the document, and DocuSign will take care of formatting the number you enter.

Next

DocuSign Envelope ID: 3CA6A4EC-E382-4228-A51A-BED8E4CD4CAC



Pricing Quote

Quote Effective Date:

Customer Information	
Customer:	
(additional locations listed on Attachment 1)	
Customer Address:	
Customer Contact Name:	Jill TM

Terms																	
This Pricing Quote ("Quote") sets forth the preliminary understanding between Bioventus LLC ("Bioventus") and the above-named customer ("Customer") regarding the extension of pricing for certain products.																	
1. Pricing Offer. Pricing provided herein is valid for sixty (60) days from the Quote Effective Date. After such sixty (60) day period, Bioventus has no obligation to honor the pricing herein. This Quote does not create any obligation on the part of the Customer to purchase.																	
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TM-1002	TalisMann Implant Procedure Pack with Spares	\$20,000.00	1 unit														

Once all three fields are populated with valid data, you will see a finish button appear in the upper right corner. Click Finish to complete your role in the workflow.

Next

Finish



Pricing Quote

Quote Effective Date:

Customer Information	
Customer:	ABC Surgery Center
(additional locations listed on Attachment 1)	
Customer Address:	123 Any St., Durham, NC 27709
Customer Contact Name:	Jill Vazquez

Terms																	
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2. **Purchase Terms.** All sales are final, not available for return, and subject to Bioventus' Standard Terms and Conditions

Next, the National Sales Director will receive a DocuSign email notification to review and sign the envelope. The NSD can make any necessary corrections to the customer's name, address, or the price before signing the document.

Start

DocuSign Envelope ID: 3CA6A4EC-E382-4228-A51A-BED8E4CD4CAC



Pricing Quote

Quote Effective Date:

Customer Information	
Customer:	ABC Surgery Center (additional locations listed on Attachment 1)
Customer Address:	123 Any St, Durham, NC, 27703
Customer Contact Name:	Jill TM

Terms																																					
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Date:	6/29/2026	Date:																																			

Lastly, the customer contact person will receive a DocuSign email notification to review the envelope. Customer contact will be able to make any necessary changes to the customer's name and address but cannot change the price.

Start

DocuSign Envelope ID: 3CAB4AEC-E382-4228-A51A-BED8E4CD4CAC



Pricing Quote

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Please indicate your acknowledgment and acceptance of the terms outlined in this Quote by signing below.

Bioventus

Signature: (DocuSigned by: Jill Vazquez)
 Name: Jill Vazquez
 Title: test
 Date: 6/29/2026

Customer

Approve

Signature: _____
 Name: _____
 Title: _____
 Date: _____

Bioventus LLC

The customer contact can upload a list of additional locations if applicable and will click the “Approve” button to complete their role in the workflow. Customer contact is not required to sign.

Please indicate your acknowledgment and acceptance of the terms outlined in this Quote by signing below.

Bioventus	Customer
Signature: 	Signature: _____
Name: Jill Vazquez	Name: _____
Title: test	Title: _____
Date: 6/29/2026	Date: _____

Bioventus LLC
PNS Quote v. Nov2025

1 of 2

Once the workflow is complete, all participants receive a DocuSign email notification indicating the envelope is complete and all can download, save, or print the document.

The business process owner for the Quote should download/save a copy of the accepted quote to a repository outside of DocuSign.