



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

U.S. Communities Product Schedule with Purchase Option (*tax exempt*)

Product Schedule Number: _____
Master Lease Agreement Number: _____

This U.S. Communities Product Schedule with Purchase Option (this "Schedule") is between Ricoh USA, Inc. ("we" or "us") and HOPKINS COUNTY BOARD OF EDUCATION, as customer or lessee ("Customer" or "you"). This Schedule constitutes a "Schedule," "Product Schedule," or "Order Agreement," as applicable, under the U.S. Communities Master Lease Agreement (together with any amendments, attachments and addenda thereto, the "Lease Agreement") identified above, between you and RICOH USA, INC. 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

HOPKINS COUNTY BOARD OF EDUCATION				MELANIE LAW			
Customer (Bill To) 110 SUGG ST				Billing Contact Name 320 S SEMINARY ST			
Product Location Address MADISONVILLE HOPKINS KY 42431				Billing Address (if different from location address) MADISONVILLE HOPKINS KY 42431-2447			
City County State Zip				City County State Zip			
Billing Contact Telephone Number 270-825-6000		Billing Contact Facsimile Number		Billing Contact E-Mail Address melanie.law@hopkins.kyschools.us			

PRODUCT DESCRIPTION ("Product")

Qty	Product Description: Make & Model
1	RICOH IM 2500

Qty	Product Description: Make & Model

PAYMENT SCHEDULE

Minimum Term (months) 60	Minimum Payment (Without Tax) \$ 1,186.92	Interest Rate 5.64 % per annum	Minimum Payment Billing Frequency <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other: ANNUALLY	Advance Payment <input type="checkbox"/> 1 st Payment <input type="checkbox"/> 1 st & Last Payment <input type="checkbox"/> Other: _____
---	--	---	---	--

Sales Tax Exempt: ☒ Yes (Attach Exemption Certificate)

I.R.C. Section 103 Interest Tax Exempt: ☐ Yes

Addendum Attached: ☐ Yes (Check if yes and indicate total number of pages: _____)

Customer Billing Reference Number (P.O.#, etc.) _____

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 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.**

3. Purchase Option:

The parties agree that the purchase option for the Product is a \$1.00 purchase option plus applicable taxes. In connection with such option, Customer further agrees as follows:

- (i) notwithstanding anything to the contrary in the Lease Agreement, with respect to this Schedule only: It is the mutual intention of the parties that Customer shall be considered the owner of the Product (excluding all Software, which is owned and licensed to you by the Software Supplier) for various purposes, including federal income tax purposes, as of the Effective Date. You are entitled to all federal income tax benefits afforded to the owner of the Product, but we shall not be liable to you if you fail to secure or obtain such benefits. You will keep the Product free of all liens and encumbrances. You hereby grant to us a security interest in the Product covered by this Schedule (including any replacements, substitutions, additions, attachments and proceeds) as security for the payment of the amounts due or to become due under each Schedule;
- (ii) in the event of default under the Lease Agreement or this Schedule, we may exercise all rights and remedies of a secured party under applicable law, in addition to any and all rights and remedies we may otherwise have under the Lease Agreement, including, without limitation, the right to repossess the Product free and clear of any of your rights and interests in the Product; and
- (iii) notwithstanding anything to the contrary in the Lease Agreement, if no default has occurred and is continuing under the Lease Agreement or this Schedule and all of your obligations under this Schedule have been satisfied, we will release any security interest that we may have in the Product, you shall have no obligation to provide any end-of-term notice to us, and this Schedule will terminate and not be renewed.

4. WE MAKE NO REPRESENTATION OR WARRANTY OF ANY KIND, EXPRESS OR IMPLIED, WITH RESPECT TO THE LEGAL, TAX OR ACCOUNTING TREATMENT OF THE LEASE AGREEMENT, THIS SCHEDULE OR THE TRANSACTIONS EVIDENCED THEREBY. YOU ACKNOWLEDGE THAT WE ARE NOT AN AGENT OR A FIDUCIARY OF CUSTOMER. YOU WILL OBTAIN YOUR OWN LEGAL, TAX AND ACCOUNTING ADVICE AND WILL MAKE YOUR OWN DETERMINATION OF THE PROPER TREATMENT OF THE LEASE AGREEMENT AND THIS SCHEDULE.

5. 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: **X** _____
Authorized Signer Signature
Printed Name: _____
Title: _____ Date: _____

Accepted by: RICOH USA, INC.

By: _____
Authorized Signer Signature
Printed Name: _____
Title: _____ Date: _____



ORDER AGREEMENT

Sales Type: LEASE

Master Maintenance and Sale Agreement Number: MMSAP00002283
Master Maintenance and Sale Agreement Date: 2/11/2013 12:00:00 AM

EQUIPMENT BILL TO INFORMATION

Customer Legal Name: HOPKINS COUNTY BOARD OF EDUCATION		
Address Line 1: 320 S SEMINARY ST		Contact: Melanie Law
Address Line 2: OF EDUCATION		Phone: (270) 825-6079
City: MADISONVILLE		E-mail: melanie.law@hopkins.kyschools.us
ST/Zip: KY/42431-2447	County: HOPKINS	Fax:

Check all that apply:

- | | |
|---|--|
| <input type="checkbox"/> PO Included PO# | <input type="checkbox"/> PS Service (Subject to and governed by additional Terms and Conditions) |
| <input type="checkbox"/> TS PO# (if applicable) | <input type="checkbox"/> IT Service (Subject to and governed by additional Terms and Conditions) |
| <input checked="" type="checkbox"/> Sales Tax Exempt (Attach Valid Exemption Certificate) | <input checked="" type="checkbox"/> Fixed Rate Service Term <u>60 Months</u> |
| <input type="checkbox"/> Syndication | |
| <input type="checkbox"/> Add to Existing Service Contract # | |

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, all of which are incorporated herein by reference and made part of this Order. This Order is not valid unless and until signed by and Authorized Signatory of Ricoh USA, Inc.

SERVICE INFORMATION

SERVICE BILL TO INFORMATION

Customer Legal Name: HOPKINS COUNTY BOARD OF EDUCATION			
Address Line 1: 320 S SEMINARY ST		Contact: Melanie Law	
Address Line 2: OF EDUCATION		Phone: (270) 825-6079	
City: MADISONVILLE		E-mail: melanie.law@hopkins.kyschools.us	
ST/Zip: KY/42431-2447	County: HOPKINS	Fax:	
Service Term (Months) 60	Base Billing Frequency QUARTERLY	Overage Billing Frequency QUARTERLY	Service Type GOLD

SHIP TO INFORMATION

Customer Name	Address Line 1 Address Line 2	City ST/Zip County	Contact	Phone E-mail Fax
HOPKINS COUNTY BOARD OF EDUCATION	110 SUGG ST HOPKINS COUNTY DAY TREATMENTDay Treatment	MADISONVILLE KY/42431-2455 HOPKINS	Crystal Carlton	(270)825-6059 crystal.carlton@hopkins.kysch ools.us

PRODUCT INFORMATION



Product Description	QTY	Service Level	Total B/W Allowance <i>QUARTERLY</i>	B/W Ovg	Total Color Allowance <i>QUARTERLY</i>	Color Ovg	Service Base <i>QUARTERLY</i>
RICOH IM2500A CONFIGURABLE PTO MODEL	1	GOLD	0	0.0089	0	0	\$0.00

BASIC CONNECTIVITY / PS / IT SERVICES INFORMATION	
BASIC CONNECTIVITY / PS / IT Services Description	Quantity
TS NETWORK & SCAN CONNECT - SEG 2	1
TS-TRAINING ADVANCED HARDWARE ONLY	4

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 After Promotions:	
Bronze: Parts and labor only. Excludes paper, staples and supplies.	Grand Total:	
Additional Provisions: <i>Insert ANY additional provisions here</i>	(Excludes Tax)	
Per US Communities Contract 4400003732		

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

