

Section (A) Office Information

Office Number: 661	Office Name: BRENT'S MAILING EQUIPMENT	Office Phone #: 815 226 8111	Date Submitted:
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Section (B) Billing Information

Company Name (Full legal name): HARLEM ADMINISTRATION CENTER		
DBA:		
Billing Address: 8605 N. SECOND ST.		
Billing City: MACHESNEY PARK	State: IL	ZIP Code + 4: 61111
Billing Contact Name: GAIL ALDRICH	Contact Phone Number: 815 654 4500	
Billing Contact Title: PURCHASING	Contact Fax Number:	
Billing Contact email Address: gail.aldrich@harlem122.org	Purchase Order Number:	

Section (C) Installation Information (if different than Billing Information)

Company Name (Full legal name): HARLEM ADMINISTRATION CENTER		
Installation Address (No PO Boxes or General Delivery): 8605 N. SECOND ST.		
Installation City: MACHESNEY PARK	State: IL	ZIP Code + 4: 61111
Installation Contact Name: GAIL ALDRICH	Phone Number: 815 654 4500	
Installation Contact Title: PURCHASING	Fax Number:	
Installation Contact email Address: gail.aldrich@harlem122.org		
Main Post Office Name / Mail Drop off:	Post office 5-Digit ZIP Code:	

Section (D) Products

	Quantity	Model / Part Number	Description (Include Serial Number, if applicable) <input type="checkbox"/> See additional listed products on attached continuation schedule.
1	1	IX-7WP10	IX-7 SERIES BASE W.MIXED SIZED FEEDER, SEALER, DROP TRAY, INK CAR
2			
3			
4			

Section (E) Lease Payment Information & Lease Payment Schedule

Tax Status: <input checked="" type="checkbox"/> Taxable <input type="checkbox"/> Tax-Exempt (Certificate attached)	Period	# of Months	Monthly Payment (plus applicable taxes)
	First	63	\$275.05
	Next		
	Next		
	Next		
Billing Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Annually	Current Lease Number:		
Billing Method: <input checked="" type="checkbox"/> Standard <input type="checkbox"/> ACH (Customer to submit authorization form)			

Section (F) Postage Meter & Postage Funding Information

Meter Model: IX5	Machine Model: IX5WP5
Postage Funding Method: <input checked="" type="checkbox"/> Bill Me <input type="checkbox"/> Prepay By Check <input type="checkbox"/> ACH Debit (Customer to submit authorization form)	Postage Funding Account: <input type="checkbox"/> New <input checked="" type="checkbox"/> Existing Account TMS Account # _____ POC Account # <u>54232075</u>
Service Products (Check all that apply) <input checked="" type="checkbox"/> Online Postal Rates iMeter™ App (SP10) <input type="checkbox"/> Online Postal Expense Manager iMeter™ App (SP20/NeoStats) <input type="checkbox"/> Online E-Services iMeter™ App (SP30) <input type="checkbox"/> Online E-Services with Electronic Return Receipt iMeter™ App (SP35) <input type="checkbox"/> NeoShip BASIC – Requires NeoFunds/TotalFunds (EP70) <input type="checkbox"/> NeoShip PLUS – Requires NeoFunds/TotalFunds (EP70PLUS) <input type="checkbox"/> NeoShip ADVANCED - Requires NeoFunds/TotalFunds (NEOSHIPADV) <input type="checkbox"/> NeoShip Install & User Guide (EP70GUIDES) <input type="checkbox"/> RunMyMail <input type="checkbox"/> Maintenance (provided by your authorized office) <input checked="" type="checkbox"/> Installation & Training (provided by your authorized office) <input type="checkbox"/> Annual Software Support (Maintenance)	
Covered Product:	

Section (G) Approval

Existing customers who currently fund the Postage account by ACH Debit will not be converted to NeoFunds/TotalFunds unless initialed here _____.

This document consists of a Product Lease ("Lease") with MailFinance Inc.; and a Postage Meter Rental Agreement ("Rental Agreement"), and an Online Services and Software Agreement with Neopost USA Inc.; and a NeoFunds/TotalFunds Account Agreement with Mailroom Finance, Inc. Your signature constitutes an offer to enter into the Lease and, if applicable, the other agreements, and acknowledges that you have received, read, and agree to all applicable terms and conditions (version DealerLease-V04-16), which are also available at <http://neopostusa.com/terms/DealerLease-V04-16.pdf>, and that you are authorized to sign the agreements on behalf of the customer identified above. The applicable agreements will become binding on the companies identified above only after an authorized individual accepts your offer by signing below, or when the equipment is shipped to you.

Authorized Signature _____	Print Name and Title _____	Date Accepted _____
Accepted by Neopost USA and its Affiliates _____		Date Accepted _____