



**SCHEDULE TO MASTER AGREEMENT
(Imaging Equipment)**

MASTER AGREEMENT NO. _____

APPLICATION NO. _____

AGREEMENT/SCHEDULE NO. _____

CUSTOMER ("YOU" or "YOUR")

FULL LEGAL NAME: City Of Grand Junction

ADDRESS: 250 North 6th Street, Grand Junction, CO 81501

MASTER AGREEMENT

REFERS TO THE AGREEMENT BETWEEN CUSTOMER AND OWNER IDENTIFIED IN OWNER'S RECORDS BY THE MASTER AGREEMENT NO. ABOVE.

DESCRIPTION OF EQUIPMENT, IMAGE ALLOWANCE AND EXCESS CHARGES

QTY	TYPE, MAKE, MODEL NUMBER, AND INCLUDED ACCESSORIES	NOT FINANCED UNDER THIS AGREEMENT	BEGINNING METER READING		MONTHLY IMAGE ALLOWANCE		EXCESS PER IMAGE CHARGE (PLUS TAX)	
			B&W	COLOR	B&W	COLOR	B&W	COLOR
1	Ricoh MPC2004EX-RS				0	0	\$0.00750	\$0.06500
1	Ricoh Cablnet Type F							
1	Ricoh Fax Option Type M19							
TOTAL CONSOLIDATED MONTHLY IMAGE ALLOWANCE AND EXCESS PER IMAGE CHARGES (IF CONSOLIDATED)								

EQUIPMENT LOCATION:

SEE ATTACHED EQUIPMENT OR GROUP BILLING SCHEDULE

METER FREQUENCY: Monthly

* THE CONSOLIDATED IMAGE ALLOWANCE AND EXCESS PER IMAGE AMOUNTS SHOWN ABOVE (OR ON THE ATTACHED EQUIPMENT OR GROUP BILLING SCHEDULE), IF ANY, APPLIES TO (CHECK ONE): EQUIPMENT INSTALLED UNDER THIS SCHEDULE ONLY, OR EQUIPMENT INSTALLED UNDER THIS SCHEDULE, TOGETHER WITH EQUIPMENT LISTED ON ANY OTHER APPLICABLE SCHEDULES TO MASTER AGREEMENT (FOR IMAGING EQUIPMENT) (I.E., AN AGGREGATE CONSOLIDATION). IF NO IMAGE ALLOWANCE OR EXCESS PER IMAGE AMOUNTS ARE SHOWN ABOVE (OR ON THE ATTACHED EQUIPMENT OR GROUP BILLING SCHEDULE), IMAGES MADE ON THE EQUIPMENT UNDER THIS SCHEDULE WILL BE INCLUDED IN DETERMINING YOUR IMAGE AND OVERAGE CHARGES UNDER THE APPLICABLE PRIOR SCHEDULE TO MASTER AGREEMENT.

TERM (CHECK ONE TERM OPTION)

TERM: THE END OF THE TERM OF THIS SCHEDULE IS THE END OF THE TERM OF THE SCHEDULE TO MASTER AGREEMENT IDENTIFIED AS SCHEDULE NO. _____

TERM IN MONTHS: **36** (APPLIES TO THIS SCHEDULE ONLY)

PAYMENT (CHECK ONE TERM OPTION)

MONTHLY BASE PAYMENT AMOUNT: **\$100.00** (PPTX Inclusive) (INCLUDES AMOUNTS DUE UNDER THIS SCHEDULE ONLY)

TOTAL CONSOLIDATED MONTHLY BASE PAYMENT AMOUNT: \$ _____ (PLUS TAX) (INCLUDES AMOUNTS DUE UNDER THIS SCHEDULE AND ANY OTHER APPLICABLE SCHEDULES TO THE MASTER AGREEMENT (FOR IMAGING EQUIPMENT) DURING THE TERM THEREOF)

ADDITIONAL TERMS AND CONDITIONS

IMAGE ALLOWANCE CHARGES AND OVERAGES. You are entitled to make the total number of Images shown under Image Allowance Per Machine (or Total Consolidated Image Allowance, if applicable) each period during the term of this Agreement. If you make more than the allowed Images in any period, you will pay us an additional amount equal to the number of the excess Images made during such period multiplied by the applicable Excess Per Image Charge. Regardless of the number of Images made in any period, you will never pay less than the Base Payment Amount. You agree to provide us with the actual meter readings on any business day as designated by us; we may estimate the number of Images used if such meter readings are not received within five days after being requested. We will adjust the estimated charge for excess Images upon receipt of actual meter readings. You agree that the Base Payment Amount and the Excess Per Image Charges may be proportionately increased at any time if our estimated average page coverage is exceeded. After the end of the first year of this Schedule and not more than once each successive twelve-month period thereafter, the Base Payment Amount and the Excess Per Image Charges (and, at our election, the Base Payment Amount and Excess Per Image Charges under any other schedules for Imaging equipment between you and us that incorporate the terms of the Master Agreement) may be increased by a maximum of 15% of the then existing payment or charge. Images made on equipment marked as not financed under this Agreement will be included in determining your image and overage charges.

APPLICABLE TO GOVERNMENTAL ENTITIES ONLY

You hereby represent and warrant to us that as of the date of the Agreement: (a) the individual who executed the Agreement had full power and authority to execute the Agreement on your behalf; (b) all required procedures necessary to make the Agreement a legal and binding obligation against you have been followed; (c) the Equipment will be operated and controlled by you and will be used for essential government purposes for the entire term of the Agreement; (d) that all payments due and payable for the current fiscal year are within the current budget and are within an available, unexhausted, and unencumbered appropriation; (e) you intend to pay all amounts payable under the terms of the Agreement when due, if funds are legally available to do so; (f) your obligations to remit amounts under the Agreement constitute a current expense and not a debt under applicable state law; (g) no provision of the Agreement constitutes a pledge of your tax or general revenues; and (h) you will comply with any applicable information reporting requirements of the tax code, which may include 8038-G or 8038-GC Information Returns. If funds are not appropriated to pay amounts due under the Agreement for any future fiscal period, you shall have the right to return the Equipment and terminate the Agreement on the last day of the fiscal period for which funds were available, without penalty or additional expense to you (other than the expense of returning the Equipment to the location designated by us), provided that at least thirty (30) days prior to the start of the fiscal period for which funds were not appropriated, your Chief Executive Officer (or Legal Counsel) delivers to us a certificate (or opinion) certifying that (a) you are a state or a fully constituted political subdivision or agency of the state in which you are located; (b) funds have not been appropriated for the applicable fiscal period to pay amounts due under the Agreement; (c) such non-appropriation did not result from any act or failure to act by you; and (d) you have exhausted all funds legally available for the payment of amounts due under the Agreement. You agree that this paragraph shall only apply if, and to the extent that, state law precludes you from entering into the Agreement if the Agreement constitutes a multi-year unconditional payment obligation.

AGREEMENT

This Schedule to Master Agreement ("Schedule"), together with the preprinted terms of the Master Agreement (as amended), constitutes an agreement between Customer and Owner with respect to the equipment referenced herein (or on the attached Equipment or Group Billing Schedule) (excluding equipment marked as not financed under this Schedule), separate and distinct from any other Schedule to Master Agreement entered into between Customer and Owner pursuant to the Master Agreement. Customer agrees to be bound by the terms of this Schedule, which includes the preprinted terms of the Master Agreement (as amended), and agrees this Schedule shall constitute an "Agreement" as such term is used in the Master Agreement. The original of this Schedule shall be that copy which: (A) bears (i) the original or a facsimile of your manually applied signature, or (ii) evidence of a stamped or electronically applied replica of your signature or other indication of your intent to enter into this Schedule; and (B) bears the original of our manually applied signature. If any provision in this Schedule conflicts with a provision in the Master Agreement, the provision in this Schedule shall control. This Schedule shall commence on the date of our acceptance.

CUSTOMER'S AUTHORIZED SIGNATURE

ONCE YOU SIGN THIS SCHEDULE AND OWNER ACCEPTS IT, THIS SCHEDULE WILL BE NON-CANCELABLE FOR THE FULL TERM.

City Of Grand Junction

CUSTOMER

Susan J. Hyatt
SIGNATURE

Senior Buyer
PRINT NAME & TITLE

10/2/2018
DATE

OWNER ("WE", "US", "OUR")

Capital Business Systems Inc.

OWNER

SIGNATURE

PRINT NAME & TITLE

DATE

7052 Commerce Cir Ste 120, Cheyenne, WY 82007-1858

CERTIFICATE OF DELIVERY AND ACCEPTANCE

The Customer hereby certifies that all the Equipment: 1) has been received, installed, and inspected, and 2) is fully operational and unconditionally accepted.

SIGNATURE: X

NAME AND TITLE:

DATE:



AFTERMARKET SUPPORT AGREEMENT

Customer Bill To:
 Customer Name: City Of Grand Junction
 Address: 250 North 5th Street Grand Junction, CO 81501
 Telephone: 970 244-1513
 Attention: Susan Hyatt
 Email:

Customer Ship To:
 Customer Name: City Of Grand Junction - Cemetery
 Address: 2620 Legacy Way Grand Junction, CO 81501
 Telephone: 970 244-1550
 Attention: Mike Vendegna
 Email: mikev@gjcity.org

DEVICES	Make, Model, Included Accessories	Serial #	ID#	Base Payment			Beginning Meter Reading		Image Allowance		Excess Per Image Charge (Plus Tax)		
				<input checked="" type="checkbox"/> Monthly	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Annually	B & W	Color	<input type="checkbox"/> Monthly	<input checked="" type="checkbox"/> Quarterly	<input type="checkbox"/> Annually	B & W	Color
1	Ricoh MPC2004EX-RS	C763R91004	51194	\$0.00					0	0	\$0.0075	\$0.065	
2													
3													
4													
5													
6													

End User Details			Location / Address (if different to supply shipments)	
Name	Email			
1				
2				
3				
4				
5				

Supplies Included Items Excluded; paper See attached equipment or group billing schedule. Meter Frequency: _____

* The consolidated image allowance and excess per image amounts shown above (or on the attached equipment or group billing schedule), if any applies to (check one):
 Equipment installed under this schedule only, or Equipment installed under this schedule together with equipment listed on any other applicable schedule (i.e. an aggregate consolidation). If no image allowance or excess per image amounts are shown above (or on the attached equipment or group billing schedule), images made on the equipment under this schedule will be included in determining your image and overages charges the applicable prior schedule to master agreement.

TERM (check one term option)
 Term: The end of the term of this schedule is the end of the term of the schedule to agreement identified as schedule NO. _____
 Term: In Months: 36 (Applies to this schedule only) Start Date: _____

PAYMENT (check one term option)
 Monthly Base Payment Amount: \$ _____ (Plus Tax) Quarterly Base Payment Amount: \$ _____ (Plus Tax) Annual Base Payment Amount: \$ _____ (Plus Tax)
 (Includes amounts due under this schedule only)

ADDITIONAL TERMS AND CONDITIONS
 IMAGE ALLOWANCE CHARGES AND OVERAGES. You are entitled to make the total number of images shown under Image Allowance Per Machine (or Total Consolidated Image Allowance, if applicable) each period during the term of this Agreement. If you make more than the allowed images any period, you will pay us an additional amount equal to the number of the excess images made during such period multiplied by the applicable Excess Per Image Charge. Regardless of the number of images made in any period, you will never pay less than the Base Payment Amount. You agree to provide us with the actual meter readings on any business day as designated by us; we may estimate the number of images used if such meter reading are not received within five days after being requested. We will adjust the estimated charge for excess images upon receipt of actual meter readings. You agree that the Base Payment Amount and the Excess Per Image Charges may be proportionately increased at any time if our estimated average page coverage is exceeded. After the end of the first year of this Schedule and not more than once each successive (twelve-month period thereafter, the Base Payment Amount and the Excess Per Image Charges (and at our election, the Base Payment Amount and Excess Per Image Charges under any other schedules for imaging equipment between you and us that incorporate the terms of the Master Agreement) may be increased by a maximum of 15% of the then existing payment or charge. At expiration of original or any renewal terms, this agreement shall be automatically renewed for a minimum of one year. No refunds will be made if contract is cancelled prior to original or renewal terms.

Customer
 Signature: City Of Grand Junction Susan G. Hyatt Senior Buyer 10/2/2018
 CUSTOMER SIGNATURE NAME & TITLE DATE

Capital Business Systems Signature: Geof Lambert Geof
 REPRESENTATIVE SIGNATURE



Product Installation Removal & Acceptance

Bill To	Company Name City Of Grand Junction		Account Number	
	Billing Address 250 North 5th Street		City Grand Junction	State CO
	Contact Name		Phone Number	Zip Code 81501
			Email Address	

Delivery location	Company Name City Of Grand Junction - Cemetery			
	Shipping Address 2620 Legacy Way		City Grand Junction	State CO
	Contact Name Mike		Phone Number 970 244-1550	Zip Code 81501
			Email Address mikev@citygj.org	

Delivery	Sales Representative Geof Lambert		
	Delivery Type	<input type="checkbox"/> Installation	<input type="checkbox"/> Pick Up
	Installation Instructions	<input type="checkbox"/> Connected Integration	<input type="checkbox"/> Training
	Requested Delivery Date	<input type="checkbox"/> Stairs	<input type="checkbox"/> Elevator
	Delivery Instructions		

Product Delivered & Installed

Equipment Information	QTY	Main Unit And Accessories	Description	Product Number	ID #	Serial #	Meter B/W	Meter Color
	1	MPC2004EX-RS	Ricoh MP C2004ex	418017	51194	C768R910014	27	9
	1	Cabinet Type F	Cabinet Type F	100478FNG				
	1	Fax Option Type M19	Fax Option Type M19	417510		PD018601818		

Supplies:

Pick Up	<input type="checkbox"/> CBL Return <input type="checkbox"/> 3rd Party Leasing <input type="checkbox"/> Customer Owned <input type="checkbox"/> Leasing Company (If Known) _____	
	Return to Company:	
	<input type="checkbox"/> Have Instructions <input type="checkbox"/> Pending Instructions	
	Customer Agrees: X _____ <small>The listed equipment does not have liens or bond by any other company and Capital is released from any liability when disposing of sold units</small>	

Product Removed

Equipment Information	QTY	Main Unit And Accessories	Description	Product Number	ID #	Serial #	Meter B/W	Meter Color

Supplies:

Acceptance	The customer hereby certifies that the equipment and supplies listed above have been delivered and received. The installation has been completed and the equipment is in good working order and is satisfactory and acceptable. I hereby authorize Capital Business Systems, Inc. to commence billing in accordance with the terms and conditions of the Agreement.		
	X <u>Mike Vercelay</u> Customer Signature	Title _____	Date _____
	X <u>Geof</u> Capital Business Systems, Inc. Representative	Date _____	



Proposed DocuManagement Solution

Now that we have worked with you from the ground up to assess your current document management and printing system, here are a variety of effective document management and printing system solutions that are easy to implement, easy to maintain, and that **are just plain economically smart.**

Equipment

Qty	Manufacturer / Model	Description
1	Ricoh MPC2004EX-RS	20ppm Full-Size Color & B/W Copy/Print/Scan Color & B/W Auto Doc Scanner, Duplex 2x550 Sheet Paper trays...up to 11x17 paper Hard disk Drive PCL & PDF Direct Print Scan to folder, SMB, USB
1	Ricoh Cabinet Type F	Rolling Storage Cabinet
1	Ricoh Fax Option Type M19	Fax Option Super G3

Cash Option: \$3,100.00

Lease Option:

36 Month FMV lease PPTX included and Capital picks up at end \$100.00 /Monthly

Notes:

Recommended Service & Supply Agreement

Service *Plus* Agreement includes all parts, labor, service calls, preventative maintenance calls, and all supplies, excluding paper and staples.

- This agreement includes 0 black prints Monthly.
- All additional black prints to be billed Monthly @ \$0.0075 per page based on actual volumes
- This agreement includes 0 color prints Monthly.
- All additional color prints to be billed Monthly @ \$0.065 per page based on actual volumes