Pitney Bowes

Engineering the flow of communication

9322828-401

Your Business Information

Rental Account Number 60

WISE COUNTY TAX ASSESSOR COLECTOR	CAN #	ORDER #	
Full Legal Name of Lessee	DBA Name of Lessee	Tax ID # (FEIN/TIN)	
PO BOX 899	DECATUR	TX	76234-0899
Billing Address	City	State	Zip+4
Billing Contact Name	Billing Contact Phone #	Billing CAN #	
404 W WALNUT ST	DECATUR	TX	76234-1372
Installation Address (If different than billing address)	City	State	Zip+4
Installation Contact Name	Installation Contact Phone #	18191443861 Installation CAN #	
Credit Card #	Name on Card	Exp Date	Type of Card
Tax Exempt #	State Tax (if applicable)	Fiscal Period (from - to)	

Your Business Needs

Qty	Business Solution Description
	Mail Stream Solution - 2
1	DM450C/ 5lb Integrated Weighing Platform
1	IntelliLink Interface / PSD for DM300C/ DM400C/DM450C w/PP (NTF)
1	Accounting (30 Dept) Software
1	IntelliLink Subscription

Check items to be included in customer's payment

[X] **Equipment Maintenance**
Provides service coverage including certain parts and labor

[X] **Software Maintenance**
Provides revision updates and technical assistance

[X] **Soft-Guard® Subscription**
Provides postal and carrier updates

If you do not elect to include Soft-Guard® protection with your lease, you will automatically receive updates at the then-current rates.

[X] **IntelliLink™ Subscription/Meter Rental**
Provides simplified billing and includes ( )resets per year

( ) **Confirmation Services**
( ) **Purchase Power**

Electronic access to postal confirmation services. Receive an invoice for postage, consolidated billing, and a enhanced management reporting information.

Your Payment Plan

Number of months		Monthly amount*
First	63	$ 186

* Monthly Billing Only

(xx) Required advance check of $( ) received
(xx) Tax Exempt certificate attached
Initial Rental Term _____

Your Acknowledgement

By your signature as "Lessee" below, you request that we rent to you the equipment described above or on any addenda attached hereto (the "Equipment") for essential governmental purposes in consideration of your payment to us of the amounts set forth in the Payment Schedule, subject to the terms and conditions provided in this Agreement. For purposes of this Agreement, all payments set forth in the Payment Schedule shall be referred to as the "Total Payments." The payments referred to in the Payment Schedule other than the "Final Payment" shall be referred to singularly as a "Period Payment" and collectively as the "Period Payments." Your obligation to pay is not which not exceed it be having an authorized employee sign it. All payments hereunder shall be payable only to us at our executive offices unless we direct you otherwise in writing.

1. NON-APPROPRIATION. You warrant that you have funds available to pay the Total Payments until the end of your current fiscal period, and shall use your best efforts to obtain funds to pay the Total Payments in each subsequent fiscal period through the end of your Initial Term. If your appropriation request to your legislative body, or funding authority ("Governing Body") for funds to pay the Total Payments is denied, you may terminate this Agreement on the last day of the fiscal period for which funds have been appropriated, upon (i) submission of documentation reasonably satisfactory to us evidencing the Governing Body's denial of an appropriation sufficient to continue this Agreement for the next succeeding fiscal period, and (ii) satisfaction of all charges and obligations under this Agreement incurred through the end of the fiscal period for which funds have been appropriated, including the return of the Equipment in your Premises.

Signature: Bill McElhaney Date: OCTOBER 8, 2007

Print Name: Bill McELHANEY Title: County Judge

Email Address:

David Wilki 059

Account Rep District Office PBCFS Acceptance