

Requisition

Req # 00188513

PO #

Date: 01/19/11

Consent
25020
2/1/11

Bill To: x
x

Vendor: 243353
IKON OFFICE SOLUTIONS
809A SAVANNAH AVE #311
MCALLEN TX 78503-3003

Ship To: HEALTH DEPARTMENT
1304 S. 25TH
EDINBURG TX 78539

Contact: JOSIE ESCALANT
956-383-6221

Contract No: BUYBOARD

Special Instructions:

| QUANTITY | UOM | DESCRIPTION | UNIT PRICE | AMOUNT |
|----------|-------|---|------------|-----------|
| 11.00 | MONTH | ***HEALTH & HUMAN SERVICES*** DIFFERENT LOCATIONS DO NOT DUPLICATE ORDER CO NEW EQUIPMENT: NEW 36 MONTH CAPITAL LEASE OPTION RICOH AFICIO MP MP4001 SP COPIER \$170.00 LCIT PB3050 LARGE CAPACITY TRAY (2,000 SHEETS) \$25.00 BRIDGE UNITY BU 3030 REQUIRED FOR FINISHER \$4.00 1,000 SHEET FINISHER SR790 1,000 SHEET \$25.00 ESP DIGITAL QC 120/15 NETWORK (POWERFILTER) \$4.00 DATA OVERWRITE SECURITY UNIT TYPE I \$7.00 LOCATIONS: 1) PHARR CLINIC 300 W. HALL ACRES SUITE B, PHARR, TX 2) ADMINISTRATION 1304 SOUTH 25TH AVE, EDINBURG, TX 3) MISSION ENVIRO, 722 N. BREYFOGLE, MISSION, TX 4) ELSA CLINIC, 708 E. EDINBURG, AVE, ELSA, TEXAS 5) WESLACO ENVIRO, 1902 JOE STEPHENS, WESLACO, TX 6) HIDALGO CLINIC, 702 TEXANO DR, HIDALGO, TEXAS 7) PULMONARY RECEP 1304 SOUTH 25TH , EDINBURG, TX 8) ENVIRONMENTAL , 1304 SOUTH 25TH AVE, EDINBURG, TX 9) PULMONARY 1304 SOUTH 25TH AVE, EDINBURG, TX | 2,115.00 | 23,265.00 |
| 11.00 | MONTH | CO NEW MAINTENANCE FOR RICOH AFICIO MP MP4001 SP COPIER (5,000 B/W IMAGES PER MONTH WITH OVERAGES @ \$0.007) \$44.50 LOCATIONS: 1) PHARR CLINIC, 300 W. HALL ACRES SUITE B PHARR TX 2) ADMINISTRATION 1304 SOUTH 25TH AVE, EDINBURG, TX 3) MISSION ENVIRO, 722 N. BREYFOGLE, MISSION, TX 4) ELSA CLINIC, 708 E. EDINBURG, AVE, ELSA, TEXAS 5) WESLACO ENVIRO, 1902 JOE STEPHENS, WESLACO, TX 6) HIDALGO CLINIC, 702 TEXANO DR, HIDALGO, TEXAS 7) PULMONARY RECEP 1304 SOUTH 25TH , EDINBURG, TX 8) ENVIRONMENTAL , 1304 SOUTH 25TH AVE, EDINBURG, TX 9) PULMONARY 1304 SOUTH 25TH AVE, EDINBURG, TX | 400.50 | 4,405.50 |
| 11.00 | MONTH | CO NEW EQUIPMENT: NEW 36 MONTH CAPITAL LEASE OPTION RICOH MP5001 SP COPIER \$207.00 LCIT PB3050 (2,000 SHEETS) \$25.00 BRIDGE UNIT BU 3030 \$4.00 1,000 SHEET FINISHER SR790 \$25.00 ESP DIGITAL QC 120/15 NETWORK (POWERFILTER) \$4.00 DATA OVERWRITE SECURITY UNIT TYPE I \$7.00 LOCATIONS: 1) EDINBURG CLINIC 3105 E. RICHARDSON RD, EDINBURG, TX 2) WESLACO CLINIC, 1901 N. BRIDGE AVE, WESLACO, TX 3) MCALLEN CLINIC, 300 E. HACKBERRY, MCALLEN, TX 4) MISSION CLINIC, 211 S. SHUERBUCK RD, MISSION, TX | 1,360.00 | 14,960.00 |

Authorized By: _____

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EDINBURG TX 78539

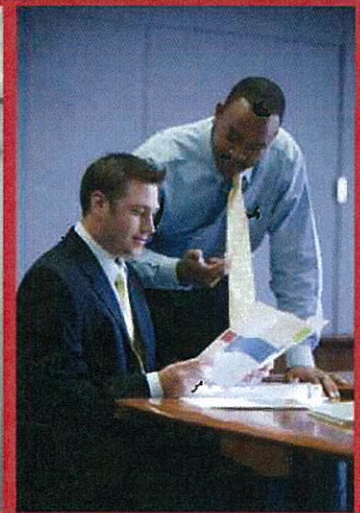
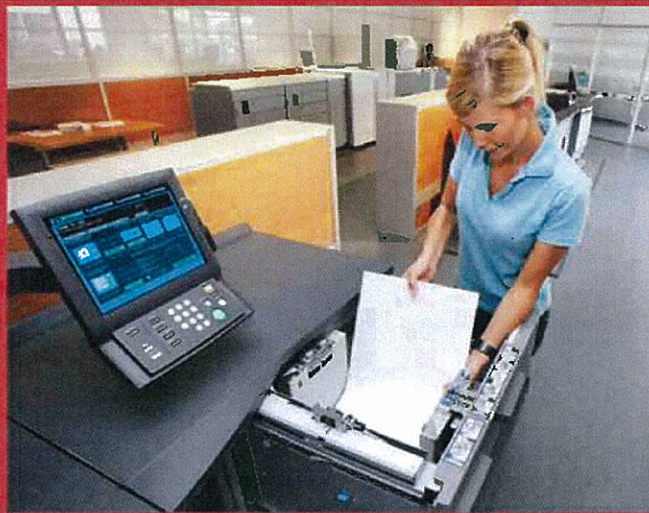
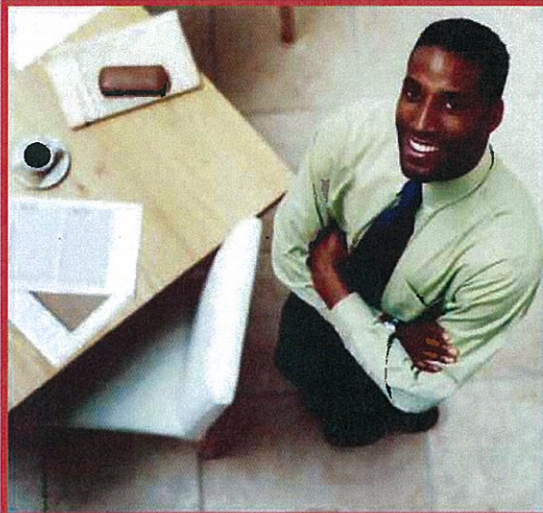
Contact:

| QUANTITY | UOM | DESCRIPTION | UNIT PRICE | AMOUNT |
|----------|-------|--|-------------|-----------|
| 11.00 | MONTH | 5) PHARR CLINIC, 300 W. HALL ACRES RD, PHARR, TEXAS CO NEW MAINTENANCE FOR RICOH MP5001 SP COPIER : (12,000 B/W IMAGES PER MONTH WITH OVERAGES @ \$0.007) \$79.20 LOCATIONS: 1) EDINBURG CLINIC 3105 E. RICHARDSON RD, EDINBURG, TX 2) WESLACO CLINIC, 1901 N. BRIDGE AVE, WESLACO, TX 3) MCALLEN CLINIC, 300 E. HACKBERRY, MCALLEN, TX 4) MISSION CLINIC, 211 S. SHUERBUCK RD, MISSION, TX 5) PHARR CLINIC, 300 W. HALL ACRES RD, PHARR, TEXAS Account No _____ REPORT ROAD HAZARDS 1-866-HCR-SAFE OR 1-866-427-7233 | 396.00 | 4,356.00 |
| | | | Encumbrance | |
| | | | Freight | .00 |
| | | | Total | 46,986.50 |

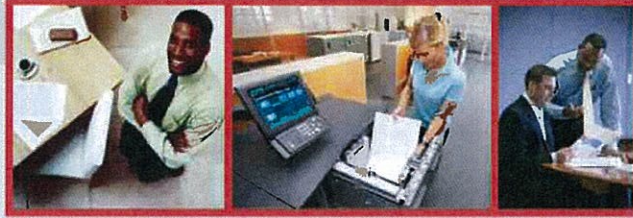
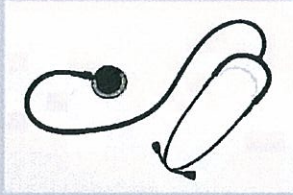
Authorized By: _____



*Proposal for Hidalgo County
Health & Human Services Department*



January 25, 2011



Aissa Garcia
Account Executive
IKON Office Solutions, Inc.
809-A Savannah, Suite 311
McAllen, TX 78503
(956) 607-6465
aigarcia@IKON.com



Reservation of Rights—In response to your request, we have reviewed and are responding to the terms and conditions in your RFP or invitation. Based on our review of the information provided by you, IKON is confident that contracts acceptable to us may be reached promptly following any award. Specifically, we recognize your right to negotiate and approve the terms and conditions of any contract following award and respectfully reserve the same right. We acknowledge that all contract terms and conditions must be mutually agreed upon by both of us. Our proposal represents our commitment with respect to pricing, equipment specifications and our proposed solution. Following bid award, we contemplate that we will both negotiate and sign, in the exercise of good faith, customary definitive agreement(s) to govern our relationship, and provide reasonable assurances of our authority to enter into such agreements. In an effort to expedite the finalization of our agreements, we have noted the following topics for our discussion, which are either not addressed in your request or for which we request further clarification:

- To the extent you lease from us or IKON Financial Services, customary terms and conditions related to equipment financing, subject to customary non-appropriation rights;
- Mutually acceptable terms related to the measurement and calculation of service levels, including customary terms related to reporting requirements and remedies;
- Standard industry service termination and default, rights and remedies, including reasonable written notice requirements and cure periods;
- Risk of loss and insurance requirements during possession of provided equipment;
- Assignment rights subject to prior credit approval;
- Standard industry warranties for service and support and the transfer of applicable manufacturer product warranties, as well as customary limitations of implied warranties;
- Mutual indemnification for third party claims arising from acts of misconduct in connection with the performance of services; and
- Mutual liability protections for consequential and similar damages.

As is customary for transactions of this type, any acknowledgements made by each of us are qualified by the right to negotiate mutually acceptable terms. Our proposal is based upon the information provided by you, and the assumptions made by us in preparing our response. Any changes to information or assumptions may, if material, require modification. Upon award, we will be pleased to work with you to promptly finalize mutually acceptable contract terms and, if applicable, provide copies of appropriate contract forms for that purpose.

Proprietary and Confidential Statement—The enclosed materials are proprietary to IKON Office Solutions, Inc. (“IKON”), and IKON reserves all right, title, and interest in and to such materials. The terms, conditions, and information set forth herein are confidential to IKON and may not be disclosed in any manner to any person other than the addressee, together with its officers, employees, and agents who are directly responsible for evaluating the contents of these materials for the limited purpose intended. These materials may not be used in any manner other than for such limited purpose. Any unauthorized disclosure, use, reproduction, or transmission is expressly prohibited without the prior written consent of IKON. These materials summarize a proposed equipment and/or services solution. They are intended for informational purposes only to assist you in your evaluation of IKON as a potential business partner. These materials do not represent an offer or a binding agreement.

Rigo Hinojosa / Josie Escalante
Director of Operations / Administration
Hidalgo County Health & Human Services Department
1304 S. 25th Ave.
Edinburg, TX 78542



Dear Mr. Hinojosa & Ms. Escalante,

Thank you for taking the time to speak with me regarding your copier situation. Based on our conversation, I have put together a proposed solution that we believe will meet your goals of:

- New technology to increase efficiency and increase speed
- Increased monthly copy allowance with reduced overages
- Reducing overall monthly costs
- Complete lease forgiveness on current lease contract # 429301-1008606A2

At IKON Office Solutions, Inc., a Ricoh company, we have built a solid reputation for providing the best solution for each of our customer's unique requirements. We are able to meet your specific needs by leveraging innovative technology backed by IKON's world class service and expertise.

Thank you for giving us the opportunity to present the following proposal. On behalf of your IKON team, we appreciate the time you have committed to considering our recommendations. We look forward to serving all of your document needs and increasing your document efficiency.

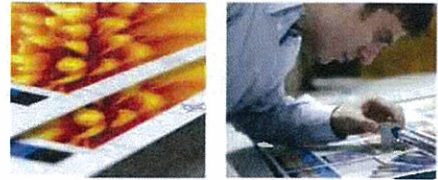
Sincerely,

Aissa Garcia
Account Executive
Office 956-687-9156
Mobile 956-607-6465
aigarcia@ikon.com



Reservation of Rights—In response to your invitation, we are pleased to submit this proposal for your consideration. We recognize your right to negotiate and approve the terms and conditions of any contract following award and respectfully reserve the right to do the same. We acknowledge that all contract terms and conditions must be mutually agreed upon by both of us. Our proposal represents our commitment with respect to pricing, equipment specifications and service levels and contemplates that both parties reserve the right to review and negotiate appropriate and mutually acceptable terms and conditions in the exercise of good faith. As is customary for transactions of this type, our proposal is based upon the information provided by you and the assumptions set forth in our response, and any changes to such information or assumptions may, if material, require modification. Upon award, we will be pleased to work with you to promptly finalize mutually acceptable contract terms and, if applicable, provide copies of appropriate contract forms for that purpose.

Ricoh MP4001SP



The Ricoh MP 4001SP delivers exceptional results to businesses seeking versatile digital copying, productive network scanning and printing. Featuring professional image quality and a space-saving design, the Ricoh MP 4001SP incorporates an array of impressive features that will substantially increase user productivity.

Key Features of the Ricoh MP 4001SP

- 40-PPM monochrome output speed, Low cost per page output
- 2 x 500 Sheet Paper Trays
- 1 - 2,000 sheet Large Capacity Tray
- 100 Sheet ARDF / Duplex unit
- 100 Sheet Bypass
- Configured to Print and scan - providing both black & white and color scanning functionality
- 1 standard PPDM license that includes 1 Desktop, 1 PSP Server Software & MFP Connectivity, plus standard App2Me application.
- Warm up time less than 20 seconds and a 4.5 seconds monochrome first print speed
- ESP Power Filter
- Data Overwrite Security System - DOSS
- Energy Star® compliant



Ricoh MP5001SP



The Ricoh MP 5001SP delivers exceptional results to businesses seeking versatile digital copying, productive network scanning and printing. Featuring professional image quality and a space-saving design, the Ricoh MP 5001SP incorporates an array of impressive features that will substantially increase user productivity.

Key Features of the Ricoh MP 5001SP

- 50-PPM monochrome output speed, Low cost per page output
- 2 x 550 Sheet Paper Trays
- 1 - 2,000 sheet Large Capacity Tray
- 100 Sheet ARDF / Duplex unit
- 100 Sheet Bypass
- Configured to Print and scan - providing both black & white and color scanning functionality
- 1 standard PPDM license that includes 1 Desktop, 1 PSP Server Software & MFP Connectivity, plus standard App2Me application.
- Warm up time less than 22 seconds and a 3.5 seconds monochrome first print speed
- ESP Power Filter
- Data Overwrite Security System - DOSS
- Energy Star® compliant



Current Situation and Proposed Solution

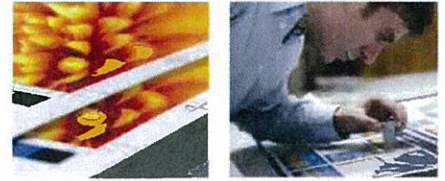


| SERIAL NUMBER | LOCATION | CURRENT MODEL DESCRIPTION | ADDITIONAL ACCESSORIES INCLUDED | AMV | PROPOSED SOLUTION | ADDITIONAL ACCESSORIES |
|---------------|---|---------------------------|--|--------|-------------------|---|
| SRH00086 | 1304 S 25TH AVE EDINBURG, TX **NEW MACHINE WILL BE DELIVERED TO: 300 W HALL ACRES RD PHARR, TX | CANON COPIER IR2016I | PAPER DRAWER AND CABINET | 1,097 | RICOH MP 4001 | PAPER DRAWER, LARGE CAPACITY TRAY, STAPLE, PRINT/SCAN, DOSS |
| SRH00088 | 1304 S 25TH AVE EDINBURG, TX | CANON COPIER IR2016I | PAPER DRAWER AND CABINET | 809 | RICOH MP 4001 | PAPER DRAWER, LARGE CAPACITY TRAY, STAPLE, PRINT/SCAN, DOSS |
| SRH00085 | 722 N BREYFOGLE MISSION, TX | CANON COPIER IR2016I | PAPER DRAWER AND CABINET | 1,642 | RICOH MP 4001 | PAPER DRAWER, LARGE CAPACITY TRAY, STAPLE, PRINT/SCAN, DOSS |
| SRH00091 | 708 E EDINBURG AVE ELSA TX | CANON COPIER IR2016I | PAPER DRAWER AND CABINET | 3,167 | RICOH MP 4001 | PAPER DRAWER, LARGE CAPACITY TRAY, STAPLE, PRINT/SCAN, DOSS |
| SLH26838 | 1902 JOE STEPHENS AVE WESLACO, TX | CANON COPIER IR2270 | CABINET, STAPLE AND PRINT/SCAN | 860 | RICOH MP 4001 | PAPER DRAWER, LARGE CAPACITY TRAY, STAPLE, PRINT/SCAN, DOSS |
| SLH26694 | 702 E TEXANO DR HIDALGO, TX | CANON COPIER IR2270 | CABINET, STAPLE AND PRINT/SCAN | 7,308 | RICOH MP 4001 | PAPER DRAWER, LARGE CAPACITY TRAY, STAPLE, PRINT/SCAN, DOSS |
| SKV57119 | 1304 S 25TH AVE EDINBURG, TX | CANON COPIER IR3570 | CABINET, PAPERDECK, STAPLE AND PRINT/SCAN | 6,685 | RICOH MP 4001 | PAPER DRAWER, LARGE CAPACITY TRAY, STAPLE, PRINT/SCAN, DOSS |
| SKV57143 | 1304 S 25TH AVE EDINBURG, TX | CANON COPIER IR3570 | CABINET, PAPERDECK, STAPLE AND PRINT/SCAN | 5,668 | RICOH MP 4001 | PAPER DRAWER, LARGE CAPACITY TRAY, STAPLE, PRINT/SCAN, DOSS |
| SKV57651 | 3105 E RICHARDSON RD EDINBURG, TX | CANON COPIER IR3570 | CABINET, PAPERDECK, STAPLE AND PRINT/SCAN | 16,004 | RICOH MP 5001 | PAPER DRAWER, LARGE CAPACITY TRAY, STAPLE, PRINT/SCAN, DOSS |
| SKV58232 | 1901 N BRIDGE AVE WESLACO, TX | CANON COPIER IR3570 | CABINET, PAPERDECK, STAPLE AND PRINT/SCAN | 9,307 | RICOH MP 5001 | PAPER DRAWER, LARGE CAPACITY TRAY, STAPLE, PRINT/SCAN, DOSS |
| SKV58241 | 300 E HACKBERRY AVE MCALLEN, TX | CANON COPIER IR3570 | CABINET, PAPERDECK, STAPLE AND PRINT/SCAN | 16,313 | RICOH MP 5001 | PAPER DRAWER, LARGE CAPACITY TRAY, STAPLE, PRINT/SCAN, DOSS |
| SKV57154 | 211 S SCHUERBACH RD MISSION, TX | CANON COPIER IR3570 | CABINET, PAPERDECK, STAPLE AND PRINT/SCAN | 17,470 | RICOH MP 5001 | PAPER DRAWER, LARGE CAPACITY TRAY, STAPLE, PRINT/SCAN, DOSS |
| SKV57180 | 300 W HALL ACRES RD PHARR, TX | CANON COPIER IR3570 | CABINET, PAPERDECK, STAPLE AND PRINT/SCAN | 12,150 | RICOH MP 5001 | PAPER DRAWER, LARGE CAPACITY TRAY, STAPLE, PRINT/SCAN, DOSS |
| SKU22781 | 1304 S 25TH AVE EDINBURG, TX | CANON COPIER IR4570 | CABINET, PAPERDECK, STAPLE AND PRINT/SCAN | 5,726 | RICOH MP 4001 | PAPER DRAWER, LARGE CAPACITY TRAY, STAPLE, PRINT/SCAN, DOSS |

Financial Considerations

Investment Details:

9 Ricoh MP 4001SP's, 5 Ricoh MP 5001SP



Current Situation:

14 Machines with 80,000 copies per month on a 60 Month Lease

\$3,517.40

Financial Considerations for 36 Months

| Equipment Breakdown | TASB Purchase Pricing | 36 mo Pricing |
|--|-----------------------|-------------------|
| 1. Ricoh Aficio MP 4001SP-40ppm B/W Copier/Printer/Scanner | \$4,950.00 | \$170.00 |
| LCIT PB3050-Additional 2,000 Large Capacity Tray | \$731.00 | \$25.00 |
| Bridge Unity BU 3030-Required for installation of finisher | \$108.00 | \$4.00 |
| 1,000 Sheet Finisher SR 790-1,000 Sheet Finisher- 50 sheet staple capacity | \$731.00 | \$25.00 |
| Digital QC 120/20 Network Powerfilter-Surge Protector | \$110.00 | \$4.00 |
| Data Overwrite Security System-DOSS-Compliance with ISO 15408 | \$201.00 | \$7.00 |
| Equipment Total | | \$235.00 |
| Service (5,000 B/W images per month with overages @ \$0.007) | | \$44.50 |
| | Grand Total | \$279.50 |
| | x9 | \$2,515.50 |
| 2. Ricoh Aficio MP 5001SP-50ppm B/W Copier/Printer/Scanner | \$6,027.00 | \$207.00 |
| LCIT PB3050-Additional 2,000 Large Capacity Tray | \$731.00 | \$25.00 |
| Bridge Unity BU 3030-Required for installation of finisher | \$108.00 | \$4.00 |
| 1,000 Sheet Finisher SR790-1,000 Sheet Finisher-50 sheet staple capacity | \$731.00 | \$25.00 |
| Digital QC 120/20 Network Powerfilter-Surge Protector | \$110.00 | \$4.00 |
| Data Overwrite Security System-DOSS-Compliance with ISO 15408 | \$201.00 | \$7.00 |
| Equipment Total | | \$272.00 |
| Service – (12,000 B/W images per month with overages @ \$0.007) | | \$79.20 |
| | Grand Total | \$351.20 |
| | x5 | \$1,756.00 |

36 Month Lease Option - Grand Total - \$4,271.50

(Please see attached TASB Pricing Sheet for further break downs of each machine and service)

This quote includes: **105,000 B/W COPIES** per month with B/W overages billed quarterly @ 0.007

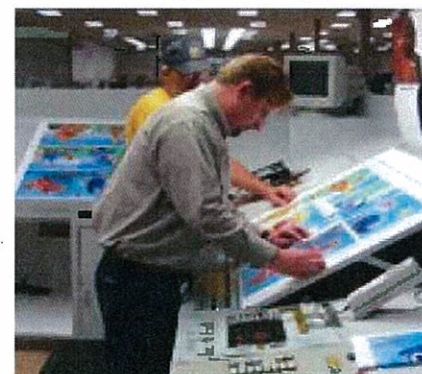
Pricing Components Include: Equipment, Delivery, Installation, Operator Training, Maintenance, Toner, Staples and Service performed by IKON Customer Service Technicians (You will incur no additional charges for parts or labor)

****NOTE:** All rates are Property Tax Inclusive and based off of the TASB BuyBoard Complete Lease Forgiveness on current lease Contract # 429301-1008606A2 with 14 Canon Units And all machines will include DOSS (Data Overwrite Security System) (To comply with ISO 15408 Common Criteria Guidelines)



A RICOH COMPANY

www.ikon.com



A RICOH COMPANY

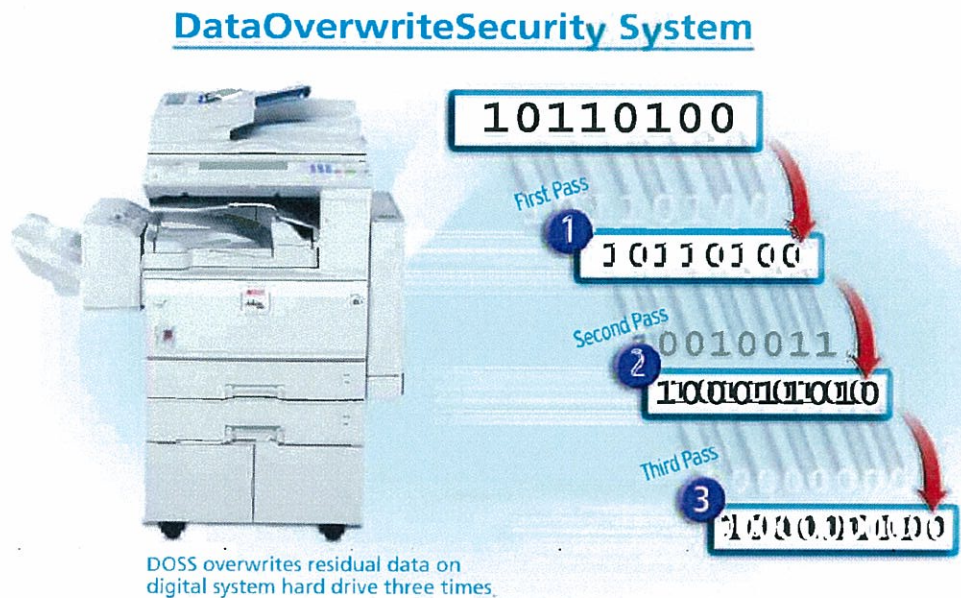
Proprietary and Confidential Statement—The enclosed materials are proprietary to IKON Office Solutions, Inc., a Ricoh company ("IKON"), and IKON reserves all right, title, and interest in and to such materials. The terms, conditions, and information set forth herein are confidential to IKON and may not be disclosed in any manner to any person other than the addressee, together with its officers, employees, and agents who are directly responsible for evaluating the contents of these materials for the limited purpose intended. These materials may not be used in any manner other than for such limited purpose. Any unauthorized disclosure, use, reproduction, or transmission is expressly prohibited without the prior written consent of IKON. These materials summarize a proposed equipment and/or services solution. They are intended for informational purposes only to assist you in your evaluation of IKON as a potential business partner. These materials do not represent an offer or a binding agreement.

DataOverwriteSecurity System (DOSS)

RICOH

Ricoh's DataOverwriteSecurity System (DOSS) option offers added security to all types of customer mission-critical documents and proprietary information. The DOSS option overwrites temporary data stored on the system's internal hard disk drive by using a three-pass overwrite process of random sequences of 1s and 0s, making it incredibly difficult to reconstruct images or files. Customers can rest easy knowing their copy and print jobs, scanned files, and paperless Fax data are safeguarded against the risk of unauthorized distribution of files or information theft.

When customers relocate or dispose of their system, an Erase All Memory function is available to permanently erase all content stored on the hard disk drive, including address book information, user codes, network settings, and additional fonts downloaded to the system.



■ Key Benefits:

- **A DIMM CHIP** is installed within the digital system, automatically enabling the overwrite functionality. The DOSS Unit can only be disabled by the system administrator using a special password. DOSS installation must be completed by an authorized Ricoh Service Technician.
- **PROVIDES THE ADDED ASSURANCE OF ISO 15408 COMMON CRITERIA CERTIFICATION** – ISO 15408 Certification provides customers with third party independent assurance that a vendor's security claims operate as advertised. This certification can then be added to an Information Assurance plan as proof that a reasonable effort has been made to keep information secure. The ISO 15408 standard is administered in the US by the National Information Assurance Partnership (NIAP), a US Government agency. ISO 15408 Certification completed for DOSS Type C and D is fully recognized in the US by NIAP.
- **REMOVABLE HARD DISK DRIVE SECURITY SYSTEM** allows a digital system's internal hard drive to be removed and works in conjunction with Ricoh's DOSS option. Combining these two security features provides a multi-layered approach to securing sensitive documents. (Available on select Ricoh digital systems)
- **ASSISTS IN COMPLIANCE WITH US GOVERNMENT INFORMATION SECURITY ACTS** – Health Insurance Portability AND Accountability Act (HIPPA), Gramm-Leach-Bliley Act (GLBA) for financial privacy, and Family Education Rights Privacy Act (FERPA) for student privacy. Each ACT requires organizations dealing with sensitive information to complete an information assurance plan to document that a reasonable effort has been made to keep information secure. Including DOSS on digital systems helps comply with the security ACTs and provides substance for the information assurance plan.

*To comply with ISO 15408 Common Criteria guidelines, an authorized Ricoh service technician must install the DOSS option.

For more information on the DOSS option, please go to the Solution section at www.ricoh-usa.com

| Product Description | Vendor Part Number | MSRP | TLGC Selling Price | 24 Mo | 36 Mo | 48 Mo | 60 Mo |
|---------------------|--------------------|------|--------------------|-------|-------|-------|-------|
|---------------------|--------------------|------|--------------------|-------|-------|-------|-------|

Ricoh Aficio MP4001SP

BASE UNIT

| | | | | | | | |
|-----------------------|----------|----------|---------|-------|-------|-------|-------|
| Ricoh Aficio MP4001SP | MP4001SP | \$12,030 | \$4,950 | \$242 | \$170 | \$135 | \$113 |
|-----------------------|----------|----------|---------|-------|-------|-------|-------|

COPIER ACCESSORIES

| | | | | | | | |
|--|-----------|---------|---------|------|------|------|------|
| FAC33 Cabinet | 413762 | \$210 | \$100 | \$5 | \$3 | \$3 | \$2 |
| 2-Tray Paper Bank (PB3040) | 415002 | \$1,520 | \$753 | \$37 | \$26 | \$21 | \$17 |
| LCIT PB3050 (2,000 Sheets) | 415003 | \$1,570 | \$731 | \$36 | \$25 | \$20 | \$17 |
| LCIT RT3000 (1,200 Sheets) | 415005 | \$1,570 | \$679 | \$33 | \$23 | \$19 | \$16 |
| Bridge Unit BU 3030 | 414175 | \$230 | \$108 | \$5 | \$4 | \$3 | \$2 |
| 1 Bin Tray BN3040 | 414177 | \$420 | \$222 | \$11 | \$8 | \$6 | \$5 |
| 2000 Sheet Booklet Finisher SR3020 | 413323 | \$4,110 | \$1,968 | \$96 | \$68 | \$54 | \$45 |
| 1,000 Sheet Finisher SR790 | 412730 | \$1,480 | \$731 | \$36 | \$25 | \$20 | \$17 |
| 3000 Sheet Finisher SR3030 | 413325 | \$2,860 | \$1,371 | \$67 | \$47 | \$37 | \$31 |
| 2/3 Hole Punch Unit Type 3260 | 412209 | \$920 | \$416 | \$20 | \$14 | \$11 | \$10 |
| HDD Encryption Unit Type A | 414021 | \$390 | \$198 | \$10 | \$7 | \$5 | \$5 |
| TYPE MP5000 REMOVABLE HARD DRIVE (RHD) | 003896MIU | \$1,500 | \$1,060 | \$52 | \$36 | \$29 | \$24 |
| TYPE MP5000 ADDITIONAL REMOVABLE HARD DRIVE (ARHD) | 003897MIU | \$765 | \$616 | \$30 | \$21 | \$17 | \$14 |
| Optional Counter Interface Unit Type A | 413012 | \$62 | \$31 | \$2 | \$1 | \$1 | \$1 |
| ESP Digital QC 120/15 Network - (Powerfilter) | D5133NT | \$170 | \$110 | | \$4 | \$3 | \$3 |

FAX OPTION ACCESSORIES

| | | | | | | | |
|-----------------------------|-----------|---------|-------|------|------|------|------|
| Ricoh Fax Option Type 5001 | 415291 | \$1,150 | \$553 | \$27 | \$19 | \$15 | \$13 |
| G3 Interface Unit Type 5000 | 413891 | \$685 | \$340 | \$17 | \$12 | \$9 | \$8 |
| Handset Type 1018 | 410781 | \$68 | \$34 | \$2 | \$1 | \$1 | \$1 |
| 32MB Memory Unit Type B | 001342MIU | \$195 | \$90 | \$4 | \$3 | \$2 | \$2 |

PRINT/SCAN OPTION

| | | | | | | | |
|---|--------|-------|-------|------|------|------|------|
| PostScript3 Unit Type 5000 | 413954 | \$920 | \$445 | \$22 | \$15 | \$12 | \$10 |
| IEEE802.11a/b/g Wireless Interface Type J | 414008 | \$565 | \$290 | \$14 | \$10 | \$8 | \$7 |
| Gigabit Ethernet Board Type A | 402547 | \$340 | \$211 | \$10 | \$7 | \$6 | \$5 |
| IEEE1284 Interface Board Type A | 411699 | \$105 | \$51 | \$2 | \$2 | \$1 | \$1 |
| Bluetooth Interface Unit Type 3245 | 412866 | \$378 | \$223 | \$11 | \$8 | \$6 | \$5 |

Special Options

| | | | | | | | |
|--|-----------|---------|-------|------|------|------|------|
| File Format Converter Type E | 414007 | \$605 | \$304 | \$15 | \$10 | \$8 | \$7 |
| Key Counter Bracket Type H | 412552 | \$100 | \$48 | \$2 | \$2 | \$1 | \$1 |
| Data Overwrite Security Unit Type I | 413955 | \$420 | \$201 | \$10 | \$7 | \$5 | \$5 |
| Scanner Accessibility Option Type 4045 | 413054 | \$1,680 | \$803 | \$39 | \$28 | \$22 | \$18 |
| 3L68-17 USB Keyboard | 100168FNG | \$449 | \$409 | \$20 | \$14 | \$11 | \$9 |

| | | | |
|---|-----------------|--|----------------|
| TOTAL PURCHASE PRICE FOR EACH MP4001SP | \$6,831 | LEASE TOTAL PER MONTH FOR EACH MP4001SP | \$235 |
| | X9 | | X9 |
| TOTAL PURCHASE PRICE FOR 9 MP4001SP'S | \$61,479 | LEASE TOTAL PER MONTH FOR 9 MP4001SP'S | \$2,115 |

SUPPLIES

| | | |
|--------------------------|--------|-------|
| TONER MP4500/8045E/LD345 | 841346 | \$342 |
| STAPLES TYPE K 5000/CTG | 410801 | \$44 |
| STAPLES TYPE K REFILL | 410802 | \$78 |
| STAPLES TYPE L | 411240 | \$32 |
| STAPLES TYPE L REFILL | 411241 | \$53 |
| Marker Type 30 | 334049 | \$31 |

Notes

- (1)Mainframe includes 2 x 550 Sheet Paper Trays, 768MB RAM, 100-Sheet ARDF, Duplex, 100-Sheet Bypass, Interchange, 40 GB HDD, Printer/Scanner SD Card. Color Scanning is a standard feature. Also includes Java Card Type F, 1 standard PPDM license that includes 1 Desktop, 1 PSP Server Software & MFP Connectivity, plus standard App2Me application. Standard support for PCL5e/PL6. RPCS is not available.
- (2)Must install either FAC33 Cabinet (413762) or PB3040 (415002) or PB3050 (415003).
- (3)The Bridge Unit BU3030 (414175) is required with the SR3020 Booklet Finisher (413323), SR790 (412730) and SR3030 Finishers (413325).
- (4)125 Sheet Capacity. Provides additional output tray to separate fax/print output from copy.
- (5)Encrypts HDD and Non-Volatile RAM data immediately upon storage, which reduces the risk of data disclosure in the event HDD is stolen.
- (6)Punch Kit Type 3260 NA 2/3 (412209) requires the installation of either Finisher SR3030 (413325) or Booklet Finisher SR3020 (413323).
- (7)33.6Kbps, 2 Second Transmission Speed, Standard JBIG. Standard 320 Pages. LAN-Faxing, Fax Forward to Email, IP Faxing.
- (8)Provides an additional fax modem. Two additional G3 lines can be added. Maximum of 3 lines available.
- (9)Memory Unit Type B 32MB increases page memory size to 16MB, SAF memory size increases to 28MB (or 2,240 pages), and resolution increases to 400 x 400 dpi.
- (10)Required for Macintosh and PostScript environments.
- (11)Overwrites Copy, Print, Scanner, Document Server, File Format Converter and Paperless Fax.
- (12)One out of five options may be installed: IEEE1284 (411699), Bluetooth (412866), IEEE802.11a/g (414008), Gigabit Ethernet (402547) or File Format Converter
- (13)Required to convert, format and drag to desktop document stored via Copy or Print mode.
- (14)Requires Fax Option Type 5001 (415291).
- (15)LCIT RT3000 (414137) requires installation of LCIT PB3050 (415003) or Paper Feed Unit PB3040 (415002). This option cannot be installed with FAC33 Cabinet (413762).
- (16)SR790 Finisher (412730), SR3030 Finisher (413325) and SR3020 Booklet Finisher (413323) cannot be installed on the same device.
- (17)Cannot install Paper Feed Unit Type PB3040 (415002) with Tandem LCT PD3050 (415003).
- (18)20-Pin Interface used to attach External Key Counter or Key Card Device.
- (19)Used to mount external Key Counter to MFP.
- (20)Includes cable kit to allow ARDF/Scanner to be removed from mainframe and placed on a table for easier access.
- (21)This option is installed in the standard exit tray and supports optional eCopy ShareScan Suite, eCopy ShareScan Essentials & GlobalScan NX.
- (22)PPDM Bundle Upgrade. Only valid for purchase with the MP 2851SP/MP 3351SP/MP 40001SP/MP 5001SP products.
- (23)RHD kit uses MFP's Internal Hard Drive
- (24)Fax Option is NOT COMPATIBLE with RHD or ARHD
- (25)HDD Encryption unit is NOT COMPATIBLE with RHD or ARHD
- (26)ARHD includes an extra hard drive

| Product Description | Vendor Part Number | MSRP | TLGC Selling Price | 24 Mo | 36 Mo | 48 Mo | 60 Mo |
|--|--------------------|----------|---|-------|-------|--|----------------|
| Ricoh Aficio MP5001SP | | | | | | | |
| BASE UNIT | | | | | | | |
| Ricoh Aficio MP5001SP | MP5001SP | \$14,870 | \$6,027 | \$294 | \$207 | \$165 | \$138 |
| COPIER ACCESSORIES | | | | | | | |
| FAC33 Cabinet | 413762 | \$210 | \$100 | \$5 | \$3 | \$3 | \$2 |
| 2-Tray Paper Bank (PB3040) | 415002 | \$1,520 | \$753 | \$37 | \$26 | \$21 | \$17 |
| LCIT PB3050 (2,000 Sheets) | 415003 | \$1,570 | \$731 | \$36 | \$25 | \$20 | \$17 |
| LCIT RT3000 (1,200 Sheets) | 415005 | \$1,570 | \$679 | \$33 | \$23 | \$19 | \$16 |
| Bridge Unit BU 3030 | 414175 | \$230 | \$108 | \$5 | \$4 | \$3 | \$2 |
| 1 Bin Tray BN3040 | 414177 | \$420 | \$222 | \$11 | \$8 | \$6 | \$5 |
| 2000 Sheet Booklet Finisher SR3020 | 413323 | \$4,110 | \$1,968 | \$96 | \$68 | \$54 | \$45 |
| 1,000 Sheet Finisher SR790 | 412730 | \$1,480 | \$731 | \$36 | \$25 | \$20 | \$17 |
| 3000 Sheet Finisher SR3030 | 413325 | \$2,860 | \$1,371 | \$67 | \$47 | \$37 | \$31 |
| 2/3 Hole Punch Unit Type 3260 | 412209 | \$920 | \$416 | \$20 | \$14 | \$11 | \$10 |
| HDD Encryption Unit Type A | 414021 | \$390 | \$198 | \$10 | \$7 | \$5 | \$5 |
| TYPE MP5000 REMOVABLE HARD DRIVE (RHD) | 003896MIU | \$1,500 | \$1,060 | \$52 | \$36 | \$29 | \$24 |
| TYPE MP5000 ADDITIONAL REMOVABLE HARD DRIVE (ARHD) | 003897MIU | \$765 | \$616 | \$30 | \$21 | \$17 | \$14 |
| Optional Counter Interface Unit Type A | 413012 | \$62 | \$31 | \$2 | \$1 | \$1 | \$1 |
| ESP Digital QC 120/15 Network - (Powerfilter) | D5133NT | \$170 | \$110 | | \$4 | \$3 | \$3 |
| FAX OPTION ACCESSORIES | | | | | | | |
| Ricoh Fax Option Type 5001 | 415291 | \$1,150 | \$553 | \$27 | \$19 | \$15 | \$13 |
| G3 Interface Unit Type 5000 | 413891 | \$685 | \$340 | \$17 | \$12 | \$9 | \$8 |
| Handset Type 1018 | 410781 | \$68 | \$34 | \$2 | \$1 | \$1 | \$1 |
| 32MB Memory Unit Type B | 001342MIU | \$195 | \$90 | \$4 | \$3 | \$2 | \$2 |
| PRINT/SCAN OPTION | | | | | | | |
| PostScript3 Unit Type 5000 | 413954 | \$920 | \$445 | \$22 | \$15 | \$12 | \$10 |
| IEEE802.11a/b/g Wireless Interface Type J | 414008 | \$565 | \$290 | \$14 | \$10 | \$8 | \$7 |
| Gigabit Ethernet Board Type A | 402547 | \$340 | \$211 | \$10 | \$7 | \$6 | \$5 |
| IEEE1284 Interface Board Type A | 411699 | \$105 | \$51 | \$2 | \$2 | \$1 | \$1 |
| Bluetooth Interface Unit Type 3245 | 412866 | \$378 | \$223 | \$11 | \$8 | \$6 | \$5 |
| Special Options | | | | | | | |
| File Format Converter Type E | 414007 | \$605 | \$304 | \$15 | \$10 | \$8 | \$7 |
| Key Counter Bracket Type H | 412552 | \$100 | \$48 | \$2 | \$2 | \$1 | \$1 |
| Data Overwrite Security Unit Type I | 413955 | \$420 | \$201 | \$10 | \$7 | \$5 | \$5 |
| Scanner Accessibility Option Type 4045 | 413054 | \$1,680 | \$803 | \$39 | \$28 | \$22 | \$18 |
| 100168FNG | 41499 | \$409 | \$209 | \$20 | \$14 | \$11 | \$9 |
| | | | TOTAL PURCHASE PRICE FOR EACH MP5001SP | | | LEASE TOTAL PER MONTH FOR EACH MP5001SP | \$272 |
| | | | | X5 | | | X5 |
| | | | TOTAL PURCHASE PRICE FOR 5 MP5001SP'S | | | LEASE TOTAL PER MONTH FOR 5 MP5001SP'S | \$1,360 |
| SUPPLIES | | | | | | | |
| TONER MP4500/8045E/LD345 | 841346 | \$342 | | | | | |
| STAPLES TYPE K 5000/CTG | 410801 | \$44 | | | | | |
| STAPLES TYPE K REFILL | 410802 | \$78 | | | | | |
| STAPLES TYPE L | 411240 | \$32 | | | | | |
| STAPLES TYPE L REFILL | 411241 | \$53 | | | | | |
| Marker Type 30 | 334049 | \$31 | | | | | |

Notes

- Mainframe includes 2 x 550 Sheet Paper Trays, 768MB RAM, 100-Sheet ARDF, Duplex, 100-Sheet Bypass, Interchange, 40 GB HDD, Printer/Scanner SD Card. Color Scanning is a standard feature. Also includes Java Card Type F, 1 standard PPD license that includes 1 Desktop, 1 PSP Server Software & MFP Connectivity, plus standard App2Me application. Standard support for PCL5e/PL6. RPCS is not available.
- Must install either FAC33 Cabinet (413762) or PB3040 (415002) or PB3050 (415003).
- The Bridge Unit BU3030 (414175) is required with the SR3020 Booklet Finisher (413323), SR790 (412730) and SR3030 Finishers (413325).
- 125 Sheet Capacity. Provides additional output tray to separate fax/print output from copy.
- Encrypts HDD and Non-Volatile RAM data immediately upon storage, which reduces the risk of data disclosure in the event HDD is stolen.
- Punch Kit Type 3260 NA 2/3 (412209) requires the installation of either Finisher SR3030 (413325) or Booklet Finisher SR3020 (413323).
- 33.6Kbps, 2 Second Transmission Speed, Standard JBIG. Standard 320 Pages. LAN-Faxing, Fax Forward to Email, IP Faxing.
- Provides an additional fax modem. Two additional G3 lines can be added. Maximum of 3 lines available.
- Memory Unit Type B 32MB increases page memory size to 16MB, SAF memory size increases to 28MB (or 2,240 pages), and resolution increases to 400 x 400 dpi.
- Required for Macintosh and PostScript environments.
- Overwrites Copy, Print, Scanner, Document Server, File Format Converter and Paperless Fax.
- One out of five options may be installed: IEEE1284 (411699), Bluetooth (412866), IEEE802.11a/g (414008), Gigabit Ethernet (402547) or File Format Converter (414007).
- Required to convert, format and drag to desktop document stored via Copy or Print mode.
- Requires Fax Option Type 5001 (415291).
- LCIT RT3000 (414137) requires installation of LCIT PB3050 (415003) or Paper Feed Unit PB3040 (415002). This option cannot be installed with FAC33 Cabinet (413762).
- SR790 Finisher (412730), SR3030 Finisher (413325) and SR3020 Booklet Finisher (413323) cannot be installed on the same device.
- Cannot install Paper Feed Unit Type PB3040 (415002) with Tandem LCT PD3050 (415003).
- 20-Pin Interface used to attach External Key Counter or Key Card Device.
- Used to mount external Key Counter to MFP.
- Includes cable kit to allow ARDF/Scanner to be removed from mainframe and placed on a table for easier access.
- This option is installed in the standard exit tray and supports optional eCopy ShareScan Suite, eCopy ShareScan Essentials & GlobalScan NX.
- PPDM Bundle Upgrade. Only valid for purchase with the MP 2851SP/MP 3351SP/MP 40001SP/MP 5001SP products.
- RHD kit uses MFP's Internal Hard Drive
- Fax Option is NOT COMPATIBLE with RHD or ARHD
- HDD Encryption unit is NOT COMPATIBLE with RHD or ARHD
- ARHD includes an extra hard drive

TASB

IKON Office Solutions GTX IMP

CANON / RICOH DIGITAL BLACK&WHITE, COLOR AND PROFESSIONAL SERVICES

| TERM | SEG 1 | SEG 2 | SEG 3 | SEG 4a | SEG 4b | SEG 5a | SEG 5b | SEG 6 |
|-----------------------|--|-------------|--------------|---------------|---------------|---------------|---------------|----------|
| | Per Copy | Per Copy | Per Copy | Per Copy | Per Copy | Per Copy | Per Copy | Per Copy |
| 12 MONTH | 0.0149 | 0.011 | 0.0085 | 0.0066 | 0.0064 | 0.0058 | 0.0056 | 0.0051 |
| 36 MONTH RATE | 0.0156 | 0.0115 | 0.0089 | 0.0068 | 0.0066 | 0.006 | 0.0058 | 0.0053 |
| 48 MONTH RATE | 0.0163 | 0.0121 | 0.0093 | 0.0071 | 0.0068 | 0.0063 | 0.006 | 0.0055 |
| 60 MONTH RATE | 0.0171 | 0.0127 | 0.0098 | 0.0075 | 0.0072 | 0.0066 | 0.0062 | 0.0057 |
| OVERAGES | 0.0145 | 0.0095 | 0.0086 | 0.0062 | 0.0060 | 0.0055 | 0.0054 | 0.0050 |
| MONTHLY VOLUME | 1,000-2,500 | 2,500-5,000 | 5,000-10,000 | 10,000-20,000 | 20,000-30,000 | 30,000-40,000 | 40,000-75,000 | 75,000 + |
| | B/W Service for 9 MP 4001SP'S: 5,000 B/W images per month for 9 machines= 5,000 x \$0.0089 = \$44.50 x 9 = \$400.50 | | | | | | | |
| | B/W Service for 5 MP 5001SP'S: 12,000 B/W images per month for 5 machines= 12,000 x \$0.0066 = \$79.20 x 5 = \$396.00 | | | | | | | |
| | TOTAL FOR 9 MP 4001SP'S AND 5 MP 5001SP'S = \$796.50 Overages charged @ \$0.00849 \$0.007 | | | | | | | |

Price included Service Parts/Labor, Black Toner and Staples. Excluded Connectivity Support.

* **Required Minimum Volume**

| TERM | C1100/IPC-1 | CLC4/5100 | MPC2000/2500 /3000 | MPC3500/4500 /6000/7500 | C2550/3080/3480 | C4080/4580/5185 | C5058U/5068U | CPP5500/6500/7000/8000VP/8000 | | | | | | |
|--|-----------------|------------|--------------------|-------------------------|-----------------|-----------------|----------------|-------------------------------|---|----------|----------------------------------|-----------------|--|--|
| | Color* | Color* | B/W or Color** | B/W or Color** | B/W or Color** | B/W or Color** | B/W or Color** | Color* | | | | | | |
| 12 MONTH | 0.1200 | 0.0680 | 0.0750 | 0.0750 | 0.0660 | 0.0660 | 0.0830 | 0.0520 | | | | | | |
| 36 MONTH RATE | 0.1250 | 0.0700 | 0.0770 | 0.0770 | 0.0679 | 0.0679 | 0.0850 | 0.0540 | | | | | | |
| 48 MONTH RATE | 0.1313 | 0.0720 | 0.0790 | 0.0790 | 0.0712 | 0.0712 | 0.0870 | 0.0560 | | | | | | |
| 60 MONTH RATE | 0.1378 | 0.0740 | 0.0810 | 0.0810 | 0.0748 | 0.0748 | 0.0890 | 0.0580 | | | | | | |
| OVERAGES COLOR | 0.1100 | 0.0660 | 0.0720 | 0.0720 | 0.0640 | 0.0640 | 0.0810 | 0.0500 | | | | | | |
| BLACK/WHITE CPC | 0.0200 | 0.0130 | 0.0110 | 0.0090 | 0.0110 | 0.0100 | 0.0120 | 0.0120 | | | | | | |
| MONTHLY VOLUME COLOR | 1,000-2,500 | 10,000 + | 2,500 + | 5,000 + | 2,500 + | 5,000 + | 5,000 + | 10,000 + | | | | | | |
| RIP Fees | \$45/month | \$50/month | \$30/month | \$30/month | \$30/month | \$30/month | \$30/month | \$50/month | | | | | | |
| No charge for Embedded RIPs | | | | | | | | | | | | | | |
| <table border="1"> <tr> <td>SERVICE TOTAL FOR 9 MP 4001SP'S & 5 MP 5001SP'S</td> <td>\$796.50</td> </tr> <tr> <td>TOTAL MONTHLY SERVICE FEE</td> <td>\$796.50</td> </tr> <tr> <td colspan="2">B/W Overages charged quarterly @ \$0.00849 \$0.007</td> </tr> </table> | | | | | | | | | SERVICE TOTAL FOR 9 MP 4001SP'S & 5 MP 5001SP'S | \$796.50 | TOTAL MONTHLY SERVICE FEE | \$796.50 | B/W Overages charged quarterly @ \$0.00849 \$0.007 | |
| SERVICE TOTAL FOR 9 MP 4001SP'S & 5 MP 5001SP'S | \$796.50 | | | | | | | | | | | | | |
| TOTAL MONTHLY SERVICE FEE | \$796.50 | | | | | | | | | | | | | |
| B/W Overages charged quarterly @ \$0.00849 \$0.007 | | | | | | | | | | | | | | |

Price included Service Parts/Labor, Toners and Staples. Excluded Connectivity Support.

* **Required Minimum COLOR Volume. ** Select either Black/White or Color as minimum.**

Managed Printer Fleet Pricing

All LaserJet Printers BuyBoard Pricing
 B/W Printer .03/impression*
 Color .25/impression*
 * Only Laser Jets
 *All Printers need to have Director of Service approval

Product Schedule Number: _____

State and Local Government Master Agreement Number: _____

This Image Management Plus Product Schedule ("Schedule") is made part of the State and Local Government Master Agreement ("Master Agreement") identified on this Schedule between IKON Office Solutions, Inc. ("we" or "us") and Hidalgo, County of _____, as Customer ("Customer" or "you"). All terms and conditions of the Master Agreement are incorporated into this Schedule and made a part hereof. It is the intent of the parties that this Schedule be separately enforceable as a complete and independent agreement, independent of all other Schedules to the Master Agreement.

CUSTOMER INFORMATION

| | | | | | | | |
|---|--------|-------|--|---|--|-------|-----|
| HIDALGO COUNTY - HEALTH DEPARTMENT | | | | JOSIE ESCALANTE | | | |
| Customer (Bill To) 1304 S 25TH AVE. | | | | Billing Contact Name 1304 S 25TH AVE | | | |
| Product Location Address EDINBURG HIDALGO TX 78539 | | | | Billing Address (if different from location address) EDINBURG HIDALGO TX 78539 | | | |
| City | County | State | Zip | City | County | State | Zip |
| Billing Contact Telephone Number (956) 383-6221 | | | Billing Contact Facsimile Number (956) 383-3229 | | Billing Contact E-Mail Address JOSIE.ESCALANTE@HCHD.ORG | | |

PRODUCT DESCRIPTION ("Product")

| Qty | Product Description: Make & Model |
|-----|-----------------------------------|
| 9 | RICOH MP 4001 |
| 5 | RICOH.MP.5001 |
| | |
| | |
| | |
| | |
| | |

| Qty | Product Description: Make & Model |
|-----|-----------------------------------|
| | |
| | |
| | |
| | |
| | |
| | |
| | |

PAYMENT SCHEDULE

| Minimum Term (months) |
|--------------------------|
| 36 |

| Minimum Payment (Without Tax) |
|----------------------------------|
| \$ 4,271.50 |

| Minimum Payment Billing Frequency |
|---|
| <input checked="" type="checkbox"/> Monthly |
| <input type="checkbox"/> Quarterly |
| <input type="checkbox"/> Other: _____ |

| Advance Payment |
|---|
| <input type="checkbox"/> 1 st Payment |
| <input type="checkbox"/> 1 st & Last Payment |
| <input type="checkbox"/> Other: _____ |

| Guaranteed Minimum Images*° | |
|-----------------------------|-------|
| Black/White | Color |
| 105,000 | N/A |

| Cost of Additional Images° | |
|----------------------------|-------|
| Black/White | Color |
| 0.007 | N/A |

| Meter Reading/Billing Frequency |
|---|
| <input type="checkbox"/> Monthly |
| <input checked="" type="checkbox"/> Quarterly |
| <input type="checkbox"/> Other: _____ |

* Based upon Minimum Payment Billing Frequency
° Based upon standard 8 1/2" x 11" paper size. Paper sizes greater than 8 1/2" x 11" may count as more than one image.

Sales Tax Exempt: YES (Attach Exemption Certificate) Customer Billing Reference Number (P.O. #, etc.) _____
Addendum(s) attached: YES (check if yes and indicate total number of pages: _____)

TERMS AND CONDITIONS

- The first Payment will be due on the Effective Date.
- You, the undersigned Customer, have applied to us to use the above-described items ("Product") for lawful commercial (non-consumer) purposes. **THIS IS AN UNCONDITIONAL, NON-CANCELABLE AGREEMENT FOR THE MINIMUM TERM INDICATED ABOVE.** If we accept this Schedule, you agree to use the above Product on all the terms hereof, including the Terms and Conditions on the

Master Agreement. **THIS WILL ACKNOWLEDGE THAT YOU HAVE READ AND UNDERSTAND THIS SCHEDULE AND THE MASTER AGREEMENT AND HAVE RECEIVED A COPY OF THIS SCHEDULE AND THE MASTER AGREEMENT.**

3. Image Charges/Meters: In return for the Minimum Payment, you are entitled to use the number of Guaranteed Minimum Images as specified in the Payment Schedule of this Agreement. The Meter Reading/Billing Frequency is the period of time (monthly, quarterly, etc.) for which the number of images used will be reconciled. If you use more than the Guaranteed Minimum Images during the selected Meter Reading/Billing Frequency period, you will pay additional charges at the applicable Cost of Additional Images as specified in the Payment Schedule of this Schedule for images, black and white and/or color, which exceed the Guaranteed Minimum Images ("Additional Images"). The charge for Additional Images is calculated by multiplying the number of Additional Images times the applicable Cost of Additional Images. The Meter Reading/Billing Frequency may be different than the Minimum Payment Billing Frequency as specified in the Payment Schedule of this Schedule. You will provide us or our designee with the actual meter reading(s) by submitting meter reads electronically via an automated meter read program, or in any other reasonable manner requested by us or our designee from time to time. If such meter reading is not received within seven (7) days of either the end of the Meter Reading/Billing Frequency period or at our request, we may estimate the number of images used. Adjustments for estimated charges for Additional Images will be made upon receipt of actual meter reading(s). Notwithstanding any adjustment, you will never pay less than the Minimum Payment.

4. Additional Provisions (if any) are: _____

THE PERSON SIGNING THIS AGREEMENT ON BEHALF OF THE CUSTOMER REPRESENTS THAT HE/SHE HAS THE AUTHORITY TO DO SO.

| | |
|--|---|
| <p>CUSTOMER</p> <p>By: X _____ Authorized Signer Signature</p> <p>Printed Name: _____</p> <p>Title: _____ Date: _____</p> | <p>Accepted by: IKON OFFICE SOLUTIONS, INC.</p> <p>By: _____ Authorized Signer Signature</p> <p>Printed Name: _____</p> <p>Title: _____ Date: _____</p> |
|--|---|

IKON OFFICE SOLUTIONS, INC.
IMAGE MANAGEMENT PLUS COMMITMENTS

The below service commitments (collectively, the "Service Commitments") are brought to you by IKON Office Solutions, Inc., an Ohio corporation having its principal place of business at 70 Valley Stream Parkway, Malvern, PA 19355 ("IKON"), one of the largest distributors of office solutions in the world. The words "you" and "your" refer to you, our customer. You agree that IKON alone is the party to provide all of the services set forth below and is fully responsible to you, the customer, for all of the Service Commitments. The Service Commitments are only applicable to the equipment ("Equipment") described in the Image Management Plus Product Schedule to which these Service Commitments are attached, excluding facsimile machines, single-function and wide-format printers and production units. The Service Commitments are effective on the date the Equipment is accepted by you and apply during IKON's normal business hours, excluding weekends and IKON recognized holidays. They remain in effect for the Minimum Term so long as no ongoing default exists on your part.

TERM PRICE PROTECTION

The Image Management Minimum Payment and the Cost of Additional Images, as described on the Image Management Plus Product Schedule, will not increase in price during the Minimum Term of the Image Management Plus Product Schedule, unless agreed to in writing and signed by both parties.

EQUIPMENT SERVICE AND SUPPLIES

IKON will provide full coverage maintenance services, including replacement parts, drums, labor and all service calls, during Normal Business Hours. "Normal Business Hours" are between 8:00am and 5:00pm, Monday to Friday excluding public holidays. IKON will also provide the supplies required to produce images on the Equipment covered under the Image Management Plus Product Schedule (other than non-metered equipment and soft-metered Equipment). The supplies will be provided according to manufacturer's specifications. Optional supply items such as paper and transparencies are not included. **Includes staples x_____**

RESPONSE TIME COMMITMENT

IKON will provide a quarterly average response time of 2 to 6 business hours for all service calls located within a 30-mile radius of any IKON office, and 4 to 8 business hours for service calls located within a 31-60 mile radius for the term of the Image Management Plus Product Schedule. Response time is measured in aggregate for all Equipment covered by the Image Management Plus Product Schedule.

UPTIME PERFORMANCE COMMITMENT

IKON will service the Equipment to be Operational with a quarterly uptime average of 96% during Normal Business Hours, excluding preventative and interim maintenance time. Downtime will begin at the time you place a service call to IKON and will end when the Equipment is again Operational. You agree to make the Equipment available to IKON for scheduled preventative and interim maintenance. You further agree to give IKON advance notice of any critical and specific uptime needs you may have so that IKON can schedule with you interim and preventative maintenance in advance of such needs. As used in these Service Commitments "Operational" means substantial compliance with the manufacturer's specifications and/or performance standards and excludes customary end-user corrective actions.

IMAGE VOLUME FLEXIBILITY AND EQUIPMENT ADDITIONS

At any time after the expiration of the initial ninety day period of the original term of the Image Management Plus Product Schedule to which these Service Commitments relate, IKON will, upon your request, review your image volume. If the image volume has moved upward or downward in an amount sufficient for you to consider an alternative plan, IKON will, on a quarterly basis, present pricing options to conform to a new image volume. If you agree that additional equipment is required to satisfy your increased image volume requirements, IKON will include the equipment in the pricing options. The addition of equipment and/or increases/decreases to the Guaranteed Minimum Images requires an amendment ("Amendment") to the Image Management Plus Product Schedule that must be agreed to and signed by both you and IKON. The Amendment may not be less than the remaining term of the existing Image Management Plus Product Schedule but may be extended for a term up to 60 months. Adjustments to the Guaranteed Minimum Images commitment and/or the addition of equipment may result in a higher or lower minimum payment. Images decreases are limited to 25% of the Guaranteed Minimum Images in effect at the time of Amendment.

EQUIPMENT AND PROFESSIONAL SERVICES UPGRADE OPTION

At any time after the expiration of one-half of the original term of the Image Management Plus Product Schedule to which these Service Commitments relate, you may reconfigure the Equipment by adding, exchanging, or upgrading to an item of Equipment with additional features or enhanced technology. A new Image Management Plus Product Schedule or Amendment for not less than the remaining term of the existing Image Management Plus Product Schedule or Amendment, must be agreed to and signed by you and IKON. The Image Management Cost of Additional Images and the Minimum Payment of the new Image Management Plus Product Schedule or Amendment will be based on any obligations remaining on the Equipment, the added equipment and new image volume commitment. Your IKON Account Executive will be pleased to work with you on a Technology Refresh prior to the end of your Image Management Plus Product Schedule or Amendment.

PERFORMANCE COMMITMENT

IKON is committed to performing these Service Commitments and agrees to perform its services in a manner consistent with the applicable manufacturer's specifications. If IKON fails to meet any Service Commitments and in the unlikely event that IKON is not able to repair the Equipment in your office, IKON, at IKON's election, will provide to you either the delivery of a temporary loaner, for use while the Equipment is being repaired at IKON's service center, or IKON will replace such Equipment with comparable Equipment of equal or greater capability at no additional charge. These are the exclusive remedies available to you under the Image Management Plus Commitments Customer's exclusive remedy shall be for IKON to re-perform any Services not in compliance with this warranty and brought to IKON's attention in writing within a reasonable time, but in no event more than thirty (30) days after such Services are performed. If you are dissatisfied with IKON's performance, you must send a registered letter outlining your concerns to the address specified below in the "Quality Assurance" section. Please allow 30 days for resolution.

ACCOUNT MANAGEMENT

Your IKON sales professional will, upon your request, be pleased to review your equipment performance metrics on a quarterly basis and mutually convenient date and time. IKON will follow up within 8 business hours of a call or e-mail to one of our account management team members requesting a metrics review. IKON will, upon your request, be pleased to annually review your business environment and discuss ways in which we may improve efficiencies and reduce costs relating to your document management processes.

QUALITY ASSURANCE

Please send all correspondence relating to the Service Commitments via registered letter to the Quality Assurance Department located at: 3920 Arkwright Road, Macon, GA 31210, Attn: Quality Assurance. The Quality Assurance Department will coordinate resolution of any performance issues concerning the above Service Commitments with your local IKON office. If either of the Response Time or Uptime Performance Commitments is not met, a one-time credit equal to 3% of your Minimum Payment invoice total on the non-performing unit will be made available upon your request. Credit requests must be made in writing via registered letter to the address above. IKON is committed to responding to any questions regarding invoiced amounts for the use of the Equipment relating to the Product Schedule within a two (2) day timeframe. *To ensure the most timely response please call 1-888-ASK-IKON*

MISCELLANEOUS

These Service Commitments do not cover repairs resulting from misuse (including without limitation improper voltage or environment or the use of supplies that do not conform to the manufacturer's specifications), subjective matters (such as color reproduction accuracy) or any other factor beyond the reasonable control of IKON. IKON and you each acknowledge that these Service Commitments represent the entire understanding of the parties with respect to the subject matter hereof and that your sole remedy for any Service Commitments not performed in accordance with the foregoing is as set forth under the section hereof entitled "Performance Commitment". The Service Commitments made herein are service and/or maintenance warranties and are not product warranties. Except as expressly set forth herein, IKON makes no warranties, express or implied, including any implied warranties of merchantability, fitness for use, or fitness for a particular purpose. Neither party hereto shall be liable to the other for any consequential, indirect, punitive or special damages. These Service Commitments shall be governed according to the laws of the Commonwealth of Pennsylvania without regard to its conflicts of law principles. These Service Commitments are not assignable by the Customer. Unless otherwise stated in your Implementation Schedule, your Equipment will ONLY be serviced by an "IKON Certified Technician". You acknowledge and agree that, in connection with its performance of its obligations under these Service Commitments, IKON may place automated meter reading units on imaging devices, including but not limited to the Equipment, at your location in order to facilitate the timely and efficient collection of accurate meter read data on a monthly, quarterly or annual basis. IKON agrees that such units will be used by IKON solely for such purpose. Once transmitted, all meter read data shall become the sole property of IKON and will be utilized for billing purposes.

IN WITNESS WHEREOF, each party has caused its duly authorized officer to execute these Image Management Plus Commitments as of _____, 20__.

CUSTOMER

By: _____
Name:
Title:
Date:

IKON OFFICE SOLUTIONS, INC.

By: _____
Name:
Title:
Date:



Document Efficiency
At Work.

Work Order - US
IKON Office Solutions, INC.
Professional Services

A RICOH COMPANY

| | | | |
|-----------------|------------------|-------------------------|-------------------|
| Base Eq Model # | Base Eq Serial # | Email Address of PS Rep | Date of Services: |
|-----------------|------------------|-------------------------|-------------------|

Customer must already be an IKON customer to use this form without being part of the SFP

Bill ToCust No.: _____ Pymt Method: _____ Ship To Customer No.: _____ PO No: _____ PO Date: _____
 Bill To Customer: HIDALGO COUNTY - HEALTH DEPARTMENT Ship To Customer: HIDALGO COUNTY - HEALTH DEPARTMENT
 Address: 1304 S 25TH AVE Address: 1304 S 25TH AVE
 City: EDINBURG State: TX Zip: _____ City: EDINBURG State: TX Zip: _____
 Customer Contact: JOSIE ESCALANTE Title: SECRETARY Phone: (956) 383-6221
 IKON Sales Rep: GARCIA,AISSA,VALERIA Phone: 956-687-9156 ext. 214
 MPS/FSM/SAM/SAC: _____ SC: _____ SC-C: _____ SA/SSA: _____

Description of Professional Services

| Professional Services Task1 | Professional Services Task2 | Professional Services Task3 |
|---|---|--|
| Connect Svc Tech - Segment 3 (Up to 45 ppm) | Connect Svc Tech - Segment 4 (Up to 69 ppm) | Installation-Ricoh Basic Scan (Scan to folder/email) |
| | | |

| Task | eIKON Code | OMD Code | Qty | Unit Price | Ext. Price | Notes: |
|------|------------------|----------|-----|------------|------------|---|
| 1 | PS-CONN3 | WPWY30 | 9 | 310 | 2,790 | |
| 2 | PS-CONN4 | WPWY40 | 5 | 310 | 1,550 | |
| 3 | PS-INSRICBASSCAN | WPSR40 | 14 | 442 | 6,188 | |
| | | | | | | Total Price: Price Included |

This Work Order shall be effective as of the date of execution by both IKON and Customer. By signing below, the undersigned represent that they are duly authorized to enter into this Work Order on behalf of their respective entities.

| | |
|-----------------|------------------------------------|
| CUSTOMER | IKON OFFICE SOLUTIONS, INC. |
| By: _____ | By: _____ |
| Name: _____ | Name: _____ |
| Title: _____ | Title: _____ |
| Date: _____ | Date: _____ |

TERMS AND CONDITIONS

The performance by IKON of the Services described in this Work Order is subject to and shall be governed solely by the following terms and conditions:

Customer engages IKON to perform the services described in this Work Order (the "Services"). Changes to the scope of the Services shall be made only in a written change order signed by both parties. IKON shall have no obligation to commence work in connection with any change until the fee and/or schedule impact of the change and all other applicable terms are agreed upon by both parties in writing. IKON shall provide the Services at the Customer location set forth herein or on a remote basis. In consideration of its Services hereunder, Customer shall pay IKON the Service fees in the amounts and at the rates set forth above. Customer shall pay all amounts payable to IKON hereunder within thirty (30) days of the date of the invoice submitted by IKON. If IKON undertakes collection or enforcement efforts, Customer shall be liable for all costs thereof, including, without limitation, reasonable attorneys' fees and late charges. IKON may suspend or terminate Services for non-payment. Customer shall be responsible for payment of any applicable taxes arising in connection with the transactions contemplated hereby (other than with respect to the income of IKON). Customer shall provide IKON with such access to its facilities, networks and systems as may be reasonably necessary for IKON to perform its Services. Customer acknowledges that IKON's performance of the Services is dependent upon Customer's timely and effective performance of its responsibilities hereunder. Unless connectivity services are specifically identified in the Task and Description section of this Work Order as part of the Services to be performed by IKON, IKON shall have no obligation to perform and no responsibility for the connection of any hardware or software to any Customer network or system.

IKON shall perform its Services in a professional manner. IKON is not the manufacturer of any of the software, tools and/or products utilized in connection with this Work Order. IKON shall, however, make available to Customer any warranties made to IKON by the manufacturers of the software, tools and/or products utilized by IKON in connection with its Services hereunder, to the extent transferable and without recourse. EXCEPT AS EXPRESSLY SET FORTH HEREIN, IKON MAKES NO WARRANTIES, EXPRESSED OR IMPLIED, INCLUDING WARRANTIES OF MERCHANTABILITY, OR FITNESS FOR A PARTICULAR PURPOSE, IN CONNECTION WITH THIS WORK ORDER AND THE TRANSACTIONS CONTEMPLATED HEREBY. IN NO EVENT SHALL IKON BE LIABLE TO CUSTOMER FOR ANY INDIRECT, SPECIAL OR CONSEQUENTIAL DAMAGES OR LOST PROFITS ARISING OUT OF OR RELATED TO THIS WORK ORDER OR THE PERFORMANCE OR BREACH HEREOF, EVEN IF IKON HAS BEEN ADVISED OF THE POSSIBILITY THEREOF. IKON'S LIABILITY TO CUSTOMER HEREUNDER, IF ANY, SHALL IN NO EVENT EXCEED THE TOTAL OF THE FEES PAID TO IKON HEREUNDER BY CUSTOMER. IN NO EVENT SHALL IKON BE LIABLE TO CUSTOMER FOR ANY DAMAGES RESULTING FROM OR RELATED TO ANY FAILURE OF THE SOFTWARE, INCLUDING, BUT NOT LIMITED TO, LOSS OF DATA, OR DELAY OF DELIVERY OF SERVICES UNDER THIS WORK ORDER. IKON ASSUMES NO OBLIGATION TO PROVIDE OR INSTALL ANY ANTI-VIRUS OR SIMILAR SOFTWARE AND THE SCOPE OF SERVICES CONTEMPLATED HEREBY DOES NOT INCLUDE ANY SUCH SERVICES.

Except for purposes of this Work Order, IKON shall not use or disclose any proprietary or confidential Customer data derived from its Services hereunder; provided, however, that IKON may use general statistics relating to the Service engagement so long as it does not disclose the identity of Customer or make any reference to any information from which the identity of Customer may be reasonably ascertained. Customer agrees that during the term of the Services and for a period of one (1) year after termination thereof, it shall not directly or indirectly solicit, hire or otherwise retain as an employee or independent contractor any employee of IKON that is or was involved with or part of the Services. This Work Order represents the entire agreement between the parties relating to the subject matter hereof and supersedes all prior understandings, writings, proposals, representations or communications, oral or written, of either party. This Work Order may be amended only in writing executed by the authorized representatives of both parties. Any purchase order, service order or other Customer ordering document will not modify or affect this Work Order, nor have any other legal effect, and shall serve only the purpose of identifying the service ordered. This Work Order may not be transferred or assigned by Customer without the prior written consent of IKON. This Work Order shall be interpreted in accordance with the substantive laws of the Commonwealth of Pennsylvania, without regard to principles of conflicts of law. The relationship of the parties is that of independent contractors. IKON shall not be responsible for and shall be excused from performance or have reasonable additional periods of time to perform its obligations where it is delayed or prevented from performing any of its obligations for reasons beyond IKON's reasonable control, including, without limitation, acts of God, natural disasters, labor disputes, strikes or unavailability of services, personnel or materials. This Work Order is separately enforceable as a complete and independent binding agreement, independent of all other Work Orders, if any. By signing, the Customer acknowledges and accepts the terms and conditions of this Work Order, and confirms that the undersigned has the necessary power and authority to enter into this Work Order on behalf of Customer.



Equipment Removal Authorization

Equipment Leased by Customer from IKON, IOS Capital, or IKON Financial Services

| CUSTOMER INFORMATION | | | |
|----------------------|------------------------------------|---------------|-----------------|
| Customer Name | HIDALGO COUNTY - HEALTH DEPARTMENT | Date Prepared | 25-JANUARY-2011 |
| Contact Name | JOSIE ESCALANTE | Phone | (956) 383-6221 |
| Email | JOSIE.ESCALANTE@HCHD.ORG | Fax | (956) 383-3229 |

Check if Additional Product Description page(s) attached

| TERMS AND CONDITIONS |
|--|
| <p>This Authorization will confirm that you desire to engage IKON Office Solutions, Inc. ("IKON") to pick-up and remove certain items of equipment that are currently leased by you from IKON, IOS Capital or IKON Financial Services, and that you intend to issue written or electronic removal requests (whether such equipment is identified in this Authorization, in a purchase order, in a letter or other written form) to us from time to time for such purpose. Such removal request will set forth the location, make, model and serial number of the equipment to be removed by IKON. By signing below, you confirm that, with respect to every removal request issued by you (1) IKON may rely on the request, and (2) the request shall be governed by this Authorization. Except for the obligations of IKON to pick-up and remove the identified equipment, IKON does not assume any obligation, payment or otherwise, under your lease agreement, which shall remain your sole responsibility. As a material condition to the performance by IKON, you hereby release IKON from, and shall indemnify, defend and hold IKON harmless from and against, any and all claims, liabilities, costs, expenses and fees arising from or relating to any breach of your representations or obligations in this Authorization or of any obligation owing by you under your lease agreement.</p> |

| EQUIPMENT INFORMATION | | | |
|----------------------------|------------------------|---------|-------------------|
| Make /Model /Serial Number | CANON/IR2016I/SRH00088 | Contact | JOSIE ESCALANTE |
| Pick-Up Address | 1304 S 25TH AVE | Phone | (956) 383-6221 |
| City | EDINBURG | State | TX Zip Code 78542 |
| Make /Model /Serial Number | CANON/IR4570/SKU22781 | Contact | JOSIE ESCALANTE |
| Pick-Up Address | 1304 S 25TH AVE | Phone | (956) 383-6221 |
| City | EDINBURG | State | TX Zip Code 78542 |
| Make /Model /Serial Number | CANON/IR2016I/SRH00086 | Contact | JOSIE ESCALANTE |
| Pick-Up Address | 1304 S 25TH AVE | Phone | (956) 383-6221 |
| City | EDINBURG | State | TX Zip Code 78542 |
| Make /Model /Serial Number | CANON/IR3570/SKV57119 | Contact | JOSIE ESCALANTE |
| Pick-Up Address | 1304 S 25TH AVE | Phone | (956) 383-6221 |
| City | EDINBURG | State | TX Zip Code 78542 |

| CUSTOMER |
|------------------------------|
| Authorized Signature _____ |
| Signature Printed Name _____ |
| Title _____ |
| Date _____ |

| IKON OFFICE SOLUTIONS, INC. |
|------------------------------|
| Authorized Signature _____ |
| Signature Printed Name _____ |
| Title _____ |
| Date _____ |



Equipment Removal Authorization Additional Product Description

For Equipment Leased through IKON / IOSC / IFS

| CUSTOMER INFORMATION | | | |
|----------------------|------------------------------------|-------|-------------------|
| Customer Name | HIDALGO COUNTY - HEALTH DEPARTMENT | Phone | (956) 383-6221 |
| Contact Name | JOSIE ESCALANTE | Fax | |
| Pick-Up Address | 1304 S 25TH AVE | Email | |
| City | EDINBURG | State | TX Zip Code 78542 |

| EQUIPMENT INFORMATION | |
|------------------------------|------------------------------|
| Make / Model / Serial Number | Make / Model / Serial Number |
| CANON/IR3570/SKV57143 | |
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| CUSTOMER INFORMATION | | | |
|----------------------|------------------------------------|-------|-------------------|
| Customer Name | HIDALGO COUNTY - HEALTH DEPARTMENT | Phone | (956) 383-6221 |
| Contact Name | JOSIE ESCALANTE | Fax | |
| Pick-Up Address | 1901 N BRIDGE AVE | Email | |
| City | WESLACO | State | TX Zip Code 78596 |

| EQUIPMENT INFORMATION | |
|------------------------------|------------------------------|
| Make / Model / Serial Number | Make / Model / Serial Number |
| CANON/IR3570/SKV58232 | |
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| CUSTOMER INFORMATION | | | |
|----------------------|------------------------------------|-------|-------------------|
| Customer Name | HIDALGO COUNTY - HEALTH DEPARTMENT | Phone | (956) 383-6221 |
| Contact Name | JOSIE ESCALANTE | Fax | |
| Pick-Up Address | 1902 JOE STEPHENS AVE | Email | |
| City | WESLACO | State | TX Zip Code 78596 |

| EQUIPMENT INFORMATION | |
|------------------------------|------------------------------|
| Make / Model / Serial Number | Make / Model / Serial Number |
| CANON/IR2270/SLH26838 | |
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| | |

Equipment Removal Authorization Additional Product Description

For Equipment Leased through IKON / IOSC / IFS

| CUSTOMER INFORMATION | | | |
|----------------------|------------------------------------|-------|-------------------|
| Customer Name | HIDALGO COUNTY - HEALTH DEPARTMENT | Phone | (956) 383-6221 |
| Contact Name | JOSIE ESCALANTE | Fax | |
| Pick-Up Address | 300 W. HALL ACRES RD. | Email | |
| City | PHARR | State | TX Zip Code 78577 |

| EQUIPMENT INFORMATION | |
|------------------------------|------------------------------|
| Make / Model / Serial Number | Make / Model / Serial Number |
| CANON/IR3570/SKV57180 | |
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| CUSTOMER INFORMATION | | | |
|----------------------|------------------------------------|-------|-------------------|
| Customer Name | HIDALGO COUNTY - HEALTH DEPARTMENT | Phone | (956) 383-6221 |
| Contact Name | JOSIE ESCALANTE | Fax | |
| Pick-Up Address | 211 S SCHUERBACH RD | Email | |
| City | MISSION | State | TX Zip Code 78572 |

| EQUIPMENT INFORMATION | |
|------------------------------|------------------------------|
| Make / Model / Serial Number | Make / Model / Serial Number |
| CANON/IR3570/SKV57154 | |
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| CUSTOMER INFORMATION | | | |
|----------------------|------------------------------------|-------|-------------------|
| Customer Name | HIDALGO COUNTY - HEALTH DEPARTMENT | Phone | (956) 383-6221 |
| Contact Name | JOSIE ESCALANTE | Fax | |
| Pick-Up Address | 300 E HACKBERRY AVE | Email | |
| City | MCALLEN | State | TX Zip Code 78501 |

| EQUIPMENT INFORMATION | |
|------------------------------|------------------------------|
| Make / Model / Serial Number | Make / Model / Serial Number |
| CANON/IR3570/SKV58241 | |
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| | |

Equipment Removal Authorization Additional Product Description

For Equipment Leased through IKON / IOSC / IFS

CUSTOMER INFORMATION

| | | | |
|-----------------|------------------------------------|-------|-------------------|
| Customer Name | HIDALGO COUNTY - HEALTH DEPARTMENT | Phone | (956) 383-6221 |
| Contact Name | JOSIE ESCALANTE | Fax | |
| Pick-Up Address | 3105 E RICHARDSON RD | Email | |
| City | EDINBURG | State | TX Zip Code 78542 |

EQUIPMENT INFORMATION

| Make / Model / Serial Number | Make / Model / Serial Number |
|------------------------------|------------------------------|
| CANON/IR3570/SKV57651 | |
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CUSTOMER INFORMATION

| | | | |
|-----------------|------------------------------------|-------|-------------------|
| Customer Name | HIDALGO COUNTY - HEALTH DEPARTMENT | Phone | (956) 383-6221 |
| Contact Name | JOSIE ESCALANTE | Fax | |
| Pick-Up Address | 702 E TEXANO DR | Email | |
| City | HIDALGO | State | TX Zip Code 78557 |

EQUIPMENT INFORMATION

| Make / Model / Serial Number | Make / Model / Serial Number |
|------------------------------|------------------------------|
| CANON/IR2270/SLH26694 | |
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CUSTOMER INFORMATION

| | | | |
|-----------------|------------------------------------|-------|-------------------|
| Customer Name | HIDALGO COUNTY - HEALTH DEPARTMENT | Phone | (956) 383-6221 |
| Contact Name | JOSIE ESCALANTE | Fax | |
| Pick-Up Address | 708 E. EDINBURG AVE. | Email | |
| City | ELSA | State | TX Zip Code 78543 |

EQUIPMENT INFORMATION

| Make / Model / Serial Number | Make / Model / Serial Number |
|------------------------------|------------------------------|
| CANON/IR-2016I/SRH00091 | |
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Equipment Removal Authorization Additional Product Description

For Equipment Leased through IKON / IOSC / IFS

| CUSTOMER INFORMATION | | | |
|----------------------|------------------------------------|-------|-------------------|
| Customer Name | HIDALGO COUNTY - HEALTH DEPARTMENT | Phone | (956) 383-6221 |
| Contact Name | JOSIE ESCALANTE | Fax | |
| Pick-Up Address | 722 N BREYFOGLE | Email | |
| City | MISSION | State | TX Zip Code 78574 |

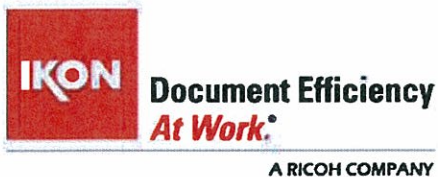
| EQUIPMENT INFORMATION | |
|------------------------------|------------------------------|
| Make / Model / Serial Number | Make / Model / Serial Number |
| CANON/IR2016I/SRH00085 | |
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| CUSTOMER INFORMATION | | | |
|----------------------|--|-------|----------|
| Customer Name | | Phone | |
| Contact Name | | Fax | |
| Pick-Up Address | | Email | |
| City | | State | Zip Code |

| EQUIPMENT INFORMATION | |
|------------------------------|------------------------------|
| Make / Model / Serial Number | Make / Model / Serial Number |
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| CUSTOMER INFORMATION | | | |
|----------------------|--|-------|----------|
| Customer Name | | Phone | |
| Contact Name | | Fax | |
| Pick-Up Address | | Email | |
| City | | State | Zip Code |

| EQUIPMENT INFORMATION | |
|------------------------------|------------------------------|
| Make / Model / Serial Number | Make / Model / Serial Number |
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[TEXAS]

IKON Office Solutions, Inc.
70 Valley Stream Parkway
Malvern, PA 19355

ADDENDUM ("Addendum"), dated as of the 25 day of JANUARY, 2011, to that certain Master Agreement no. 1008606 ("Agreement"), dated as of the 25 day of JANUARY, 2011, between IKON Office Solutions, Inc. ("we" or "us") and Hidalgo, _____ County of _____, as customer ("Customer" or "you").

The parties, intending to be legally bound, agree that the Agreement shall be modified as follows:

1. **Section 19-Non-Appropriation of Funds:** The caption/heading of Section 19 of the Agreement shall be and hereby is amended to read as follows: "19. Non-Appropriation"; and subsection (a) of Section 19 of the Agreement shall be deleted in its entirety and substituted with the following subsection (a) in lieu thereof:

"(a) You intend to remit all Payments and other charges due to us under any Schedule to this Master Agreement for the entire term of such Schedule if funds are legally available. In the event you are not granted an appropriation of funds at any time during the term for the Product subject to any Schedule to this Master Agreement and the non-appropriation did not result from an act or omission, then a "Non-Appropriation" shall be deemed to have occurred."

Clause (i) of subsection (b) of Section 19 is hereby deleted in its entirety and substituted with the following clause (i) in lieu thereof:

"(i) at least thirty (30) days prior to the end of your then current fiscal year; or, if Non-Appropriation has not occurred by such date, immediately upon Non-Appropriation, your chief executive officer (or legal counsel) shall certify in writing that (x) funds have not been appropriated for the fiscal period and (y) such non-appropriation did not result from any act or failure by you,"

- 2. Section 20 of the Agreement is hereby deleted in its entirety.
- 3. All capitalized terms used but not defined in this Addendum will have the meanings given to them in the Agreement. Except to the extent modified by this Addendum, the terms and conditions of the Agreement will remain unchanged and shall continue in full force and effect.

IN WITNESS WHEREOF, each party has caused its duly authorized officer to execute this Addendum, as of the date first written above.

CUSTOMER

IKON Office Solutions, Inc.

X _____
Authorized Signature Date

Authorized Signature Date

Print Authorized Signer Name Title

Print Authorized Signer Name Title

Matilde Faz

From: Saved by Windows Internet Explorer 7
Sent: Wednesday, January 26, 2011 4:01 PM
Subject: Print Agenda Item
Attachments: ATT00068.css; ATT00071.css; ATT00077.dat

[Print]

AI-25027 4.0.0.

2011 - Health & Human Services Dept. (1100)
CC CONSENT

Date: 02/01/2011
Submitted By: Mike Escaname, HEALTH & HUMAN SERVICES DEPT.
Submitted For: Mike Escaname
Department: HEALTH & HUMAN SERVICES DEPT.
Agenda Category: 2011 Intradep.(line-item) Transfers

Information

CAPTION

2011 - Health & Human Services Dept. (1100)

BACKGROUND

Fiscal Impact

FISCAL YEAR: 2011 ACCT. #: 1-1100-441-00-340-003-0-xxx
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?: N
BUDGETARY IMPACT:

Attachments

Link: [LIT](#)

Form Routing/Status

| Route Seq | Inbox | Approved By | Date | Status |
|-----------|---------------------|---------------|---------------------|---------|
| | | Mike Escaname | 01/26/2011 03:16 PM | CREATED |
| 1 | Budget & Management | | | NEW |
| 2 | Auditor's Office | | | |

Form Started By: Mike Escaname Started On: 01/26/2011 03:16 PM
