## **TOSHIBA BUSINESS SOLUTIONS**

## AIMS MAINTENANCE CONTRACT

**MA-1.0.0** 

| <br> |                     |      |
|------|---------------------|------|
|      | SALES PACKET NUMBER | DATE |
|      | ····                |      |

4/11/2016

| Outtoner annace   |  | COPTIENT TAINE         |                         |                                 |                     | llection contain    | oro (the "Mai   | ntonanos Sandoss")    |
|-------------------|--|------------------------|-------------------------|---------------------------------|---------------------|---------------------|-----------------|-----------------------|
| for the equipmen  | s to purchase and Toshiba B<br>nt listed below in accordance<br>nder the Exclusion section o<br>ort. | with the terms and     | I conditions of this    | contract. Th                    | e Maintenance Se    | rvices exclude pape | er, staples an  | d all other parts and |
| CUSTOMER          | INFORMATION  |                        |                         |                                 |                     |                     |                 |                       |
| Customer Name:    | WEBB COUNTY, TX  | <                      |                         | Bill to Number                  | r:                  |                     |                 |                       |
| Billing Address:  | 1110 WASHINGTON  | N STREET, SU           | ITE 101                 | Phone #:                        | (956) 523-          | 4134 Ext.           | Fax #:          | (956) 523-5010        |
| Address 2:        |  |                        | Contact: LUDIVINA GOMEZ |                                 |                     |                     |                 |                       |
| City:             | LAREDO   | State: TX              | zip: 78040              | email: lgomez@w                 |                     |                     | ebbcountytx.gov |                       |
| INVOICE / MI      | ETER COLLECTION I  | NFORMATION             |                         |                                 |                     |                     |                 |                       |
| Meter Collection: | •  | Electronic             |                         | Invoi                           | ice Location: Cu    | stomer Address      | Term:           | 36 Months             |
|                   | SEE ATTAC  | HED MAINTEN            | VANCE CONT              | RACT SCI                        | HEDULE FOR          | DEVICE DETA         | II S            |                       |
| TRANSACTION       | ON TERMS (Consolid   |                        |                         | INACT CO                        | ILDOLL I OK         | DEVICE DETA         | ILO             |                       |
|                   |  |                        |                         |                                 | Minimum             | Payment             | Excess Per      | Excess Billing        |
| Pool Description  |  | Туре                   | Includes                | Units                           | Payment             | Frequency           | Unit Charge     | Frequency             |
|                   | JDIO 6550CT COLOR  | Black                  | 36,000                  | Prints                          | \$ 216.00           | Quarterly           | 0.006           | Quarterly             |
|                   | /N: CSCSD10521   | COLOR                  | 0                       | Prints                          |                     | <u> </u>            | 0.07            | Quarterly             |
| RENEWAL           |  |                        |                         |                                 |                     |                     |                 | · · · · · ·           |
|                   |  |                        |                         |                                 |                     |                     |                 |                       |
|                   |  |                        |                         |                                 |                     |                     |                 |                       |
| LOCATED AT:       |  |                        |                         |                                 |                     |                     |                 |                       |
| WEBB COUNTY IN    | NDIGENT HEALTH SERVICES  |                        |                         |                                 |                     |                     |                 |                       |
| 1620 SANTA UR     | RSULA  |                        |                         |                                 |                     |                     |                 |                       |
| LAREDO, TEXAS     | S 78040  |                        |                         |                                 |                     |                     |                 |                       |
| DEBBIE ORNEL      | AS (956) 523-4744  |                        |                         |                                 |                     |                     |                 |                       |
| 201/01/201        | SELECTE OF BANK  |                        |                         |                                 |                     |                     |                 |                       |
|                   | REEMENT - 30 DAY   |                        |                         | ļ                               |                     |                     |                 |                       |
| CANCELLATION      | N BY EITHER PARTY.   |                        |                         |                                 |                     |                     |                 |                       |
| DECLINATIO        | N  |                        |                         |                                 |                     |                     |                 |                       |
|                   | er is declining maintenance on the   | e equipment listed abo | ove.                    |                                 |                     |                     |                 |                       |
| Printed Name:     | · · · · · · · · · · · · · · · · · · ·  |                        |                         |                                 | Signature:          |                     |                 |                       |
| Title:            | <del>3</del>   | Date:                  |                         | •                               |                     |                     |                 |                       |
| ACCEPTANO         | CE   |                        |                         |                                 |                     |                     |                 |                       |
|                   | ID CONDITIONS HEREOF   | ARE PART OF TH         | IS SERVICE AGE          | REEMENT. E                      | Y SIGNING THIS      | CONTRACT, THE       | CUSTOMER        | ACKNOWLEDGES          |
|                   | VE READ AND UNDERSTA   |                        |                         |                                 |                     |                     |                 |                       |
| Customer agrees   | s to pay the Minimum Payme   | ent per transaction    | terms, plus any i       | Excess Per U                    | nit Charges for the | term of this Contra | act. When the   | is Contract is signed |
|                   | nd=TBS, it=shall=constitute=a<br>d agree that your electronic s                                      |                        |                         |                                 |                     |                     | nea-by-I-BS-    | below.—rou-nereby     |
| acknowledge and   |  |                        |                         | T T                             |                     |                     |                 |                       |
| Customer:         | WEBB (   | COUNTY, TEX            | AS                      | Toshiba Business Solutions      |                     |                     |                 |                       |
| Printed Name:     | TANG   | O E. TIJERINA          |                         | Printed Name: CHRISTOPHER YANES |                     |                     |                 |                       |
| Signature:        |  |                        |                         | Signature:                      | Signature:          |                     |                 |                       |
| Title:            | WEBB COUNTY JUI  | DGE Date:              |                         | Title:                          | GOVERN              | MENT SALES          | Effective D     | Date: 4/11/2016       |