



## ORDER AGREEMENT

Master Maintenance and Sale Agreement Number: MMSAP00001774  
Master Maintenance and Sale Agreement Date:

Sales Type: LEASE

EQUIPMENT BILL TO INFORMATION	
<b>Customer Legal Name:</b> FAYETTE COUNTY PUBLIC SCHOOLS	
<b>Address Line 1:</b> 1126 RUSSELL CAVE RD <b>Address Line 2:</b> <b>City:</b> LEXINGTON <b>ST/Zip:</b> KY/40505-3412	<b>County:</b> FAYETTE
<b>Contact:</b> Curt Demott <b>Phone:</b> (859)859-3814 <b>E-mail:</b> curtis.demott@fayette.kyschools.us <b>Fax:</b>	

Check all that apply:

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

SERVICE INFORMATION			
SERVICE BILL TO INFORMATION			
<b>Customer Legal Name:</b> FAYETTE COUNTY PUBLIC SCHOOLS			
<b>Address Line 1:</b> 1126 RUSSELL CAVE RD <b>Address Line 2:</b> <b>City:</b> LEXINGTON <b>ST/Zip:</b> KY/40505-3412		<b>County:</b> FAYETTE	
<b>Contact:</b> Curt Demott <b>Phone:</b> (859)859-3814 <b>E-mail:</b> curtis.demott@fayette.kyschools.us <b>Fax:</b>			
<b>Service Term (Months)</b> 60	<b>Base Billing Frequency</b> MONTHLY	<b>Overage Billing Frequency</b> MONTHLY	<b>Service Type</b> GOLD

SHIP TO / PRODUCT INFORMATION									
Product Description	QTY	Service Level	11 x 17	B/W Allowance MONTHLY	B/W Ovg	Color Allowance MONTHLY	Color Ovg	Service Base MONTHLY	Ship To / Equipment Address Contact Info
RICOH PROC7500 CONFIGURABLE PTO MODEL	2	GOLD	Single Click	0	0.007	0	0.035	\$260.00	1126 RUSSELL CAVE RD LEXINGTON, KY 40505-3412 FAYETTE Curt Demott (859)859-3814 curtis.demott@fayette.kyschools.us

BASIC CONNECTIVITY / PS / IT SERVICES INFORMATION	
BASIC CONNECTIVITY / PS / IT Services Description	Quantity

[OOD]EFI SB KIT CPS ES-3000 4YRS SMSA (5YR TOTAL) - INCLUDES 5 YEARS SUPPORT & MAINTENANCE	1
[OA]EFI CPS IMPLEMENTATION AND TRAINING	1
[OOD]FIERY SB SW TERM LAC IMPOSE-COMPOSE 5 YR DIGITAL INC5YR	2
[OA]PPSE TRAINING - EFI COMPOSE	2
[OA]CIP ISF PPSE TRAINING - C75XX W/ N-50A FIERY	2
[OA]FIERY CLONE CONSULTATION AND SERVICE	2
HYTEC BUNDLE FIERY BACKUP	2
[OA]CIP ISF CERTIFIED OPERATOR TRAINING - 76XX	2
PROMO GRAPHIC COMMUNICATIONS TEAM 0 AND REDUCED LEASE RATES	1

ORDER TOTALS		
<b>Service Type Offerings:</b>	<b>Product Total:</b>	
<b>Gold:</b> Includes all supplies and staples. Excludes paper. <b>Silver:</b> Includes all supplies. Excludes paper and staples. <b>Bronze:</b> Parts and labor only. Excludes paper, staples, and supplies.	<b>BASIC CONNECTIVITY / PS / IT Services:</b>	
	<b>Buyout After Promotions:</b>	
	<b>Grand Total: (Excludes Tax)</b>	
<b>Additional Provisions: Insert ANY additional provisions here</b>		

<b>Accepted by Customer</b>	<b>Accepted: Ricoh USA, Inc.</b>
Authorized Signature:	Authorized Signature:
Printed Name:	Printed Name:
Title:	Title:
Date	Date





**RICOH**EQUIPMENT REMOVAL/BUYOUT AUTHORIZATION

Customer Name:	Fayette County Public Schools			Phone:	(859)859-3814
Contact Name:	Curt Demott			City:	LEXINGTON
Address:	1126 RUSSELL CAVE RD			Fax/Email:	curtis.demott@fayette.kyschools.us
State:	KY	Zip:	40505-3412		

  

Make	Model	Serial Number
	PRO8320S	3699C600058/C84291066

**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. ("Rico") 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. Such removal request will set forth the location, make, model and serial number of the equipment to be removed by Ricoh. By signing below, you confirm that, with respect to every removal request issued by Customer (1) Ricoh may rely on the request, (2) the request shall be governed by this Authorization, and (3) Ricoh may accept this Authorization by either its signature or by commencing performance (e.g. equipment removal, initiating Services, etc.). Each party agrees that electronic signatures of the parties on this Authorization will have the same force and effect as manual signature. Notwithstanding the foregoing, the parties acknowledge and agree that Ricoh shall have no obligation to remove, delete, preserve, maintain or otherwise safeguard any information, images or content retained by, in or on any item of equipment serviced by Ricoh, whether through a digital storage device, hard drive or similar electronic medium ("Data Management Services"). If desired, Customer may engage Ricoh to perform such Data Management Services at its then-current rates. Notwithstanding anything in this Authorization to the contrary, (i) Customer is responsible for ensuring its own compliance with legal requirements pertaining to data retention and protection, (ii) it is the Customer's sole responsibility to obtain advice of competent legal counsel as to the identification and interpretation of any relevant laws and regulatory requirements that may affect the customer's business or data retention, and any actions required to comply with such laws, (iii) Ricoh does not provide legal advice or represent or warrant that its services or products will guarantee or ensure compliance with any law, regulation or requirement, and (iv) the selection, use and design of any Data Management Services, and any and all decisions arising with respect to the deletion or storage of any data, as well as any loss of data resulting therefrom, shall be the sole responsibility of Customer, and Customer shall indemnify and hold harmless Ricoh and its subsidiaries, directors, officers, employees and agents from and against any and all costs, expenses, liabilities, claims, damages, losses, judgments or fees (including reasonable attorneys' fees) (collectively, "Losses") arising therefrom or related thereto.

☒ **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. As a material condition to the performance by Ricoh, Customer hereby releases Ricoh from, and shall indemnify, defend and hold Ricoh harmless from and against, any and all claims, liabilities, costs, expenses and fees arising from or relating to any breach of Customer's representations or obligations in this Authorization or of any obligation owing by Customer under its lease agreement.

**CUSTOMER**

**CO**  
 Signature: \_\_\_\_\_  
 Name: \_\_\_\_\_  
 Title: \_\_\_\_\_  
 Date: \_\_\_\_\_

**RICOH USA, INC.**

Signature: \_\_\_\_\_  
 Name: \_\_\_\_\_  
 Title: \_\_\_\_\_  
 Date: \_\_\_\_\_

*CO*  
*8/3*



## ORDER AGREEMENT

Sales Type: LEASE

Master Maintenance and Sale Agreement Number: MMSAP00001774  
Master Maintenance and Sale Agreement Date:

EQUIPMENT BILL TO INFORMATION	
<b>Customer Legal Name:</b> COMMONWEALTH OF KENTUCKY	
<b>Address Line 1:</b> 1126 RUSSELL CAVE RD	<b>Contact:</b> Curt Demott
<b>Address Line 2:</b>	<b>Phone:</b> (859)859-3814
<b>City:</b> LEXINGTON	<b>E-mail:</b> curtis.demott@fayette.kyschools.us
<b>ST/Zip:</b> KY/40505-3412	<b>Fax:</b>
<b>County:</b> FAYETTE	

## Check all that apply:

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

SERVICE INFORMATION			
SERVICE BILL TO INFORMATION			
<b>Customer Legal Name:</b> COMMONWEALTH OF KENTUCKY			
<b>Address Line 1:</b> 1126 RUSSELL CAVE RD		<b>Contact:</b> Curt Demott	
<b>Address Line 2:</b>		<b>Phone:</b> (859)859-3814	
<b>City:</b> LEXINGTON		<b>E-mail:</b> curtis.demott@fayette.kyschools.us	
<b>ST/Zip:</b> KY/40505-3412		<b>Fax:</b>	
<b>County:</b> FAYETTE			
<b>Service Term (Months)</b>	<b>Base Billing Frequency</b>	<b>Overage Billing Frequency</b>	<b>Service Type</b>
60	QUARTERLY	QUARTERLY	SILVER

SHIP TO / PRODUCT INFORMATION									
Product Description	QTY	Service Level	11 x 17	B/W Allowance <small>QUARTERLY</small>	B/W Ovg	Color Allowance <small>QUARTERLY</small>	Color Ovg	Service Base <small>QUARTERLY</small>	Ship To / Equipment Address Contact Info
GREENLINE RICOH PRO C7260S	1	SILVER	Single Click	0	0.009	0	0.045	\$0.00	1126 RUSSELL CAVE RD LEXINGTON, KY 40505-3412 FAYETTE Curt Demott (859)859-3814 curtis.demott@fayette.kyschools.us

TRIMMERUNITTR5050	1			0		0		\$0.00	1126 RUSSELL CAVE RD LEXINGTON, KY 40505-3412 FAYETTE Curt Demott (859)859-3814 curtis.demott@fayette.kyschools.us
BOOKLET FINISHER SR5120	1			0		0		\$0.00	1126 RUSSELL CAVE RD LEXINGTON, KY 40505-3412 FAYETTE Curt Demott (859)859-3814 curtis.demott@fayette.kyschools.us
GBC STREAMPUNCH ULTRA DIE C4 COIL 43-47H ROUND	1			0		0		\$0.00	1126 RUSSELL CAVE RD LEXINGTON, KY 40505-3412 FAYETTE Curt Demott (859)859-3814 curtis.demott@fayette.kyschools.us

BASIC CONNECTIVITY / PS / IT SERVICES INFORMATION	
BASIC CONNECTIVITY / PS / IT Services Description	Quantity
[OA] FIERY CLONE CONSULTATION AND SERVICE	1
[OA] CIP ISF PPSE TRAINING - C72XX W/ E86 FIERY	1
[OA] CIP ISF CERTIFIED OPERATOR TRAINING - 72XX	1
HYTEC BUNDLE FIERY BACKUP	1
PROMO GRAPHIC COMMUNICATIONS TEAM 0 AND REDUCED LEASE RATES	1

ORDER TOTALS		
<b>Service Type Offerings:</b>  Gold: Includes all supplies and staples. Excludes paper. Silver: Includes all supplies. Excludes paper and staples. Bronze: Parts and labor only. Excludes paper, staples, and supplies.  Additional Provisions: <i>Insert ANY additional provisions here</i>	<b>Product Total:</b>	
	<b>BASIC CONNECTIVITY / PS / IT Services:</b>	
	<b>Buyout After Promotions:</b>	
	<b>Grand Total: (Excludes Tax)</b>	

<b>Accepted by Customer</b>	<b>Accepted: Ricoh USA, Inc.</b>
Authorized Signature:	Authorized Signature:
Printed Name:	Printed Name:
Title:	Title:
Date	Date



**RICOH**

Ricoh USA, Inc.  
300 Eagleview Blvd  
Suite 200  
Exton, PA 19341

**Product Schedule**

**Product Schedule Number:**  
**Master Lease Agreement Number: 1015539**

This Product Schedule (this "Schedule") is between Ricoh USA, Inc. ("we" or "us") and COMMONWEALTH OF KENTUCKY, as customer or lessee ("Customer" or "you"). This Schedule constitutes a "Schedule," "Product Schedule," or "Order Agreement," as applicable, under the State & Local Government Master Agreement (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**

<b>COMMONWEALTH OF KENTUCKY</b>				<b>Curt Demott</b>			
Customer (Bill To)				Billing Contact Name			
<b>1126 RUSSELL CAVE RD</b>				<b>1126 RUSSELL CAVE RD</b>			
Product Location Address				Billing Address (if different from location address)			
<b>LEXINGTON</b>	<b>FAYETTE</b>	<b>KY</b>	<b>40505-3412</b>	<b>LEXINGTON</b>	<b>FAYETTE</b>	<b>KY</b>	<b>40505-3412</b>
City	County	State	Zip	City	County	State	Zip
Billing Contact Telephone Number (859)859-3814		Billing Contact Facsimile Number		Billing Contact E-Mail Address curtis.demott@fayette.kyschools.us			

**PRODUCT/EQUIPMENT DESCRIPTION ("Product")**

Qty	Product Description: Make & Model	Street Address/City/State/Zip
1	TRIMMERUNITTR5050	1126 RUSSELL CAVE RD, LEXINGTON, KY, 40505-3412, US
1	BOOKLET FINISHER SR5120	1126 RUSSELL CAVE RD, LEXINGTON, KY, 40505-3412, US
1	GBC STREAMPUNCH ULTRA DIE C4 COIL 43-47H ROUND	1126 RUSSELL CAVE RD, LEXINGTON, KY, 40505-3412, US
1	GREENLINE RICOH PRO C7200S	1126 RUSSELL CAVE RD, LEXINGTON, KY, 40505-3412, US

**PAYMENT SCHEDULE**

<b>Minimum Term</b> (months)	<b>Minimum Payment</b> (Without Tax)	<b>Minimum Payment Billing Frequency</b>	<b>Advance Payment</b>
60	\$973.52	<input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other: _____	<input type="checkbox"/> 1 <sup>st</sup> Payment <input type="checkbox"/> 1 <sup>st</sup> & Last Payment <input type="checkbox"/> 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:

(a)



Initials

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

<b>CUSTOMER</b> <b>CD</b> By: <b>X</b> _____ Authorized Signer Signature  Printed Name: _____  Title: _____ Date: _____	<b>Accepted by: RICOH USA, INC.</b>  By: _____ Authorized Signer Signature  Printed Name: _____  Title: _____ Date: _____
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