



CANON SOLUTIONS AMERICA, INC. (\*Service Provider\*)

Production Print Solutions
Master Lease Agreement
LEASE SCHEDULE
CFS-1534 (12/17)

CANON FINANCIAL SERVICES, INC. ("CFS")
Remittance address: 14904 Collections Center Drive
Chicago, Illinois 60693 Phone: (800) 220-0200

CFS' AGREEMENT NUMBER:

THIS MASTER LEASE AGREEMENT LEASE SCHEDULE (this "Schedule") incorporates all of the terms of the Master Lease Agreement, between the Customer indicated below ("Customer") and CFS, executed on \_\_\_\_\_ (the "Agreement"). This Schedule and the Agreement (as it relates to this Schedule) constitutes a lease of the equipment described below (the "Equipment"). In the event of any conflict between the terms hereof and the terms of the Agreement, the terms of this Schedule shall govern.

CUSTOMER INFORMATION

Table with 4 columns: COMPANY LEGAL NAME, DBA, PHONE, BILLING ADDRESS, CITY, COUNTY, STATE, ZIP, EQUIPMENT ADDRESS, CITY, COUNTY, STATE, ZIP. Values include CONTRA COSTA COUNTY, Print & Mail Services, 925-655-4500, 4061 PORT CHICAGO HWY, CONCORD, CA, 94520-1196.

EQUIPMENT INFORMATION

NUMBER AND AMOUNT OF PAYMENTS

Table with 5 columns: Quantity, Serial Number, Make/Model/Description, Number Of Payments, Payment Amount \*. Rows include VPIX3200-varioPRINT iX-3200 Series, IPV1000-imagePRESS V1000, VP6180 -varioPRINT 6180 TITAN TPxp.

Form fields for Term in months (84), Number of Payments in Advance, Total Amount Due at Signing, Payment Frequency (Monthly checked), End of Term Purchase Option (\$1.00 checked).

Maintenance and Supplies Included in Payment\*: (Separate Service Provider Agreement required.) [ ] Maintenance [ ] Supplies [ ] Software Maintenance

COMMENTS

OMNIA - University of California, CA Contract Number: 2020002755 Terms & Conditions Govern

THIS SCHEDULE IS NON-CANCELABLE BY CUSTOMER AND IS SUBJECT TO AND CONDITIONED UPON CREDIT APPROVAL BY CFS. CUSTOMER REPRESENTS THAT ALL ACTION REQUIRED TO AUTHORIZE EXECUTION OF THIS SCHEDULE ON BEHALF OF CUSTOMER BY THE FOLLOWING SIGNATORIES HAS BEEN TAKEN. THE UNDERSIGNED HAS READ, UNDERSTANDS AND HEREBY AGREES TO ALL OF THE TERMS AND CONDITIONS SET FORTH IN THIS SCHEDULE.

ACCEPTED

Form for ACCEPTED signature: CANON FINANCIAL SERVICES, INC. By: Title: Date:

AUTHORIZED CUSTOMER SIGNATURE

Form for AUTHORIZED CUSTOMER SIGNATURE: By: X Title: Printed Name: Email Address: Date: By: X Title: Printed Name: