



Ricoh USA, Inc.

For Correspondence Only:

Ricoh USA, Inc.
PO Box 9115
Macon GA 31210

Customer Service:
Telephone 1-800-595-1011

Aug 01, 2016

**NATHAN WEEKS
HIGHLAND JOINT SCHOOL DISTRICT
PO BOX 130
CRAIGMONT, ID 83523 0130**

RE: Account Number: **515851-1025285US1**

Dear Valued Customer:

Thank you for allowing Ricoh USA, Inc. to finance your recent contract. This packet contains copies of your executed documents. Please review the enclosed documents and notify us immediately should you feel there is any discrepancy in the documents or should you have any other concerns.

We are happy to assist you with any questions regarding your account and we are committed to providing the highest quality of customer service possible. For your convenience your account number is referenced in this letter and should be used when calling about your account. For account assistance, please call Customer Service at 1-800-595-1011. Our customer service representatives are available 8:00 AM to 5:30 PM EST, Monday through Friday to assist you.

Did you know we now offer online account management? View your account history, make payments online, and ***Go Green*** with our invoice E-Delivery program. Call Customer Service or visit www.getmyaccounts.com to get started today!

Sincerely,

Customer Service

Enclosures



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PO Box 9115
Macon GA 31210

Customer Service:
Telephone 1-800-595-1011

Customer Name: **HIGHLAND JOINT SCHOOL DISTRICT**

Account Number: **515851-1025285US1**

Agreement Dates:

Description	Date
Term Begin Date	7/18/2016
First Payment Due Date	8/17/2016
Initial Term End Date	7/17/2021

Payment Remit Payments as follows:

Address: **RICOH USA, INC.**
PO BOX 650073
DALLAS,
TX 75265 007373

W-9 Fed TAX PAYER ID NUMBER: 42-1074725
Please access MyAccounts (www.getmyaccounts.com) for a copy of the W-9 form.

Equipment Make and model number can be found on copy of attached executed agreement.
Description: Please access MyAccounts (www.getmyaccounts.com) for equipment serial numbers(s).

Property Taxes: Property Taxes are assessed based on the equipment location on the tax assessment date and determined by your county or state. Each county or state determines its own tax assessment date.

Customer Service: In the event of any discrepancies contact Customer Service immediately at 1-800-595-1011.

Please note that this notice is subject in all respects to the terms and conditions of your agreement and does not constitute an amendment or any other change to any of the terms or conditions of such agreement. To the extent of any conflict between the contents of this notice and the terms or conditions of such agreement, the terms and conditions of such agreement shall control.

NOTICE: The information contained in this letter and any attachments ("this letter") may contain confidential information for the sole use of the intended recipient(s). Any unauthorized use, disclosure, viewing, copying, alteration, dissemination or distribution of, or reliance on this letter is strictly prohibited. If you have received this letter in error, or you are not an authorized recipient, please notify the sender immediately, delete all copies from your e-mail system and destroy any printed copies.

RICOH**U.S. Communities Product Schedule**Ricoh USA, Inc.
70 Valley Stream Parkway
Malvern, PA 19355
1025285US1

Product Schedule Number: _____

Master Lease Agreement Number: 1025285

This U.S. Communities Product Schedule (this "Schedule") is between Ricoh USA, Inc. ("we" or "us") and HIGHLAND JOINT SCHOOL DISTRICT 305 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

HIGHLAND JOINT SCHOOL DISTRICT 305				Nathan Weeks			
Customer (Bill To)				Billing Contact Name			
112 BOULEVARD AVE				PO BOX 130			
Product Location Address				Billing Address (if different from location address)			
CRAIGMONT				CRAIGMONT			
City		County	State	ID	Zip		
					83523-0130		
Billing Contact Telephone Number				Billing Contact Facsimile Number		Billing Contact E-Mail Address	
(208) 924-5211						nweeks@lapwai.org	

PRODUCT/EQUIPMENT DESCRIPTION ("Product")

Qty	Product Description	Make & Model
	RICOH MP7502	

Qty	Product Description	Make & Model

PAYMENT SCHEDULE

Minimum Term (months) 60	Minimum Payment (Without Tax) \$ 331.26	Minimum Payment Billing Frequency <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____	Advance Payment <input type="checkbox"/> 1 st Payment <input type="checkbox"/> 1 st & Last Payment <input type="checkbox"/> Other _____
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Sales Tax Exempt ☒ YES (Attach Exemption Certificate)
 Addendum(s) attached ☐ YES (check if yes and indicate total number of pages: _____)

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

TERMS AND CONDITIONS

1. 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."

2. 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 expressly provided in any provision of the Lease Agreement. 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. Additional Provisions (if any) are _____

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

CUSTOMER By <input checked="" type="checkbox"/> <u>Nathan Weeks</u> Authorized Signer Signature Printed Name <u>Nathan Weeks</u> Title <u>Business Manager</u> Date <u>6-21-16</u>	Accepted by: RICOH USA, INC. <u>GYANESH BHATNAGAR</u> By: _____ Authorized Signer Signature Printed Name _____ Title <u>Funding specialist</u> Date <u>8/1/2016</u>
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