



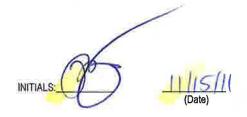
ANNUAL SERVICE & SUPPLY AGREEMENT

Business Name	Kittitas Coun	ty Treasurer	#303339	Phone Nu	mber: (509)	962-7627
Installation Address	205 West 5th Av	enue Room 102	Ellensburg,	WA 989	926	
Billing Address	Same					
Contact Name	Deanna J. Panatto	oni, Treasurer		Fax Numb	er: (509)	
Model	Service ID	Serial #	B&W Meter	Color Meter	Name	Start Date
Sharp MX-M623N	#18465	Ø 5005160	464	N/A	Megan	10/6/2011
Service Pr	icing is Per WA Sta	ate Contract #037	06c and Reflects	all of Its	Terms and	d Conditions
0 Color Prin	s and/or Copies Included ts and/or Copies Included GREEMENT - Includes INE - I understand that I to Service calls, Pa	d per Month Billed Quar	arges. This agreemer		ude supplies	
with the terms and co	purchase and Pinnell agonditions of this agreem fithis agreement, signed	ent. No terms and co	nditions, expressed o	r implied, a	re authorized	
	and conditions on the r e, alter, or amend the te			(1.5)		ment. No one is officers of both parties.
this agreement include Pinnell Service Mana Customer Signature	r signature below and/ording additional terms and see.		verse side. This agre	eement is no	ot valid unles	Ses signed by the

TERMS AND CONDITIONS

DESCRIPTION OF COVERAGE:

This Agreement and Service Pricing is Per Washington State Contract #03706c and Reflects All of Its Terms and Conditions.





PURCHASE AGREEMENT

3901 Kern Road Suite 100 Yakima WA 98902 Phone (509) 452-9117 Fax (509) 453-5913

Sold To:

Sales Rep: Date:

Clayton Oldham 11-Oct-11

Customer Name:	Kittitas County Treasurer Office	Customer Name:	Same			
Address:	205 West 5th Avenue Room 102	Address:	Same			
City:	Ellensburg	City:	Same			
State:	WA 98926	State:	Same			
Phone #:	(509) 962-7627	Phone #:	Same			
Fax #:	(509)	Fax #:	Same			
Contact Name:	Deanna J. Panattoni, Treasurer	Contact Name:	Same			
Order Quantity	Descrip	tion		Unit Price	Total	
1	MX-M623N, 62 ppm B&W MultiFunction Device (Co		AX)		Included	
1	MX-LC10, 3500 Sheet Large Capacity Tray (LCT) (L	Letter}			Included	
1	MX-FN16, Multi-Position Saddle Stitch Finisher				Included	
1.	AR-PN4B, 3-Hole Punch Module for FN16				Included	
1	MX-PKX1, PostScript 3 Exp. Kit MX-FXX2, Facsimile Expansion Kit				Included	
	MA-FAAZ, Facsinine Expansion Kit				Included	
	Coordination and Return of Existing im	n5530 Equipment to Banc of A	merica [Included]			
	Equipment Pricing is per WA State Contract #03706c and Reflects all of its.	terms & conditions. Pinnell Agrees le	coordinate pick-up and return			
	of current equipment (im5530) to the Leasing Company (BofA) and pay all r	return freight charges				
VOLUME ENTITY ED TO A C	ASSIVED THE CONTRACT. TERMS OF ORAL PROMICES			Monthly Lease Total Tax:	\$ 347.92 / mo.	
	COPY OF THIS CONTRACT TERMS OR ORAL PROMISES ED IN THIS WRITTEN AGREEMENT MAY NOT BE LEGALLY			TOTAL	Not included.	
ENFORCED ORDER IS B	INDING ONLY WHEN ACCEPTED BY A MANAGER OF PINNELL					,
configuration and setup workelation setup will be	ation Support Option (Console Equipment - \$350.00 / Desktop Eq. Custamer to provide network cabling with proper connectors and act invoiced at current hourly rates. Printing of a tool page will be confire plad as part of this stuffshare arrangement, all installation support s	ive designated network interface med for each workstation Also is	port. Print driver software will reludes training of workstation	be loaded on up to (5) was and key operator personne	ketotione. Additional 🔫	0/0
Authorized Signatu	1800	Date: 11/5/1	11/15/11	1/1		
	ire:			1/////		
Title:	ire: Chair	Salesperson:	Clayton Oldham, Flek	ales Manager	10-11-11	
	re: Chair		Clayton Oldham, Field	i Sales Manager 2	10-11-11	
Title:	Chair Chair		Clayton Oldham, Field	Sales Wapersel	10-11-11	

Ship to:

FOR CASH TRANSACTIONS ONLY

Title: Title will be passed on to you when your cash transaction is paid in full. Until such time, to secure all of your obligations to us under this Agreement, you hereby grant us a security interest in a) the Equipment to the extent of your interests in the Equipment, b) anything attached or added to the Equipment at any time, c) any money or property from the sale of the Equipment, and d) any money from an insurance claim if the Equipment is lost or damaged. You agree that the security interest will not be affected if this Agreement is changed in any way. You hereby appoint us for our agents) as your true and lawful attorney-in-fact to affix your signature to UCC financing statements prepared and filed on your behalf by us (or our agent) with the same force and effect as if you had signed such financing statements. If we request, you agree to sign financing statements in order for us to publicly record our security interest. This Agreement and a copy of this Agreement shall by sufficient as a financing statement and may be filed as such.

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De	Lage Landen	Finan	icial Servi	ices, In	C.					HFS34186	0		Lea	se Agreemen "Lease")
ĬĬ.	Full Legal Name Kittitas County	dba Ki	ttitas County	Treasurer						Purchase Order Requis	dion Numbe		ne Number 99) 962-7	
LESSEE	Billing Address 205 W 5th Ave #			City Ellen:	sburg		ate NA	Zip 98926		County Kittitas			d Invoice to A	
	Make		Model Number	Serial Numb		Quantity	Descriptio		eparate Sch	iedule A II Necessary)				
EQUIPMENT	Sharp		MX-M623N	050	005160	1	Sharp	BW Doo	cument	System				
PAYMENT INFORMATION	Number of Lease Payments 60	Lease Payme \$347.9	nt (PLUS)	Applicable Sales Tax	(EQUALS)	Total Lease Paymont	Terri in M	of Lease onths	End	of Lease Option:	₩ FMV	□ 10%	arterly 0 0	
PAYM			+		-		Secu	rity Deposit	(PLUS)	First Period Payment	(PLUS)	Other	(EQUALS)	Total Payment Enclosed
Z	-		+					\$0.00	+	\$0.00	+	\$0.00		\$0.00
numb posses will passes of day tional, a fee of tation are no will re your w common to WAIV 2. Titl tille Ur 3. Equal IS" A MERO	ter date that we desiger of months indicated session of the Equipmer by us interim rent for thencement Date as reas in that period, and a and are not subject to if \$75.00 to reimburse costs and all ongoing an-interest-bearing and urn the deposit to you ill pay us a late charge you a fee of \$25.00 to reimburse to you a fee of \$25.00 to Deurchase opt us a security interest inform Commercial Comment Use, Mainter UD MAKE NO WARR HANTABILITY, OR Fireducer of the produced to the produced	l above. Lit from this to the period sisonably of a month cancellate a our expendent of the period sisonably of the period sisonably of the period sisonand of t	ease payments as le date of its delic from the date it calculated by us of 30 days. You it consists for preparation costs durin applied to cure a le Lease is termir of the payment check that is resolvision OR CO con control or contro	are due as invery, if we ac he Equipmer based on the robligations etoff or coun ing financing g the term of Lease defaul aated. If a pay or \$10.00, turned. ONL NOTTION OF we will have leemed to b fil proceeds atements on We are leasin MPLIED. IN	voiced by us. / voicept and sign it is delivered it lease payme to us are absterolaim. You statements, of this Lease. Sit. If you are now ment is not in whichever is of Y WE ARE ALTHE LEASE. It it is to the Equipme a security a thereof. You it the Equipme go the Equipme of th	As you will he this Lease you until to you until ant, the num olute, uncor agree to pay there docum ecurity deposit in default, nade when degreater. We ITHORIZED uipment. If y greement, y authorize us nt. eent to you "/	ave will out Con the 7. E ber (to to didi- you all ti en- opti sits we locate we locate we locate ue, Equ will amo or a you othe for a fair AS- the	indemnify innencem md of Leasur addres r Intentior re Equipm on amoust re all the tion we di pment as unit for co- proportion my other a re Lease and receive market val Residual of to that to the to the to the to the to the to that to the to the to to to to to to to to to to	y us on a ent Date isse: You y ss below it to purch nent as in hts will b Equipme lesignate, s provide onsecutive d Remed amount w with us. If payments e the total illuscounter of a U.S.	n after-tax basis at arising out of you will give us at least) before the expiral tase or return the Edicated above und to determined by the foliation of the	gainst the acts or c 60 days 600 days 160 of the quipment or "End or is based of condition y us, or it is breach a in the Leaterm immediates photon (the util at the I maturity of maturity of maturity of maturity of maturity of maturity or a condition or the I maturity of maturity o	loss of innision but not no initial let. With professe Con the End of the letter of th	any tax bers. In sore than "ase term (coper notice ption" (fair quipment's cost in a tot (f) pur ally renew (a) you fail obligation and (f) eccle and paulipment's (")" with futt. A) with futt. A) with futt. A) or per and (as report)	roperty tax filings. Your street that anticipated at the 20 days written notice any renewal term) of you may, a) purchas market value purchas in place value); or timely manner, and to chase or (ii) return that the same payment to pay a Lease payment of pay a Lease payment of the entire balance of yable to us; (ii) sue younticipated end of Lease payments an num interest rate equited by the U.S. Treasu

4. Assignment: You agree not to transfer, sell, sublease, assign, pledge or encumber either the Equipment or any rights under this Lease without our prior written consent. You agree that we may sell, assign, or transfer the Lease and the new owner will have the same rights and benefits we now have and will not have to perform any of our obligations and the rights of the new owner will not be subject to any claims, defenses, or setoffs that you may have against us or any supplier. 5. Risk of Loss and Insurance: You are responsible for all risks of loss or damage to the

Equipment and if any loss occurs you are required to satisfy all of your Lease obligations. You will keep the Equipment insured against all risks of loss or damage for an amount equal to its replacement cost. You will list us as the sole loss payee for the insurance and give us written proof of the insurance. If you do not provide such insurance, you agree that we have the right, but not the obligation, to obtain such insurance, and add an insurance fee to the amount due from you, on which we may make a profit. We are not responsible for any losses or injuries caused by the Equipment and you will reimburse us and defend us against any

out notice to you, and apply the net proceeds (after deducting any related expenses) to your obli-gations. You remain liable for any deficiency with any excess being retained by us. 9. Miscellaneous: You agree the Lease is a Finance Lease as defined in Article 2A of the UCC.

9. Miscellaneous: You agree the Lease is a Finance Lease as defined in Article 2A of the UCC. You acknowledge we have given you the name of the Equipment supplier and that you may have rights under the contract with the supplier and may contact the supplier for a description of these rights. If requested, you will sign a separate Equipment acceptance certificate. This Lease was made in Pennsylvania ("PA"), is to be performed in PA and shall be governed and construed in accordance with the laws of PA. You consent to jurisdiction, personal or otherwise, in any state or federal court in PA and irrevocably waive a trial by jury. You agree to waive any and all rights and remedies granted to you under Sections 2A-508 through 2A-522 of the UCC. You agree that the Equipment will only be used for business purposes and not for personal, family agree that the Equipment will only be used for business purposes and not for personal, family or household use, and will not be moved from the above location without our consent. You agree that a facsimile copy of the Lease with facsimile signatures may be treated as an original and will

such	claims. This indemnity will continue after the termination of this Lease. You will obtain	pe ac	imissible as evidence of the Lease. We may inspect the Equipment during the Lease term.
LESSEE	You agree that this is a non-cancelable lease. The Equipment is: NEW USED Date 1/5 / 1 / 5 / 1	LESSOR	De Lage Landen Financial Services, Inc. Lease Processing Center, 1111 Old Eagle School Road, Wayne, PA 19087 PHONE: (800) 735-3273 • FAX: (800) 776-2329 Commencement Date Lease Number Accepted By: Accepted By:
ACCEPTANCE	The Equipment has been received, put in use, is in good working order and is satisfactory and the satisfactory of the satisfac	Date Title	ramadilli an m
			Lessor is not required to proceed against the Lessee or the Equipment or enforce other mands of any kind to which I may be entitled. I consent to any extensions or modification

granted to the Lessee and the release and/or compromise of any obligations of the Lessee or any other guaranters without releasing me from my obligations. This is a continuing guaranty and will remain in effect in the event of my death and may be enforced by or for the benefit of any assignee or successor of the Lessor. This guaranty is governed by and constituted in accordance with the laws of the Commonwealth of PA and I consent to non-exclusive jurisdiction of any state or federal court in PA and waive trial by jury. Signature Print Name

FISCAL FUNDING ADDENDUM

		LESSEE INFOR	MATION			
Full Legal Name KITTITAS COUNTY			DBA Name (If Any)	KITTITAS	COUNT	Y TREASURER
Billing Address 205 W 5TH Ave #102					Phone (509 962-7535
City ELLENSBURG	County	KITTITAS		State WA	Zip	98926

stion sbove)				
	County		State	Zip
MODEL NO.	EQUIPMENT DESCRIPTION (ATTACH SCHEDULE IF NECESSARY)	OTWILL	MODEL NO	EQUIPMENT DESCRIPTION (ATTACH SCHEDULE IF NECESSARY)
MX-M623N	BW DOC System		Ī	
	SN# 05005160			
	MCOEL NO.	COUNTYCOUNTY	County	County State MODEL NO. EQUIPMENT DESCRIPTION (ATTACH SCHEDULE IF NECESSARY) OX-M623 N BW DOC System

The above described KITTIAS COUNTY ("Lessee") warrants that it has funds available to pay rents ("Lease Payments") until the end of its current appropriation period. In the event its legislative body or funding authority does not appropriate funds to be paid to Lessor for the above described Equipment ("Equipment"), Lessee may, upon prior written notice to Lessor, effective 60 days after the giving of such notice or upon the exhaustion of the funding authorized for the then current appropriation period, whichever is later, return the Equipment to Lessor, at Lessee's expense; and thereupon, be released of its obligation to make all rental payments (Lease Payments) to Lessor due thereafter, provided: (1) The Equipment is returned to Lessor as provided for in the above described Lease ("Lease"), (2) the foregoing notice states the failure of the legislative body or funding authority to appropriate the necessary funds as reason for cancellation, and (3) the notice is accompanied by payment of all amounts then due to Lessor under the Lease.

In the event Lessee returns the Equipment pursuant to the terms of this Addendum, Lessor shall retain all sums paid hereunder by Lessee, including the Security Deposit (if any) specified in the Lease.

If the provisions of this Addendum are utilized by Lessee, Lessee agrees not to purchase, lease or rent any other functionally similar equipment for the balance of the Lease term following Lessee's exercise of its termination rights hereunder.

This Addendum will not be construed so as to permit the Lessee to terminate the Lease in order to acquire any other equipment or obtain funds directly or indirectly to perform essentially the same application for which the Equipment is intended.

Signature X

Signature X

OMUST BE SIGNED BY RUTHORIZED AGENT, REPRESENTATIVE OR OFFICER OF GOVERNMENT ENTITY)

Print Name

Title BECCHILL

Date

For KITTITAS COUNTY

Name of Government Entity

Signature Date Date Legal Name of Corporation or Partnership