

Schedule of Lease Equipment and Lease Payment

CUSTOMER BILL - TO INFORMATION (Separate schedules must be completed for each billing location.)

LEGAL COMPANY NAME WILLIAMSON COUNTY CONSTABLE PCT 3			DEPARTMENT NAME
STREET ADDRESS / P.O. BOX 100 WILCO WAY			BLDG / ROOM / SUITE C 101
CITY GEORGETOWN	STATE TX	ZIP 78628	BILLING CONTACT NAME
BILL-TO PHONE NUMBER* 512 943 1436	FAX NUMBER	FEDERAL TAX I.D. NUMBER	

CUSTOMER INSTALLATION LOCATION (Separate schedules must be completed for each billing location.)

LESSEE LEGAL NAME WILLIAMSON COUNTY CONSTABLE PCT 3			DEPARTMENT NAME
STREET ADDRESS / P.O. BOX 100 WILCO WAY			BLDG / FLOOR / ROOM / SUITE
CITY GEORGETOWN	STATE TX	ZIP 78628	CONTACT NAME
PHONE NUMBER 512 943 1436	FAX NUMBER		

MAKE/MODEL NO./ACCESSORIES

SERIAL NO.

Bizhub C360i Copier Printer	
Delivery Charge - Level 1	
DF-714 Dual Scan Feeder	
PC-216 Paper Feed Unit	
JS-506 Job Separator	
FK-514 Fax Kit (1st/2nd LINES)	
CS-1 Convenience Stapler	
WT-506 Working Table	
Bizhub SECURE	
KMBS Professional Project Services	
* replace / upgrade / pickup of Bizhub C364 Serial Number A5C1011014552	
Black and White Copies billed at 0.0075	
Color Copies billed at 0.05	

See attached schedule for additional Equipment / Accessories


TERM AND PAYMENT SCHEDULE

60 Monthly Payments of \$ 198.00
(mos.) (plus applicable taxes)

☒ FMV ☐ \$1.00 Out

THIS SCHEDULE INCORPORATES ALL OF THE TERMS & CONDITIONS OF THE AGREEMENT FOR THE LEASE OF EQUIPMENT IDENTIFIED ABOVE.

LESSOR ACCEPTANCE

Konica Minolta Business Solutions USA, Inc.  MILED C CAMP
DATED LESSOR SIGNATURE PRINT NAME

CUSTOMER ACCEPTANCE

 
DATED FULL LEGAL NAME SIGNATURE / TITLE PRINT NAME