COUNTY OF MONTEREY STANDARD AGREEMENT

This **Agreement** is made by and between the County of Monterey, a political subdivision of the State of California (hereinafter "County") and:

Smile Business Products, Inc.

(hereinafter "CONTRACTOR").

In consideration of the mutual covenants and conditions set forth in this Agreement, the parties agree as follows:

1.0 GENERAL DESCRIPTION:

The County hereby engages CONTRACTOR to perform, and CONTRACTOR hereby agrees to perform, the services described in **Exhibit A** in conformity with the terms of this Agreement. The goods and/or services are generally described as follows:

Provide: Printer/Copier/Multi-function machine with needed accessories, lease, equipment maintenance, repair, customer education & analyst services to all Department of Social Services facilities as needed and requested.

2.0 PAYMENT PROVISIONS:

2.1 County shall pay the CONTRACTOR in accordance with the payment provisions set forth in **Exhibit A**, subject to the limitations set forth in this Agreement. The total amount payable by County to CONTRACTOR under this Agreement shall not exceed the sum of: \$ 368.000.00

3.0 TERM OF AGREEMENT:

- 3.01 The term of this Agreement is from July 1, 2024 to June 30, 2028 , unless sooner terminated pursuant to the terms of this Agreement. This Agreement is of no force or effect until signed by both CONTRACTOR and County and with County signing last, and CONTRACTOR may not commence work before County signs this Agreement.
- 3.02 The County reserves the right to cancel this Agreement, or any extension of this Agreement, without cause, with a thirty day (30) written notice, or with cause immediately.

4.0 <u>SCOPE OF SERVICES AND ADDITIONAL PROVISIONS:</u>

The following attached exhibits are incorporated herein by reference and constitute a part of this Agreement:

Exhibit A Scope of Services/Payment Provisions

Exhibit B Other: See page 11(a) for a list of Exhibits

5.0 PERFORMANCE STANDARDS:

- 5.01 CONTRACTOR warrants that CONTRACTOR and CONTRACTOR's agents, employees, and subcontractors performing services under this Agreement are specially trained, experienced, competent, and appropriately licensed to perform the work and deliver the services required under this Agreement and are not employees of the County, or immediate family of an employee of the County.
- 5.02 CONTRACTOR, its agents, employees, and subcontractors shall perform all work in a safe and skillful manner and in compliance with all applicable laws and regulations. All work performed under this Agreement that is required by law to be performed or supervised by licensed personnel shall be performed in accordance with such licensing requirements.
- 5.03 CONTRACTOR shall furnish, at its own expense, all materials, equipment, and personnel necessary to carry out the terms of this Agreement, except as otherwise specified in this Agreement. CONTRACTOR shall not use County premises, property (including equipment, instruments, or supplies) or personnel for any purpose other than in the performance of its obligations under this Agreement.

6.0 PAYMENT CONDITIONS:

- 6.01 Prices shall remain firm for the initial term of the Agreement and, thereafter, may be adjusted annually as provided in this paragraph. The County does not guarantee any minimum or maximum amount of dollars to be spent under this Agreement.
- 6.02 Negotiations for rate changes shall be commenced, by CONTRACTOR, a minimum of ninety days (90) prior to the expiration of the Agreement. Rate changes are not binding unless mutually agreed upon in writing by the County and the CONTRACTOR.
- 6.03 Invoice amounts shall be billed directly to the ordering department.
- 6.04 CONTRACTOR shall submit such invoice periodically or at the completion of services, but in any event, not later than 30 days after completion of services. The invoice shall set forth the amounts claimed by CONTRACTOR for the previous period, together with an itemized basis for the amounts claimed, and such other information pertinent to the invoice. The County shall certify the invoice, either in the requested amount or in such other amount as the County approves in conformity with this Agreement and shall promptly submit such invoice to the County Auditor-Controller for payment. The County Auditor-Controller shall pay the amount certified within 30 days of receiving the certified invoice.
- 6.05 The Parties agree that CONTRACTOR and its subcontractors shall be reimbursed for mileage based upon the Internal Revenue Service (IRS) standard business mileage rate at the time of travel.

7.0 TERMINATION:

7.01 During the term of this Agreement, the County may terminate the Agreement for any reason by giving written notice of termination to the CONTRACTOR at least thirty (30) days prior to the effective date of termination. Such notice shall set forth the effective date of termination. In the event of such termination, the amount payable under this Agreement shall be reduced in proportion to the services provided prior to the date of termination.

Revised 12/19/23 2 of 11 Agreement ID: 5010--451 FY 2024-28

- 7.02 The County may cancel and terminate this Agreement for good cause effective immediately upon written notice to CONTRACTOR. "Good cause" includes the failure of CONTRACTOR to perform the required services at the time and in the manner provided under this Agreement. If County terminates this Agreement for good cause, the County may be relieved of the payment of any consideration to CONTRACTOR, and the County may proceed with the work in any manner, which County deems proper. The cost to the County shall be deducted from any sum due the CONTRACTOR under this Agreement.
- 7.03 The County's payments to CONTRACTOR under this Agreement are funded by local, state and federal governments. If funds from local, state and federal sources are not obtained and continued at a level sufficient to allow for the County's purchase of the indicated quantity of services, then the County may give written notice of this fact to CONTRACTOR, and the obligations of the parties under this Agreement shall terminate immediately, or on such date thereafter, as the County may specify in its notice, unless in the meanwhile the parties enter into a written amendment modifying this Agreement.

8.0 INDEMNIFICATION:

CONTRACTOR shall indemnify, defend, and hold harmless the County, its officers, agents, and employees, from and against any and all claims, liabilities, and losses whatsoever (including damages to property and injuries to or death of persons, court costs, and reasonable attorneys' fees) occurring or resulting to any and all persons, firms or corporations furnishing or supplying work, services, materials, or supplies in connection with the performance of this Agreement, and from any and all claims, liabilities, and losses occurring or resulting to any person, firm, or corporation for damage, injury, or death arising out of or connected with the CONTRACTOR's performance of this Agreement, unless such claims, liabilities, or losses arise out of the sole negligence or willful misconduct of the County. "CONTRACTOR's performance" includes CONTRACTOR's action or inaction and the action or inaction of CONTRACTOR's officers, employees, agents and subcontractors.

9.0 INSURANCE REQUIREMENTS:

9.01 Evidence of Coverage: Prior to commencement of this Agreement, the Contractor shall provide a "Certificate of Insurance" certifying that coverage as required herein has been obtained. Individual endorsements executed by the insurance carrier shall accompany the certificate. In addition, the Contractor upon request shall provide a certified copy of the policy or policies.

This verification of coverage shall be sent to the County's Contracts/Purchasing Department, unless otherwise directed. The Contractor shall <u>not</u> receive a "Notice to Proceed" with the work under this Agreement until it has obtained all insurance required and the County has approved such insurance. This approval of insurance shall neither relieve nor decrease the liability of the Contractor.

9.02 **Qualifying Insurers:** All coverages, except surety, shall be issued by companies which hold a current policy holder's alphabetic and financial size category rating of not less than A- VII, according to the current A.M. Best's Rating Guide or a company of equal financial stability that is approved by the County's Purchasing Agent.

9.03 <u>Insurance Coverage Requirements:</u> Without limiting CONTRACTOR's duty to indemnify, CONTRACTOR shall maintain in effect throughout the term of this Agreement a policy or policies of insurance with the following minimum limits of liability:

<u>Commercial General Liability Insurance</u>: including but not limited to premises and operations, including coverage for Bodily Injury and Property Damage, Personal Injury, Contractual Liability, Broad form Property Damage, Independent Contractors, Products and Completed Operations, with a combined single limit for Bodily Injury and Property Damage of not less than \$1,000,000 per occurrence, and \$2,000,000 in the aggregate.

(Note: any proposed modifications to these general liability insurance requirements shall be attached as an Exhibit hereto, and the section(s) above that are proposed as not applicable shall be lined out in blue ink. All proposed modifications are subject to County approval.)

<u>Auto Liability Coverage:</u> must include all motor vehicles, including owned, leased, non-owned, and hired vehicles, used in providing services under this Agreement, with a combined single limit or Bodily Injury and Property Damage of not less than \$1,000,000 per occurrence.

(Note: any proposed modifications to these auto insurance requirements shall be attached as an Exhibit hereto, and the section(s) above that are proposed as not applicable shall be lined out in blue ink. All proposed modifications are subject to County approval.)

Workers' Compensation Insurance: if CONTRACTOR employs others in the performance of this Agreement, in accordance with California Labor Code section 3700 and with Employer's Liability limits not less than \$1,000,000 each person, \$1,000,000 each accident and \$1,000,000 each disease.

(Note: any proposed modifications to these workers' compensation insurance requirements shall be attached as an Exhibit hereto, and the section(s) above that are proposed as not applicable shall be lined out in blue ink. All proposed modifications are subject to County approval.)

Professional Liability Insurance: if required for the professional services being provided, (e.g., those persons authorized by a license to engage in a business or profession regulated by the California Business and Professions Code), in the amount of not less than \$1,000,000 per claim and \$2,000,000 in the aggregate, to cover liability for malpractice or errors or omissions made in the course of rendering professional services. If professional liability insurance is written on a "claims-made" basis rather than an occurrence basis, the CONTRACTOR shall, upon the expiration or earlier termination of this Agreement, obtain extended reporting coverage ("tail coverage") with the same liability limits. Any such tail coverage shall continue for at least three years following the expiration or earlier termination of this Agreement.

(Note: Professional liability insurance coverage is required if the contractor is providing a professional service regulated by the state. Examples of service providers regulated by the state are insurance agents, professional architects and engineers, doctors, certified public accountants, lawyers, etc. However, other professional Contractors, such as computer or software designers, technology services, and services providers such as claims administrators, should also have professional liability. If in doubt, consult with your risk or contract manager.)

If the contractor maintains broader coverage and/or higher limits than the minimums shown above, the County requires and shall be entitled to the broader coverage and/or higher limits maintained by the contractor.

9.04 Other Requirements:

All insurance required by this Agreement shall be with a company acceptable to the County and issued and executed by an admitted insurer authorized to transact Insurance business in the State of California. Unless otherwise specified by this Agreement, all such insurance shall be written on an occurrence basis, or, if the policy is not written on an occurrence basis, such policy with the coverage required herein shall continue in effect for a period of three years following the date CONTRACTOR completes its performance of services under this Agreement.

Each liability policy shall provide that the County shall be given notice in writing at least thirty days in advance of any endorsed reduction in coverage or limit, cancellation, or intended non-renewal thereof. Each policy shall provide coverage for Contractor and additional insureds with respect to claims arising from each subcontractor, if any, performing work under this Agreement, or be accompanied by a certificate of insurance from each subcontractor showing each subcontractor has identical insurance coverage to the above requirements.

Additional Insured Status:

The County of Monterey, its officers, officials, employees, and volunteers are to be covered as additional insureds on the commercial general liability policy with respect to liability arising out of work or operations performed by or on behalf of the CONTRACTOR including materials, parts, or equipment furnished in connection with such work or operations. General liability coverage shall be provided in the form of an endorsement to the CONTRACTOR'S insurance (at least as broad as ISO Form CG 20 10 11 85 or if not available, through the addition of both CG 20 10, CG 20 26, CG 20 33, or CG 20 38; and CG 20 37 if a later edition is used).

Primary Coverage:

For any claims related to this contract, the CONTRACTOR'S insurance coverage shall be primary and non-contributory and at least as broad as ISO CG 20 01 04 13 as respects the County, its officers, officials, employees, and volunteers. Any insurance or self-insurance maintained by the County, its officers, officials, employees, or volunteers shall be excess of the CONTRACTOR'S insurance and shall not contribute with it. This requirement shall also apply to any Excess or Umbrella liability policies.

Waiver of Subrogation:

CONTRACTOR hereby grants to County a waiver of any right to subrogation which any insurer of said CONTRACTOR may acquire against the County by virtue of the payment of any loss under such insurance. CONTRACTOR agrees to obtain any endorsement that may be necessary to affect this waiver of subrogation, but this provision applies regardless of whether or not the County has received a waiver of subrogation endorsement from the insurer.

Prior to the execution of this Agreement by the County, CONTRACTOR shall file certificates of insurance with the County's contract administrator and County's Contracts/Purchasing Division, showing that the CONTRACTOR has in effect the insurance required by this Agreement. The CONTRACTOR shall file a new or amended certificate of insurance within five calendar days after any change is made in any insurance policy, which would alter the information on the certificate then on file. Acceptance or approval of insurance shall in no way modify or change the indemnification clause in this Agreement, which shall continue in full force and effect. CONTRACTOR shall always during the term of this Agreement maintain in force the insurance coverage required under this Agreement and shall send, without demand by County, annual certificates to County's Contract Administrator and County's Contracts/Purchasing Division. If the certificate is not received by the expiration date, County shall notify CONTRACTOR and CONTRACTOR shall have five calendar days to send in the certificate, evidencing no lapse in coverage during the interim. Failure by CONTRACTOR to maintain such insurance is a default of this Agreement, which entitles County, at its sole discretion, to terminate this Agreement immediately.

10.0 RECORDS AND CONFIDENTIALITY:

- 10.1 Confidentiality: CONTRACTOR and its officers, employees, agents, and subcontractors shall comply with any and all federal, state, and local laws, which provide for the confidentiality of records and other information. CONTRACTOR shall not disclose any confidential records or other confidential information received from the County or prepared in connection with the performance of this Agreement, unless County specifically permits CONTRACTOR to disclose such records or information. CONTRACTOR shall promptly transmit to County any and all requests for disclosure of any such confidential records or information. CONTRACTOR shall not use any confidential information gained by CONTRACTOR in the performance of this Agreement except for the sole purpose of carrying out CONTRACTOR's obligations under this Agreement.
- 10.2 <u>County Records:</u> When this Agreement expires or terminates, CONTRACTOR shall return to County any County records which CONTRACTOR used or received from County to perform services under this Agreement.
- 10.3 Maintenance of Records: CONTRACTOR shall prepare, maintain, and preserve all reports and records that may be required by federal, state, and County rules and regulations related to services performed under this Agreement. CONTRACTOR shall maintain such records for a period of at least three years after receipt of final payment under this Agreement. If any litigation, claim, negotiation, audit exception, or other action relating to this Agreement is pending at the end of the three-year period, then CONTRACTOR shall retain said records until such action is resolved.
- 10.4 Access to and Audit of Records: The County shall have the right to examine, monitor and audit all records, documents, conditions, and activities of the CONTRACTOR and its subcontractors related to services provided under this Agreement. Pursuant to Government Code section 8546.7, if this Agreement involves the expenditure of public funds in excess of \$10,000, the parties to this Agreement may be subject, at the request of the County or as part of any audit of the County, to the examination and audit of the State Auditor pertaining to matters connected with the performance of this Agreement for a period of three years after final payment under the Agreement.

10.5 **Royalties and Inventions:** County shall have a royalty-free, exclusive and irrevocable license to reproduce, publish, and use, and authorize others to do so, all original computer programs, writings, sound recordings, pictorial reproductions, drawings, and other works of similar nature produced in the course of or under this Agreement. CONTRACTOR shall not publish any such material without the prior written approval of County.

11.0 NON-DISCRIMINATION:

11.1 During the performance of this Agreement, CONTRACTOR, and its subcontractors, shall not unlawfully discriminate against any person because of race, religious creed, color, sex, national origin, ancestry, physical disability, mental disability, medical condition, marital status, age (over 40), sexual orientation, or any other characteristic set forth in California Government code § 12940(a), either in CONTRACTOR's employment practices or in the furnishing of services to recipients. CONTRACTOR shall ensure that the evaluation and treatment of its employees and applicants for employment and all persons receiving and requesting services are free of such discrimination. CONTRACTOR and any subcontractor shall, in the performance of this Agreement, fully comply with all federal, state, and local laws and regulations which prohibit discrimination. The provision of services primarily or exclusively to such target population as may be designated in this Agreement shall not be deemed to be prohibited discrimination.

12.0 COMPLIANCE WITH TERMS OF STATE OR FEDERAL GRANTS:

If this Agreement has been or will be funded with monies received by the County pursuant to a contract with the state or federal government in which the County is the grantee, CONTRACTOR will comply with all the provisions of said contract, to the extent applicable to CONTRACTOR as a subgrantee under said contract, and said provisions shall be deemed a part of this Agreement, as though fully set forth herein. Upon request, County will deliver a copy of said contract to CONTRACTOR, at no cost to CONTRACTOR.

13.0 <u>COMPLIANCE WITH APPLICABLE LAWS:</u>

- 13.1 CONTRACTOR shall keep itself informed of and in compliance with all federal, state, and local laws, ordinances, regulations, and orders, including but not limited to all state and federal tax laws that may affect in any manner the Project or the performance of the Services or those engaged to perform Services under this AGREEMENT as well as any privacy laws including, if applicable, HIPAA. CONTRACTOR shall procure all permits and licenses, pay all charges and fees, and give all notices require by law in the performance of the Services.
- 13.2 CONTRACTOR shall report immediately to County's Contracts/Purchasing Officer, in writing, any discrepancy or inconsistency it discovers in the laws, ordinances, regulations, orders, and/or guidelines in relation to the Project of the performance of the Services.
- 13.3 All documentation prepared by CONTRACTOR shall provide for a completed project that conforms to all applicable codes, rules, regulations, and guidelines that are in force at the time such documentation is prepared.

14.0 INDEPENDENT CONTRACTOR:

In the performance of work, duties, and obligations under this Agreement, CONTRACTOR is always acting and performing as an independent contractor and not as an employee of the County. No offer or obligation of permanent employment with the County or County department or agency is intended in any manner, and CONTRACTOR shall not become entitled by virtue of this Agreement to receive from County any form of employee benefits including but not limited to sick leave, vacation, retirement benefits, workers' compensation coverage, insurance or disability benefits. CONTRACTOR shall be solely liable for and obligated to pay directly all applicable taxes, including federal and state income taxes and social security, arising out of CONTRACTOR's performance of this Agreement. In connection therewith, CONTRACTOR shall defend, indemnify, and hold County harmless from any and all liability which County may incur because of CONTRACTOR's failure to pay such taxes.

15.0 <u>NOTICES:</u>

Notices required under this Agreement shall be delivered personally or by first-class, postage prepaid mail to the County and CONTRACTOR'S contract administrators at the addresses listed below:

FOR COUNTY:	FOR CONTRACTOR:		
Lori A. Medina, Director	Cathy Hetherington, Chief Operating Officer		
Name and Title	Name and Title		
1000 S Main St, Suite 306, Salinas, CA 93901	40 Clark St., Unit H, Salinas, CA 93901		
Address	Address		
(831) 755-4430	916-481-7695		
Phone:	Phone:		

16.0 MISCELLANEOUS PROVISIONS.

- 16.01 <u>Conflict of Interest:</u> CONTRACTOR represents that it presently has no interest and agrees not to acquire any interest during the term of this Agreement, which would directly, or indirectly conflict in any manner or to any degree with the full and complete performance of the services required to be rendered under this Agreement.
- 16.02 <u>Amendment:</u> This Agreement may be amended or modified only by an instrument in writing signed by the County and the CONTRACTOR.
- 16.03 <u>Waiver:</u> Any waiver of any terms and conditions of this Agreement must be in writing and signed by the County and the CONTRACTOR. A waiver of any of the terms and conditions of this Agreement shall not be construed as a waiver of any other terms or conditions in this Agreement.
- 16.04 <u>Contractor:</u> The term "CONTRACTOR" as used in this Agreement includes

 8 of 11 Agreement ID: 5010--451 FY 2024-28

Smile Business Products, Inc.

- CONTRACTOR's officers, agents, and employees acting on CONTRACTOR's behalf in the performance of this Agreement.
- 16.05 <u>Disputes:</u> CONTRACTOR shall continue to perform under this Agreement during any dispute.
- 16.06 Assignment and Subcontracting: The CONTRACTOR shall not assign, sell, or otherwise transfer its interest or obligations in this Agreement without the prior written consent of the County. None of the services covered by this Agreement shall be subcontracted without the prior written approval of the County. Notwithstanding any such subcontract, CONTRACTOR shall continue to be liable for the performance of all requirements of this Agreement.
- 16.07 <u>Successors and Assigns:</u> This Agreement and the rights, privileges, duties, and obligations of the County and CONTRACTOR under this Agreement, to the extent assignable or delegable, shall be binding upon and inure to the benefit of the parties and their respective successors, permitted assigns, and heirs.
- 16.08 **Headings:** The headings are for convenience only and shall not be used to interpret the terms of this Agreement.
- 16.09 <u>Time is of the Essence:</u> Time is of the essence in each and all of the provisions of this Agreement.
- 16.10 **Governing Law:** This Agreement shall be governed by and interpreted under the laws of the State of California; venue shall be Monterey County.
- 16.11 **Non-exclusive Agreement:** This Agreement is non-exclusive and both County and CONTRACTOR expressly reserve the right to contract with other entities for the same or similar services.
- 16.12 <u>Construction of Agreement:</u> The County and CONTRACTOR agree that each party has fully participated in the review and revision of this Agreement and that any rule of construction to the effect that ambiguities are to be resolved against the drafting party shall not apply in the interpretation of this Agreement or any amendment to this Agreement.
- 16.13 <u>Counterparts:</u> This Agreement may be executed in two or more counterparts, each of which shall be deemed an original, but all of which together shall constitute one and the same Agreement.
- 16.14 <u>Authority:</u> Any individual executing this Agreement on behalf of the County or the CONTRACTOR represents and warrants hereby that he or she has the requisite authority to enter into this Agreement on behalf of such party and bind the party to the terms and conditions of this Agreement.
- 16.15 <u>Integration:</u> This Agreement, including the exhibits, represent the entire Agreement between the County and the CONTRACTOR with respect to the subject matter of this Agreement and shall supersede all prior negotiations, representations, or agreements, either written or oral, between the County and the CONTRACTOR as of the effective date of this Agreement, which is the date that the County signs the Agreement.

16.16 <u>Interpretation of Conflicting Provisions:</u> In the event of any conflict or inconsistency between the provisions of this Agreement and the Provisions of any exhibit or other attachment to this Agreement, the provisions of this Agreement shall prevail and control.

17.0 CONSENT TO USE OF ELECTRONIC SIGNATURES.

17.1 The parties to this Agreement consent to the use of electronic signatures via DocuSign to execute this Agreement. The parties understand and agree that the legality of electronic signatures is governed by state and federal law, 15 U.S.C. Section 7001 et seq.; California Government Code Section 16.5; and, California Civil Code Section 1633.1 et. seq. Pursuant to said state and federal law as may be amended from time to time, the parties to this Agreement hereby authenticate and execute this Agreement, and any and all Exhibits to this Agreement, with their respective electronic signatures, including any and all scanned signatures in portable document format (PDF).

17.2 Counterparts.

The parties to this Agreement understand and agree that this Agreement can be executed in two (2) or more counterparts and transmitted electronically via facsimile transmission or by delivery of a scanned counterpart in portable document format (PDF) via email transmittal.

17.3 Form: Delivery by E-Mail or Facsimile.

Executed counterparts of this Agreement may be delivered by facsimile transmission or by delivery of a scanned counterpart in portable document format (PDF) by e-mail transmittal, in either case with delivery confirmed. On such confirmed delivery, the signatures in the facsimile or PDF data file shall be deemed to have the same force and effect as if the manually signed counterpart or counterparts had been delivered to the other party in person.

****** THIS SECTION INTENTIONALLY LEFT BLANK *******

18.0 SIGNATURE PAGE.

IN WITNESS WHEREOF, County and CONTRACTOR have executed this Agreement as of the day and year written below.

			CONTRACTOR
	COUNTY OF MONTEREY		Smile Business Products, Inc.
By:			Contractor/Business Name *
•			DocuSigned by:
	Contracts/Purchasing Officer	By:	Cathy Hetherington
Date:			7cod (Signature of Chair, President, or Vice-President)
D		1	Cathy Hetherington
By:	Department Head (if applicable)	Date:	Name and Title 6/7/2024 3:30 PM PDT
Date:	Department Head (II applicable)	Date.	0/1/2024 3.30 PM PB1
	1		
	ved as to Form Counsel		
•	K. Blitch, Acting County Counsel		
	- '	By:	
By:	DocuSigned by:		(Signature of Secretary, Asst. Secretary, CFO, Treasurer, or
	A46091E5DE6@ounty Counsel		Asst. Treasurer)
	with the second		
Date:	6/7/2024 3:35 PM PDT	Ì	Name and Title
		Date:	
	Approved as to Fiscal Provisions DocuSigned by:		
By:	Jennifer Forsyth		
J	4E7E657875 Auditor/Controller		
_	- (- (
Date:	6/7/2024 4:37 PM PDT		
Annrov	ved as to Liability Provisions		
	of the County Counsel-Risk Management		
	·		
Dry			
By:	David Bolton, Risk Manager		
	David Dotton, Misk Manager		
Date:		1	
Country	Board of Supervisors' Agreement No		approved on
County .	Duaru di Supervisors' Agreement No		_ approved on

*INSTRUCTIONS: If CONTRACTOR is a corporation, including non-profit corporations, the full legal name of the corporation shall be set forth above together with the signatures of two (2) specified officers per California Corporations Code Section 313. If CONTRACTOR is a Limited Liability Corporation (LLC), the full legal name of the LLC shall be set forth above together with the signatures of two (2) managers. If CONTRACTOR is a partnership, the full legal name of the partnership shall be set forth above together with the signature of a partner who has authority to execute this Agreement on behalf of the partnership. If CONTRACTOR is contracting in an individual capacity, the individual shall set forth the name of the business, if any, and shall personally sign the Agreement or Amendment to said Agreement.

¹Approval by County Counsel is required

²Approval by Auditor-Controller is required

³Approval by Risk Management is necessary only if changes are made in paragraphs 8 or 9

LIST OF EXHIBITS Smile Business Products Inc.

Scope of Services/Payment Provisions
Service Level Agreement
Budget
Invoice Sample
Lease Agreements
Cooperative Agreement

SCOPE OF SERVICES/PAYMENT PROVISIONS SMILE BUSINESS PRODUCTS INC.

July 1, 2024 – June 30, 2028

1. CONTACT INFORMATION:

County Contract Monitor: Monterey County Department of Social Services

Sylvia Solis, Administrative Operations Manager 1000 S. Main Street, Suite 306 Salinas, CA 93901

Phone: 831-755-4483 Fax: 831-755-8476

soliss@countyofmonterey.gov

Ashley Arness Administrative Services Assistant

1488 Schilling Place Salinas, CA 93901 Phone: 831-796-4482 Fax: 831-755-8476

arnessa@countyofmonterey.gov

Contractor Information: Smile Business Productions Inc.

Scott Harvey, Account Manager

40 Clark St., Unit H Salinas, CA 93901 aharvey@smilebpi.com

831-758-1474

2. DESCRIPTION OF SERVICES

CONTRACTOR shall provide services and staff, and otherwise do all things necessary for or incidental to the performance of work, as set forth below:

Maintenance, supplies, and replacement, as needed, for all leased multi-function printers, copiers, scanners, and faxes located at Department of Social Services facilities.

2.1 Basic Device Standards

- a. Multi-function printers, copiers, scanners, and faxes
- b. High volume printing and copying productivity of 55PM or higher
- c. High volume scanning productivity of 160 IPM or higher
- d. Duplex mode operation
- e. Universal staple and hole punch
- f. Bypass tray for specialized paper and envelopes
- g. Copy quality: Legible contrast, no streaking, white background (not grey), correct color separation, and true color
- h. Size of paper: Copy and print onto $8 \frac{1}{2} \times 11$ ", $8 \frac{1}{2} \times 14$ " and 11×17 " paper
- i. Reduction/Enlargement: Provide up to 50% reduction of original and up to 200% enlargement of original documents in 1% increments
- j. Double-sided printing and copying

Smile Business Products Inc. Agreement: 5010-451 FY 2024-28

- k. Single pass dual scanning
- 1. Scan to email or network file server

2.2 Installation/Transition:

Program implementation date is anticipated to be July 1, 2024, for the employeeuse copiers and printers. CONTRACTOR will include a transition plan and schedule that includes a timeline for the delivery, installation and removal of all equipment and consumables and include costs for temporary equipment during the transition, if any to meet this date.

2.3 Training:

CONTRACTOR will include training for Information Technology Administrators, assigned key operators from each Department section, and general staff. CONTRACTOR will provide a detailed plan for training the appropriate groups during installation and providing ongoing support as needed.

CONTRACTOR will include support for all devices, including onsite and/or virtual training as required or requested, and will include onsite and/or remote Analyst Support to assist with set up of the Xerox devices.

3. TECHNOLOGY / SERVICES COVERED

- 3.1 Multifunction Equipment as described and referenced in Exhibit E, Lease Agreements part of the Managed Services Agreement. All equipment listed on "Exhibit E" will be covered and maintained according the Managed Services Agreement as described in Exhibit B, Service Level Agreement.
- 3.2 Desktop Laser Printers Laser Printers have the same SLA Uptime Targets, Service and Supply Process and Service Escalation Process as described in Exhibit B, Service Level Agreement.

4. SERVICE AND SUPPLY PROCESS

4.1 Toner Auto-Replenishment and Device Monitoring.

CONTRACTOR will supply and COUNTY obtains automated meter reads, supply auto-replenishment operates effectively, and monitor fault codes, which improves remote analyst support.

5. Monitoring and Reporting:

- **5.1** CONTRACTOR will provide monthly electronic reports on the use of each multifunction device. Reports should include:
 - a. Volume of copies made
 - b. Number of scans sent
 - c. Number of faxes sent
 - d. Number of pages printed
 - e. Number of copies made by CONTRACTOR during service calls
- **5.2** Pricing Summary: CONTRACTOR will provide a detailed annual cost of all services provided which must be for the firm fixed pricing for the term of the

Smile Business Products Inc. Agreement: 5010-451 FY 2024-28 lease. Any variable costs must be detailed. The pricing summary will describe costs for the following categories:

- a. Lease and maintenance of multi-function devices, inclusive of all related services as described above in Section 2.1.
- b. Cost of relocating the equipment if relocation is requested by COUNTY.
- **5.3** CONTRACTOR will meet quarterly with COUNTY to address performance and maintenance issues.
- **5.4** Quarterly Reviews;
 - CONTRACTOR will provide in-depth quarterly reviews to assess each model covered under the agreement. The review will contain and address the following:
 - 1. Spreadsheet on each model number, ID number, and location within the organization.
 - 2. Detailed review on average monthly volume per machine
 - **3.** Detailed review of how many service calls were placed on each machine within the organization
 - **4.** Average response time for each machine within the organization
 - 5. An in-depth graph demonstrating average monthly volume per machine.
 - **6.** A detailed look at annual volumes throughout the life of the contract creating an overview of copies done so far versus the expected life of the machine.
 - 7. CONTRACTOR will evaluate each machine and volume on a quarterly basis and if necessary, make recommendations to move higher volume machines in order to maximize the expected life of each model.
 - **8.** CONTRACTOR will provide up to date, factual information on newest products and updates available on each machine placed within COUNTY. CONTRACTOR agrees to follow best business practices and always provide information to the best of the industry knowledge to assist COUNTY in their need for up-to-date technology information.

6. INVOICING AND PAYMENT

CONTRACTOR shall submit monthly invoices no later than the 10th day of the month following the month in which services are performed. Invoices shall be submitted in the form contained in **Exhibit D** and shall be submitted electronically to: <u>501-MCDSSAccountsPayable@co.monterey.ca.us</u>

CONTRACTOR shall abide pricing based on Exhibit F, Cooperative Agreement.

The maximum amount payable by COUNTY to CONTRACTOR under this Agreement shall not exceed three hundred sixty-eight thousand dollars (\$368,000) per Exhibit C, Budget.

Smile Business Products Inc. Agreement: 5010-451 FY 2024-28

Exhibit A

Full -Service Maintenance Plan

EXHIBIT B

Service Language Agreement (SLA) # CMPS9314

Smile Support

Relax knowing your system is backed by *Smile Support*: Smile Support compliments traditional maintenance agreements for On-Site service that includes parts, labor, and toner, plus Smile Support provides Remote Desktop Copier/Printer support and more.

Smile Support includes the following services:

- Help Desk Support
- Print Driver Updates
- Use of Power Filter- copier only
- *Additional Fiery Support
- Network Scanning Resolution
- Network Fax Issue Resolution
- Network Connectivity Troubleshooting
- No Charge Service Loaner
- Response Time Guaranteed
- Toner Shipping and Handling

*Fiery Support Includes: Firmware Upgrades, Parts, Labor, Onsite Support, Remote Support, New User-Set up and Training.

Additional Monthly Cost Associated with Smile Support – based on number of MFP's

Included with Service Agreement



How to Request Service

PPM & NOC: The Principal Period of Maintenance (PPM) and The Network Operating Center (NOC) is 8:00am – 5:00pm Monday – Friday. (Excluding Holidays)

SMILE offers three easy methods to obtain service to resolve any equipment or service issues that you may have. We want to ensure that you receive the best level of service in the quickest amount of time to minimize any potential downtime. By using the below method's, we can insure that if an escalation of service is required our Technicians will make Best Effort to resolve the issue within the PPM.

- **Phone** You can call our Dispatch team at 800-790-7701 and they will route your call to the first available technician who is most qualified to resolve your issue.
- Online You may request service by accessing our CLIENT portal at www.smilebpi.com and your ticket will be placed in the appropriate queue based on the severity of your issue.
- **E-Mail** You may send an e-mail to serviceweb@smilebpi.com. You will need to include your Company Name, Equipment ID, and a Description of the issue before any service can be rendered.

Coverage

- Manufacturer Specifications SMILE shall make best effort to perform all maintenance service and repair and furnish all labor, materials and replacement parts to maintain the Equipment to meet or exceed manufacturer specifications.
- Normal Service Response Times are an average of 2-4 hours for standard service within the PPM and within the defined Service Area.
- Smile Support Any normal service call will be first handled by our NOC staff to provide resolution. If an issue cannot be resolved remotely then an On-Site technician will be paged to complete the needed service. Shipping and supplies are included at no extra cost. See above for all support services
- Power Filter If a power filter is provided in an agreement as part of a SMILE Support Fee, this power filter will remain the sole & exclusive property of SMILE. CLIENT agrees that the power filter will remain on the equipment at CLIENT's facility as long as a SMILE maintenance agreement with a SMILE Support Fee is in force. If the maintenance agreement is allowed to lapse, as evidenced by a cancellation letter sent to Smile by CLIENT or by non-payment, CLIENT agrees to allow a service technician access to the equipment to retrieve the power filter. If a power or data line related incident causes irreparable damage to CLIENT's equipment while a SMILE power filter is in use, CLIENT will receive a replacement machine of like features at no charge. The specific terms & conditions for a replacement machine are available upon request. If a SMILE power filter is lost or removed from the installed site, CLIENT agrees to pay a replacement fee of \$150.00
- Technicians All service technicians are factory trained and certified.
- Equipment Exchange In the event that Smile deems an exchange beneficiary the equipment will be exchanged for a like printer or copier. If equipment is older than 5 years, it must be replaced and cannot be exchanged.
- Toner Usage Toner use within the manufacturer's specified yield is included. SMILE reserves the right to use compatible toner in the fulfillment of this Agreement. If CLIENT requests OEM toner a surcharge will be applicable. Toner may only be used for the machine in which a toner request has been placed. Usage is calculated by using the industry standard of an 8 ½ x 11 single sided page @ 5% coverage for B/W and 20% coverage for color.
- Travel Travel is included at no cost to the CLIENT.
- Parts & Labor Only Contract Excludes supplies (toner and developer)
- **Volumes** The covered volume(s) under this agreement billed Monthly are:
 - Monthly B/W Base
 - ➤ Monthly Color Base

		_
Color	B/W	

Smile Business Product Inc. Agreement 5010-451 FY 2024-28 Exhibit B imeiais

Excluded Coverage

- Maintenance & warranty service provided by SMILE under any type of service agreement does not include any of the following:
 - 1. Repair of damage or increase in service time due caused by:
 - a. Failure of the CLIENT to provide a continually suitable environment for covered Equipment as prescribed by the manufacturer in the covered Equipment operating manual.
 - b. Failure to provide appropriate electrical power, air conditioning, or humidity control, or improper moving or relocation of covered Equipment.
 - 2. Repair of damage or increase in service caused by accident (including but not limited to power surges (unless machine has a SMILE approved power filter installed), abuse, misuse, moving, etc.
 - a. Disaster (including but not limited to vandalism, fire, flood, water, wind, etc.), use of covered Equipment contrary to the manufacturer's operating guide or for purposes other than for which designed & unauthorized modifications or repair by persons other than authorized SMILE representatives.
 - 3. Painting or refinishing the covered Equipment, inspecting altered equipment, performing services connected with relocation of Equipment, or adding or removing accessories, attachments or other devices.
 - 1. Repair of damage, replacement of parts (due to other than normal wear) or repetitive service calls caused by use of incompatible supplies, toner brands not approved by SMILE, or copy paper not in compliance with manufacturer's specification.
 - 5. Complete unit replacement or overhauling the covered Equipment (unless otherwise specified).
 - 6. Electrical work external to the covered Equipment or maintenance of accessories, attachments or other devices not furnished by SMILE.
 - 7. Increase in service time or repeat calls caused by CLIENT denial of full & free access to the Equipment or denial of departure from CLIENT's site.
 - 8. Connectivity (including at time of delivery), application, printer driver, any networked device, any locally connected printer or copier, desktop operating system, network operating system or software, whether sold or not sold by SMILE to CLIENT if Smile Support is not included in Agreement.
 - 9. Training beyond the initial key operator training given upon installation of the Equipment (unless otherwise specified).
 - 10. Onsite replenishment of toner, staple cartridges or paper, or emptying toner collection bottles.
 - 11. Maintenance agreements do not include dies, knives, staples, or paper (unless specifically noted in writing).
 - 12. Relocation or moving of covered Equipment. (CLIENT must notify SMILE of Equipment moves).
 - 13. SMILE reserves the right to charge CLIENT for toner requested during the term of this Agreement in excess of the manufacturer's specified yield for the number of copies or images run by CLIENT.
 - 14. Any additional machines will require a contract addendum before any service will be performed.

The foregoing items excluded from maintenance service, if performed by SMILE, will be charged to CLIENT at SMILE's applicable time & materials rates & terms then in effects.

General Responsibilities of the CLIENT

CLIENT is responsible for providing SMILE with domain credentials, remote access capabilities and connectivity to be able to properly setup the equipment as configured in the proposal. CLIENT agrees to inform SMILE of any modification, installation, or service performed on the Network by individuals not employed by SMILE in order to assist SMILE in providing an efficient and effective equipment support response.

In the performance of all services set forth herein, SMILE shall have, and CLIENT hereby grants, full and unrestricted access to the premises on which the Equipment is located. SMILE's responsibility to repair shall be limited to CLIENT's side of the point of connection between CLIENT's Equipment and the utility service or ISP.

- Meter Readings Where required to ensure accurate invoicing, meter readings shall be provided by CLIENT at the request of SMILE, or CLIENT shall agree to have remote meter gathering software, Print Tracker, installed by SMILE. Failure to submit meter readings in a timely manner will allow SMILE, at its discretion, to estimate the meter & bill CLIENT accordingly, or to dispatch a technician to CLIENT location to retrieve an accurate meter reading. Each time it is necessary for a technician to be dispatched to the CLIENT's location to retrieve a meter reading; CLIENT agrees to pay SMILE a \$60 meter retrieval fee per machine. CLIENT also agrees to pay for overage charges (if applicable) that may be incurred at the end of each billing cycle, plus applicable sales taxes.
- Overages: Per Copy/Overages covered under the terms of this agreement.

Color	B/W	<u>Initials</u>

- Power Power must meet the manufacturer's specifications. If any damage occurs due to the result of improper power the CLIENT assumes all
 responsibility
- Data Security In order to protect CLIENT's & CLIENT's customer's confidential information & comply with applicable laws, SMILE strongly recommends that all data from all disk drives or magnetic media in computers & multifunction equipment be securely removed prior to the disposal of such equipment. CLIENT is responsible for selecting the appropriate removal standard to meet its business needs. SMILE is not responsible or liable for any damages that may arise from CLIENT's failure to comply with this provision. SMILE offers several methods of data removal at chargeable rates.
- Print Types: The CLIENT is liable for all charges incurred from any printer/copy options and/or driver settings for the equipment operation and print output.

Smile Business Products Inc. Multi-Year Budget

DESCRIPTION	Budget 07/01/2024 - 06/30/2025	Budget 07/01/2025 - 06/30/2026	Budget 07/01/2026 - 06/30/2027	Budget 07/01/2027 - 06/30/2028	Incidentals 07/01/2024- 06/30/2028	Total Budget 07/01/2024 - 06/30/2028		
Provide leases multi-function printers,								
copiers, scanners, faxes, maintenance,								
supplies and replacements as needed for								
the Department of Social Services.	85,000	85,000	85,000	85,000	28,000	368,000		
Total	85,000	85,000	85,000	85,000	28,000	368,000		

The amounts listed above in the Budget are estimates by year only and unused funds can roll-over to future years for the term of the agreement and the total expended shall not exceed \$368,000.

Smile Business Products Inc. Agreement: 5010-451 FY 2024-28

Exhibit C

7554444-TC



CONTRACT INVOICE

Invoice Number:

Invoice Date:

Account Number:

Balance Due:

Monterey County - Social Services Accounts Payable **Bill To:**

1000 South Main Street, Suite 306

SALINAS, CA 93901

Monterey County - Social Services 1000 South Main Street SALINAS, CA 93901 **Customer:**

Account No	Payment Terms	Due Date	Invoice Total	Balance Due		
7554444-TC						
Invoice Remarks						

Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date		
Contract Remarks							

^{***}Rental Service Agreement***

Summary:

Contract base rate charge for the 00/00/0000 to 00/00/0000 billing period Contract overage charge for the 00/00/0000 to 00/00/0000 overage period \$0.00* \$0.00** \$0.00

Equipment included under this contract

Sharp/MX-

Number	Serial Number	Base Charge	Location
XXXX	xxxxxxx	\$0.00	Monterey County - Social Services 1000 South Main Street SALINAS, CA 93901

Meter Type	Meter Group	Begin Meter	End Meter	Total	Minimum	Billable	Rate	Overage
B\W	Black MFP	0	0	0	0	0	0.000000	\$0.00
Color	Color MFP	0	0	0	0	0	0.000000	\$0.00
								\$0.00

Thank you for your business; we are always here to serve your needs.

Please contact us at accountsreceivable@smilebpi.com if you would prefer to receive your invoices via email!

Balance Due:	\$0.00
Invoice Total	\$0.00
Tax:	\$0.00
Invoice SubTotal	\$0.00

^{*}Sum of equipment base charges **See overage details below

DIVISION

168 W. Alisal Street 3rd Floor, Salinas CA 93901
Phone (831) 755-4990



Date: 5/30/2024		Sales Rep Name: Scott Harvey, Account Manager		
Company Name:	Smile Business Products, Inc.	Sales Rep Phone: 831-758-1474 ext. 1099		
Company Addres	s 1550 Moffett Street Salinas, CA 93905	Sales Rep Signature:		
The following equi *NETWORKED:	ipment shall be provided on a; ⊠ 3 ⊠ Yes □ No	36 month term 24 r	month term 12 month term	
Copier Model:	SHARP BP-50C31	\$150.02/month	Note: Do not list standard	
Finisher Model:	SHARP BP-TU10 Exit Tray	\$158.92/month Included	Note: Do not list standard features as Add-ons.	
Add-on:	SHARP BP-DE12 Paper drawer	Included	Teatures as Add-ons.	
Add-on:	SHARP BP-FX11 Fax	Included	Security Note: The County	
Add-on:	SHARP AR-D5133NT Surge	Included	requires full hard disk	
ridd-oii.	Suppressor	meraded	encryption and data overwrite	
Add-on:	SHARP BP50C Toner Kit	Included	capabilities. If these are standard	
Add-on:	SHARP MX-PK131 Postscript	Included	features do not list them as add-	
Add-on:			ons. However, if add-ons are	
Add-on:			required to meet these	
Security Add-on:			requirements, please list those.	
Total Monthly				
Rental:		\$158.92/month		
All delivery, in Toner included Ship To: Mo. Co. 200 Bros	Black \$0.0089 ce and repair costs shall be included a stallation, and machine pick-up shall as needed (no limitations) Dept. of Social Services	Il be included in pricing taples included as need Bill To: Mo. Co. I Attn: Accounts Pa	g above led (no limitations) Dept. of Social Services ayable Main St. Suite 306	
Equip Contact: TF For Meter Reading	: TBD	Billing Conta	act: Ashley Arness, 831-755-4482	
PRINTING DEVI	E WILL BE CONNECTED TO CE, ITD REVIEW AND APPROV TICES" TO FACILIATE IT AP	THE COUNTY NETV	WORK AND USED AS A SHAREI LEASE ROUTE THIS FORM TO "I' SURE TIMELY ASSISTANCE FOR	
ITD Technical and (Security review su	Security Review Approved by:	n if machine is network	Date:	
ITD Management	Approval:	M. I.C.	Date:	

168 W. Alisal Street 3rd Floor, Salinas CA 93901 Phone (831) 755-4990

Date: 5/30/2024		Sales Rep Name: Scott Harvey, Account Manager	
Company Name: Smile Business Products, Inc.		Sales Rep Phone: 831-758-1474 ext. 1099	
Company Address 1550 Moffett Street Salinas, CA 93905		Sales Rep Signature:	
The following equip *NETWORKED:	oment shall be provided on a; 🛛 3	36 month term 24 m	nonth term 12 month term
Copier Model:	SHARP MX-C428F		
		\$70.26/month	Note: Do not list standard
Finisher Model:			features as Add-ons.
Add-on:	SHARP AR-D5133NT Surge Suppressor	Included	Security Note: The County
Add-on:	SHARP BP50C Toner Kit	Included	requires full hard disk
Add-on:	SHARP AR-D5133NT Surge	Included	encryption and data overwrite
	Suppressor		capabilities. If these are standard
Add-on:			features do not list them as add-
Add-on:			ons. However, if add-ons are
Add-on:			required to meet these requirements, please list those.
Add-on:			requirements, please list those.
Security Add-on:			_
Total Monthly		670.26/	
Rental: Monthly Copies Inc	luded (if any): Black 0 C	\$70.26/month	
Cost-Per-Copy:		8 Color \$0.0610	
	e and repair costs shall be included		ing drums & rollers
	stallation, and machine pick-up shall		
		taples included as neede	
	Dept. of Social Services		Dept. of Social Services
Salinas, C	th Main St., Suite 202 CA 93905		unts Payable Main St., Suite 306 93901
Equip Contact: TBD For Meter Reading: TBD		Billing Contact: Ashley Arness, 831-755-4482	
PRINTING DEVIC	E, ITD REVIEW AND APPROV	'AL IS REQUIRED. PI	VORK AND USED AS A SHARED LEASE ROUTE THIS FORM TO "IT URE TIMELY ASSISTANCE FOR
ITD Technical and Security review sur	Security Review Approved by:nmary shall be attached to this form	n if machine is networke	Date:
ITD Management A	.pproval:		Date:
	pproval:	Monterey Information T	Sechnology Department

168 W. Alisal Street 3rd Floor, Salinas CA 93901 Phone (831) 755-4990



Date: 5/30/2024		Sales Rep Name: Scott Harvey, Account Manager	
Company Name: Smile Business Products, Inc.		Sales Rep Phone: 831-758-1474 ext. 1099	
Company Address 1550 Moffett Street Salinas, CA 93905		Sales Rep Signature:	
The following equi *NETWORKED:	pment shall be provided on a; ⊠ 3 ⊠ Yes □ No	6 month term 24 r	month term 12 month term
Copier Model:	SHARP BP-70C31	6227 47/	N. A. D. a. Aliatana dan dan
Finisher Model:	SHARP BP-FN11 Int. Finisher	\$227.47/month Included	Note: Do not list standard features as Add-ons.
Add-on:	SHARP BP-DE14 Paper drawer	Included	leatures as Add-ons.
Add-on:	SHARP BP-FX11 Fax	Included	Security Note: The County
Add-on:	SHARP AR-D5133NT Surge	Included	requires full hard disk
Add-oil.	Suppressor	meruded	encryption and data overwrite
Add-on:	SHARP BP50C Toner Kit	Included	capabilities. If these are standard
Add-on:	SHARP MX-PN14B Hole Punch	Included	features do not list them as add-
Add-on:	SHARP MX-SCX1 Staples	Included	ons. However, if add-ons are
Add-on:		111010000	required to meet these
Security Add-on:			requirements, please list those.
Total Monthly			
Rental:		\$227.47/month	
 ✓ All delivery, in ✓ Toner included Ship To: Mo. Co. 730 La C Salinas, 	Black \$0.0089 see and repair costs shall be included installation, and machine pick-up shall as needed (no limitations) Dept. of Social Services Guardia, 2 nd Floor Mailroom CA 93905	l be included in pricing taples included as need Bill To: Mo. Co. I Attn: Accounts Pa 1000 South Salinas, CA	g above led (no limitations) Dept. of Social Services ayable Main St., Suite 306 93901
Equip Contact: TE For Meter Reading		Billing Conta	act: Ashley Arness, 831-755-4482
PRINTING DEVICE	CE, ITD REVIEW AND APPROV	AL IS REQUIRED. P	WORK AND USED AS A SHAREI LEASE ROUTE THIS FORM TO "IT SURE TIMELY ASSISTANCE FOR
ITD Technical and	Security Review Approved by:		Date:
(Security review su	Security Review Approved by: mmary shall be attached to this form	if machine is network	ed)
ITD Management A	Approval:		Date:
6	Approval:	Monterey Information	Technology Dengriment

168 W. Alisal Street 3rd Floor, Salinas CA 93901 Phone (831) 755-4990



Date: 5/30/2024		Sales Rep Name: Scott Harvey, Account Manager	
Company Name: Smile Business Products, Inc.		Sales Rep Phone: 831-758-1474 ext. 1099	
Company Address 1550 Moffett Street Salinas, CA 93905		Sales Rep Signature:	
*NETWORKED:	pment shall be provided on a; 🛛 3	6 month term 24 r	month term 12 month term
Copier Model:	SHARP BP-70C31	\$227 47/m om4h	Notes De not list standard
Finisher Model:	SHARP BP-FN11 Int. Finisher	\$227.47/month Included	Note: Do not list standard features as Add-ons.
Add-on:	SHARP BP-DE14 Paper drawer	Included	leatures as Add-ons.
Add-on:	SHARP BP-FX11 Fax	Included	Security Note: The County
Add-on:	SHARP AR-D5133NT Surge	Included	requires full hard disk
Aud-on.	Suppressor	meruded	encryption and data overwrite
Add-on:	SHARP BP50C Toner Kit	Included	capabilities. If these are standard
Add-on:	SHARP MX-PN14B Hole Punch	Included	features do not list them as add-
Add-on:	SHARP MX-SCX1 Staples	Included	ons. However, if add-ons are
Add-on:			required to meet these
Security Add-on:			requirements, please list those.
Total Monthly			
Rental:		\$227.47/month	
All delivery, in Toner included Ship To: Mo. Co. 730 La C	Black \$0.0089 te and repair costs shall be included stallation, and machine pick-up shal	l be included in pricing taples included as need Bill To: Mo. Co. l Attn: Accounts Pa	g above ed (no limitations) Dept. of Social Services nyable Main St., Suite 306
Equip Contact: TE For Meter Reading		Billing Conta	act: Ashley Arness, 831-755-4482
PRINTING DEVICE	CE, ITD REVIEW AND APPROV	AL IS REQUIRED. P	WORK AND USED AS A SHAREI LEASE ROUTE THIS FORM TO "IT SURE TIMELY ASSISTANCE FOR
ITD Technical and Security Review Approved by			Date:
(Security review su	Security Review Approved by:	n if machine is network	ed)
ITD Management A	Approval:		Date:
	Approval:	Monterey Information	Technology Denartment

168 W. Alisal Street 3rd Floor, Salinas CA 93901 Phone (831) 755-4990



Date: 5/30/2024 Company Name: Smile Business Products, Inc. Company Address 1550 Moffett Street Salinas, CA 93905		Sales Rep Name: Scott Harvey, Account Manager		
		Sales Rep Phone: 831-758-1474 ext. 1099		
		Sales Rep Signature:		
The following equi *NETWORKED:	ipment shall be provided on a; 🖂 3	36 month term 24 r	month term 12 month term	
Copier Model:	SHARP BP-50C31	0150 00/	N. B. Hills	
Einigh an Madal.	CHADD DD THIO Estit Trees	\$158.92/month	Note: Do not list standard features as Add-ons.	
Finisher Model: Add-on:	SHARP BP-TU10 Exit Tray	Included	leatures as Add-ons.	
Add-on:	SHARP BP-DE12 Paper drawer SHARP BP-FX11 Fax	Included Included	Security Note: The County	
			requires full hard disk	
Add-on:	SHARP AR-D5133NT Surge Suppressor	Included	encryption and data overwrite	
Add-on:	SHARP BP50C Toner Kit	Included	capabilities. If these are standard	
Add-on:	SHARP MX-PK131 Postscript	Included	features do not list them as add-	
Add-on:		meradea	ons. However, if add-ons are	
Add-on:			required to meet these	
Security Add-on:			requirements, please list those.	
Total Monthly				
Rental:		\$158.92/month		
All delivery, in	Black \$0.0089 ce and repair costs shall be included a stallation, and machine pick-up shall be included as tallation.		gabove	
730 La (Dept. of Social Services Guardia, Suite 209A CA 93905	Attn: Acco	Dept. of Social Services ounts Payable Main St., Suite 306 93901	
Equip Contact: TBD For Meter Reading: TBD		· ·	act: Ashley Arness, 831-755-4482	
PRINTING DEVI	E WILL BE CONNECTED TO CE, ITD REVIEW AND APPROVICES" TO FACILIATE IT AP	THE COUNTY NETV AL IS REQUIRED. P	WORK AND USED AS A SHARED LEASE ROUTE THIS FORM TO "IT SURE TIMELY ASSISTANCE FOR	
ITD Technical and (Security review su	Security Review Approved by:	n if machine is network	Date:	
ITD Management	Approval:		Date: Technology Department	
-	ITD Manager, County of	Monterey Information	Technology Department	

168 W. Alisal Street 3rd Floor, Salinas CA 93901

Phone (831) 755-4990

Date: 5/30/2024 Company Name: Smile Business Products, Inc. Company Address 1550 Moffett Street Salinas, CA 93905		Sales Rep Name: Scott Harvey, Account Manager		
		Sales Rep Phone: 831-758-1474 ext. 1099		
		Sales Rep Signature:		
*NETWORKED:		6 month term 24 r	month term 12 month term	
Copier Model:	SHARP BP-70C31	\$227 47/month	Note: Do not list standard	
Finisher Model:	SHARP BP-FN11 Int. Finisher	\$227.47/month Included	features as Add-ons.	
Add-on:	SHARP BP-DE14 Paper drawer	Included	Teatures as 7 tag-ons.	
Add-on:	SHARP BP-FX11 Fax	Included	Security Note: The County	
Add-on:	SHARP AR-D5133NT Surge	Included	requires full hard disk	
ridd oii.	Suppressor	meradea	encryption and data overwrite	
Add-on:	SHARP BP50C Toner Kit	Included	capabilities. If these are standard	
Add-on:	SHARP MX-PN14B Hole Punch	Included	features do not list them as add-	
Add-on:	SHARP MX-SCX1 Staples	Included	ons. However, if add-ons are	
Add-on:	1		required to meet these	
Security Add-on:			requirements, please list those.	
Total Monthly				
Rental:		\$227.47/month		
All delivery, in Toner included Ship To: Mo. Co. 730 La Co.	Black \$0.0089 ce and repair costs shall be included a stallation, and machine pick-up shall	l be included in pricing taples included as need Bill To: Mo. Co. I Attn: According	g above	
Equip Contact: TBD For Meter Reading: TBD		Salinas, CA 93901 Billing Contact: Ashley Arness, 831-755-4482		
PRINTING DEVI	CE WILL BE CONNECTED TO TO CE, ITD REVIEW AND APPROVICES" TO FACILIATE IT API	AL IS REQUIRED. P	WORK AND USED AS A SHAREI LEASE ROUTE THIS FORM TO "IT SURE TIMELY ASSISTANCE FOR	
ITD Technical and (Security review su	Security Review Approved by:	ı if machine is network	Date:	
ITD Management Approval:		Montough Information	Date:	

168 W. Alisal Street 3rd Floor, Salinas CA 93901 Phone (831) 755-4990



Date: 5/30/2024		Sales Rep Name: Scott Harvey, Account Manager	
Company Name: Smile Business Products, Inc.		Sales Rep Phone: 831-758-1474 ext. 1099	
Company Address 1550 Moffett Street Salinas, CA 93905		Sales Rep Signature:	
The following equi *NETWORKED:	ipment shall be provided on a; 🛛 3	36 month term 24 r	month term 12 month term
Copier Model:	SHARP BP-50C31	\$158.92/month	Note: Do not list standard
Finisher Model:	SHARP BP-TU10 Exit Tray	Included	features as Add-ons.
Add-on:	SHARP BP-DE12 Paper drawer	Included	Teatures as ridd ons.
Add-on:	SHARP BP-FX11 Fax	Included	Security Note: The County
Add-on:	SHARP AR-D5133NT Surge	Included	requires full hard disk
ridd oii.	Suppressor	meradea	encryption and data overwrite
Add-on:	SHARP BP50C Toner Kit	Included	capabilities. If these are standard
Add-on:	SHARP MX-PK131 Postscript	Included	features do not list them as add-
Add-on:			ons. However, if add-ons are
Add-on:			required to meet these
Security Add-on:			requirements, please list those.
Total Monthly			
Rental:		\$158.92/month	
All delivery, in Toner included Ship To: Mo. Co. 2620 Fir	Black \$0.0089 ce and repair costs shall be included a stallation, and machine pick-up shall as needed (no limitations) Dept. of Social Services	Il be included in pricing taples included as need Bill To: Mo. Co. Attn: Accounts Pa	g above led (no limitations) Dept. of Social Services
Equip Contact: TF For Meter Reading		Salinas, CA 93901 Billing Contact: Ashley Arness, 831-755-4482	
*IF THIS DEVIC	E WILL BE CONNECTED TO CE, ITD REVIEW AND APPROVICES" TO FACILIATE IT AP	'AL IS REQUIRED. P	WORK AND USED AS A SHAREI LEASE ROUTE THIS FORM TO "IT SURE TIMELY ASSISTANCE FOR
ITD Technical and Security Review Approved by: (Security review summary shall be attached to this form		n if machine is network	Date:
ITD Management	Approval:	Montagen Information	Date: Technology Department

168 W. Alisal Street 3rd Floor, Salinas CA 93901 Phone (831) 755-4990



Date: 5/30/2024 Company Name: Smile Business Products, Inc. Company Address 1550 Moffett Street Salinas, CA 93905		Sales Rep Name: Scott Harvey, Account Manager		
		Sales Rep Phone: 831-758-1474 ext. 1099		
		Sales Rep Signature:		
*NETWORKED:	ipment shall be provided on a; ⊠ 3 ⊠ Yes □ No	36 month term 24 r	month term 12 month term	
Copier Model:	SHARP BP-50C31	\$159.02/month	Note: Do not list standard	
Finisher Model:	SHARP BP-TU10 Exit Tray	\$158.92/month Included	Note: Do not list standard features as Add-ons.	
Add-on:	SHARP BP-DE12 Paper drawer	Included	Teatures as 7 (dd-ons.	
Add-on:	SHARP BP-FX11 Fax	Included	Security Note: The County	
Add-on:	SHARP AR-D5133NT Surge	Included	requires full hard disk	
rida on.	Suppressor	meradea	encryption and data overwrite	
Add-on:	SHARP BP50C Toner Kit	Included	capabilities. If these are standard	
Add-on:	SHARP MX-PK131 Postscript	Included	features do not list them as add-	
Add-on:	•		ons. However, if add-ons are	
Add-on:			required to meet these	
Security Add-on:			requirements, please list those.	
Total Monthly				
Rental:		\$158.92/month		
All delivery, in Toner included Ship To: Mo. Co. 1000 So	Black \$0.0089 ce and repair costs shall be included a stallation, and machine pick-up shall be included as tallation.	Il be included in pricing taples included as need Bill To: Mo. Co. Attn: Accounts Pa	g above led (no limitations) Dept. of Social Services ayable Main St., Suite 306	
Equip Contact: TI For Meter Reading	g: TBD	Billing Contact: Ashley Arness, 831-755-4482		
PRINTING DEVI	CE WILL BE CONNECTED TO CE, ITD REVIEW AND APPROV VICES" TO FACILIATE IT AP	'AL IS REQUIRED. P	WORK AND USED AS A SHAREI LEASE ROUTE THIS FORM TO "IT SURE TIMELY ASSISTANCE FOR	
ITD Technical and (Security review su	Security Review Approved by: ummary shall be attached to this form	n if machine is network	Date:	
ITD Management	Approval:	Montana Information	Date:	

COUNTY 1850

168 W. Alisal Street 3rd Floor, Salinas CA 93901 Phone (831) 755-4990

Date: 5/30/2024 Company Name: Smile Business Products, Inc. Company Address 1550 Moffett Street Salinas, CA 93905		Sales Rep Name: Scott Harvey, Account Manager		
		Sales Rep Phone: 831-758-1474 ext. 1099		
		Sales Rep Signature:		
*NETWORKED:		36 month term 24 r	month term 12 month term	
Copier Model:	SHARP BP-50C31	\$158.92/month	Note: Do not list standard	
Finisher Model:	SHARP BP-TU10 Exit Tray	Included	features as Add-ons.	
Add-on:	SHARP BP-DE12 Paper drawer	Included		
Add-on:	SHARP BP-FX11 Fax	Included	Security Note: The County	
Add-on:	SHARP AR-D5133NT Surge	Included	requires full hard disk	
	Suppressor		encryption and data overwrite	
Add-on:	SHARP BP50C Toner Kit	Included	capabilities. If these are standard	
Add-on:	SHARP MX-PK131 Postscript	Included	features do not list them as add-	
Add-on:			ons. However, if add-ons are	
Add-on:			required to meet these	
Security Add-on:			requirements, please list those.	
Total Monthly				
Rental: Monthly Copies Inc	 	\$158.92/month		
Cost-Per-Copy: All maintenanc All delivery, in: Toner included Ship To: Mo. Co. I 1000 Sou	Black \$0.0089 e and repair costs shall be included stallation, and machine pick-up shalls.	Il be included in pricing staples included as need Bill To: Mo. Co. I Attn: Accounts Pa 1000 South	g above led (no limitations) Dept. of Social Services ayable Main St., Suite 306	
Equip Contact: TBD For Meter Reading: TBD		Salinas, CA 93901 Billing Contact: Ashley Arness, 831-755-4482		
PRINTING DEVIC	CE, ITD REVIEW AND APPROV	'AL IS REQUIRED. P	WORK AND USED AS A SHAREI LEASE ROUTE THIS FORM TO "IT SURE TIMELY ASSISTANCE FOR	
ITD Technical and Security Review Approved by: (Security review summary shall be attached to this form		n if machine is network	Date:	
ITD Management A	Approval:		Date:	
	ITD Manager, County of	Monterey Information	1 ecnnology Department	

168 W. Alisal Street 3rd Floor, Salinas CA 93901 Phone (831) 755-4990

Date: 5/30/2024		Sales Rep Name: Scott Harvey, Account Manager	
Company Name: Smile Business Products, Inc.		Sales Rep Phone: 831-758-1474 ext. 1099	
Company Address 1550 Moffett Street Salinas, CA 93905		Sales Rep Signature:	
*NETWORKED:	pment shall be provided on a; X	36 month term 24 r	nonth term 12 month term
Copier Model:	SHARP MX-C428F	\$70.26/month	Note: Do not list standard
Finisher Model:		\$70.20/IIIOIItII	features as Add-ons.
Add-on:	SHARP AR-D5133NT Surge Suppressor	Included	Security Note: The County
Add-on:	SHARP BP50C Toner Kit	Included	requires full hard disk
Add-on:	SHARP AR-D5133NT Surge Suppressor	Included	encryption and data overwrite capabilities. If these are standard
Add-on:			features do not list them as add-
Add-on:			ons. However, if add-ons are
Add-on:			required to meet these
Add-on:			requirements, please list those.
Security Add-on:			
Total Monthly Rental:		\$70.26/month	
✓ All delivery, ins✓ Toner includedShip To: Mo. Co. I1000 Sou	Black \$0.012 e and repair costs shall be included stallation, and machine pick-up sha	Il be included in pricing staples included as need Bill To: Mo. Co. 1 Attn: According	g above ed (no limitations) Dept. of Social Services ounts Payable Main St., Suite 306
	Equip Contact: TBD For Meter Reading: TBD		act: Ashley Arness, 831-755-4482
PRINTING DEVIC	CE, ITD REVIEW AND APPROV	AL IS REQUIRED. P	WORK AND USED AS A SHARED LEASE ROUTE THIS FORM TO "IT URE TIMELY ASSISTANCE FOR
ITD Technical and (Security review sur	Security Review Approved by:	n if machine is network	Date:
ITD Management A	Approval:	Montana Information	Date:
	11D Manager, County of	wionierey injormation.	τετιποιόξη Department

168 W. Alisal Street 3rd Floor, Salinas CA 93901 Phone (831) 755-4990

Date: 5/30/2024 Company Name: Smile Business Products, Inc. Company Address 1550 Moffett Street Salinas, CA 93905		Sales Rep Name: Scott Harvey, Account Manager		
		Sales Rep Phone: 831-758-1474 ext. 1099		
		Sales Rep Signature:		
*NETWORKED:		36 month term 24 r	month term 12 month term	
Copier Model:	SHARP BP-50C31	\$158.92/month	Note: Do not list standard	
Finisher Model:	SHARP BP-TU10 Exit Tray	Included	features as Add-ons.	
Add-on:	SHARP BP-DE12 Paper drawer	Included		
Add-on:	SHARP BP-FX11 Fax	Included	Security Note: The County	
Add-on:	SHARP AR-D5133NT Surge	Included	requires full hard disk	
	Suppressor		encryption and data overwrite	
Add-on:	SHARP BP50C Toner Kit	Included	capabilities. If these are standard	
Add-on:	SHARP MX-PK131 Postscript	Included	features do not list them as add-	
Add-on:			ons. However, if add-ons are	
Add-on:			required to meet these	
Security Add-on:			requirements, please list those.	
Total Monthly				
Rental: Monthly Copies Inc	 	\$158.92/month		
Cost-Per-Copy: All maintenanc All delivery, in: Toner included Ship To: Mo. Co. I 1000 Sou	Black \$0.0089 e and repair costs shall be included stallation, and machine pick-up shalls.	Il be included in pricing staples included as need Bill To: Mo. Co. I Attn: Accounts Pa	g above led (no limitations) Dept. of Social Services	
Equip Contact: TBD For Meter Reading: TBD		Salinas, CA 93901 Billing Contact: Ashley Arness, 831-755-4482		
PRINTING DEVIC	CE, ITD REVIEW AND APPROV	'AL IS REQUIRED. P	WORK AND USED AS A SHAREI LEASE ROUTE THIS FORM TO "I' SURE TIMELY ASSISTANCE FOR	
ITD Technical and Security Review Approved by: (Security review summary shall be attached to this form		n if machine is network	Date:	
ITD Management A	Approval:		Date:	
	ITD Manager, County of	Monterey Information	1 ecnnology Department	

168 W. Alisal Street 3rd Floor, Salinas CA 93901 Phone (831) 755-4990



Date: 5/30/2024 Company Name: Smile Business Products, Inc. Company Address 1550 Moffett Street Salinas, CA 93905		Sales Rep Name: Scott Harvey, Account Manager		
		Sales Rep Phone: 831-758-1474 ext. 1099 Sales Rep Signature:		
Copier Model:	SHARP MX-C428F			
District M . 4.1.		\$70.26/month	Note: Do not list standard features as Add-ons.	
Finisher Model: Add-on:	SHARP AR-D5133NT Surge	Included	leatures as Add-ons.	
Add-oil.	Suppressor	Included	Security Note: The County	
Add-on:	SHARP BP50C Toner Kit	Included	requires full hard disk	
Add-on:	SHARP AR-D5133NT Surge	Included	encryption and data overwrite	
	Suppressor		capabilities. If these are standard	
Add-on:			features do not list them as add-	
Add-on:			ons. However, if add-ons are	
Add-on:			required to meet these	
Add-on:			requirements, please list those.	
Security Add-on:			_	
Total Monthly				
Rental: Monthly Copies Inc	 eluded (if any):	\$70.26/month		
All delivery, ins Toner included Ship To: Mo. Co. I 1000 Sou	e and repair costs shall be included stallation, and machine pick-up sha	Il be included in pricing taples included as need Bill To: Mo. Co. Attn: Accounts Page 1	g above led (no limitations) Dept. of Social Services ayable Main St., Suite 306	
Equip Contact: TB For Meter Reading:		Billing Cont	act: Ashley Arness, 831-755-4482	
PRINTING DEVIC	CE, ITD REVIEW AND APPROV	'AL IS REQUIRED. P	WORK AND USED AS A SHARED PLEASE ROUTE THIS FORM TO "IT SURE TIMELY ASSISTANCE FOR	
ITD Technical and (Security review sun	Security Review Approved by:	n if machine is network	Date:	
ITD Management A	approval:		Date: Technology Department	
	ITD Manager, County of	Monterey Information	Technology Department	

168 W. Alisal Street 3rd Floor, Salinas CA 93901 Phone (831) 755-4990

Date: 5/30/2024		Sales Rep Name: Scott Harvey, Account Manager	
Company Name: Smile Business Products, Inc.		Sales Rep Phone: 831-758-1474 ext. 1099	
Company Address 1550 Moffett Street Salinas, CA 93905		Sales Rep Signature:	
The following equi *NETWORKED:	pment shall be provided on a; 🔲	36 month term 24 n	nonth term 12 month term
Copier Model:	SHARP MX-C428F		
		\$70.26/month	Note: Do not list standard
Finisher Model:			features as Add-ons.
Add-on:	SHARP AR-D5133NT Surge	Included	Security Note: The County
Add-on:	Suppressor SHARP BP50C Toner Kit	Included	requires full hard disk
Add-on:	SHARP AR-D5133NT Surge	Included	encryption and data overwrite
Add-oii.	Suppressor	meruded	capabilities. If these are standard
Add-on:			features do not list them as add-
Add-on:			ons. However, if add-ons are
Add-on:			required to meet these
Add-on:			requirements, please list those.
Security Add-on:			
Total Monthly			
Rental: Monthly Copies Inc	cluded (if any): Black 0 (\$70.26/month	
All delivery, in Toner included Ship To: Mo. Co. 1 1000 Sou Salinas,	te and repair costs shall be included stallation, and machine pick-up shat as needed (no limitations) Dept. of Social Services ath Main St., Suite 209 CA 93905	All be included in pricing Staples included as need Bill To: Mo. Co. I Attn: Accounts Pa	ed (no limitations) Dept. of Social Services Lyable Main St., Suite 306
Equip Contact: TB For Meter Reading:		Billing Conta	act: Ashley Arness, 831-755-4482
PRINTING DEVICE	CE, ITD REVIEW AND APPROV	VAL IS REQUIRED. P.	WORK AND USED AS A SHARED LEASE ROUTE THIS FORM TO "IT URE TIMELY ASSISTANCE FOR
ITD Technical and	Security Review Approved by:		Date:
(Security review su	Security Review Approved by:	m if machine is network	ed)
ITD Management A	Annroval·		Date
TID Ivianagement A	Approval:	f Monterey Information [Date: Technology Department

1850

168 W. Alisal Street 3rd Floor, Salinas CA 93901 Phone (831) 755-4990

Date: 5/30/2024		Sales Rep Name: Scott Harvey, Account Manager	
Company Name: Smile Business Products, Inc.		Sales Rep Phone: 831-758-1474 ext. 1099	
Company Address 1550 Moffett Street Salinas, CA 93905		Sales Rep Signature:	
*NETWORKED:		36 month term 24 r	month term 12 month term
Copier Model:	SHARP BP-50C31	\$158.92/month	Note: Do not list standard
Finisher Model:	SHARP BP-TU10 Exit Tray	Included	features as Add-ons.
Add-on:	SHARP BP-DE12 Paper drawer	Included	
Add-on:	SHARP BP-FX11 Fax	Included	Security Note: The County
Add-on:	SHARP AR-D5133NT Surge	Included	requires full hard disk
	Suppressor		encryption and data overwrite
Add-on:	SHARP BP50C Toner Kit	Included	capabilities. If these are standard
Add-on:	SHARP MX-PK131 Postscript	Included	features do not list them as add-
Add-on:			ons. However, if add-ons are
Add-on:			required to meet these
Security Add-on:			requirements, please list those.
Total Monthly			
Rental: Monthly Copies Inc	 	\$158.92/month	
Cost-Per-Copy: All maintenanc All delivery, in Toner included Ship To: Mo. Co. 1 1000 Sou	Black \$0.0089 e and repair costs shall be included stallation, and machine pick-up shall be a stallation.	9 Color \$0.0524 in pricing above, included the included in pricing staples included as need Bill To: Mo. Co. In Attn: Accounts Page 1	g above led (no limitations) Dept. of Social Services ayable Main St., Suite 306
Equip Contact: TBD For Meter Reading: TBD		Billing Contact: Ashley Arness, 831-755-4482	
PRINTING DEVIC	CE, ITD REVIEW AND APPROV	'AL IS REQUIRED. P	WORK AND USED AS A SHAREI LEASE ROUTE THIS FORM TO "I' SURE TIMELY ASSISTANCE FOR
ITD Technical and Security Review Approved by: (Security review summary shall be attached to this form		n if machine is network	Date:
ITD Management A	Approval:		Date:
	ITD Manager, County of	Monterey Information	Technology Department

168 W. Alisal Street 3rd Floor, Salinas CA 93901 Phone (831) 755-4990



Date: 5/30/2024		Sales Rep Name: Scott Harvey, Account Manager	
Company Name: Smile Business Products, Inc.		Sales Rep Phone: 831-758-1474 ext. 1099	
Company Address 1550 Moffett Street Salinas, CA 93905		Sales Rep Signature:	
The following equi *NETWORKED: Copier Model:	pment shall be provided on a; 🛛 3	66 month term 24 r	month term 12 month term
Copier Model:	SHARP BP-30C31	\$158.92/month	Note: Do not list standard
Finisher Model:	SHARP BP-TU10 Exit Tray	Included	features as Add-ons.
Add-on:	SHARP BP-DE12 Paper drawer	Included	
Add-on:	SHARP BP-FX11 Fax	Included	Security Note: The County
Add-on:	SHARP AR-D5133NT Surge	Included	requires full hard disk
	Suppressor		encryption and data overwrite
Add-on:	SHARP BP50C Toner Kit	Included	capabilities. If these are standard
Add-on:	SHARP MX-PK131 Postscript	Included	features do not list them as add-
Add-on:			ons. However, if add-ons are
Add-on:			required to meet these
Security Add-on:			requirements, please list those.
Total Monthly			
Rental:		\$158.92/month	
All delivery, in Toner included Ship To: Mo. Co. 1000 Sou Salinas,	Black \$0.0089 see and repair costs shall be included stallation, and machine pick-up shall as needed (no limitations) Dept. of Social Services 1th Main St., Suite 216 Translator CA 93901	ll be included in pricing taples included as need Bill To: Mo. Co. I Attn: Accounts Pa 1000 South Salinas, CA	g above ed (no limitations) Dept. of Social Services hyable Main St., Suite 306 93901
Equip Contact: TB For Meter Reading		Billing Conta	act: Ashley Arness, 831-755-4482
PRINTING DEVICE	CE, ITD REVIEW AND APPROV	AL IS REQUIRED. P	WORK AND USED AS A SHARED LEASE ROUTE THIS FORM TO "IT SURE TIMELY ASSISTANCE FOR
ITD Technical and	Security Review Approved by:		Date:
(Security review su	Security Review Approved by:	n if machine is network	ed)
ITD Management A	Approval:		Date:
	ITD Manager County of	Monterey Information	Technology Department

168 W. Alisal Street 3rd Floor, Salinas CA 93901 Phone (831) 755-4990

Date: 5/30/2024		Sales Rep Name: Sco	tt Harvey, Account Manager
Company Name: Smile Business Products, Inc.		Sales Rep Phone: 831-758-1474 ext. 1099	
Company Address 1550 Moffett Street Salinas, CA 93905		Sales Rep Signature:	
*NETWORKED:		36 month term 24 m	nonth term 12 month term
Copier Model:	SHARP BP-50C31	\$158.92/month	Note: Do not list standard
Finisher Model:	SHARP BP-TU10 Exit Tray	Included	features as Add-ons.
Add-on:	SHARP BP-DE12 Paper drawer	Included	
Add-on:	SHARP BP-FX11 Fax	Included	Security Note: The County
Add-on:	SHARP AR-D5133NT Surge	Included	requires full hard disk
	Suppressor		encryption and data overwrite
Add-on:	SHARP BP50C Toner Kit	Included	capabilities. If these are standard
Add-on:	SHARP MX-PK131 Postscript	Included	features do not list them as add-
Add-on:			ons. However, if add-ons are
Add-on:			required to meet these
Security Add-on:			requirements, please list those.
Total Monthly			
Rental:	 	\$158.92/month	
All delivery, ins Toner included Ship To: Mo. Co. 1 1000 Sou	Black \$0.0089 e and repair costs shall be included stallation, and machine pick-up shalls are stallation.	9 Color \$0.0524 in pricing above, included the included in pricing staples included as need Bill To: Mo. Co. I Attn: Accounts Pa	g above ed (no limitations) Dept. of Social Services hyable Main St., Suite 306
Equip Contact: TBD For Meter Reading: TBD		_	act: Ashley Arness, 831-755-4482
PRINTING DEVIC	CE, ITD REVIEW AND APPROV	THE COUNTY NETV AL IS REQUIRED. P	WORK AND USED AS A SHAREI LEASE ROUTE THIS FORM TO "I' URE TIMELY ASSISTANCE FOR
ITD Technical and Security Review Approved by: (Security review summary shall be attached to this for			
(Security review sur	mmary snati ve attachea to this form	n ij macnine is network	ea)
ITD Management Approval:			Date:
	ITD Manager, County of	Monterey Information	Technology Department

850

168 W. Alisal Street 3rd Floor, Salinas CA 93901 Phone (831) 755-4990

Date: 5/30/2024		Sales Rep Name: Sco	tt Harvey, Account Manager
Company Name: Smile Business Products, Inc.		Sales Rep Phone: 831-758-1474 ext. 1099	
Company Address 1550 Moffett Street Salinas, CA 93905		Sales Rep Signature:	
The following equip *NETWORKED:	pment shall be provided on a;	36 month term 24 n	nonth term 12 month term
Copier Model:	SHARP BP-50C31	\$158.92/month	Note: Do not list standard
Finisher Model:	SHARP BP-TU10 Exit Tray	Included	features as Add-ons.
Add-on:	SHARP BP-DE12 Paper drawer	Included	
Add-on:	SHARP BP-FX11 Fax	Included	Security Note: The County
Add-on:	SHARP AR-D5133NT Surge	Included	requires full hard disk
	Suppressor		encryption and data overwrite
Add-on:	SHARP BP50C Toner Kit	Included	capabilities. If these are standard
Add-on:	SHARP MX-PK131 Postscript	Included	features do not list them as add-
Add-on:			ons. However, if add-ons are
Add-on:			required to meet these
Security Add-on:			requirements, please list those.
Total Monthly			
Rental: Monthly Copies Inc	 	\$158.92/month	
Cost-Per-Copy: All maintenance All delivery, ins Toner included Ship To: Mo. Co. I 1000 Sou	Black \$0.0089 e and repair costs shall be included stallation, and machine pick-up shalls are stallation.	Il be included in pricing staples included as need Bill To: Mo. Co. I Attn: Accounts Pa	g above ed (no limitations) Dept. of Social Services hyable Main St., Suite 306
Equip Contact: TB For Meter Reading:		_	act: Ashley Arness, 831-755-4482
PRINTING DEVIC	CE, ITD REVIEW AND APPROV	THE COUNTY NETV AL IS REQUIRED. P	WORK AND USED AS A SHAREI LEASE ROUTE THIS FORM TO "I' URE TIMELY ASSISTANCE FOR
ITD Technical and Security Review Approved by: (Security review summary shall be attached to this for			
(Security review Sur	mmary snati ve attachea to this jorn	n ij macnine is neiwork	eu)
ITD Management Approval:			Date:
	ITD Manager, County of	Monterey Information	I ecnnology Department

168 W. Alisal Street 3rd Floor, Salinas CA 93901 Phone (831) 755-4990



Date: 5/30/2024		Sales Rep Name: Scott Harvey, Account Manager	
Company Name: Smile Business Products, Inc.		Sales Rep Phone: 831-758-1474 ext. 1099	
Company Address 1550 Moffett Street Salinas, CA 93905		Sales Rep Signature:	
The following equi	ipment shall be provided on a; ⊠ 3 ⊠ Yes □ No	36 month term 24 r	month term 12 month term
Copier Model:	SHARP BP-50C31	\$158.92/month	Note: Do not list standard
Finisher Model:	SHARP BP-TU10 Exit Tray	Included	features as Add-ons.
Add-on:	SHARP BP-DE12 Paper drawer	Included	Teatures as 7 (dd-ons.
Add-on:	SHARP BP-FX11 Fax	Included	Security Note: The County
Add-on:	SHARP AR-D5133NT Surge	Included	requires full hard disk
ridd oii.	Suppressor	meradea	encryption and data overwrite
Add-on:	SHARP BP50C Toner Kit	Included	capabilities. If these are standard
Add-on:	SHARP MX-PK131 Postscript	Included	features do not list them as add-
Add-on:	•		ons. However, if add-ons are
Add-on:			required to meet these
Security Add-on:			requirements, please list those.
Total Monthly			
Rental:		\$158.92/month	
All delivery, in Toner included Ship To: Mo. Co. 1000 So	Black \$0.0089 ce and repair costs shall be included a stallation, and machine pick-up shall be included as tallation.	Il be included in pricing taples included as need Bill To: Mo. Co. Attn: Accounts Pa	g above led (no limitations) Dept. of Social Services ayable Main St., Suite 306
Equip Contact: TBD For Meter Reading: TBD		Billing Cont	act: Ashley Arness, 831-755-4482
PRINTING DEVI	CE WILL BE CONNECTED TO CE, ITD REVIEW AND APPROV VICES" TO FACILIATE IT AP	THE COUNTY NET' AL IS REQUIRED. P	WORK AND USED AS A SHAREI LEASE ROUTE THIS FORM TO "IT SURE TIMELY ASSISTANCE FOR
ITD Technical and Security Review Approved by: (Security review summary shall be attached to this form		n if machine is network	Date:
ITD Management Approval:		Mantanan Informati	Date:

168 W. Alisal Street 3rd Floor, Salinas CA 93901 Phone (831) 755-4990



Date: 5/30/2024		Sales Rep Name: Scott Harvey, Account Manager	
Company Name: Smile Business Products, Inc.		Sales Rep Phone: 831-758-1474 ext. 1099	
Company Address 1550 Moffett Street Salinas, CA 93905		Sales Rep Signature:	
The following equip *NETWORKED:	pment shall be provided on a; 🔲 . Yes 🗌 No	36 month term 24	month term 12 month term
Copier Model:	SHARP MX-C428F		
Ti 11 26 11		\$70.26/month	Note: Do not list standard
Finisher Model:	GILLED AD DELCANTE	T 1 1 1	features as Add-ons.
Add-on:	SHARP AR-D5133NT Surge Suppressor	Included	Security Note: The County
Add-on:	SHARP BP50C Toner Kit	Included	requires full hard disk
Add-on:	SHARP AR-D5133NT Surge	Included	encryption and data overwrite
	Suppressor		capabilities. If these are standard
Add-on:			features do not list them as add-
Add-on:			ons. However, if add-ons are
Add-on:			required to meet these
Add-on:			requirements, please list those.
Security Add-on:			
Total Monthly			
Rental:		\$70.26/month	
		Staples included as need	
1000 Sou	Dept. of Social Services th Main St., Suite 313 CA 93905	Attn: Accounts P	Main St., Suite 306
Equip Contact: TBD For Meter Reading: TBD		Billing Contact: Ashley Arness, 831-755-4482	
PRINTING DEVIC	CE, ITD REVIEW AND APPROV	AL IS REQUIRED. I	WORK AND USED AS A SHARE PLEASE ROUTE THIS FORM TO "I SURE TIMELY ASSISTANCE FO
ITD Technical and Security Review Approved by: (Security review summary shall be attached to this form		m if machine is not	Date:
(Security review Sui	nmary snatt ve attachea to this fort	n ij macnine is neiwori	veu)
ITD Management Approval:			Date:
	ITD Manager County of	Montaray Information	Technology Department

168 W. Alisal Street 3rd Floor, Salinas CA 93901 Phone (831) 755-4990

Date: 5/30/2024		Sales Rep Name: Scott Harvey, Account Manager	
Company Name: Smile Business Products, Inc.		Sales Rep Phone: 831-758-1474 ext. 1099	
Company Address 1550 Moffett Street Salinas, CA 93905		Sales Rep Signature:	
The following equation: *NETWORKED:	ipment shall be provided on a; 🛛 3	36 month term 24 r	month term 12 month term
Copier Model:	SHARP BP-50C31	\$158.92/month	Note: Do not list standard
Finisher Model:	SHARP BP-TU10 Exit Tray	Included	Note: Do not list standard features as Add-ons.
Add-on:	SHARP BP-DE12 Paper drawer	Included	Teatures as 7 (dd-ons.
Add-on:	SHARP BP-FX11 Fax	Included	Security Note: The County
Add-on:	SHARP AR-D5133NT Surge	Included	requires full hard disk
rida on.	Suppressor	meradea	encryption and data overwrite
Add-on:	SHARP BP50C Toner Kit	Included	capabilities. If these are standard
Add-on:	SHARP MX-PK131 Postscript	Included	features do not list them as add-
Add-on:	•		ons. However, if add-ons are
Add-on:			required to meet these
Security Add-on:			requirements, please list those.
Total Monthly			
Rental:		\$158.92/month	
All delivery, in Toner included Ship To: Mo. Co. 1000 So	Black \$0.0089 ce and repair costs shall be included a stallation, and machine pick-up shall be included as tallation.	Il be included in pricing taples included as need Bill To: Mo. Co. Attn: Accounts Pa	g above led (no limitations) Dept. of Social Services ayable Main St., Suite 306
Equip Contact: TBD For Meter Reading: TBD		Billing Cont	act: Ashley Arness, 831-755-4482
PRINTING DEVI	CE WILL BE CONNECTED TO CE, ITD REVIEW AND APPROV VICES" TO FACILIATE IT AP	THE COUNTY NET' AL IS REQUIRED. P	WORK AND USED AS A SHAREI LEASE ROUTE THIS FORM TO "IT SURE TIMELY ASSISTANCE FOR
ITD Technical and Security Review Approved by: (Security review summary shall be attached to this form		n if machine is network	Date:
ITD Management Approval:		Montana Information	Date:

1850

168 W. Alisal Street 3rd Floor, Salinas CA 93901 Phone (831) 755-4990

Date: 5/30/2024		Sales Rep Name: Sco	tt Harvey, Account Manager
Company Name: Smile Business Products, Inc.		Sales Rep Phone: 831-758-1474 ext. 1099	
Company Address 1550 Moffett Street Salinas, CA 93905		Sales Rep Signature:	
The following equip *NETWORKED:	pment shall be provided on a;	36 month term 24 n	month term 12 month term
Copier Model:	SHARP BP-50C31	\$158.92/month	Note: Do not list standard
Finisher Model:	SHARP BP-TU10 Exit Tray	Included	features as Add-ons.
Add-on:	SHARP BP-DE12 Paper drawer	Included	
Add-on:	SHARP BP-FX11 Fax	Included	Security Note: The County
Add-on:	SHARP AR-D5133NT Surge	Included	requires full hard disk
	Suppressor		encryption and data overwrite
Add-on:	SHARP BP50C Toner Kit	Included	capabilities. If these are standard
Add-on:	SHARP MX-PK131 Postscript	Included	features do not list them as add-
Add-on:			ons. However, if add-ons are
Add-on:			required to meet these
Security Add-on:			requirements, please list those.
Total Monthly			
Rental:	 	\$158.92/month	
All delivery, ins Toner included Ship To: Mo. Co. 1 1000 Sou	Black \$0.0089 e and repair costs shall be included stallation, and machine pick-up shalls are stallation.	9 Color \$0.0524 in pricing above, included the included in pricing staples included as need Bill To: Mo. Co. I Attn: Accounts Pa	g above ed (no limitations) Dept. of Social Services hyable Main St., Suite 306
Equip Contact: TB For Meter Reading:		_	act: Ashley Arness, 831-755-4482
PRINTING DEVIC	CE, ITD REVIEW AND APPROV	AL IS REQUIRED. P	WORK AND USED AS A SHAREI LEASE ROUTE THIS FORM TO "I' URE TIMELY ASSISTANCE FOR
ITD Technical and Security Review Approved by: (Security review summary shall be attached to this for			
(~ com my review sur	y shaw so amachea to hus form	Therefore is herivorial	,
ITD Management Approval:		Montana Information	Date:
	11D Manager, County of	<i>Monterey Information</i>	i ecnnology Department





Sharp's awarded Sourcewell Contract for Multifunction Copiers, Printers & Equipment enables our authorized MFP Dealers and direct sales offices, Sharp Business Systems, the ability to offer technology solutions to Sourcewell Members. This overview provides a summary and outline of the essential contract functions and various roles and responsibilities.

I) CONTRACT OVERVIEW

A. CONTRACT NUMBER 030321-SEC

B. CONTRACT TERM 7/01/21 – 4/19/25

C. GUARANTEED DELIVERY

- 1. 14 Business Days ARO
- 2. FOB Destination within 25 miles of Authorized Dealer or SBS location

D. ORDERING ADDRESS

SHARP ELECTRONICS CORPORATION c/o Local Authorized Dealer OR Sharp Business Systems (Insert Name) 100 Paragon Drive, Box Q Montvale, NJ 07645

Contact:

snapcustomerservice@sharpsec.com

II) CONTRACT SCOPE

A. USAGE & TERM

This contract may be used by any Sourcewell Member. Membership is open to State Governments & Political Subdivisions; Non-profit/tax-exempt Schools, Colleges and Universities; Non-profit/tax-exempt Hospitals and other Non-profit/tax-exempt Organizations.

Click here to become a member

B. AWARDED PRODUCT OFFERINGS

- 1. Multifunction Copiers and Printers
- 2. AQUOS BOARD Interactive and Professional Displays
- 3. Customized Software Solutions

C. ANCILLARY PRODUCT OFFERINGS

Related ancillary products such as software solutions, vend equipment, card readers, etc. which will enhance the overall customized solution may be acquired under the Sourcewell contract. Allowance for ancillary products is ultimately the ordering member's decision and should comply with ordering member's policies. Ancillary products may not exceed 25% of total order value.

III) CONTRACT PRICING

A. EQUIPMENT

The basis for Sourcewell pricing is calculated on a percentage discount from Manufacturer Suggested Retail Price. Mainframe and Accessory discounts may differ.

SHIPPING CHARGES

All deliveries are F.O.B. destination as freight and handling charges are calculated into the pricing schedules. Portions of an order shipped due to back-orders are shipped at no charge.

B. PRICING

CEILING PRICING – The contract award is based upon ceiling pricing which may not be exceeded.

C. START-UP SUPPLIES

Start-up Supplies are NOT included. Installing local authorized dealer or Sharp SBS may charge for start-up supplies.

IV) ACQUISITION METHODS

A. PURCHASE

B. FINANCING OPTIONS

Financing options may be offered directly by Sharp authorized dealers or SBS locations. Specific terms should be reviewed and approved by the Sourcewell member.

V) ORDER DOCUMENTATION

A. DOCUMENTATION

PURCHASE ORDER REQUIREMENT

Purchase Orders must contain the following:

- Dealer (or SBS Branch) Name, Address, Email & Phone
- End User Name, Address, Contact, Email & Phone
- Itemized list of equipment and accessories with Contract Pricing
- Signed Lease Agreement, if applicable
- Tax-Exempt form where applicable

FINANCING OPTION

In addition to the requirements above, additional terms and conditions related to the agreed upon financing must be

incorporated into the Purchase Order OR a signed finance document must accompany the Purchase Order.

B. PAYMENT TERMS

Payment terms: Net 30 days

VI) DELIVERY, INSTALLATION, MOVES

DELIVERY

Sourcewell member will confirm delivery, installation and acceptance of all products covered by each order, by signing a Delivery and Acceptance Certificate (D&A) which shows acceptance of the product(s) and allows local authorized dealer or SBS location to invoice for the product(s).

INSTALLATION

Purchase price includes standard installation within 25 mile radius of Authorized Dealer or Branch Location.

EXCESSIVE INSTALLATION

Installing local authorized dealer or SBS location may charge for excessive installation requirements, including rigging, access alterations, and access to nonground floors via stairs. Any such excessive installation charges must be quoted to the Sourcewell member prior to the signature of any Order and shall be based on the actual expenditures.

NETWORK INSTALLATION

Network installation includes configuration of the Device for the proper network and installation of the protocols, appropriate print drivers on up to five (5) computers per device. Requests for network installation on additional devices will be the negotiated between Sourcewell member and the servicing local authorized dealer or SBS location.

EQUIPMENT MOVES

Cost for equipment moves is dependent upon the distance of the move and the size of unit. One move (per life of installation) within the same building is provided at no charge. All other equipment moves will be negotiated and a cost estimate will be provided to the requesting Sourcewell member.

CUSTOMER TRAINING

Local authorized dealer or SBS location will provide 2-4 hours on-site initial training, depending on model and number of key operator participants. Additional training will be negotiated, and a cost estimate will be provided to the requesting Sourcewell member.

VII) SERVICE PROVISIONS

A. WARRANTIES & DOWNTIME

WARRANTY

Standard warranty is 90-days for all products offered, beginning with the date of acceptance of delivery. In addition, Sharp provides a Three Year Performance Guarantee for all orders placed under Sourcewell Contract 030321-SEC.

REPLACEMENT OF EQUIPMENT

If the MFP is not performing within the machine's design specifications and cannot be repaired by the Authorized Sharp Dealer and Sharp Service Technician, Sharp will replace the equipment with a like model with comparable features at no additional cost per the terms of the Three Year Performance Guarantee.

The 3-Year Performance Guarantee begins at the date of installation. All equipment must be maintained under a full Service Maintenance Agreement with a Sharp Authorized Dealer or SBS location, and operated using only genuine Sharp supplies and parts.

This guarantee applies to all products procured through and billed under the Sourcewell contract and is not applicable to equipment that has been damaged by accident or misuse, including improper voltage. If it is determined that the equipment was maintained using other than genuine Sharp supplies and parts, the 3-Year Performance Guarantee will no longer be valid.

LOANERS

If any Device is inoperable for more than (8) hours due to equipment malfunction, a Service Technician will determine if a Service Loaner is necessary. If required, a loaner device of similar speed and capabilities will be provided within (2) Business Days by the local authorized dealer or SBS location until such time as the inoperable device is operable.

B. SERVICE ZONES

STANDARD URBAN SERVICE

Service rates are calculated based on service zones. Standard Urban Service applies to units located within 25 miles from a service provider.

RURAL SERVICE

For units located 25 miles+ from a service provider, additional rates may apply.

VIII) SERVICE BILLING OPTIONS & METER COLLECTION

PURCHASED / FINANCED EQUIPMENT

Sourcewell service and supply pricing includes all parts, labor and consumables, except staples and paper.

Sourcewell Members may source a customized service contract directly from the installing Authorized Sharp Dealer or SBS Branch Location.

SERVICE ESCALATION

Annual maintenance agreement pricing may be increased up to 5% by the servicing Sharp Dealer or SBS Branch. This price adjustment will be based upon market conditions, age of equipment and potential price increases of parts and supplies.

METER COLLECTION

Meter read collection instructions will be presented during the installation / training process.

IX) END OF TERM RELATED ISSUES

SECURITY/END OF LIFE

Sharp's End-Of-Lease feature is standard on all advanced series MFPs. This feature ensures that all data is overwritten before returning, or relinquishing control of the MFP. After the erasing process is completed, the MFP will be rebooted automatically and a completion report can be printed.

HARD DRIVE REMOVAL / REPLACEMENT

As directed, the authorized servicing dealer or SBS location will remove the hard drive upon written direction from the Sourcewell member.

The hard drive will be provided to the Sourcewell member for their disposal. The cost of hard drive removal and replacement is \$350 per device.

X) CONTRACT DOCUMENTATION

Contract information is provided on <u>Sharp's</u> <u>customized Sourcewell website</u>.

CONTRACT QUESTIONS AND PRICING:

<u>Government and Major Account Manager</u> <u>Listing</u>