Exhibit 704.5

Balance Autism Children's Services

Financial Policy and Agreement

Person Served	███████████ For student confidentiality, all identifying information has been redacted
Responsible Payor	Linn Mar Community School District
Contact Person	Leisa Breitfelder, ██████████ Services Director

SERVICES:

Balance Autism will provide Behavioral Intervention Services to ██████████ on behalf of Linn Mar Community School District. Services are for the 2019-2020 school year or until a decision to change placement or services being delivered have been determined by the IEP team or Balance Autism. These services will directly address ████ learning, academic and behavioral goals as dictated by the IEP team. Balance Autism will provide a certified Behavior Analyst to oversee ██████ educational programs. This Behavior Analyst will coordinate efforts with the local district and Grant Wood AEA.   Appropriate data towards goal mastery will be collected and entered into the Web IEP. In addition the following stipulations exist.

1. Sessions will begin with 2.5 hours per day for 3 days per week, and may be extended with notice to the school and AEA when ██████████ has demonstrated ██ can comply with instruction and remain safe. A transition plan to return to school or other appropriate placement will be developed in collaboration with the AEA and School team.

2. Transportation for any community instruction provided outside of the home or school setting will be provided by Balance Autism staff. Transportation costs incurred by Balance Autism will be charged to Linn Mar Community School District at the allowable Federal mileage reimbursement rate of $.575 cents per mile. Employee time for transportation will not be billed to Linn Mar.

3. Balance Autism will provide 1-2 trained staff with ██████ at all times. If ██████ behavior allows for a reduction in staff, the hourly rate will be reduced by $50.00

4. Services at Balance Autism will be provided on all days that Linn Mar is in session or has scheduled holiday or teacher work days except for days in which the Clinic is closed. When Linn Mar is cancelled due to road conditions because of weather, no services will be provided. Balance Autism will track all days of attendance, including those that are not school calendar days. Extended school year services and schedule will be decided by IEP team and Balance Autism.

5. Services will be billed to Linn Mar Schools at a rate of $185 per hour or $46.25 per 15 minute unit of direct service for two trained staff and $135 per hour or $33.75 per 15 minute unit of direct service for

one staff. Other services that are considered included in this rate are up to 10% of total hours of service for treatment planning and program oversight by the Teacher or Behavior Analyst, and up to 10% for collaboration with school and AEA personnel. Any additional training and collaboration will be billed at the consultation rate of $100.00 per hour.

6. Balance Autism will conduct a thorough assessment which may include a Functional Behavior Assessment (FBS) and/or Assessment of Functional Living Skills (AFLS) to determine baseline levels and allow for future programming. Rate for this assessment will be at our consultation rate of $100 per hour with a maximum of 8 hours.

BILLING/PAYMENTS:
Invoices will be sent directly to the school at:

> Leisa Breitfelder, Executive Director of Student Services
> Linn Mar Community Schools
> 2999 N. Tenth Street
> Marion, IA 52302
> Phone 310-447-3000

Unless other arrangements are approved in writing, the balance is due and payable upon receipt and is past due if payment has not reached us within 30 days of statement date. Services may be discontinued due to non-payment.

FINANCE CHARGE A finance charge will be imposed on any unpaid balance that has not been paid within 30 days of statement date. The finance charge will be computed at the rate of one and a half percent (1.5%) per month or an annual percentage rate of nineteen (19%) percent. The financed charge is computed by applying the period rate to the "overdue balance" of your account.

_____   _____
School Personnel Signature   Date

_____   _____
Balance Autism Personnel Signature   Date