



KONICA MINOLTA

Mohave Educational Services Cooperative Contract 10i-KMBS-0127

KMBS CPC Service & Maintenance Agreement

Sold To: (legal name)			Ship To:		
Name: <u>Gila County</u>	Account Number: _____	Name: <u>Gila County</u>	Account Number: _____		
Address Line 1: _____		Address Line 1: _____			
Address Line 2: <u>Community Development</u>		Address Line 2: _____			
Street Address: <u>1400 E. Ash Street</u>		Street Address: _____			
City: <u>Globe</u>	State: <u>Az</u>	Zip: <u>85501</u>	City: <u>Globe</u>	State: <u>Az</u>	Zip: <u>85501</u>

Tax Exemption <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Certificate required)	Tax Exemption Number: _____
PO Required <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (Copy required)	PO Number: _____ PO Expiration Date: _____

Advantage CPC Maintenance Plan

Cost Per Copy	<input checked="" type="checkbox"/> With Supplies <input type="checkbox"/> Without Supplies - Purchased Separately	Effective Date: <u>90 Days from Install</u>
Billing for CPC contract:	<input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Annually	Contract Term (Months): <input type="checkbox"/> 12 <input type="checkbox"/> 24 <input checked="" type="checkbox"/> 36 <input type="checkbox"/> 48 <input type="checkbox"/> 60
Overages billed:	<input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Annually	

Product Covered Under Contract:

Item	Model Description	Serial Number	Type	Start Meter Read	Monthly Min Volume	CPC	Monthly Min \$	Overage CPC
1	BizHub C368		C			\$ 0.03770		\$ 0.03770
			B/W	Flat Rate - Unlimited			\$ 30.67	
2			C				368.04 Annual	
			B/W					
3			C					
			B/W					
4			C					
			B/W					
5			C					
			B/W					
6			C					
			B/W					

Comments

This agreement incorporates Schedule A-1 KMBS Modified Standard Maintenance Terms and Conditions for Mohave Educational Services Cooperative (MESCC), a copy of which is available upon request. Not binding on KMBS until signed by KMBS Manager.

Customer Name: <u>Don E. McDaniel, Jr.</u>	KMBS Representative: <u>[Signature]</u>	Date: <u>3-30-16</u>
Signature: <u>[Signature]</u>	KMBS Manager: _____	Date: _____
Title: <u>County Manager</u>		

FOR INTERNAL USE

<input checked="" type="checkbox"/> New Customer	<input checked="" type="checkbox"/> Maintenance w/ Equipment Order	<input type="checkbox"/> Maintenance Only	<input checked="" type="checkbox"/> Maintenance Billed by KMBS	<input type="checkbox"/> Maintenance Billed by Lease Company	<input type="checkbox"/> Dealer Serviced
PE #: _____	Agreement #: _____	Customer Code 1: <u>Mohave Contract</u>			
Promotion #: _____	Price Plan #: _____	Customer Code 2: _____			
	Subfleet #: _____	Customer Code 3: _____			

Key Operator Contact: _____	Phone: _____	Email Addr: _____
Meter Read Contact: _____	Phone: _____	Email Addr: _____
Accounts Payable Contact: _____	Phone: _____	Email Addr: _____

Special Instructions:	Additional Documents Attached:
	<input checked="" type="checkbox"/> Price Exception <input type="checkbox"/> Tax Exempt Certificate
	<input checked="" type="checkbox"/> Purchase Order <input type="checkbox"/> Credit Application

	Sales Rep Number	Sales Rep Name (Please Print)	Sales Rep Email Address
Originating:		Robert Barney	robbarney@cableone.net
Order Taking:			
Servicing:			

Contract Processed: Windsor, CT Branch Interstate Copy Shop (Branch Name)