

Order Package Acceptance Agreement

Customer Name/Address:

CITY OF BISBEE
76 ERIE ST
BISBEE, AZ 85603

Customer's signature below constitutes Customer's acceptance of the preceding forms in this Order Package (as identified by Order Package ID S00672180 time stamped 03/13/24 06:17 PM).

This Order Package is governed by the terms and conditions of the Master Agreement contract between Konica Minolta Business Solutions U.S.A., Inc. and STATE OF ARIZONA - NASPO 140597 / CTR067244 dated 09/06/2023 terms of which are incorporated into this agreement. If payment by credit card is indicated above, Customer hereby grants KMBS the authority to charge the Customer's credit card in the amount indicated (plus applicable taxes). KMBS assumes no responsibility to pick-up, return to any party, and/or resolve any financial obligations on any existing Customer equipment except as specifically stated in this Agreement or separately executed form.

Not binding on KMBS until signed by KMBS Manager.

Authorized Customer Representative

Name: Ken Budge
(Please Print)

Signature: 

Title: Mayor

Date: 4-2-2024

KMBS Representative

Name: MIKE DEHEN
(Please Print)

Signature: 

Date: 3-13-2024

KMBS Manager

Name: Eric Crane
(Please Print)

Signature: 

Date: 4/3/24

Order Agreement

Check Applicable Box Purchase Lease Other:

VOICE TO Account #	SOLD TO Account # PR 0030246328	SHIP TO Account #
Legal Name CITY OF BISBEE	Legal Name CITY OF BISBEE	Legal Name CITY OF BISBEE
Attn Line 1	Attn Line 1	Attn Line 1
Attn Line 2	Attn Line 2	Attn Line 2
Street Address 76 ERIE ST	Street Address 76 ERIE ST	Street Address 76 ERIE ST
City BISBEE State AZ Zip 85603	City BISBEE State AZ Zip 85603	City BISBEE State AZ Zip 85603
Tax Exempt <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Copy Required)	Tax Exempt #	P.O. Expiration Date
P.O. Required <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Copy Required)	P.O. #	

Payment Terms:
TERMS SET BY MASTER AGREEMENT

Yes, I want to pay by Credit Card. Please provide contact name/phone below.
 Pay in Full (including applicable tax) Partial Payment, Amount \$ _____

Contact Name: _____ Phone: _____

Requested Delivery Date: SEE ATTACHED

Maintenance Contract Accepted Declined

QTY	MATERIAL #	MATERIAL DESCRIPTION	SERIAL NUMBER	PRICE EACH	EXTENDED
2	AA7P017	BIZHUB C550I		\$ 8,182.25	\$ 16,364.50
2	7670525507	MFP DELIVERY CHARGE - LEVEL TWO		\$ 0.00	\$ 0.00
2	7640018094	BASIC NETWORK SERVICE - BNS04		\$ 0.00	\$ 0.00
2	AAV5019	PC-416 CABINET		\$ 490.70	\$ 981.40
2	AAR4WY3	FS-539		\$ 612.50	\$ 1,225.00
2	AC28W11	PK-524 2/3 PUNCH UNIT FOR FS-539		\$ 292.50	\$ 585.00
2	A87JWY2	RU-513 RELAY UNIT		\$ 73.50	\$ 147.00
2	ACCJWY1	KP-102 KEYPAD (10" PANEL)		\$ 63.00	\$ 126.00
2	W100015120	PWRFILTER WNOISE & SURGE PROTEC		\$ 135.00	\$ 270.00
2	A0W4WY3	WT-506 WORKING TABLE		\$ 56.00	\$ 112.00
2	A883012	FK-514 FAX KIT (1ST & 2ND LINE)		\$ 374.50	\$ 749.00
2	7640015657	BIZHUB SECURE		\$ 250.00	\$ 500.00

QTY	MATERIAL #	SUPPLY - MATERIAL DESCRIPTION	PRICE EACH	EXTENDED
2	ACV1430	TN626C CYAN TONER (YIELD: 28K)	N/A	\$ 0.00
2	ACV1130	TN626K BLACK TONER (YIELD: 28K)	N/A	\$ 0.00
2	ACV1330	TN626M MAGENTA TONER (YIELD: 28K)	N/A	\$ 0.00
2	ACV1230	TN626Y YELLOW TONER (YIELD: 28K)	N/A	\$ 0.00
			N/A	
			N/A	

ADDITIONAL CHARGES

Network _____ Removal _____ Other _____

Additional Charges

TOTAL \$ 21,059.90
(TOTAL is exclusive of applicable taxes)

PICK-UP **Requested Removal Date: 03/26/2024**

QTY	MATERIAL #	MATERIAL DESCRIPTION	SERIAL NUMBER

COMMENTS

Maintenance Agreement

Customer Information

Sold to Acct #: <u>0030246328</u>	Payer/Bill to Acct #: _____	Ship to Acct #: _____
Name: <u>CITY OF BISBEE</u>	Name: <u>CITY OF BISBEE</u>	Name: <u>CITY OF BISBEE</u>
Attn/Dept: _____	Attn/Dept: _____	Attn/Dept: _____
Ste/Rm: _____	Ste/Rm: _____	Ste/Rm: _____
Address: <u>76 ERIE ST</u>	Address: <u>76 ERIE ST</u>	Address: <u>76 ERIE ST</u>
City: <u>BISBEE</u>	City: <u>BISBEE</u>	City: <u>BISBEE</u>
State: <u>AZ</u> Zip: <u>85603</u>	State: <u>AZ</u> Zip: <u>85603</u>	State: <u>AZ</u> Zip: <u>85603</u>

Tax Exempt Customer? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Tax Exemption Number: _____	Tax Exemption Certificate must be attached when applicable.
PO Required? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	PO Number: _____	PO Expiration Date: _____
<input type="checkbox"/> Individual PO <input type="checkbox"/> Blanket PO	PO Contact: _____	PO must be attached when applicable.
Fleet Manager? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name: _____	Email: _____
		Ph: _____

Coverage / Billing Options

Coverage Options:

Select Options:

- Supply Inclusive (See comments below for inclusions)
- After Hours Service - Requires After Hours Agreement
- Decline Digital Connected Support*

* Digital Connect Support will be added automatically billed at \$12.00 per serial number monthly, unless declined above.

Billing Options:

Initial Term in Months:
Flat Rate Frequency:
Meter Frequency:
Aggregate Volume:

- MFP**
- 36 48 60 Other _____
- Monthly Quarterly Annually
- Monthly Quarterly Annually
- B/W Color

Select Options:

- Toner (Black Only)
- 20lb Bond Roll Paper
- Decline Digital Connected Support*

Wide Format

- 36 48 60 Other _____
- Monthly
- Monthly

All Devices

Effective Date: On Install Date: _____

Billing Day: Selected by KMBS Preferred Day: _____ (29th, 30th, and 31st are not an available selection)

Maintenance Pricing

Internal Use

MA #:

MFP							Wide Format		
Item	Model Description	Serial Number	Type	Monthly Minimum Volume	Monthly Flat Rate \$	Cost Per Copy Rate \$	Start Meter	Sub Fleet	Price Plan
1	BIZHUB C550I		Color			0.04300			
			B/W	8,000	52.80	0.00660			
2	BIZHUB C550I		Color			0.04300			
			B/W	8,000	52.80	0.00660			
3			Color						
			B/W						

Additional Equipment on Schedule B

Wide Format							Wide Format		
Item	Model Description	Serial Number	Type	Monthly Minimum Volume (Sq. Feet)	Monthly Flat Rate \$	Cost Per Square Foot Rate \$	Start Meter	Sub Fleet	Price Plan
1			Color						
			B/W						

Additional Equipment on Schedule C

Comments

- TONER - BLACK AND COLOR (CYM) INCLUDED
- STAPLES INCLUDED

For Internal Use

Maintenance: <input type="checkbox"/> with Equipment Order <input type="checkbox"/> Maintenance Only <input type="checkbox"/> Billed by KMBS <input type="checkbox"/> Billed by Lease Company <input type="checkbox"/> Dealer Serviced
Sales Rep Number: _____ Sales Rep Name: _____ Sales Rep Email Address: _____
Originating: <u>106799</u> <u>MIKE DEHEN</u> <u>MDEHEN@KMBS.KONICAMINOLTA.US</u> <u>37402</u>
Order Taking: <u>106799</u> <u>MIKE DEHEN</u> <u>MDEHEN@KMBS.KONICAMINOLTA.US</u> <u>Processed</u>
Servicing: <u>106799</u> <u>MIKE DEHEN</u> <u>MDEHEN@KMBS.KONICAMINOLTA.US</u> <input type="checkbox"/> Branch <input checked="" type="checkbox"/> Windsor

KONICA MINOLTA BUSINESS SOLUTIONS U.S.A., INC.

100 Williams Drive, Ramsey, NJ 07446 (201) 825-4000 www.kmbs.konicaminolta.us

Form: 1011-050117-0S