Maintenance Agreement Invoice

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Account No.	
P.O. / Cust. Order No.	
Contract No.	AZ 2293

Bill To:

Name	GILA COUNTY ATTORNEY'S OFFICE				
Address	1400 E. ASH				
City	GLOBE	State	AZ	Zip	85501
Telephone	928-425-3231	Contact	DONNA		

Location:

Name	PAYSON OFFICE				
Address	714 S. BEELINE				
City	PAYSON	State	AZ	Zip	58841
Telephone	928-474-4068	Contact	KRISTIN		

Date	Service Zone	MC Start	MC Expire	Beg Meter	End Meter	Copies Used
11/15/12	2	8/20/12	8/19/13	130591		

Plan	Manufacturer	Model	Serial No.	Allow. Copies	Exc. Copies Chg	Unit Price
1	KONICA/MINOLTA	BH 423	A1UDO11001908	90,000	.0083	$747.00
		Accessories				
		FS-529	ADU7WY2006702			
		PC-409	A1V4W13002743			
				Ex. Copies Charge Where Applicable		
					Subtotal	$747.00
					Total Tax	
					Invoice TTL	$747.00

Exclusions Or Special Instructions:

INCLUDES PARTS, LABOR AND A DRUM , IF NEEDED. DOES INCLUDE CONSUMMABLE SUPPLIES. DOES NOT INCLUDE PAPER OR STAPLES. DOES NOT COVER ABUSE OR MISUSE.

Customer agrees to purchase and ICS agrees to provide maintenance service for the equipment identified above, in accordance with the terms and conditions of this contract. No terms or conditions, expressed or implied, are authorized unless they appear on original of this contract, signed by the Customer and ICS manager.

THE ADDITIONAL TERMS AND CONDITIONS OF THE MAINTAINANCE AGREEMENT ARE INCORPORATED IN AND MADE PART OF THIS CONTRACT, NO CHANGE, ALTERATION OR AMENDMENT OF THE TERMS OR CONDITIONS OF THIS CONTRACT ARE AUTHORIZED OR EFFECTIVE UNLESS THEY HAVE BEEN AGREED TO IN WRITING BY AN OFFICER OF ICS. NO COURSE OF DEALING OR OTHER CONDUCT OR CUSTOM SHALL CONSTITUTE AN AMENDMENT TO THE TERMS HEREOF NOR ALTER OR VARY THE TERMS OF THIS CONTRACT.

THIS CONTRACT IS AUTOMATICALLY RENEWABLE UNLESS CANCELLED BY EITHER PARTY.
THIS CONTRACT IS DUE AND PAYABLE PRIOR TO COVERAGE DATES.

☐ Yes, I have received a copy of the terms and conditions of this Maintenance Agreement.

ICS Representative Signature: Kathleen Barney			Customer Name: GILA COUNTY ATTORNEY'S OFFICE	
Printed Signature Name: KATHLEEN BARNEY	Empl. # 1020	Terr. #	By: (Authorized Agent): Don E. McDaniel Jr.	Date: 11/28/12
Branch Office Address: P.O. BOX 730			Printed Signature Name: Don E. McDaniel Jr.,	Title: County Manager
City: THATCHER	State: AZ	Zip: 85552		

☐ I do not wish to purchase a Maintenance Agreement at this time.