Form: 3000-090115-OS



## **Order Agreement**

Check Applicable Box   Purch				ase	□ Lease	⊠ Oth	er:	INTERNAL LEAS	3E			
INVOICE_TO Account #				SOLD_TO Account # SH 0001138287			SHIP	HIP TO Account #				
Legal Name KONICA MINOLTA BUSINESS SOLUTIONS USA INC Legal Name					Name NW FOCAL POINT SENIOR CENTER DISTRICT Leg			al Name NW FOCAL POINT SENIOR CENTER DISTRICT				
Attn Line 1 Attn Line 1 KA					N DIAZ Attn			Line 1 KARIN DIAZ				
Attn Line	2			Attn Line 2	Attn L			Line 2				
Street Ad	dress 500 DAY	HILL RI	0	Street Address 600	09 NW 10TH STREET Stres			t Address 6009 NW 10TH STREET				
City WIN				City MARGATE	State FL Zip 33063 City N			MARGATE State FL Zip 33063				
Tax Exem				Tax Exempt # 85	-8012646-322C-5							
P.O. Required X No Yes (Copy Required) P.O. # P.O. Expiration Date												
Payment Terms:  SEE LEASE  Yes, I want to pay by Credit Card. Please provide contact name/phone below.  Payment, Amount \$  Contact Name:  Phone:												
OEE LE	AGE		Contact Name	9:		Phone:			Check #			
Requested Delivery Date: SEE ATTACHED Maintenance Contract Accepted Dedined												
QTY	MATERIAL #		MATERIAL DESC	CRIPTION	SERIAL NUM	BER		PRICE E	ACH	EXTEN	NDED	
1	A9HH011	Biz	ZHUB 458 COPIER/PI	RINTER					\$ 83.48		83.48	
1	7670525507		LIVERY CHARGE - L						\$ 0.00	\$	0.00	
1	7640018094		SIC NETWORK SER						\$ 0.00	\$	0.00	
1	A2XM019		-410 LARGE CAPAC						\$ 9.01	\$	9.01	
1	A87GWY3		-536 FINISHER (50 S J-513 RELAY UNIT	HEETS)					\$ 11.95	\$	0.00	
1	A87JWY2		P POWER FILTER 12	20V/15A NETWOR					\$ 4,60	\$	4.60	
1	D5133NTKM A64TWY3		-101 KEYPAD	OV/ ISA NETWOR					\$ 0.81	S	0.81	
- '-	ADATWYS	- INF	-IOI KEIPAD						Ψ 0.01	-	0.01	
		+-										
		+										
		1										
QTY	MATERIAL #		SUPPLY - MATERIAL	DESCRIPTION				PRICE E	ACH	EXTE	NDED	
1	A9E8030	TN	515 TONER BIZHUB	558/458 (YIELD:2	N/A				\$ 0.00	\$	0.00	
					N/A							
		+			N/A							
		-			N/A							
		+-			N/A		-					
(ADDITIO	NAMO HARGES				N/A		-	Additional Charge	28			
IVODITIO	AWERO WARREN							TOTAL	distribution	\$	109.85	
	Network		Removal		□ Other			(TOTAL Is exc	lusive of applic			
P	PICK-UP	Ren	uested Removal Da	te: 04/07/2017				_				
QTY	MATERIAL #	Ttoq!	dostod Nemoval Ba	MATERIAL DE	ESCRIPTION				SERIAL NUMB	ER		
100000000000000000000000000000000000000												
		-										
	Control of the Contro				COMMENTS							
					COMMENTS	A TANKS OF STREET	Circles S		OF STREET			





## **Order Package Acceptance Agreement**

Customer Name/Address:					
NW FOCAL POINT SENIOR CENTER DISTRICT 6009 NW 10TH STREET MARGATE, FL 33063					
Customer's signature below constitutes Customer's accepta Order Package ID S00348214 time stamped 03/13/17 04:15 F	ance of the preceding forms in this Order Package (as identified by $^{ m PM}$ ).				
Solutions U.S.A., Inc. and 600-000-11-1 - STATE OF FLOR dated 08/01/2010 terms of which are incorporated into thi hereby grants KMBS the authority to charge the Customer's	s agreement. If payment by credit card is indicated above, Customer s credit card in the amount indicated (plus applicable taxes). KMBS and/or resolve any financial obligations on any existing Customer				
Not binding on KMBS until signed by KMBS Manager.					
Authorized Customer Representative	KMBS Representative				
Name: Tommy Ruzzano (Please Print)	Name: Robert Kalish (Please Print)				
Signature:	Signature: Robert Kalla				
Title: Board Chair	Date: 3 13 17				
Date:	KMBS Manager				
	Name:(Please Print)				
	Signature:				
	Date:				