

Government Product Lease Agreement

with Meter Rental Agreement

Section (A) Office Information

Office Number:			0	Office Name:					Office Phone #:			Date Submitted:		
2870 Great			reat Lakes District-Itasca					800 377 118			8/16/2017			
Section (B) Billing Information Section (C) Installation Information (if different than Billing Information													illing Information)	
Com	pany Name (F	ull legal na	ime):			725		Company Name (Full legal name):						
Village of Romeoville Parks and Recreation Dept								Village of Romeoville Parks and Recreation Dept						
DBA:								Installation Address (No PO Boxes or General Delivery): 900 W. Romeo Rd.						
Billing Address: 900 W. Romeo Rd.								Installation City: Romeoville				State:	ZIP Code + 4: 60446	
Billing City: State: ZIP Code + 4:							Code + 4:	Installation Contact Name:				Phone Numbe	The state of the s	
Romeoville IL						6044	6	Rosani	Rosanna Furman			815 886 6046		
	g Contact Nam				Contact Phon		mber:	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Installation Contact Title:			Fax Number:		
Rosanna Furman 815 886 6046 Billing Contact Title: Contact Fax Numl						5070 600 - 10	205	55 77790 IA	Office Manager Installation Contact email Address:					
Billing Contact Title: Contact Fax Number: Office Manager							per.	rfurman@Romeoville.org						
Billing Contact email Address: rfurman@Romeoville.org					Purchase Order Number:			Main Po	Main Post Office Name / Mail Drop off: Pos			st Office 5-Digit ZIP Code:		
Section (D) Products														
	Description (Include Serial Number, if applicable)													
	Quantity Model / Part Number					Table 2 Control No. of Colors With Colors	e additional listed products on attached continuation schedule.							
1	1	IN600A	IN600AFWP5 IN S					N Series 600 Base w/ Autofeeder, Sealer, Catch Tray, Ink Cartri						
2	1	ICMFP	-1			1	Desktop Solution - Power Conditioning Line Filter							
3														
4						+								
_	70		V	D 90				_						
Section (E) Lease Payment Information & Lease Payment Schedule Section (F) Postage Meter & Postage Funding Information													mation	
Tax Status: ☐ Taxable ☑ Tax-Exempt (Certificate attached) Billing Frequency: ☐ Monthly ☑ Quarterly			Period	# of Months	Monthly F (plus applica	100	ICITE INIC	Meter Model: IN600AF AI			Machine Model: IN600AFWP5			
			First	63	\$153.00		Pos	Postage Funding Method:				Postage Funding Account:		
			2 22-51					— ☐ Bill Me ☐ Prepay By Check ☐ New						
			Next					Manager 17 Page 17 Pag				Washington and Company	Existing Account	
					20 150 7			OMAS C	MAS CPU (include authorization form)			TMS Account # POC Account # 210699		
			Next				Age	ency Code	Sub Agency (Sub Agency Code			FOC ACCOUNT # 2 10099	
2000	Annually		Next			Service Products (Check all that apply) ☑ Online Postal Rates iMeter™ App (SP10)								
Billing Method: Current Lease Number:							6 1	☐ Online Postal Expense Manager iMeter™ App (SP20/NeoStats)						
Standard Current Lease Number: N12041105						☐ Online E-Services iMeter™ App (SP30)								
\boxtimes A	Arrears	1		n 5 179-15				☐ Online E-Services with Electronic Return Receipt iMeter™ App (SP35)						
ACH (Customer to submit authorization form)								The care and anything the for the state of the state of the care o						
			7.5					NeoShip PLUS – Requires NeoFunds/TotalFunds (EP70PLUS)						
							100	□ NeoShip ADVANCED - Requires NeoFunds/TotalFunds (NEOSHIPADV)) □ NeoShip Install & User Guide (EP70GUIDES)						
								Maintenance						
								✓ Installation & Training						
								Software Support (Maintenance)						
							000 000	vered Product:	20.39					
								G) Approval						
Exist	ing customers	who curre	ently fund the	e Postage acc	count by ACH D	ebit v	will not be converte	ed to NeoFund	s/TotalFunds unless	initialed here _		-1		
													nce Agreement, and an stitutes an offer to enter	
													rectGovLease-V04-16),	
				that do not be a series of									stomer identified above.	
to yo	2.6	eements v	viii pecome b	omaing on the	companies ide	entifie	eu apove only after	an authorized	individual accepts ye	our offer by sig	ining be	now, or when th	e equipment is shipped	
E E			_											
Autho	orized Signature	9					Pri	nt Name and Ti	tle			Date Ac	cepted	
Acco	nted by Neonos	hae A211 to	ite Affiliates									Date Ad	econtod	