



Ricoh USA, Inc.
70 Valley Stream Parkway
Malvern, PA 19355

Product Schedule

Product Schedule Number: _____

Master Lease Agreement Number: _____

This Product Schedule (this "Schedule") is between Ricoh USA, Inc. ("we" or "us") and _____, as customer or lessee ("Customer" or "you"). This Schedule constitutes a "Schedule," "Product Schedule," or "Order Agreement," as applicable, under the _____ (together with any amendments, attachments and addenda thereto, the "Lease Agreement") identified above, between you and _____. All terms and conditions of the Lease Agreement are incorporated into this Schedule and made a part hereof. If we are not the lessor under the Lease Agreement, then, solely for purposes of this Schedule, we shall be deemed to be the lessor under the Lease Agreement. 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 Lease Agreement.

CUSTOMER INFORMATION

| | | | | | | | |
|----------------------------------|--------|-------|----------------------------------|--|--------|--------------------------------|-----|
| Customer (Bill To) | | | | Billing Contact Name | | | |
| Product Location Address | | | | Billing Address (if different from location address) | | | |
| City | County | State | Zip | City | County | State | Zip |
| Billing Contact Telephone Number | | | Billing Contact Facsimile Number | | | Billing Contact E-Mail Address | |

PRODUCT/EQUIPMENT DESCRIPTION ("Product")

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

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|--|
| Minimum Term <i>(months)</i> |
| |

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|--|
| Minimum Payment <i>(Without Tax)</i> |
| *****\$ |

| |
|--|
| Minimum Payment Billing Frequency |
| Monthly |
| Quarterly |
| Other: _____ |

| |
|------------------------|
| Advance Payment |
| 1st Payment |
| 1st & Last Payment |
| Other: _____ |

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. If the Lease Agreement uses the terms "Lease Payment" and "Commencement Date" rather than "Payment" and "Effective Date," then, for purposes of this Schedule, the term "Payment" shall have the same meaning as "Lease Payment," and the term "Effective Date" shall have the same meaning as "Commencement Date."
- You, the undersigned Customer, have applied to us to rent the above-described Product for lawful commercial (non-consumer) purposes. **THIS IS AN UNCONDITIONAL, NON-CANCELABLE AGREEMENT FOR THE MINIMUM TERM INDICATED ABOVE**, except as otherwise provided in any non-appropriation provision of the Lease Agreement, if applicable. If we accept this Schedule, you agree to rent the above Product from us, and we agree to rent such Product to you, on all the terms hereof, including the terms and conditions of the Lease Agreement. **THIS WILL ACKNOWLEDGE THAT YOU HAVE READ AND UNDERSTAND THIS SCHEDULE AND THE LEASE AGREEMENT AND HAVE RECEIVED A COPY OF THIS SCHEDULE AND THE LEASE AGREEMENT.**
- Additional Provisions (if any) are: _____

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

| |
|---|
| CUSTOMER |
| By: <input checked="" type="checkbox"/> _____ <i>Authorized Signer Signature</i> |
| Printed Name: _____ |
| Title: _____ Date: _____ |

| |
|---|
| Accepted by: RICOH USA, INC. |
| By: <input checked="" type="checkbox"/> _____ <i>Authorized Signer Signature</i> |
| Printed Name: _____ |
| Title: _____ Date: _____ |

Variable Payments Addendum

This VARIABLE PAYMENTS ADDENDUM (this "Addendum"), dated as of the 21ST day of APRIL, 20 16, is to that certain agreement/product schedule no. _____ - _____ (the "Agreement"), between Ricoh USA, Inc. ("we" or us") and TODD COUNTY BOARD OF EDUCATION, as customer ("Customer" or "you").

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

1. Notwithstanding anything to the contrary in the Agreement, Customer agrees that the scheduled monthly payments required under the Agreement will vary as indicated below:

| <u>STEP</u> | <u>MONTH</u> | <u>PAYMENT</u> |
|-------------|--------------|----------------|
| 1 | 1-10 | \$467.00 |
| 2 | 11-60 | \$463.19 |
| 3 | _____ | _____ |
| 4 | _____ | _____ |
| 5 | _____ | _____ |
| 6 | _____ | _____ |
| 7 | _____ | _____ |
| 8 | _____ | _____ |

TOTAL TERM: 60 months

2. 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

Ricoh USA, Inc.

.X _____
Authorized Signature Date

Authorized Signature Date

Print Authorized Signer Name Title

Print Authorized Signer Name Title

ORDER AGREEMENT

| | | | |
|---|--|-------------|-------|
| Master Maintenance and Sale Agreement Date: | | Sale Type : | LEASE |
|---|--|-------------|-------|

| BILL TO INFORMATION | | | |
|---|----------------|----------|---------------------------------|
| Customer Legal Name: TODD COUNTY BOARD OF EDUCATION | | | |
| Address Line 1: | 205 AIRPORT RD | Contact: | Wheeler,Makka |
| Address Line 2: | | Phone: | (270) 265-2436 |
| City: | ELKTON | E-mail: | makka.wheeler@todd.kyschools.us |
| ST / Zip: | KY/42220-9284 | County: | TODD |
| | | Fax: | (270) 265-5414 |

| ADDITIONAL ORDER INFORMATION | |
|--|---|
| Check All That Apply: | |
| <input type="checkbox"/> Sales Tax Exempt (Attach Valid Exemption Certificate) <input type="checkbox"/> PO Included PO# _____ <input type="checkbox"/> Syndication | <input type="checkbox"/> Fixed Service Charge <input type="checkbox"/> Add to Existing Service Contract # _____ <input type="checkbox"/> PS Service (Subject to and governed by separate Statement of Work) <input type="checkbox"/> IT Service (Subject to and governed by separate Statement of Work) |

This is an Order made pursuant to the terms and conditions of the above referenced Master Agreement(s) between Customer and Ricoh USA, Inc. The signature below indicates that the customer accepts all terms and conditions of the applicable Master Agreement(s) for this sale, including by not limited to the terms set forth in the Master Agreement(s) and any Exhibit A thereto, all of which are incorporated herein by reference and made part of this Order. Each party agrees that electronic signatures of the parties on this Order will have the same force and effect as manual signature. Ricoh may accept this Order by either its signature or by commencing performance (e.g. Product delivery, initiating Services, etc.).

| SERVICE INFORMATION | | |
|-----------------------|------------------------|---------------------------|
| Service Term (Months) | Base Billing Frequency | Overage Billing Frequency |
| 60 Months | MONTHLY | MONTHLY |

| SHIP TO INFORMATION | | | |
|---|------------------------|----------|---------------------------------|
| Customer Name: TODD COUNTY BOARD OF EDUCATION | | | |
| Address Line 1: | 7300 GREENVILLE RD | Contact: | Wheeler,Makka |
| Address Line 2: | NORTH TODD ELEM SCHOOL | Phone: | (270) 265-2436 |
| City: | ELKTON | E-mail: | makka.wheeler@todd.kyschools.us |
| ST / Zip: | KY/42220-9697 | County: | TODD |
| | | Fax: | (270) 265-5414 |

| PRODUCT INFORMATION | | | | | | | |
|---------------------|-----|--------------|---|----------|---|-----------|--|
| Product Description | Qty | Service Type | B/W Allowance (Per Base Billing Frequency) | B/W Ovg | Color Allowance (Per Base Billing Frequency) | Color Ovg | Service Base (Per Base Billing Frequency) |
| RICOH MP7502SP | 1 | Gold | N/A | \$0.0040 | N/A | N/A | |
| RICOH MPC2503 | 1 | Gold | N/A | \$0.0080 | N/A | \$0.0600 | |

| BASIC CONNECTIVITY / PS / IT SERVICES INFORMATION |
|---|
|---|



| BASIC CONNECTIVITY / PS / IT Services Description | Quantity |
|---|----------|
| TRAINING HOURS | 2 |
| TS NETWORK & SCAN CONNECT - SEG 5 | 1 |
| TS NETWORK & SCAN CONNECT - SEG BC3 | 1 |

| ORDER TOTALS | | |
|--|---|--|
| Service Type Offerings: | Product Total: | |
| Gold: Includes all supplies and staples. Excludes paper. | BASIC CONNECTIVITY / PS / IT Services: | |
| Silver: Includes all supplies. Excludes paper and staples. | Buyout: | |
| Bronze: Parts and labor only. Excludes paper, staples and supplies. | Grand Total: (Excludes Tax) | |
| Additional Provisions: | | |
| WELLS FARGO FINANCIAL SERVICES TO BILL MAINTENANCE AS PART OF THE LEASE | | |

| Accepted by Customer | Accepted: Ricoh USA, Inc. |
|-----------------------------|----------------------------------|
| Authorized Signature: _____ | Authorized Signature: _____ |
| Printed Name: _____ | Printed Name: _____ |
| Title: _____ | Title: _____ |
| Date: _____ | Date: _____ |





EQUIPMENT REMOVAL/BUYOUT AUTHORIZATION

Table with customer information: Customer Name, Contact Name, Address, State, Phone, City, Fax/Email.

Table with equipment details: Make, Model, Serial Number.

This Authorization applies to the equipment identified above and to the following Removal/Buy Out Option

This Authorization will confirm that Customer desires to engage Ricoh USA, Inc. ("Ricoh") to pick-up and remove certain items of equipment that are currently (i) owned by Customer or (ii) leased from Ricoh or other third party (as specified below), 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 Ricoh from time to time for such purpose.

Equipment Removal (Leased by Customer). In addition to the terms and conditions set forth above, the following terms and conditions shall apply for equipment removals of equipment leased by Customer: Except for the obligations of Ricoh to pick up and remove the identified equipment, Ricoh does not assume any obligation, payment or otherwise, under any lease agreement, which shall remain Customer's sole responsibility.

CUSTOMER

RICOH USA, INC.

By: _____
Name _____
Title _____
Date _____

By: _____
Name _____
Title _____
Date _____

