



NASPO ValuePoint FMV Lease Agreement (Option C)

Agreement Number [grid]

Agreement Number

Your Business Information

Full Legal Name of Lessee / DBA Name of Lessee: MENDOCINO COUNTY C/O G S A Tax ID # (FEIN/TIN): 946000520

Sold-To: Address: 841 LOW GAP RD, UKIAH, CA, 95482-3765, US

Sold-To: Contact Name: Scott Morgan Sold-To: Contact Phone #: (707) 234-6053 Sold-To: Account #: 0011053785

Bill-To: Address: 841 LOW GAP RD, UKIAH, CA, 95482-3765, US

Bill-To: Contact Name: Scott Morgan Bill-To: Contact Phone #: (707) 234-6053 Bill-To: Account #: 0011053785 Bill-To: Email: morgans@mendocinocounty.org

Ship-To: Address: 841 LOW GAP RD, UKIAH, CA, 95482-3765, US

Ship-To: Contact Name: Scott Morgan Ship-To: Contact Phone #: (707) 234-6053 Ship-To: Account #: 0011053785

PO #: .

Your Business Needs

Table with 3 columns: Qty, Item, Business Solution Description. Rows include SENDPROMAILCENTER, 1FS1, 1FW1, 1FWX, 7W00, APAXL, APKG, APSK, CAABL, F9PG, HV1P, HV96000, HVBD, HVPS.

1	HVSP	MailCenter Shipping Bundle
1	M9SS	USPS Tracking Services
1	ME1D	Meter Equipment - High
1	MP3X	Differential Weighing 15, 30 lb scales
1	MW90650	Tape Moistener Asmbly - 3000 Mono
1	MW92705	MailCenter 15in Display
1	NV10	InView TMR Web Acct Bundle Single only
1	NV90	InView Subscription
1	NV90KIT	InView Welcome Kit
1	NV99	InView MMS Base Software
1	NV99KIT	InView Welcome Kit
1	PTJ1	SendPro Online-PitneyShip
1	PTJ4	Multicarrier Sending App w HW or Meter
1	PTJ8	SPO-PitneyShip Mailing included w HW
1	PTJC	SPO-PitneyShip Individual
1	PTJN	Single User Access
1	PTK1	Web Browser Integration
1	PTK3	Meter Integration
1	PTKHV	PitneyShip MailCenter Integration
1	SJM3	SoftGuard - 3000
1	STDSLA	Standard SLA-Equipment Service Agreement (for MailCenter)

Your Payment Plan

Initial Term: 60 months	Initial Payment Amount:	
Number of Months	Monthly Amount	Billed Quarterly at*
60	\$ 877.01	\$ 2,631.03

**Does not include any applicable sales, use, or property taxes which will be billed separately.
If the equipment listed above is replacing your current meter, your current meter will be taken out of service once this lease commences.*

- Tax Exempt Certificate Attached
- Tax Exempt Certificate Not Required
- Purchase Power[®] transaction fees included
- Purchase Power[®] transaction fees extra

Your Signature Below

By signing below, you agree to be bound by your State's/Entity's/Cooperative's contract, which is available at <http://www.pb.com/states> and is incorporated by reference. The terms and conditions of this contract will govern this transaction and be binding on us after we have completed our credit and documentation approval process and have signed below. If software is included in the Order, additional terms apply which are either (i) included in your State's contract which is available at <http://www.pb.com/states> or (ii) available by clicking on the hyperlink for that software located at https://www.naspo.valuepoint.org/search/?term=pitney+bowes&page_ref=contractors. Those additional terms are incorporated by reference.

NASPO VALUEPOINT CTR058808; 7-22-70-50-03
State/Entity's Contract#

Lessee Signature

Print Name

Title

Date

Email Address

Roger Donohue

Pitney Bowes Signature
Roger Donohue

Print Name
Operations Manager

Title
March 26, 2025

Date

Sales Information

Penny Vanderlaan	penny.vanderlaan@pb.com	
Account Rep Name	Email Address	PBGFS Acceptance

IN WITNESS WHEREOF

DEPARTMENT FISCAL REVIEW:

By: Darcie Antle
DEPARTMENT HEAD

Date: 03/25/2025

Budgeted: Yes No

Budget Unit: 1160

Line Item: 862200

Org/Object Code:

Grant: Yes No.

COUNTY OF MENDOCINO

By: _____
JOHN HASCHAK, Chair
BOARD OF SUPERVISORS

Date: _____

ATTEST:

DARCIE ANTLE, Clerk of said Board

By: _____
Deputy

I hereby certify that according to the provisions of Government Code section 25103, delivery of this document has been made.

DARCIE ANTLE, Clerk of said Board

By: _____
Deputy

INSURANCE REVIEW:

By: Darcie Antle
Risk Management

Date: 03/25/2025

CONTRACTOR/COMPANY NAME

By: See Page 3
SIGNATURE

Date: _____

NAME AND ADDRESS OF CONTRACTOR:

Pitney Bowes

PO Box 371887

Pittsburgh PA, 15250-7887

By signing above, signatory warrants and represents that he/she executed this Agreement in his/her authorized capacity and that by his/her signature on this Agreement, he/she or the entity upon behalf of which he/she acted, executed this Agreement

COUNTY COUNSEL REVIEW:

APPROVED AS TO FORM:

By: [Signature]
COUNTY COUNSEL

Date: 03/25/2025

EXECUTIVE OFFICE/FISCAL REVIEW:

By: [Signature]
Deputy CEO or Designee

Date: 03/25/2025

Signatory Authority: \$0-25,000 Department; \$25,001- 50,000 Purchasing Agent; \$50,001+ Board of Supervisors

Exception to Bid Process Required/Completed _____

Mendocino County Business License: Valid

Exempt Pursuant to MCC Section: _____