

State and Local Fair Market Value Lease

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Your Business Information					
WILLIAMSON COUNTY ATTORNEY WILLIAMSON CNTY COU	RTHOUSE				
Full Legal Name of Lessee / DBA Name of Lessee		Tax ID # (FEIN/TIN)			
405 Martin Luther King St Ste 229	Georgetown	TX	78626-4901		
Billing Address : Street	City	State	ZIP+4		
STEPHANIE LLOYD	5129431116	0016659815			
Billing Contact Name	Billing Contact Phone #	Billing Account #			
405 Martin Luther King St Ste 229	Georgetown	TX	78626-4901		
Installation Address (if different from billing address) : Street	City	State	ZIP+4		
STEPHANIE LLOYD	5129431116	0016659815			
Installation Contact Name	Installation Contact Phone #	Installation Account #	Installation Account #		
	2017-02-19				
PO #	Quote Expiration Date				

ty Item		Business Solution Description			
1	DM400C	DM400C Digital Mailing System			
7	1FAE	Basic Accounting -50 Accounts			
1	1FY9	DM400 70 LPM			
R	1GW9	10lb Integrated Weighing Feature			
ji.	4CES	US LIVE DM400C BASE - ES2			
8	G900	Meter for DM300/DM400/475 Series			
Ĭ	G9SS	USPS Tracking Services Activation			
Ų.	MP0X	Differential Weigh 2, 5, & 10lb scale			
K.	MP9G	Integrated Weighing Platform			
()	SBTA	DM400C Digital Meter System			
	SJ40	SoftGuard for DM400			
1	STDSLA	Standard SLA-Equipment Service Agreement (for DM400C Digital Mailing System)			

Your Payment Plan

Initial Term: 36 months	Initial Payment Amount:			
Number of Months	Monthly Amount	Billed Quarterly at		
36	\$ 149.78	\$ 449.34		

^{*}Does not include any applicable sales, use, or property taxes which will be billed separately.

^() Tax Exempt Certificate Attached

^() Tax Exempt Certificate Not Required

^() Purchase Power® transaction fees included

⁽X) Purchase Power® transaction fees extra

Your Signature Below Non-Appropriations. You warrant that you have funds available to make all payments until the end of your current fiscal period, and shall use your best efforts to obtain funds to make all payments in each subsequent fiscal period through the end of your Lease Term. If your appropriation request to your legislative body, or funding authority ("Governing Body") for

all payments in each subsequent fiscal period through the end of your Lease Term. If your appropriation request to your legislative body, or funding authority ("Governing Body") for funds to make the payments is denied, you may terminate this Lease on the last day of the fiscal period for which funds have been appropriated, upon (i) submission of documentation reasonably satisfactory to us evidencing the Governing Body's denial of an appropriation sufficient to continue this Lease for the next succeeding fiscal period, and (ii) satisfaction of all charges and obligations under this Lease incurred through the end of the fiscal period for which funds have been appropriated, including the return of the equipment at your expense.

By signing below, you agree to be bound by all the terms and conditions of your State's/Entity's/Cooperative's contract, including the Pitney Bowes Terms, which are available at www.pb.com/states/buyboard and are incorporated by reference (collectively, this "Agreement"). The terms and conditions of this Agreement will govern this transaction and be binding on us after we have completed our credit and documentation approvals process and have signed below. The lease requires you either provide proof of insurance or participate in the ValueMAX® equipment protection program (see Section L9 of the Pitney Bowes Terms) for an additional fee. If software is included in the Order, additional terms apply which are available by clicking on the hyperlink for that software located at www.pitneybowes.com/us/license-terms-of-use/software-and-subscription-terms-and-conditions.html. Those additional terms are incorporated by reference.

Print Name Coch to Title Date Email Address	\$ 6x +7n 0 v2/c -2017		Print Name Coldit Unauge Title 12 14 16 Date	
Sales Information				
Account Rep Name 1	Split	Sales Rep ID	District Office	
Account Rep Name 2	Split	Sales Rep ID	District Office	