



Specialized Purchasing Consultants

1491 East Side River Road
Dummer, NH 03588
(800) 750-1538
www.spccopypro.com

FY22 Upgrade Report

Sullivan County, NH
14 Main Street
Newport, NH 03773

Specialized Purchasing Consultants Corp.

Serving Maine, New Hampshire & Vermont since 1988

1491 East Side River Road
Dummer, NH 03588
(800) 750-1538
stilton@spccopypro.com

August 1, 2022

VISIT US ON THE WEB:
www.spccopypro.com

Sullivan County, NH
Mary Bourque
14 Main Street
Newport, NH 03773

Dear Mary:


Thank you for allowing Specialized Purchasing Consultants to assist you with your recent reprographic equipment upgrade.

As with any change, challenges will arise, and we hope that we did not let you down in any way. With services such as STARDoc, automatic reporting, simplified billing, a comprehensive triple-layered warranty, and a staff that stands ready and willing to assist with all of your current and future needs, SPC has set a higher standard.

We hope that during the upgrade process we have taken care of all the details and resolved any issues that may have arisen. If you believe there is anything that we have missed, please let us know immediately, allowing us to rectify the situation to your satisfaction. You can be confident that SPC has worked hard to ensure your current fleet will serve your needs fully.

It is always our pleasure to answer questions, manage service or supply issues, and to provide top-notch customer service. We look forward to serving you throughout the years to come.

Sincerely,



Skip Tilton
President of SPC

Sullivan County NH

Derek Ferland

14 Main Street

Newport, NH 03773

Five-Year Basis beginning with the 2022/2023 Fiscal Year

Copies-per-Year: 911,018

Present vs. Proposed Recommendations as of 7/1/2022

PRESENT SITUATION

- 1) Guarantees on Photocopiers: <One Year
- 2) Annual Price Ceilings Left: <One Year
- 3) Copiers with 3 million plus: 3
- 4) Units to be Traded: 31
- 5) Photocopiers: 8
- 6) Color Photocopiers: 3
- 7) MFPs: 11 with 2 Color (3 are ink jet)
- 8) Printers: 12 w/ 4 Color
- 9) Duplexers: 26
- 10) Finishers: 8
- Total number of Units: 31

PROPOSED SITUATION

- 1) Guarantees for both New, Recons & Used Machines: Five + Years
- 2) 5% or CPI Annual Ceilings, whichever is less: Five + Years
- 3) Copiers with 3 million plus: 9
- 4) Replaced: 28 New
- 5) Photocopiers: 9 with Secure Print/Confidential Mailbox
- 6) Color Photocopiers: 5
- 7) MFPs: 7 with 2 Color
- 8) Printers: 12 with 4 Color
- 9) Duplexers: 28
- 10) Finishers: 9
- Total number of Units: 28 (Closing out 3 to right size equipment)

Overall Description of Equipment Fleet:

Presently, you have **Six manufacturers with 24 different models**. The **new arrangement** will stay with one manufacturer **with one vendor** servicing everything. There will only be 6 distinct models in the entire County.

Print Management: STARDoc for all devices and Papercut MF for select devices (9 Copiers).

Capital:

Presently, you have **one** FMV lease that will be paid off on 6/15/2022. With the new arrangement, you will have **one** municipal master lease at 3.49% interest. Your first of five annual lease payments will be due on **August 1, 2022**.

Commissioner's Meeting Approval Date: May 2, 2022

Service & Supplies:

Considering all of your consumable cost centers including service you are averaging **\$0.009799 for black and \$0.143609 for Color**. The new contract will come in at a CPC of **\$0.00366 for Black and \$0.046394 for Color**. These figures include an average for both printers and copiers.

Vendor Packages:

SPC will bring you multiple different vendor combinations, matching up the best technology available to meet your needs. We would like to highlight the most qualified bids combination for the County:

<u>Cost Center</u>	<u>Present All</u>	<u>Present Copiers</u>	<u>Symquest All</u>
1. Service & Supplies Color:	\$11,499.89	\$1,386.89	\$3,715.10
2. Service & Supplies Black:	\$8,142.08	\$2,233.05	\$3,041.23
3. Annual Muni Lease &:	\$11,532.00	\$11,532.00	\$14,958.86
4. Forced Upgrades (23 Owned Devices):	<u>\$4,575.00</u>	<u>\$1,250.00</u>	<u>\$00.00</u>
Totals:	\$35,748.98	\$16,401.94	\$21,715.19

* Note that with the last upgrade only **8 New units were purchased while 28 New units** are part of the lease. Present Cost without Forced Upgrades is **\$31,173.98**.

This Papercut MF Package includes Papercut installed on 9 copiers, RFID Card Readers and Cards. [Adds \$2,542.76 to your annual lease]

The successful bidders will have a blanket servicing contract that includes all consumables excluding only staples and paper for all of the equipment that is under their factory authorized ability to service. They will provide one easy CPC billing plan done twice a year in July & January with a reconciliation invoice in June. Your service contract will be fixed through **June 30, 2023**. A contract extension has been negotiated for four more years, which will have an annual price ceiling of five percent or CPI, whichever is less. You however, only commit funds for one-year at a time to the servicing vendor. And even this scenario allows you to upgrade, lowering the service costs, if it is to your advantage to go out to bid at any time. SPC will set up both the service- supply contracts and the warranty cards with the successful bidding vendors. **Security package:** Hard Drive Wipes are included in these prices.



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CONTRACT

THIS CONTRACT (the "Contract") is made this 8 day of February, 2022 by and between Specialized Purchasing Consultants ("Contractor" or "SPC") and Sullivan County NH ("Client"). For and in consideration of the mutual covenants and performance set forth herein, Contractor and Client agree as follows:

Skip Tilton
President

Corporate Office:
1491 East Side River Road
Dummer, NH 03588

(800) 750-1538

Corporate Email Address:
stilton@spccopypro.com

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1. **Term.** The term of this Contract is five years from the date hereof, unless earlier terminated pursuant to the terms hereof. Client or SPC can terminate this Contract at any time for any reason after one year, upon 30 days written notice to the other party to this Contract, following completion by the Client of the issuance of a lease, purchase, lease-purchase, financing, or refinancing to replace, add, or upgrade equipment covered by this Contract ("an Upgrade" defined as no less than 75% of the current reprographic equipment as outlined in the "Initial Needs and Analysis" Item 3A of this contract). If such an early termination is effected by Client or SPC, Client and SPC shall reconcile fairly all amounts due for services performed under the Contract.
2. **Fees.** The fees payable by Client to Contractor under this Contract are: (a) eleven percent (11%) of the Total Cost Per Copy of all copies scheduled to be made on all service and supply agreements for reprographic equipment (Photocopiers, Multi-functional Duplicating Equipment, or other equipment described in the Five Year Equipment Replacement Schedule referenced in subparagraph (l) hereof) leased, purchased, lease-purchased, financed, or refinanced by Client as a result of services performed by Contractor under this Contract (in other words, if the Total Cost Per Copy for services and supplies for equipment leased, purchased, lease-purchased, financed, or refinanced as a result of services performed by Contractor under this Contract is \$.003 per scheduled copy, the Contractor's fee is \$.00033 per such copy); and (b) eleven percent (11%) of the principal amount (purchase price financed) of all such reprographic equipment (in other words, if the total principal amount of reprographic equipment leased, purchased, lease-purchased, financed, or refinanced by Client as a result of services performed by Contractor under this Contract is \$3,000, the Contractor's fee is \$330). The "Total Cost Per Copy" for equipment covered by this Contract is defined as the total cost per copy scheduled to be charged for service and supply contracts between Client and servicing vendors for equipment acquired by Client as a result of services performed by Contractor under this Contract. Excluded from such service and supply contracts are the cost of paper and the cost of staples. No fees are payable by Client to Contractor hereunder, other than the retainer described in Paragraph 8 hereof, unless Client accepts a bid for reprographic services arranged by Contractor pursuant to this Contract, or unless Client breaches this Contract under Paragraph 4 hereof or otherwise.

Network Printers (NP) will be administered under separate contracts with the Vendors of such NPs. Due to the limited volume done on NPs, Contractor's fee will be Twenty-Five percent (25%) of the Vendor's fee per copy on the NP. For example if the Total Cost per Copy ("TCPC") negotiated with a Vendor for a NP is \$0.0049, then the Contractor's fee is \$0.001225 for a Total cost to the Client of \$0.006125 per copy on the NP.

SPC guarantees to improve the quality of your equipment and service as well as lower the cost of obtaining and operating reprographic equipment, even after SPC's fees have been included in the new total cost. If SPC fails to achieve this, SPC will terminate our Contract, refund SPC's retainer received from Client, and provide an additional \$500.00 check to Client to cover any loss of time on Client's part.

3. **Services Performed By Contractor:** (See Addendum B for a Complete list of services for both Vendor and Client)
 - a. **Initial Needs and Capabilities Analysis.** Contractor will provide to Client a written Initial Needs and Capabilities Analysis (contained within the Five-Year Equipment Replacement Schedule described in subparagraph (l) hereof) analyzing Client's existing reprographic system including Client's current photocopiers, offset presses, high-speed duplicators, Low End Network Printers, and outside printing requirements. Based on this Initial Needs and Capabilities Analysis, Contractor will design, with Client's approval, an overall reprographic system for Client, with the goal of increasing Client's reprographic capabilities, while reducing Client's reprographic costs. Specifically, throughout the term of this Contract, Contractor will provide Client with initial long-term service and supply contract savings and capital savings of up to two-thirds of retail. Annually hereunder, Contractor will provide Client with guaranteed ceilings on any annual price increases for service and supply contracts covering equipment obtained under this Contract of 5% or the annual increase in the Consumer Price Index (CPI-U), whichever is less.
 - b. **Annual Use Report.** Annually hereafter, Contractor will provide to Client a written Annual Use Report analyzing the use of reprographic equipment and services and supplies by Client, with recommendations that identify for Client how to use such equipment, services and supplies, and other items in the most efficient and effective manner possible.
 - c. **Two-Year Needs and Capabilities Analysis.** Every two years hereafter, Contractor will perform a Needs and Capabilities Analysis for Client covering the same matters contained in the Initial Needs and Capabilities Analysis. Client must provide written authorization to Contractor to perform the Two-Year Needs and Capabilities Analysis, and such written authorization may be provided by the Superintendent of Schools or Business Manager (or similar officer) of Client pursuant to this Contract.
 - d. **Bid Specifications.** Based on the results of the Initial Needs and Capabilities Analysis, Annual Use Report, and Two-Year Needs and Capabilities Analysis, as applicable, Contractor will prepare and distribute bid specifications to qualified contractors to obtain for Client reprographic equipment and services desired by Client.
 - e. **Selection of Vendors.** Contractor will analyze all bids received by Client for reprographic equipment and services pursuant to subparagraph (d) above and make recommendations to Client regarding how Client can obtain the most effective and lowest-cost reprographic equipment and services.



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- f. **Negotiation With Vendors.** After bids described in subparagraph (c) above are received, if further negotiation with vendors on behalf of Client is desired by Client, Contractor will undertake such negotiations with vendors at Client's direction so that contracts in compliance with Client's requirements can be executed.
- g. **Financing.** Contractor will arrange, at no cost to Client, tax-exempt lease-purchase financing (for tax-exempt Clients) or other appropriate financing for the reprographic equipment selected by Client. Contractor shall submit all transactions to Contractor's bond counsel listed in the Bond Buyer's Municipal Marketplace ("Bond Counsel"), for the preparation of all documents, for legal compliance review, and for the provision of any legal validity and tax opinions necessary to complete and finance such transactions. In addition, Client may arrange for its own counsel ("Issuer Counsel") to participate in the transaction, at Client's cost, or the Client may choose to effect its own financing, at its own cost.
- h. **Assumption of Existing Contracts.** Contractor will assume all financial obligations and hold Client harmless from such obligations under all existing contracts, leases, or financing agreements to which Client is a party for equipment being replaced by equipment being leased, purchased, lease-purchased, financed, or refinanced pursuant to this Contract. In order to facilitate the payment by Contractor of all obligations of Client under such contracts, leases, or financing arrangements, Client hereby authorizes Contractor, to change the billing addresses on such contracts, leases, or financing arrangements to the business address of Contractor. Client also agrees to hold Contractor harmless for, and to pay, any shipping costs back to a vendor or leasing company, or storage costs for such equipment, or any Federal, State, or local taxes lawfully assessed and due, now or hereafter, upon all equipment covered by such contracts, leases, or financing agreements being repaid by Contractor pursuant to this Contract.
- i. **Cancellation and Renegotiation of Existing Service Contracts and Establishing New Service Contracts.** Contractor, at Client's direction, will cause existing service and supply contracts for existing reprographic equipment used by Client to be cancelled, and will negotiate new service and supply contracts at new terms acceptable to Client, including replacement warranties from vendors for all equipment identified by Client.
- j. **Annual Monitoring of Service Contracts.** During the term of this Contract, Contractor will monitor annually all reprographic service and supply contracts entered into by Client to verify correct billing and to identify over-usage and under-usage of particular equipment.
- k. **Installation of Equipment.** After contracts have been awarded to vendors for reprographic equipment pursuant to this Contract, Contractor will communicate with such vendors to assure proper installation of equipment pursuant to the terms of any applicable lease-purchase or other financing agreement and to assure proper commencement of service and supply contracts.
- l. **Provision of Equipment Replacement Schedule.** Contractor will provide to Client, and will update as necessary, a Reprographic Equipment Replacement Schedule (a "Five Year Equipment Replacement Schedule") for all equipment to be replaced, reconditioned, upgraded, or otherwise covered by this Contract.
- m. **Provision of Key Operator Instruction Forms.** Contractor will provide Client with a Key Operator Instruction Form for posting adjacent to each copying machine of Client describing proper use, key operator name, machine serial number, life expectancy of such machine, location and telephone number of vendor's service manager, and warranties for the machine.
4. **Exclusive Agency for Bidding and Selection of Vendors and Equipment.** All bidding, analysis, and selection of vendors and equipment by Client pursuant to this Contract shall be effected exclusively through Contractor. If, during the term of this Contract, Client executes a contract separate from Contractor with any vendor to provide services or equipment such as that covered by this Contract, then Client shall be in breach of this Contract and shall pay to Contractor all fees due and unpaid by Client to Contractor under this Contract, including all fees which would have been payable by Client to Contractor under this Contract had Client accepted a bid meeting the terms of this Contract and arranged by Contractor for Client under this Contract, plus all costs including attorney's fees incurred by Contractor to collect such fees. If Client rejects all of the bids arranged by Contractor for Client pursuant to this Contract, then Contractor shall be allowed exclusively to re-bid for Client the services and equipment desired by Client according to Client's specifications. JB **Client's Initials here acknowledge that Client has carefully reviewed the terms of this Paragraph 4 applicable to Client under this Contract.**
5. **Warranties.** Throughout the term of this Contract, Contractor will obtain for Client from vendors five-to-ten-year average warranties on all new equipment obtained for Client under this Contract, five-year average warranties for all reconditioned equipment obtained for Client under this Contract, and three-to-five year average warranties for all existing equipment of Client left in place and monitored by Contractor under this Contract.
6. **Equipment Upgrades and Adjustment of SPC Fees.** If any equipment which is covered by this Contract is upgraded or replaced during the term of this Contract, then Total Cost Per Copy fees payable by Client to Contractor under paragraph 2(a) above shall be adjusted by the net increase or decrease in copy volume from the original copy volume negotiated by Contractor for Client pursuant to this Contract. (For example, three years after execution of this Contract, Contractor is asked to do an Upgrade by Client on certain of Client's equipment. After the Upgrade is approved by Client, total copy volume on Client's equipment is scheduled to be 2,000,000 copies per year for the remaining two years of this Contract instead of the 1,500,000 copies per year originally scheduled under this Contract. Under such circumstances, Contractor would be entitled to receive its fee under paragraph 2(a) above for the additional 500,000 copies per year scheduled under the Upgrade for the remaining two years of the Contract.)



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President

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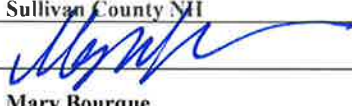
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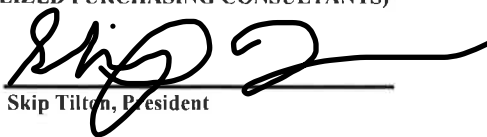
7. **Retainer.** Upon execution of this Contract, Client agrees to pay Contractor a retainer of \$1,000.00 (Waived for an existing client). This amount shall be credited in its entirety, however, to any fee earned by Contractor on an Upgrade of reprographic equipment or services by Client pursuant to this Contract.
8. **Optional Unforeseen Cost Fund & Installation:** By initialing below, Client hereby elects to pay Contractor, as part of the principal amount of equipment covered by this Contract, a one-time \$300 charge for each item of reprographic equipment covered by this Contract, to eliminate any liability by Client for costs unforeseen by Client for:
- a. SPC's Print Management Services (See Addendum A)
 - b. Shipping or storage under Paragraph 3(h) hereof;
 - c. Network Drops
 - d. Specialized reprographic surge protectors
 - e. Electrical rewiring found to be necessary to integrate reprographic equipment provided hereunder to Client's existing electronic data processing network
 - f. Installation and operation of SPC Star Doc (remote monitoring of all reprographic equipment, and analysis of Client's usage and cost patterns)
- Client Initials: Accept MB
9. **Entire Agreement.** This Contract represents the entire agreement between Contractor and Client with regard to the subject matter hereof. No oral negotiations, discussions, or agreements, either prior to or subsequent to the date of this Contract, with regard to the subject matter hereof, are binding upon Contractor or Client, unless reduced to writing and set forth in the form of an agreement, signed by both Contractor and Client.
10. **No Conflicts-of-Interest by Contractor.** Contractor warrants to Client that Contractor has no monetary or other self-interest in the selection of any vendor to provide reprographic equipment or services to Client pursuant to this Contract, and that the performance of Contractor's obligations pursuant to this Contract shall be solely in the interests of Client to provide Client with the best possible reprographic equipment and services at the lowest possible price.
11. **Non-Disparagement.** Client and Contractor will not make any unfavorable statements or references, whether written or verbal, or cause or encourage others to make such unfavorable statements or references, about the other party.

CLIENT

Company	<u>Sullivan County NH</u>
Signature	<u></u>
Authorized by (please print)	<u>Mary Bourque</u>
Title	<u>Director of Facilities and Operations</u>
Address 1	<u>14 Main Street</u>
City, State, Zip	<u>Newport, NH 03773</u>
Telephone Number	<u></u>
Fax Number	<u></u>
E-mail address	<u>mbourque@sullivancountynh.gov</u>

CONTRACTOR (SPECIALIZED PURCHASING CONSULTANTS)

SPC Corporate Signature


Skip Tilton, President



Specialized Purchasing Consultants, Corp.

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President

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Addendum A: STARDoc Services that include but are not limited to...

- Cost Saving Recommendations
- Pinpointing Color Cost over usage with cost savings recommendations
- Allocate Cost by Device and Building
- Student Population Ratios Compared to at least 55 School Districts
- Monthly Audits that build your budgets based off printing habits
- Electronic Monitoring of all Printers/Copiers
- Floor Plan Asset Management
- Measure Output at Device Level

Addendum B: Services that SPC provides that assist both the Client and servicing Vendor.

Services SPC provides to the Client:

Prior to Installation:

- Cooperative Buying Power of copiers & printers, bidding & tabulation of bids
- Five-Year Equipment Replacement Schedule: Includes onsite surveying, fleet recommendations, follow-through of bid process
- Working directly with vendors and manufacturers on Client's behalf
- Client allowed to choose vendor no matter the bid results (i.e., not necessarily awarding bid to lowest quote)

During Installation:

- On-site oversight of equipment installation
- Electronic Surge Protectors (ESPs), electrical wiring, computer interface, etc. provided as needed.
- Follow-through on remaining installation issues to ensure completion
- Print Management Software

After Installation:

- STARDoc Fleet Management program
- Live Floor Plans
- Annual Meter Read Collection
- Simplified Billing Program: Three total invoices per year directly from SPC
- Annual Reports
- Mediating equipment and warranty issues between Client and Vendor
- Chromebook Bid
- Paper Bid

Services SPC provides to the Vendor:

Prior to Installation:

- Quantity addition of clients, equipment, and volume
- Bid Specs organized in consistent format with the Five-Year Equipment Replacement Schedule
- Past bid results shared to provide best negotiating with manufacturers
- All bids shared with vendors are equal, with none allowed to under-spec, under-bid or offer discontinued equipment
- Customer chooses the vendor of choice, despite bid results
- Digital Needs Analysis to match machine to installation site
- Coordination of vendor meeting with Client after bid is awarded

During Installation:

- Oversight of equipment installation to assist delivery and technician staff
- Electronic Surge Protectors (ESPs), electrical wiring, computer interface, etc. provided by SPC as needed
- Follow-through on installation issues to ensure continuity for client and vendor
- Print Management Software

After Installation:

- Annual Meter Read Collection
- Simplified Billing Program: Three total invoices per year; SPC pays vendor directly
- Mediating equipment and warranty issues between Client and Vendor
- Annual Meetings with Vendor to address positive and negative issues or concerns as well as discussion of past and future bids.



Sullivan County NH

Mary Bourque

14 Main Street

Newport, NH 03773

Five-Year Equipment Replacement Schedule

Sullivan County NH	Present Equipment	1st Year Equipment	2nd Year	3rd Year	4th Year	5th Year
BuildingName	Present Meter/Survey Date	Estimated Life	Date Introduced			
Room	Estimated Life	Date Introduced	Serial Number	Vendor ID	Proposed IP_Address:	
# Students	Serial Number / Present IP Address	Projected Black Volume				
Annual Volume	Special Notes	Projected Color Volume				
1 Attorney's Office	Canon IR ADV 4535 Black Photocopier 45 CPM RADF Duplex 4-Paper Drawer LCT Finisher 3-Hole Punch CIF-Print-Scan-Fax-Hard Drive for Secure Print	Konica Minolta BH550i 55 CPM ~ RADF Duplex (LCT if under 1,500 Capacity) Finisher 3-Hole Punch CIF-Print-Scan-Post Script-Hard Drive for Secure Print-Airprint	New	New	New	New
	(Lease Return)					
	1,000,000	02/16	3,000,000	9/1/2020		
Black Vol:	48,833	XVZ02752 /	AC75011700443	209159		
			48,833	SymQuest Group, Inc.		
2 Attorney's Office	Canon IR C5550i Color Photocopier 50 CPM RADF Duplex 4-Paper Drawer LCT Finisher 3-Hole Punch CIF-Print-Scan-Fax-Hard Drive for Secure Print	Konica Minolta BHC550i 55 CPM~ RADF Duplex LCT-Paper 11 X 17 Finisher 3-Hole Punch-Scan-Fax-Post Script-Hard Drive for Secure Print-Airprint	New	New	New	New
	(Lease Return)					
	0	02/19	3,000,000	2/1/2020		
Black Vol:	126,716	XUG03055 /	AA7P011701174	209168		
Color Vol:	6,961		126,716	SymQuest Group, Inc.		
			6,961			

NOTE: FIN = Finisher; CIF = Computer Interface; M = Move; F = From; T = Trade;
C/O = Close Out; CPM = Copies per Minute; N/C = No Charge Exchange;

Sullivan County NH	Present Equipment	1st Year Equipment	2nd Year	3rd Year	4th Year	5th Year
BuildingName	Present Meter/Survey Date	Estimated Life Date Introduced				
Room	Estimated Life Date Introduced	Serial Number Vendor ID	Proposed IP_Address:			
# Students	Serial Number / Present IP Address	Projected Black Volume				
Annual Volume	Special Notes	Projected Color Volume				
Proposed Annual Volume for Attorney's Office		175,550		6,961		
3 Commissioners Office 192.168.14.48 (Close Out)	Brother MFC L3770cdw Color Laser MFP 25 CPM Duplex Sort-Scan-Fax-NIC- Postscript 0 (Trade) 500,000 11/18	Close Out Due to Combining and/or Low Volumes	Close Out	Close Out	Close Out	Close Out
Black Vol: 11,926	U65180D1N410319 /	0				
Color Vol: 8,958		0				
4 Commissioners Office 192.168.14.69 (Close Out)	BROTHER HL-L2360D series Black Network Printer 32 CPM Duplex Sort- NIC-Postscript 0 (Trade) 250,000 04/14	Close Out Due to Combining and/or Low Volumes	Close Out	Close Out	Close Out	Close Out
Black Vol: 6,338	U63883K5N255836 /	0				
		0				
7 Commissioners Office Main Office	CANON iR-ADV 4545 Black Photocopier 45 CPM RADF Duplex 4-Paper Drawer LCT Finisher 3-Hole Punch CIF-Print-Scan- Fax-Hard Drive for Secure Print 0 (Lease Return) 1,000,000 01/17	Konica Minolta BHC550i 55 CPM~ RADF Duplex LCT-Paper 11 X 17 Internal Finisher 3-Hole Punch-Scan- Fax-Post Script-Hard Drive for Secure Print-Airprint 3,000,000 2/1/2020 AA7P011701098 209163	New	New	New	New
Black Vol: 62,573	XVR01751 /	66,402 SymQuest Group, Inc. 13,484				

NOTE: FIN = Finisher; CIF = Computer Interface; M = Move; F = From; T = Trade;
C/O = Close Out; CPM = Copies per Minute; N/C = No Charge Exchange;

Sullivan County NH	Present Equipment	1st Year Equipment	2nd Year	3rd Year	4th Year	5th Year
BuildingName	Present Meter/Survey Date	Estimated Life Date Introduced				
Room	Estimated Life Date Introduced	Serial Number Vendor ID	Proposed IP_Address:			
# Students	Serial Number / Present IP Address	Projected Black Volume				
Annual Volume	Special Notes	Projected Color Volume				
8 Commissioners Office Main Office	BROTHER HL-L8260CDW Color Network Printer 33 CPM Duplex Sort-NIC- Postscript 0 (Trade) 03/17	Close Out Due to Combining and/or Low Volumes	Close Out	Close Out	Close Out	Close Out
Black Vol: 3,829	U64641M7J170717 /	0				
Color Vol: 4,526		0				
Proposed Annual Volume for Commissioners Office		66,402	13,484			
12 Corrections 192.168.130.251 (Close Out)	Lexmark MS823dn Black Network Printer 65 CPM Duplex Sort-NIC-Postscript- Airprint 0 (Trade) 500,000 07/18	Close Out Due to Combining and/or Low Volumes	Close Out	Close Out	Close Out	Close Out
Black Vol: 6,338	406495001C9BZ /	0				
		0				
13 Corrections Admin	CANON iR-ADV 4545 Black Photocopier 45 CPM RADF Duplex 4-Paper Drawer LCT Finisher 3-Hole Punch CIF-Print-Scan- Fax-Hard Drive for Secure Print 0 (Lease Return) 1,000,000 01/17	Konica Minolta BH550i 55 CPM ~ RADF Duplex (LCT if under 1,500 Capacity) Finisher 3-Hole Punch CIF- Print-Scan-Fax-Post Script-Hard Drive for Secure Print-Airprint 3,000,000 9/1/2020 AC75011700452 209160 58,509 SymQuest Group, Inc.	New	New	New	New
Black Vol: 59,509	XVR02447 /					

NOTE: FIN = Finisher; CIF = Computer Interface; M = Move; F = From; T = Trade;
C/O = Close Out; CPM = Copies per Minute; N/C = No Charge Exchange;

Sullivan County NH	Present Equipment	1st Year Equipment	2nd Year	3rd Year	4th Year	5th Year
BuildingName	Present Meter/Survey Date	Estimated Life Date Introduced				
Room	Estimated Life Date Introduced	Serial Number Vendor ID	Proposed IP_Address:			
# Students	Serial Number / Present IP Address	Projected Black Volume				
Annual Volume	Special Notes	Projected Color Volume				
14 Corrections Cassey Hoyt	Additional Device Black Photocopier 0 CPM	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort-Post Script-Airprint	New	New	New	New
	0	1,000,000 6/1/2019				
	Black Vol: /	ACET011008299 144182 500 SymQuest Group, Inc.				
15 Corrections CCC Reception	Additional Device Black Photocopier 0 CPM	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort-Post Script-Airprint	New	New	New	New
	0	1,000,000 6/1/2019				
	Black Vol: /	ACET011008286 144183 500 SymQuest Group, Inc.				
16 Corrections Chad Perron	Additional Device Black Photocopier 0 CPM	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort-Post Script-Airprint	New	New	New	New
	0	1,000,000 6/1/2019				
	Black Vol: /	ACET011006556 144184 500 SymQuest Group, Inc.				

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Sullivan County NH	Present Equipment	1st Year Equipment	2nd Year	3rd Year	4th Year	5th Year
BuildingName	Present Meter/Survey Date	Estimated Life Date Introduced				
Room	Estimated Life Date Introduced	Serial Number Vendor ID	Proposed IP_Address:			
# Students	Serial Number / Present IP Address	Projected Black Volume				
Annual Volume	Special Notes	Projected Color Volume				
17 Corrections Clinicians Office	Additional Device Black Photocopier 0 CPM 0	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort- Post Script-Airprint 1,000,000 6/1/2019 ACET011006537 144185 500 SymQuest Group, Inc.	New	New	New	New
Black Vol:	/					
18 Corrections Donna Magee	Additional Device Black Photocopier 0 CPM 0	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort- Post Script-Airprint 1,000,000 6/1/2019 ACET011006550 144186 500 SymQuest Group, Inc.	New	New	New	New
Black Vol:	/					
19 Corrections Female Treatment	Additional Device Black Photocopier 0 CPM 0	Close Out Due to Combining and/or Low Volumes	Close Out	Close Out	Close Out	Close Out
Black Vol:	/	0 0				

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Sullivan County NH	Present Equipment	1st Year Equipment	2nd Year	3rd Year	4th Year	5th Year
BuildingName	Present Meter/Survey Date	Estimated Life Date Introduced				
Room	Estimated Life Date Introduced	Serial Number Vendor ID	Proposed IP_Address:			
# Students	Serial Number / Present IP Address	Projected Black Volume				
Annual Volume	Special Notes	Projected Color Volume				
20 Corrections John Miliken	Additional Device Black Photocopier 0	Konica Minolta BH4000i 42 PPM ~	New	New	New	New
	CPM	Duplex Standard Paper Drawer-Sort- Post Script-Airprint				
	0	1,000,000 6/1/2019				
	Black Vol: /	ACET011006552 144188 500 SymQuest Group, Inc.				
21 Corrections Male Treatment	Additional Device Black Photocopier 0	Konica Minolta BH4000i 42 PPM ~	New	New	New	New
	CPM	Duplex Standard Paper Drawer-Sort- Post Script-Airprint				
	0	1,000,000 6/1/2019				
	Black Vol: /	ACET011006553 144189 500 SymQuest Group, Inc.				
22 Corrections Matt Lockhart	Additional Device Black Photocopier 0	Konica Minolta BH4000i 42 PPM ~	New	New	New	New
	CPM	Duplex Standard Paper Drawer-Sort- Post Script-Airprint				
	0	1,000,000 6/1/2019				
	Black Vol: /	ACET011006554 144190 500 SymQuest Group, Inc.				

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Sullivan County NH		Present Equipment	1st Year Equipment	2nd Year	3rd Year	4th Year	5th Year
BuildingName		Present Meter/Survey Date	Estimated Life Date Introduced				
Room		Estimated Life Date Introduced	Serial Number Vendor ID	Proposed IP_Address:			
# Students		Serial Number / Present IP Address	Projected Black Volume				
Annual Volume		Special Notes	Projected Color Volume				
23 Corrections Nurse Office		Additional Device Black Photocopier 0 CPM	Konica Minolta Bizhub 4020i 42 CPM~ RADE Duplex 500 Sheets Max paper 8 1/2 X 14 Sort Scan-Fax-Post Script-Airprint	New	New	New	New
		0	1,000,000 7/1/2020				
Black Vol:		/	ACER011003272 127110				
			500 SymQuest Group, Inc.				
24 Corrections Nursing		Additional Device Black Photocopier 0 CPM	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort-Post Script-Airprint	New	New	New	New
		0	1,000,000 6/1/2019				
Black Vol:		/	ACET011008294 144192				
			500 SymQuest Group, Inc.				
25 Corrections Office Manager		HP Color Laser Jet M454dn Color Network Printer 28 CPM Duplex Sort-NIC-Postscript-Airprint	Konica Minolta BHC3300i 35 PPM ~ Duplex Sort 300 Paper Supply-Post Script-Airprint	New	New	New	New
		0 (Trade)	750,000 4/1/2019				
Black Vol:	3,829	500,000 06/19	AAJT011201976 144196				
Color Vol:	4,526	VNB3S12539 /	3,829 SymQuest Group, Inc.				
			4,526				

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Sullivan County NH	Present Equipment	1st Year Equipment	2nd Year	3rd Year	4th Year	5th Year
BuildingName	Present Meter/Survey Date	Estimated Life Date Introduced				
Room	Estimated Life Date Introduced	Serial Number Vendor ID	Proposed IP_Address:			
# Students	Serial Number / Present IP Address	Projected Black Volume				
Annual Volume	Special Notes	Projected Color Volume				
26 Corrections Old Jail	Canon IR ADV 4535 Black Photocopier 45 CPM RADF Duplex 4-Paper Drawer LCT Finisher 3-Hole Punch CIF-Print-Scan-Fax-Hard Drive for Secure Print	Konica Minolta BH550i 55 CPM ~ RADE Duplex (LCT if under 1,500 Capacity) Finisher 3-Hole Punch CIF-Print-Scan-Fax-Post Script-Hard Drive for Secure Print-Airprint	New	New	New	New
	0 (Lease Return)					
	1,000,000 02/16	3,000,000 9/1/2020				
Black Vol:	53,300 XVZ02749 /	AC75011700465 209161				
		53,300 SymQuest Group, Inc.				
27 Corrections Sean Coughlin	Additional Device Black Photocopier 0 CPM	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort-Post Script-Airprint	New	New	New	New
	0					
		1,000,000 6/1/2019				
Black Vol:	/	ACET011008301 144193				
		400 SymQuest Group, Inc.				
28 Corrections SPOTS	Additional Device Black Photocopier 0 CPM	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort-Post Script-Airprint	New	New	New	New
	0					
		1,000,000 6/1/2019				
Black Vol:	/	ACET011006558 144187				
		400 SymQuest Group, Inc.				

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Sullivan County NH	Present Equipment	1st Year Equipment	2nd Year	3rd Year	4th Year	5th Year
BuildingName	Present Meter/Survey Date	Estimated Life Date Introduced				
Room	Estimated Life Date Introduced	Serial Number Vendor ID	Proposed IP_Address:			
# Students	Serial Number / Present IP Address	Projected Black Volume				
Annual Volume	Special Notes	Projected Color Volume				
29 Corrections Witney Davis	Additional Device Black Photocopier 0 CPM	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort- Post Script-Airprint	New	New	New	New
	0	1,000,000 6/1/2019				
Black Vol:	/	ACET011008303 144195				
		1,038 SymQuest Group, Inc.				
Proposed Annual Volume for Corrections		122,476		4,526		
30 Nursing Home MacConnell	BROTHER MFC-L5800DW Black Laser MFP 42 CPM Duplex Sort-Scan-Fax-NIC- Postscript	Konica Minolta Bizhub 4020i 42 CPM~ RADF Duplex 500 Sheets Max paper 8 1/2 X 14 Sort Scan-Fax-Post Script- Airprint	New	New	New	New
	0 (Trade)	1,000,000 7/1/2020				
Black Vol:	9,292	500,000 03/16				
	U64201M0N561521 /	ACER011003494 144198				
		9,292 SymQuest Group, Inc.				
31 Nursing Home Stearns 2	BROTHER MFC-L5800DW Black Laser MFP 42 CPM Duplex Sort-Scan-Fax-NIC- Postscript	Konica Minolta Bizhub 4020i 42 CPM~ RADF Duplex 500 Sheets Max paper 8 1/2 X 14 Sort Scan-Fax-Post Script- Airprint	New	New	New	New
	0 (Trade)	1,000,000 7/1/2020				
Black Vol:	9,292	500,000 03/16				
	U64221G8N809769 /	ACER011003364 144199				
		9,292 SymQuest Group, Inc.				

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C/O = Close Out; CPM = Copies per Minute; N/C = No Charge Exchange;

Sullivan County NH	Present Equipment	1st Year Equipment	2nd Year	3rd Year	4th Year	5th Year
BuildingName	Present Meter/Survey Date	Estimated Life Date Introduced				
Room	Estimated Life Date Introduced	Serial Number Vendor ID	Proposed IP_Address:			
# Students	Serial Number / Present IP Address	Projected Black Volume				
Annual Volume	Special Notes	Projected Color Volume				
32 Nursing Home 10.0.10.70	HP 4500 G510n-z Color Ink Jet MFP 28 CPM Sort-Scan-Fax-NIC-Postscript 0 (Trade) 03/03	Close Out Due to Combining and/or Low Volumes	Close Out	Close Out	Close Out	Close Out
Black Vol: 2,000	CN1ATK40YF05HR /	0				
Color Vol:		0				
33 Nursing Home Stearns 1	BROTHER MFC-L5850DW Black Laser MFP 42 CPM Duplex Sort-Scan-Fax-NIC- Postscript 0 (Trade) 500,000 03/17	Konica Minolta Bizhub 4020i 42 CPM~ RADF Duplex 500 Sheets Max paper 8 1/2 X 14 Sort Scan-Fax-Post Script- Airprint 1,000,000 7/1/2020 ACER011003467 144200	New	New	New	New
Black Vol: 9,292	U64221E7N447686 /	9,292 SymQuest Group, Inc.				
34 Nursing Home Reception	HP Laser Jet Pro M201dw Black Network Printer 26 CPM Duplex Sort-NIC- Postscript-Airprint 0 (Trade) 500,000 08/14	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort- Post Script-Airprint 1,000,000 6/1/2019 ACET011007858 144204	New	New	New	New
Black Vol: 6,338	VNB3F24374 /	6,338 SymQuest Group, Inc.				

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Sullivan County NH	Present Equipment	1st Year Equipment	2nd Year	3rd Year	4th Year	5th Year
BuildingName	Present Meter/Survey Date	Estimated Life Date Introduced				
Room	Estimated Life Date Introduced	Serial Number Vendor ID	Proposed IP_Address:			
# Students	Serial Number / Present IP Address	Projected Black Volume				
Annual Volume	Special Notes	Projected Color Volume				
35 Nursing Home Stearns 3	BROTHER MFC-L5800DW Black Laser MFP 42 CPM Duplex Sort-Scan-Fax-NIC-Postscript	Konica Minolta Bizhub 4020i 42 CPM~ RADE Duplex 500 Sheets Max paper 8 1/2 X 14 Sort Scan-Fax-Post Script-Airprint	New	New	New	New
	0 (Trade)	1,000,000 7/1/2020				
Black Vol: 9,292	500,000 03/16	ACER011003453 144201				
	U64201C8N708663 /	9,292 SymQuest Group, Inc.				
36 Nursing Home 10.0.20.20	Oki-Data C331 Color Network Printer 25 CPM Sort-NIC-Postscript	Close Out Due to Combining and/or Low Volumes	Close Out	Close Out	Close Out	Close Out
	0 (Trade)					
Black Vol: 3,829	250,000 01/16					
Color Vol: 4,526	AK5C003628 /	0				
		0				
37 Nursing Home 10.0.20.24	Oki-Data B720n Black Network Printer 47 CPM Sort-NIC-Postscript	Close Out Due to Combining and/or Low Volumes	Close Out	Close Out	Close Out	Close Out
	0 (Trade)					
Black Vol: 6,338	500,000 01/03					
	AS0A160981A0 /	0				
		0				

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Sullivan County NH	Present Equipment	1st Year Equipment	2nd Year	3rd Year	4th Year	5th Year
BuildingName	Present Meter/Survey Date	Estimated Life Date Introduced				
Room	Estimated Life Date Introduced	Serial Number Vendor ID	Proposed IP_Address:			
# Students	Serial Number / Present IP Address	Projected Black Volume				
Annual Volume	Special Notes	Projected Color Volume				
38 Nursing Home 10.0.20.54	HP Laser Jet Pro M402n Black Network Printer 40 CPM Duplex Sort-NIC- Postscript-Airprint 0 (Trade) 750,000 10/15	Close Out Due to Combining and/or Low Volumes	Close Out	Close Out	Close Out	Close Out
Black Vol: 6,338	PHBHL74155 /	0 0				
39 Nursing Home Central Supply	HP Officejet Pro 8730 Color Ink Jet MFP 24 CPM Sort-Scan-Fax-NIC-Postscript 0 (Trade) 250,000 05/16	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort- Post Script-Airprint 1,000,000 6/1/2019 ACET011007861 144205 3,000 SymQuest Group, Inc.	New	New	New	New
Black Vol: 2,000	CN74OE60MY /					
Color Vol:						
40 Nursing Home Human Resources	HP Officejet Pro 7740 Color Ink Jet MFP 22 CPM Wide Format Printer Sort-Scan- Fax-NIC-Postscript 0 (Trade) 250,000 08/16	Konica Minolta Bizhub 4020i 42 CPM~ RADE Duplex 500 Sheets Max paper 8 1/2 X 14 Sort Scan-Fax-Post Script- Airprint 1,000,000 7/1/2020 ACER011005023 127109 3,000 SymQuest Group, Inc.	New	New	New	New
Black Vol: 2,000	CN09E5508X /					
Color Vol:						

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Sullivan County NH	Present Equipment	1st Year Equipment	2nd Year	3rd Year	4th Year	5th Year
BuildingName	Present Meter/Survey Date	Estimated Life	Date Introduced			
Room	Estimated Life	Date Introduced	Serial Number	Vendor ID	Proposed IP_Address:	
# Students	Serial Number / Present IP Address	Projected Black Volume				
Annual Volume	Special Notes	Projected Color Volume				
41 Nursing Home 10.0.20.88	HP Laser Jet Pro M402n Black Network Printer 40 CPM Duplex Sort-NIC- Postscript-Airprint 0 (Trade) 750,000 10/15	Close Out Due to Combining and/or Low Volumes		Close Out	Close Out	Close Out
Black Vol: 6,338	PHBHL75799 /	0 0				
42 Nursing Home Staffing Coordinator	BROTHER MFC-L5800DW Black Laser MFP 42 CPM Duplex Sort-Scan-Fax-NIC- Postscript 0 (Trade) 500,000 03/16	Konica Minolta Bizhub 4020i 42 CPM~ RADF Duplex 500 Sheets Max paper 8 1/2 X 14 Sort Scan-Fax-Post Script- Airprint 1,000,000 7/1/2020 ACER011003374 144202	New	New	New	New
Black Vol: 9,292	U64201A9N995754 /	9,292 SymQuest Group, Inc.				
43 Nursing Home Dietary Asst. Director	Oki-Data B731dn Black Network Printer 55 CPM Duplex Sort-NIC-Postscript 0 (Trade) 07/13	Konica Minolta BH4000i 42 PPM ~ Duplex 2nd Paper Drawer-Sort-Post Script-Airprint 1,000,000 6/1/2019 ACET011007859 144203	New	New	New	New
Black Vol: 6,338	AK89013860 /	8,338 SymQuest Group, Inc.				

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Sullivan County NH		Present Equipment	1st Year Equipment	2nd Year	3rd Year	4th Year	5th Year
BuildingName		Present Meter/Survey Date	Estimated Life Date Introduced				
Room		Estimated Life Date Introduced	Serial Number Vendor ID	Proposed IP_Address:			
# Students		Serial Number / Present IP Address	Projected Black Volume				
Annual Volume		Special Notes	Projected Color Volume				
<hr/>							
44	Nursing Home Activities	Brother MFC-L8610cdw Color Laser MFP 33 CPM Duplex Sort-Scan-Fax-NIC- Postscript	Konica Minolta BHC550i 55 CPM~ RADE Duplex LCT-Paper 11 X 17 Finisher 3-Hole Punch-Scan-Post Script- Hard Drive for Secure Print-Airprint	New	New	New	New
		0 (Trade)	3,000,000 2/1/2020				
Black Vol:	11,926	500,000 03/17	AA7P011701203 209167				
Color Vol:	8,958	U64645M8J332361 /	19,755 SymQuest Group, Inc. 8,958				
<hr/>							
45	Nursing Home Admin Assistant	Additional Device Black Photocopier 0 CPM	Konica Minolta BHC3300i 35 PPM ~ Duplex Sort 300 Paper Supply-Post Script-Airprint	New	New	New	New
		0	750,000 4/1/2019				
Black Vol:		/	ACER011003335 144197				
			8,843 SymQuest Group, Inc. 2,500				
<hr/>							
46	Nursing Home Classroom	Canon C5535 Color Photocopier 35 CPM RADE Duplex 4-Paper Drawer LCT Finisher 3-Hole Punch CIF-Print-Scan-Fax- Hard Drive for Secure Print	Konica Minolta BHC550i 55 CPM~ RADE Duplex LCT-Paper 11 X 17 Finisher 3-Hole Punch-Scan-Fax-Post Script-Hard Drive for Secure Print- Airprint	New	New	New	New
		0 (Lease Return)	3,000,000 2/1/2020				
Black Vol:	47,657	750,000 08/16	AA7P011701220 209166				
Color Vol:	14,078	XUW04168 /	47,657 SymQuest Group, Inc. 14,078				
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Sullivan County NH	Present Equipment	1st Year Equipment	2nd Year	3rd Year	4th Year	5th Year
BuildingName	Present Meter/Survey Date	Estimated Life Date Introduced				
Room	Estimated Life Date Introduced	Serial Number Vendor ID	Proposed IP_Address:			
# Students	Serial Number / Present IP Address	Projected Black Volume				
Annual Volume	Special Notes	Projected Color Volume				
47 Nursing Home Classroom	HP Color Laser Jet M452dn Color Network Printer 28 CPM Duplex Sort-NIC-Postscript-Airprint	Close Out Due to Combining and/or Low Volumes	Close Out	Close Out	Close Out	Close Out
	0 (Trade)					
	500,000 10/15					
Black Vol: 3,829	JPBDQ03717 /	0				
Color Vol:		0				
48 Nursing Home Mailroom	Canon IR C5550i Color Photocopier 50 CPM RADF Duplex 4-Paper Drawer LCT Finisher 3-Hole Punch CIF-Print-Scan-Fax-Hard Drive for Secure Print	Konica Minolta BHC550i 55 CPM~ RADF Duplex LCT-Paper 11 X 17 Finisher 3-Hole Punch-Scan-Fax-Post Script-Hard Drive for Secure Print-Airprint	New	New	New	New
	0 (Lease Return)					
	3,000,000 02/19	3,000,000 2/1/2020				
Black Vol: 148,170	XUG02879 /	AA7P011701128 209165				
Color Vol: 18,586		148,170 SymQuest Group, Inc. 18,586				
49 Nursing Home Social Services	Brother DCP-7065DN Black Laser MFP 27 CPM	Konica Minolta BHC3300i 35 PPM ~ Duplex Sort 300 Paper Supply-Post Script-Airprint	New	New	New	New
	0 (Trade)					
	500,000 05/11	750,000 4/1/2019				
Black Vol:	/	AAJT011201984 144207				
		8,000 SymQuest Group, Inc. 2,026				

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Sullivan County NH	Present Equipment	1st Year Equipment	2nd Year	3rd Year	4th Year	5th Year
BuildingName	Present Meter/Survey Date	Estimated Life Date Introduced				
Room	Estimated Life Date Introduced	Serial Number Vendor ID	Proposed IP_Address:			
# Students	Serial Number / Present IP Address	Projected Black Volume				
Annual Volume	Special Notes	Projected Color Volume				
50 Nursing Home Stearn 1 Copy Room	Canon IR-ADV 4551i Black Photocopier 51 CPM RADF Duplex 4-Paper Drawer LCT Finisher 3-Hole Punch CIF-Print-Scan- Fax-Hard Drive for Secure Print	Konica Minolta BH550i 55 CPM ~ RADE Duplex (LCT if under 1,500 Capacity) Finisher 3-Hole Punch CIF- Print-Scan-Fax-Post Script-Hard Drive for Secure Print-Airprint	New	New	New	New
	0 (Lease Return)					
	1,000,000 01/17	3,000,000 9/1/2020				
Black Vol:	130,425 XVJ01806 /	AC75011700461 209162				
		130,425 SymQuest Group, Inc.				
Proposed Annual Volume for Nursing Home			429,986	46,148		
5 Sheriff's Office Chief Deputy	HP Laser Jet 1006 Black Network Printer 17 CPM	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort- Post Script-Airprint	New	New	New	New
	0 (Trade)					
	200,000 11/06	1,000,000 6/1/2019				
Black Vol:	/	ACET011008196 144179				
		6,000 SymQuest Group, Inc.				
6 Sheriff's Office Deputy	HP Laser Jet 1006 Black Network Printer 17 CPM	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort- Post Script-Airprint	New	New	New	New
	0					
	200,000 11/06	1,000,000 6/1/2019				
Black Vol:	/	ACET011008277 144180				
		6,000 SymQuest Group, Inc.				

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Sullivan County NH	Present Equipment	1st Year Equipment	2nd Year	3rd Year	4th Year	5th Year
BuildingName	Present Meter/Survey Date	Estimated Life Date Introduced				
Room	Estimated Life Date Introduced	Serial Number Vendor ID	Proposed IP_Address:			
# Students	Serial Number / Present IP Address	Projected Black Volume				
Annual Volume	Special Notes	Projected Color Volume				
9 Sheriff's Office Sheriff's Office	HP Laser Jet 600 M602 Black Network Printer 52 CPM Duplex Sort-NIC- Postscript 0 (Trade) 3,000,000 11/11	Konica Minolta BH4000i 42 PPM ~ Duplex 2nd Paper Drawer-Sort-Post Script-Airprint 1,000,000 6/1/2019 ACET011008351 135999	New	New	New	New
Black Vol: 6,338	CNCCF9X0HL /	6,338 SymQuest Group, Inc.				
10 Sheriff's Office Sheriff's Office	Xerox Versalink C605 X Color Laser MFP 55 CPM Duplex Sort-Scan-Fax-NIC- Postscript 0 (Lease Return) 500,000 03/17	Konica Minolta BHC550i 55 CPM~ RADF Duplex LCT-Paper 11 X 17 Finisher 3-Hole Punch-Scan-Fax-Post Script-Hard Drive for Secure Print- Airprint 3,000,000 2/1/2020 AA7P011701109 209164	New	New	New	New
Black Vol: 11,926 Color Vol: 8,958	5RB744838 /	13,190 SymQuest Group, Inc. 8,958				
11 Sheriff's Office Sheriff's Office	HP Laser Jet P1102w Black Network Printer 19 CPM 0 (Trade) 200,000 04/10	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort- Post Script-Airprint 1,000,000 6/1/2019 ACET011008285 144181	New	New	New	New
Black Vol:	/	5,000 SymQuest Group, Inc.				
Proposed Annual Volume for Sheriff's Office		36,528		8,958		

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**Sullivan County NH
14 Main Street
Newport, NH 03773**

	PRESENT	PROPOSED
Black Photocopiers	354,639	291,067
Black Photocopiers - Existing - Recon	0	0
High Production Black Photocopiers	0	0
Color Photocopiers - Black Volume	322,543	421,890
Color Photocopiers - Color Volume	39,626	71,026
Color Photocopiers - Existing - Recon	0	0
High Production Color Photocopiers	0	0
Black Network Printers	50,704	47,352
Black Laser MFP	46,460	49,960
Color Network Printers - Black Volume	15,316	20,672
Color Network Printers - Color Volume	13,578	9,052
Color Laser MFP - Black Volume	35,778	0
Color Laser MFP - Color Volume	26,874	0
Color Ink Jet Local Printers - Black Volume	0	0
Color Ink Jet Local Printers - Color Volume	0	0
Color Ink Jet MFP - Black Volume	6,000	0
Color Ink Jet MFP - Color Volume	0	0
<i>Total Black Volume</i>	831,441	830,941
<i>Total Color Volume</i>	80,078	80,078
TOTALS	911,518	911,018

Recommended Vendor(s): Symquest with Konica Minolta Copiers & Printers (Low Bid)

Upgrade Date on 6/15/2022

BLACK VOLUME

Vendor/Equipment	Proposed 100% Volume	Cost Per Copy	Proj Full-Year Billing
SymQuest Group, Inc. / Color Photocopier	421,890	\$0.00320	\$1,350.05
SymQuest Group, Inc. / Color Network Printer	20,672	\$0.00613	\$126.72
SymQuest Group, Inc. / Black Photocopier	291,067	\$0.00320	\$931.41
SymQuest Group, Inc. / Black Network Printer	47,352	\$0.00613	\$290.27
SymQuest Group, Inc. / Black Laser MFP	49,960	\$0.00613	\$306.25
Sub Totals	830,941	\$0.00362	\$3,004.70

COLOR VOLUME

Vendor/Equipment	Proposed 100% Volume	Cost Per Copy	Proj Full-Year Billing
SymQuest Group, Inc. / Color Network Printer	9,052	\$0.06125	\$554.44
SymQuest Group, Inc. / Color Photocopier	71,026	\$0.03885	\$2,759.34
Sub Totals	80,078	\$0.04138	\$3,313.78



SULLIVAN COUNTY

Serving the communities of:

Acworth, Charlestown, Claremont, Cornish, Croydon, Goshen, Grantham, Langdon, Lempster, Newport, Plainfield, Springfield, Sunapee, Unity and Washington

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Fax (603)863-9314
[commissioners@
sullivancountynh.gov](mailto:commissioners@sullivancountynh.gov)

County Manager

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Fax (603)863-9314
[manager@
sullivancountynh.gov](mailto:manager@sullivancountynh.gov)

Dept. of Corrections

103 County Farm Road
Unity, NH 03743
(603)542-8717
Fax (603)542-0239
doc@sullivancountynh.gov

Facilities & Operations

5 Nursing Home Drive
Unity, NH 03743
(603)542-9511 x230
Fax (603)542-2829
[facilities@
sullivancountynh.gov](mailto:facilities@sullivancountynh.gov)

Human Resources & Payroll

5 Nursing Home Drive
Unity, NH 03743
(603)542-9511 x212
Fax (603)542-9214
[humanresources@
sullivancountynh.gov](mailto:humanresources@sullivancountynh.gov)

Natural Resources

95 County Farm Road
Unity, NH 03743
(603)542-4891
Fax (603)542-2829
natural@sullivancountynh.gov

Sullivan County Health Care

5 Nursing Home Drive
Unity, NH 03743
(603)542-9511
Fax (603)542-9214
[nursinghome@
sullivancountynh.gov](mailto:nursinghome@sullivancountynh.gov)

April 8, 2022

Canon Financial Services
14904 Collections Center Drive
Chicago, IL 60693-0149

Lease Number: S0839959.01

To whom it may concern:

Please accept this letter as our written notice of cancellation of your copier and/or printer leasing services, to be effective on the end term of our contract June 12, 2022. If the replacement equipment is not available by June 12, 2022, we would like to have a month-to-month rate that is equal to the current monthly lease amount.

Our organization will also obtain final meter reads to close out our account when this equipment has been replaced. Once this is done, we will expect a reconciliation invoice for usage to close out this equipment contract.

We would like information on the return authorization. Once we receive the RA, we will ship the machines back to you.

Current Equipment List on Lease:

<i>Make/Model</i>	<i>Serial Number</i>
Canon IR ADV 4535	XVZ02752
Canon IR C5550i	XUG03055
CANON iR-ADV 4545	XVR01751
CANON iR-ADV 4545	XVR02447
Canon IR ADV 4535	XVZ02749

Canon C5535	XUW04168
Canon IR C5550i	XUG02879
Canon IR-ADV 4551i	XVJ01806

Sincerely,

A handwritten signature in black ink, appearing to read "Derek Ferland", written in a cursive style.

Derek Ferland
County Manager

SULLIVAN COUNTY CLOSE-OUT METERS

	TOTAL	BLACK	COLOR
XVR01751	255,530		
XVJ01806	515,275		
XUG02879	687,188	610,069	77,109
XUG03055	538,294	505,819	32,475
XVR02447	238,117		
XUW04168	272,022	211,189	60,833
XVZ02749	214,054		
XVZ02752	195,922		



Sullivan County NH
2022-2023 / July Pre-Bill
Summary by Building

Black Prints

Building	Projected Volume	Projected Charges	Pre-Billing Volume	Pre-Billing Charges
Attorney's Office	175,549	\$561.76	87,775	\$280.88
Commissioners Office	66,402	\$212.49	33,201	\$106.24
Corrections	122,476	\$423.18	61,239	\$211.59
Nursing Home	429,986	\$1,622.01	214,995	\$811.01
Sheriff's Office	36,528	\$185.27	18,264	\$92.63
Black Prints Totals	830,941	\$3,004.70	415,474	\$1,502.37

Building	Projected Volume	Projected Charges	Pre-Billing Volume	Pre-Billing Charges
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Color Prints

Attorney's Office	6,961	\$270.43	3,481	\$135.24
Commissioners Office	13,484	\$523.85	6,742	\$261.93
Corrections	4,526	\$277.22	2,263	\$138.61
Nursing Home	46,148	\$1,894.23	23,074	\$947.12
Sheriff's Office	8,958	\$348.02	4,479	\$174.01
Color Prints Totals	80,077	\$3,313.76	40,039	\$1,656.90

Total Pre-Billing Invoice	911,018	\$6,318.46	455,513	\$3,159.26
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SCHEDULE A SERVICE & SUPPLY CONTRACT - CLIENT

Client: Sullivan County NH
Contracted Vendor: SymQuest Group, Inc.
Term: 07/1/2022 through 6/30/2027

<i>Building</i>	<i>Room</i>	<i>Model</i>	<i>Serial Number</i>	<i>Machine Type</i>	<i>Black Cost/Copy</i>	<i>COLOR Cost/Copy</i>
Attorney's Office	Attorney's Office	Konica Minolta BH550i	AC75011700443	Black Photocopier	\$0.00320	\$0.03885
Attorney's Office	Legal Secretaries	Konica Minolta BHC550i	AA7P011701174	Color Photocopier	\$0.00320	\$0.03885
Commissioners Office	Main Office	Konica Minolta BHC550i	AA7P011701098	Color Photocopier	\$0.00320	\$0.03885
Corrections	Admin	Konica Minolta BH550i	AC75011700452	Black Photocopier	\$0.00320	\$0.03885
Corrections	Cassey Hoyt	Konica Minolta BH4000i	ACET011008299	Black Network Printer	\$0.00613	\$0.00000
Corrections	CCC Reception	Konica Minolta BH4000i	ACET011008286	Black Network Printer	\$0.00613	\$0.00000
Corrections	Chad Perron	Konica Minolta BH4000i	ACET011006556	Black Network Printer	\$0.00613	\$0.00000
Corrections	Clinicians Office	Konica Minolta BH4000i	ACET011006537	Black Network Printer	\$0.00613	\$0.00000
Corrections	Donna Magee	Konica Minolta BH4000i	ACET011006550	Black Network Printer	\$0.00613	\$0.00000
Corrections	John Miliken	Konica Minolta BH4000i	ACET011006552	Black Network Printer	\$0.00613	\$0.00000
Corrections	Male Treatment	Konica Minolta BH4000i	ACET011006553	Black Network Printer	\$0.00613	\$0.00000
Corrections	Matt Lockhart	Konica Minolta BH4000i	ACET011006554	Black Network Printer	\$0.00613	\$0.00000
Corrections	Nurse Office	Konica Minolta Bizhub 4020i	ACER011003272	Black Laser MFP	\$0.00613	\$0.00000
Corrections	Nursing	Konica Minolta BH4000i	ACET011008294	Black Network Printer	\$0.00613	\$0.00000

<i>Building</i>	<i>Room</i>	<i>Model</i>	<i>Serial Number</i>	<i>Machine Type</i>	<i>Black Cost/Copy</i>	<i>COLOR Cost/Copy</i>
Corrections	Office Manager	Konica Minolta BHC3300i	AAJT011201976	Color Network Printer	\$0.00613	\$0.06125
Corrections	Old Jail	Konica Minolta BH550i	AC75011700465	Black Photocopier	\$0.00320	\$0.03885
Corrections	Sean Coughlin	Konica Minolta BH4000i	ACET011008301	Black Network Printer	\$0.00613	\$0.00000
Corrections	SPOTS	Konica Minolta BH4000i	ACET011006558	Black Network Printer	\$0.00613	\$0.00000
Corrections	Witney Davis	Konica Minolta BH4000i	ACET011008303	Black Network Printer	\$0.00613	\$0.00000
Nursing Home	Activities	Konica Minolta BHC550i	AA7P011701203	Color Photocopier	\$0.00320	\$0.03885
Nursing Home	Admin Assistant	Konica Minolta BHC3300i	ACER011003335	Color Network Printer	\$0.00613	\$0.06125
Nursing Home	Central Supply	Konica Minolta BH4000i	ACET011007861	Black Network Printer	\$0.00613	\$0.00000
Nursing Home	Classroom	Konica Minolta BHC550i	AA7P011701220	Color Photocopier	\$0.00320	\$0.03885
Nursing Home	Dietary Asst. Director	Konica Minolta BH4000i	ACET011007859	Black Network Printer	\$0.00613	\$0.00000
Nursing Home	Human Resources	Konica Minolta Bizhub 4020i	ACER011005023	Black Laser MFP	\$0.00613	\$0.00000
Nursing Home	MacConnell	Konica Minolta Bizhub 4020i	ACER011003494	Black Laser MFP	\$0.00613	\$0.00000
Nursing Home	Mailroom	Konica Minolta BHC550i	AA7P011701128	Color Photocopier	\$0.00320	\$0.03885
Nursing Home	Reception	Konica Minolta BH4000i	ACET011007858	Black Network Printer	\$0.00613	\$0.00000
Nursing Home	Social Services	Konica Minolta BHC3300i	AAJT011201984	Color Network Printer	\$0.00613	\$0.06125
Nursing Home	Staffing Coordinator	Konica Minolta Bizhub 4020i	ACER011003374	Black Laser MFP	\$0.00613	\$0.00000
Nursing Home	Stearn 1 Copy Room	Konica Minolta BH550i	AC75011700461	Black Photocopier	\$0.00320	\$0.03885
Nursing Home	Stearns 1	Konica Minolta Bizhub 4020i	ACER011003467	Black Laser MFP	\$0.00613	\$0.00000
Nursing Home	Stearns 2	Konica Minolta Bizhub 4020i	ACER011003364	Black Laser MFP	\$0.00613	\$0.00000
Nursing Home	Stearns 3	Konica Minolta Bizhub 4020i	ACER011003453	Black Laser MFP	\$0.00613	\$0.00000
Sheriff's Office	Chief Deputy	Konica Minolta BH4000i	ACET011008196	Black Network Printer	\$0.00613	\$0.00000

<i>Building</i>	<i>Room</i>	<i>Model</i>	<i>Serial Number</i>	<i>Machine Type</i>	<i>Black Cost/Copy</i>	<i>COLOR Cost/Copy</i>
Sheriff's Office	Deputy	Konica Minolta BH4000i	ACET011008277	Black Network Printer	\$0.00613	\$0.00000
Sheriff's Office	Sheriff's Office	Konica Minolta BHC550i	AA7P011701109	Color Photocopier	\$0.00320	\$0.03885
Sheriff's Office	Sheriff's Office	Konica Minolta BH4000i	ACET011008351	Black Network Printer	\$0.00613	\$0.00000
Sheriff's Office	Sheriff's Office	Konica Minolta BH4000i	ACET011008285	Black Network Printer	\$0.00613	\$0.00000

Subject to change and correction and future additions.

Additional Provisions:

•MST•

SERVICE AND SUPPLY CONTRACT - CLIENT

M.S.T hereby contracts with Sullivan County NH ("Client") to provide comprehensive services, supplies, and maintenance to equipment described on Schedule A ("Equipment") using the Contracted Vendor shown below at a cost per print shown on said Schedule A, commencing on July 1, 2022 and terminating on June 30, 2027. This Service and Supply Contract ("Contract") shall exclude only the cost of paper, transparencies, and staples. Refer to Schedule A for Additional Provisions, if any.

M.S.T. assumes responsibility for all billing and vendor payment. M.S.T. shall invoice Client one-half of the annual projected number of pages multiplied by the cost per print listed on Schedule A. This semi-annual billing will take place July 1 and January 1. Actual meter reads will be collected by M.S.T. either electronically or from Client staff during the month of June. A final Reconciliation spreadsheet and invoice will then be completed and sent to client. Upon payment of each billing invoice during the year, M.S.T. will reimburse Contracted Vendor appropriately. Client is responsible for making payment in full within 30 days of said invoicing to avoid suspension of supplies by Contracted Vendor.

On July 1 of each calendar year during the afore-mentioned term, M.S.T. shall credit Client any unused prepaid pages to Client if fewer copies were made by Client during the Contract period ending on or before June 30 annually than were originally estimated under this Contract for such period. If more pages were consumed than billed in the combined semi-annual billing, an overage invoice will be generated. Following semi-annual billing will be based on previous year volume.

On July 1 of each calendar year during the term of this Contract, M.S.T., at its option, may increase such costs per print under this Service and Supply Contract by 5% or by a percentage equal to the increase during the immediately preceding 12-month period of "The Consumer Price Index for All Urban Consumers (CPI-U) for the U.S. City Average for All Items, 1982-84 = 100," whichever is less.


Client or M.S.T. may terminate Contract at any time with a 30-day written notice. Client will be required to provide final meter reads on all Equipment listed on Schedule A, including those added during the Contract term. Any credits owed to Client after reconciling actual usage versus projected will be paid to Client. Client must return any unused consumables to Contracted Vendor.

AGREED AND ACCEPTED BY:
M.S.T. Government Leasing, LLC

By: Skip Tilton

Title: President/Owner

Date: 6/2/2022

Signature: 

AGREED AND ACCEPTED BY:
Sullivan County NH

By: ~~Mary Bourque~~ **DEREK FERLAND**

Title: **SULLIVAN COUNTY MANAGER**

Date: 20 JUNE 2022

Signature: 



SCHEDULE B WARRANTY

Client: Sullivan County NH
Contracted Vendor: SymQuest Group, Inc.
Term: 7/1/2022 through 6/30/2027

<i>Building</i>	<i>Room</i>	<i>Model</i>	<i>Serial Number</i>	<i>Warranty Life</i>	<i>Model Intro Date</i>
Sheriff's Office	Sheriff's Office	Konica Minolta BHC550i	AA7P011701109	3,000,000	2/1/2020
Sheriff's Office	Sheriff's Office	Konica Minolta BH4000i	ACET011008351	1,000,000	6/1/2019
Sheriff's Office	Sheriff's Office	Konica Minolta BH4000i	ACET011008285	1,000,000	6/1/2019
Attorney's Office	Attorney's Office	Konica Minolta BH550i	AC75011700443	3,000,000	9/1/2020
Attorney's Office	Legal Secretaries	Konica Minolta BHC550i	AA7P011701174	3,000,000	2/1/2020
Commissioners Office	Main Office	Konica Minolta BHC550i	AA7P011701098	3,000,000	2/1/2020
Corrections	Admin	Konica Minolta BH550i	AC75011700452	3,000,000	9/1/2020
Corrections	Cassey Hoyt	Konica Minolta BH4000i	ACET011008299	1,000,000	6/1/2019
Corrections	CCC Reception	Konica Minolta BH4000i	ACET011008286	1,000,000	6/1/2019
Corrections	Chad Perron	Konica Minolta BH4000i	ACET011006556	1,000,000	6/1/2019
Corrections	Clinicians Office	Konica Minolta BH4000i	ACET011006537	1,000,000	6/1/2019
Corrections	Donna Magee	Konica Minolta BH4000i	ACET011006550	1,000,000	6/1/2019
Corrections	John Miliken	Konica Minolta BH4000i	ACET011006552	1,000,000	6/1/2019
Corrections	Male Treatment	Konica Minolta BH4000i	ACET011006553	1,000,000	6/1/2019

<i>Building</i>	<i>Room</i>	<i>Model</i>	<i>Serial Number</i>	<i>Warranty Life</i>	<i>Model Intro Date</i>
Corrections	Matt Lockhart	Konica Minolta BH4000i	ACET011006554	1,000,000	6/1/2019
Corrections	Nurse Office	Konica Minolta Bizhub 4020i	ACER011003272	1,000,000	7/1/2020
Corrections	Nursing	Konica Minolta BH4000i	ACET011008294	1,000,000	6/1/2019
Corrections	Office Manager	Konica Minolta BHC3300i	AAJT011201976	750,000	4/1/2019
Corrections	Old Jail	Konica Minolta BH550i	AC75011700465	3,000,000	9/1/2020
Corrections	Sean Coughlin	Konica Minolta BH4000i	ACET011008301	1,000,000	6/1/2019
Corrections	SPOTS	Konica Minolta BH4000i	ACET011006558	1,000,000	6/1/2019
Corrections	Witney Davis	Konica Minolta BH4000i	ACET011008303	1,000,000	6/1/2019
Nursing Home	Activities	Konica Minolta BHC550i	AA7P011701203	3,000,000	2/1/2020
Nursing Home	Admin Assistant	Konica Minolta BHC3300i	ACER011003335	750,000	4/1/2019
Nursing Home	Central Supply	Konica Minolta BH4000i	ACET011007861	1,000,000	6/1/2019
Nursing Home	Classroom	Konica Minolta BHC550i	AA7P011701220	3,000,000	2/1/2020
Nursing Home	Dietary Asst. Director	Konica Minolta BH4000i	ACET011007859	1,000,000	6/1/2019
Nursing Home	Human Resources	Konica Minolta Bizhub 4020i	ACER011005023	1,000,000	7/1/2020
Nursing Home	MacConnell	Konica Minolta Bizhub 4020i	ACER011003494	1,000,000	7/1/2020
Nursing Home	Mailroom	Konica Minolta BHC550i	AA7P011701128	3,000,000	2/1/2020
Nursing Home	Reception	Konica Minolta BH4000i	ACET011007858	1,000,000	6/1/2019
Nursing Home	Social Services	Konica Minolta BHC3300i	AAJT011201984	750,000	4/1/2019
Nursing Home	Staffing Coordinator	Konica Minolta Bizhub 4020i	ACER011003374	1,000,000	7/1/2020
Nursing Home	Stearn 1 Copy Room	Konica Minolta BH550i	AC75011700461	3,000,000	9/1/2020
Nursing Home	Stearns 1	Konica Minolta Bizhub 4020i	ACER011003467	1,000,000	7/1/2020

<i>Building</i>	<i>Room</i>	<i>Model</i>	<i>Serial Number</i>	<i>Warranty Life</i>	<i>Model Intro Date</i>
Nursing Home	Stearns 2	Konica Minolta Bizhub 4020i	ACER011003364	1,000,000	7/1/2020
Nursing Home	Stearns 3	Konica Minolta Bizhub 4020i	ACER011003453	1,000,000	7/1/2020
Sheriff's Office	Chief Deputy	Konica Minolta BH4000i	ACET011008196	1,000,000	6/1/2019
Sheriff's Office	Deputy	Konica Minolta BH4000i	ACET011008277	1,000,000	6/1/2019

Subject to change and correction and future additions.

Additional Provisions:

If it is deemed necessary to replace a malfunctioning machine then the replacement unit must comply with the following...

- Same Speed or Faster
- Same Volume or less
- Same Introduction Date or Newer

•MST•

WARRANTY

SymQuest Group, Inc. ("Contracted Vendor") hereby warrants to Sullivan County NH ("Client") that, if any such Equipment described on Schedule B attached hereto malfunctions through no fault of Client during the term commencing on July 1, 2022 and terminating on June 30, 2027, and such Equipment cannot be repaired promptly, Contracted Vendor will replace such Equipment with equipment which is equal to or superior in quality and capabilities to the Equipment being replaced, at no cost to Client. Refer to Schedule B for Additional Provisions to this Warranty.

The only exclusions to this Warranty are as follows:

1. This Warranty will expire for an item of Equipment when the Warranty Life of such item of Equipment in number of copies, as shown on Schedule B attached hereto, is exceeded;
2. This Warranty will expire for an item of Equipment at the date which is ten years after such Equipment was first offered for sale or lease by the manufacturer as shown on Schedule B attached hereto.

AGREED AND ACCEPTED BY:
SymQuest Group, Inc.

By: Ken Godzik

Title: VP of Area Sales

Date: 6/3/22

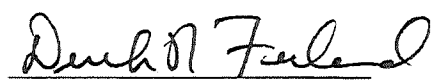
Signature: 

AGREED AND ACCEPTED BY:
Sullivan County NH

By: ~~Mary Bourque~~ **DEREK FERLAND**

SULLIVAN COUNTY MANAGER
Title: ~~Director of Facilities and Operations~~

Date: 20 JUNE 2022

Signature: 

M.S.T. Government Leasing LLC
1491 Eastside River Road
Dummer, NH 03588
800-750-1538

Lease Number: 551

Municipal Lease Purchase Agreement

M.S.T. Government Leasing LLC, a New Hampshire Limited Liability Company with a principal location in Dummer, New Hampshire (the “Lessor”), and the Lessee, indicated on Schedule A attached hereto (the “Lessee”) agree to the lease of equipment subject to the terms of this Agreement and all schedules attached hereto (collectively referred to as the “Lease”).

In consideration of the mutual covenants herein contained, the parties covenant and agree as follows:

1. **EQUIPMENT.** Lessor agrees to lease to Lessee and Lessee agrees to lease from Lessor the equipment listed in Schedule F together with any replacement parts, additions, repairs or accessories now or hereafter permanently incorporated in or affixed to it (the “Equipment”) on the terms and conditions set forth herein.
2. **TERM.** The term of this Lease is set forth in Schedule A (the “Lease Term”).
3. **COMMENCEMENT AND EXPIRATION.** This Lease shall commence upon Lessee’s acceptance of the Equipment (the “Commencement Date”) and continue until the earlier of (i) the end of the Lease Term; (ii) a permitted termination pursuant to Non-Appropriation of Funds (Paragraph 17); (iii) Lessor’s termination of the Lease after Default (Paragraph 19) or (iv) Lessee’s proper exercise of its option (Paragraph 20). Lessor shall have no obligation to Lessee under this Lease if the Equipment, for whatever reason, is not delivered to Lessee within 90 days after Lessee signs this Lease. Lessor shall have no obligation to Lessee under this Lease if Lessee fails to execute and deliver to Lessor an “Acknowledgement and Acceptance of Equipment by Lessee” form within 30 days after the Equipment is delivered to Lessee.
4. **ACCEPTANCE OF EQUIPMENT.** Lessee agrees to immediately inspect the Equipment upon receipt of the Equipment and to execute an “Acknowledgment and Acceptance of Equipment by Lessee” form, in the form attached hereto as Schedule B, after the Equipment has been delivered and after Lessee is satisfied that the Equipment is satisfactory as of the time of inspection in every respect, excluding latent or unknown defects. The “Acknowledgment and Acceptance of Equipment by Lessee” form must be promptly executed and delivered to Lessor within 30 days after the Equipment is delivered to Lessee.
5. **CONVENANTS OF LESSEE.** Lessee represents and warrants to Lessor that as of the date of this Lease and throughout the term of this Lease:
 - (a) Lessee is a public body, politic and corporate within the State in which it is located;
 - (b) Lessee is duly organized and existing under the Constitution and laws of said State, and is duly authorized to execute and carry out its obligations under this Lease;
 - (c) This Lease including all schedules and amendments hereto have been duly authorized, executed and delivered by Lessee;

- (d) Lessee will comply with all applicable provisions of the Internal Revenue Code of 1986, as amended (the "Code") and the regulations of the Treasury Department thereunder, from time to time proposed or in effect, in order to maintain the excludability from gross income for federal income tax purposes of the interest component of payments under this Lease and will not use or permit the use of the Equipment in such a manner as to cause this Lease to be a "private activity bond" or an "arbitrage bond" under the Code; and
- (e) No provision of this Lease constitutes a pledge of tax or general revenues of Lessee and all lease payments hereunder shall constitute current expenses of the Lessee.
6. **PAYMENTS: AMORTIZATION SCHEDULE.** Lessee agrees to promptly pay the total rent equal to the "Payment Amount" as set forth in Schedule A multiplied by the number of payments specified in "No. of Payments" as set forth in Schedule A. Payments will be made in advance and periodically as specified in Schedule A. Payments shall be made by Lessee at Lessor's address set forth above, or as otherwise directed by the Lessor. Lessee shall not abate, set off, deduct any amount, or reduce any payment for any reason. The first payment shall be due on the date of the date of acceptance of the Equipment by Lessee, and subsequent payments shall be due on the same day of each succeeding pay period throughout the term of the Lease. If any Payment is not received by Lessor within thirty (30) days after the Payment Date, then Lessee shall pay to Lessor a late payment fee of five percent (5%) of the amount of such delinquent Payment. Lessee agrees that the Amortization Schedule delivered or to be delivered to Lessee shall be incorporated into this Lease. Lessee shall be deemed to have agreed to such Amortization Schedule as of the Commencement Date.
7. **DISCLAIMER OF WARRANTIES AND CLAIMS, LIMITATION OF REMEDIES.** THERE ARE NO WARRANTIES BY OR ON BEHALF OF LESSOR. Lessee acknowledges and agrees as follows:
- (a) **LESSOR MAKES NO WARRANTIES EITHER EXPRESSED OR IMPLIED AS TO THE CONDITION OF THE EQUIPMENT, ITS MERCHANTABILITY, ITS FITNESS OR SUITABILITY FOR ANY PARTICULAR PURPOSE, ITS DESIGN, ITS CAPACITY, ITS QUALITY, OR WITH RESPECT TO ANY CHARACTERISTICS OF THE EQUIPMENT;**
- (b) Lessee has fully inspected the Equipment, which it has requested Lessor to acquire and lease to Lessee, and the Equipment is in good condition and to Lessee's complete satisfaction as of the time of inspection, excluding latent or unknown defects;
- (c) Lessee acknowledges that the Equipment is leased to Lessee solely for the purpose of performing essential governmental uses and public functions of Lessee within the permissible scope of Lessee's authority and will not be used in a trade or business;
- (d) If the Equipment is not properly installed, does not operate as represented or warranted by the Supplier or manufacturer, or is unsatisfactory for any reason, regardless of cause or consequence, Lessee's only remedy, if any, shall be against the Supplier or the manufacturer of the Equipment and not against the Lessor;
- (e) Provided Lessee is not in default under this Lease, Lessor assigns to Lessee any warranties made by the Supplier or the manufacturer of the Equipment;

- (f) LESSEE SHALL HAVE NO REMEDY FOR CONSEQUENTIAL OR INCIDENTAL DAMAGES AGAINST LESSOR; and
- (g) NO DEFECT, DAMAGE, OR UNFITNESS OF THE EQUIPMENT FOR ANY PURPOSE SHALL RELIEVE LESSEE OF THE OBLIGATION TO MAKE LEASE PAYMENTS OR RELIEVE LESSEE OF ANY OTHER OBLIGATION UNDER THIS LEASE.
8. **NON-ASSIGNMENT.** Lessee agrees that it shall not assign, sublease, pledge or transfer this Lease or sublease the Equipment or any interest therein, or otherwise dispose of the Equipment referenced in this Lease without the prior written consent of the Lessor.
9. **RELATION BETWEEN THE LESSOR AND THE SUPPLIER.** Lessee understands and acknowledges that no broker or Supplier or any agent of such is an agent of Lessor. No Supplier or agent of such is authorized to waive or alter any term or condition of this Lease and no representation as to the Equipment made by a Supplier or agent of same shall affect Lessee's duty to pay Lessor the lease payments hereunder.
10. **LOCATION.** The Equipment shall be kept at the location set forth in Schedule A and may not be removed without Lessor's prior written consent.
11. **USE.** Lessee shall maintain the Equipment in good operating condition in the same configuration as when accepted, shall use the Equipment solely in the manner for which it is intended and reasonably in compliance with the manufacturer instructions, shall make all necessary repairs at Lessee's expense, shall reasonably comply with all laws relating to its possession, use or maintenance, and shall not unreasonably make any alterations, additions or improvements to the Equipment without the Lessor's prior written consent. Lessee further agrees to comply with all license and copyright requirements of any software used in connection with the Equipment.
12. **OWNERSHIP; TITLE.** Title to the Equipment shall pass to Lessee upon Lessee's acceptance of the Equipment pursuant to this Lease, subject to the rights of Lessor under this Agreement. To secure the payment of Lessee's obligations under this Lease, Lessee grants to Lessor a security interest constituting a first lien on the Equipment and on all additions, attachments, accessions and substitutions thereto, and on any proceeds therefrom. Lessee agrees to execute such additional documents, including a UCC-1 financing statement in the appropriate office of Lessee's state and similar instruments, in form reasonably satisfactory to Lessor, which Lessor deems necessary or appropriate to establish and maintain a security interest, and upon assignment, the security interest of any assignee of Lessor. Lessor agrees to provide the Equipment to Lessee free of liens, attachments and other encumbrances. All additions, repairs or improvements made to Equipment shall belong to Lessee, subject to the rights of Lessor under this Lease.
13. **SURRENDER.** At the expiration of the Lease Term, should the Lessee choose not to exercise its option to purchase the Equipment, the Lessee, at its expense, shall return the Equipment in good repair, ordinary wear and tear excepted, by delivering it packed, if applicable, and ready for shipment to the Supplier or such other location as is agreed to by the parties.
14. **LOSS OR DAMAGE.** Lessee shall at all times after signing this Lease bear the entire risk of loss, theft, damage or destruction of any part of the Equipment from any cause whatsoever and no loss, theft, damage or destruction of the Equipment shall relieve Lessee of the obligation to make lease payments hereunder or to comply with any other obligation of this Lease. In the event of damage to any part of the Equipment, Lessee

shall immediately place the same in good repair at Lessee's expense. If Lessor determines that any part of the Equipment is lost, stolen, destroyed, or damaged beyond repair, Lessee shall, at Lessee's option, do one of the following:

- (a) Replace the same with like equipment in good repair of comparable function, capacity and features, reasonably acceptable to Lessor in which event this Lease shall continue and the replacement equipment shall constitute Equipment for all purposes of this Lease; or
 - (b) Pay Lessor in cash the following: (i) all amounts due from Lessee to Lessor under this Lease up to the date of the loss; and (ii) the accelerated balance of the total amounts due for the remaining term of this Lease attributable to said item, discounted to its net present value at a simple interest rate equal to the interest rate set forth on Schedule A and resulting in the amortization of principal and interest as set forth in the attached Amortization Schedule. Upon Lessor's receipt of payment set forth above, Lessee shall be entitled to the Equipment with any warranties made by the Supplier or manufacturer but without any warranties from Lessor. If insurance proceeds are used to fully comply with this subparagraph, the balance of any such proceeds shall go Lessee to compensate for loss of use of the Equipment for the remaining term of the Lease.
15. **INSURANCE; LIENS; TAXES.** The Lessee shall at its own expense and for the term of this Lease provide and maintain insurance against loss, theft, damage or destruction of the Equipment in an amount not less than the full replacement value of the Equipment, naming Lessor or its assignee as the loss payee to the extent of Lessor's interest. Lessee also agrees to name Lessor as an additional insured on Lessee's comprehensive general all-risk liability policy or public liability policy, insuring Lessor and Lessee against any and all loss or liability for all damages, either to property, persons or otherwise, which might result from the condition, use or operation of the Equipment, with such limits and with an insurer satisfactory to the Lessor. The Lessee's obligation under this paragraph is limited by the Lessee's limits of liability and substantive areas of liability under the Maine Tort Claims Act or its limits and areas of liability under its insurance, whichever is greater. Each policy shall expressly provide that said insurance as to Lessor and its assigns shall not be invalidated by any act, omission, or neglect of Lessee and cannot be canceled without 30 days' prior written notice to Lessor. As to each policy Lessee shall furnish to Lessor a certificate of insurance from the insurer, which certificate shall be evidence the insurance coverage required by this paragraph. Lessor shall have no obligation to ascertain the existence of or provide any insurance coverage for the Equipment or for Lessee's benefit. Lessee agrees to keep the Equipment free and clear of all liens and encumbrances and to pay any and all charges and taxes imposed by local, state or federal law or authorities arising out of ownership, leasing, rental, sale, purchase, possession or use of the Equipment. If Lessee causes or allows events to happen that change the interest income tax-exempt status of this Lease, as provided in the Internal Revenue Code of 1986, as amended, Lessee agrees to pay the "taxable interest rate" retroactive to its Commencement Date. The "taxable interest rate" is defined as that rate that results in the same after-tax yield to the Lessor, or its assigns, as the tax-exempt rate on this Lease, or the highest rate permitted by law, whichever is less.
16. **ASSIGNMENT BY LESSOR.** Lessee agrees that Lessor may assign this Lease after providing written notice to the Lessee of the assignment. Should the Lessor choose to assign the Lease, the assignee shall have all rights and obligations originally afforded Lessor under this Lease. Lessee shall recognize and hereby consents to any assignments of this Lease.
17. **NONAPPROPRIATION OF FUNDS.** In the event no funds or insufficient funds are appropriated and budgeted for lease payments due under this Lease, the Lessee may elect to terminate this Lease in accordance with this paragraph. Lessee's election to terminate must be exercised by delivering its prior written notice of its

intent to terminate together with a certified statement by an authorized official indicating that insufficient sums have been appropriated for the ensuing fiscal year of the Lessee. In the event of such termination, Lessee agrees to peaceably surrender the Equipment to Lessor or its assignee on the date of such termination, packed for shipment in accordance with manufacturer's specifications, if applicable, and sent prepaid and insured to the location as is agreed to by the parties. Lessor shall have all legal and equitable rights and remedies to take possession of the Equipment. Termination under this Paragraph 17 shall be effective upon the expiration of the applicable fiscal year of the Lease and payment of all lease payments during that fiscal year. Lessee's exercise of its rights under this Paragraph 17 shall not affect the survival of any other provisions (other than the obligation to make lease payments beyond the applicable fiscal year) which survive the termination of the Lease.

18. **ESCROW ACCOUNT.** At the option of the Lessor, an escrow account may be created to hold the Lease proceeds prior to disbursement of funds to the seller of the Equipment. Any interest earned on this account shall be payable to the Lessee. Lessor shall act as the escrow agent and shall disburse funds as appropriate under the other provisions of the Lease. Lessee understands and agrees they have no right of direct access to the funds in said escrow account.
19. **DEFAULT.** Lessee shall be in default of this Lease if: (a) Lessee fails to make any payments which are due under the terms of this Lease for a period of ten (10) days after the due date thereof; (b) Lessee fails to abide by any of the provisions of this Lease, and such failure continues for a period of ten (10) days after notice from Lessor; (c) the Equipment or any portion of the Equipment becomes subject to liens, seizures, assignments, transfers, sublease or sale without the prior written consent of the Lessor; (d) Lessee abandons the Equipment or permits any other entity to use the Equipment without the prior written consent of Lessor, (e) Lessee has made any misleading or false statements in connection with application for or performance of this Lease; (f) Lessee defaults in any other agreement it has with Lessor; (g) Lessee assigns its rights in property for the benefit of creditors; or (h) Lessee files a petition under any state or federal bankruptcy or insolvency laws, or any similar law.
20. **OPTION.** Provided that no default or Non-Appropriation of Funds has occurred, Lessee may purchase all (but not less than all) of the Equipment for the Option Price set forth on Schedule A at the end of the Lease Term. If Lessee exercises its option under this paragraph, Lessor shall convey or release to Lessee, all its right, title and/or interest in the Equipment on an "AS-IS, WHERE-IS" basis without any representation or warranty.
21. **SEVERABILITY.** This Lease is intended to constitute a valid and enforceable legal instrument, and no provision of this Lease that may be deemed unenforceable shall in any way invalidate any other portion or provisions hereof, all of which shall remain in full force and effect.
22. **TIME OF ESSENCE.** Time is of the essence in the performance of all aspects of this Lease; the parties agree that this provision shall not be waived by implication or otherwise should the parties accept performance on a late basis.
23. **CHOICE OF LAW.** The parties agree that the execution, interpretation and performance of this Lease shall be governed by the laws of the State of Maine.
24. **ENTIRE AGREEMENT: NO WAIVER.** This Lease, together with the attached Schedules A-F, constitutes the entire agreement between Lessor and Lessee. No provision of this Lease shall be modified or rescinded

unless in writing signed by a representative of all parties hereto. Waiver by Lessor of any provision hereof in one instance shall not constitute a waiver as to any other instance.

IN WITNESS WHEREOF, the parties have caused this Municipal Lease Purchase Agreement to be executed by their duly authorized representatives as an instrument under seal.

Lessor:

M.S.T. Government Leasing LLC

By: 
Merle S Tilton

Its: Manager

Date: 7-1-22

Lessee:

Sullivan County NH

By: 
Mary Bourque, Director of Facilities and Operations

Its: Superintendent or Board Designee

Date: 7/6/2022

M.S.T Government Leasing, LLC.

Lease Number: 551

Schedule A – SCHEDULE OF EQUIPMENT AND LEASE PAYMENTS

LESSEE: Sullivan County NH

ADDRESS: 14 Main Street Newport, NH 03773

EQUIPMENT DESCRIPTION: (Schedule F)

Lease Term: 5 Years

Payment Amount: \$20,385.66

No. of Payments: 5

Pay Period: Annual

Advance Payments: No

Lease Value: \$95,000.00

Option Price: \$1.00

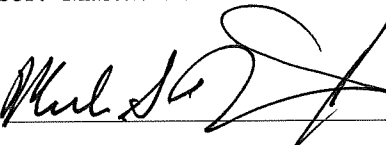
Amortization Schedule: (see attached)

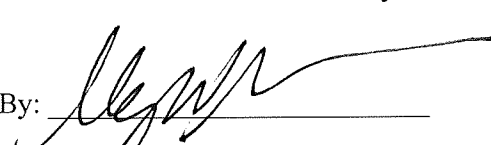
Lease Commencement Date: 7/1/2022

First Payment Due: 8/1/2022

Lessor: M.S.T. Government Leasing LLC

Lessee: Sullivan County NH

By: 
Merle S Tilton, Manager

By: 
Mary Bourque, Director of Facilities and Operations

Date: 7-1-22

Date: 7-6-2022

Sullivan County Amort 2022

Compound Period : Annual

Nominal Annual Rate : 3.490 %

CASH FLOW DATA

Event	Date	Amount	Number	Period	End Date
1 Loan	07/01/2022	95,000.00	1		
2 Payment	08/01/2022	20,385.66	5	Annual	08/01/2026

AMORTIZATION SCHEDULE - Normal Amortization

Date	Payment	Interest	Principal	Balance
Loan 07/01/2022				95,000.00
1 08/01/2022	20,385.66	281.59	20,104.07	74,895.93
2022 Totals	20,385.66	281.59	20,104.07	
2 08/01/2023	20,385.66	2,613.87	17,771.79	57,124.14
2023 Totals	20,385.66	2,613.87	17,771.79	
3 08/01/2024	20,385.66	1,993.63	18,392.03	38,732.11
2024 Totals	20,385.66	1,993.63	18,392.03	
4 08/01/2025	20,385.66	1,351.75	19,033.91	19,698.20
2025 Totals	20,385.66	1,351.75	19,033.91	
5 08/01/2026	20,385.66	687.46	19,698.20	0.00
2026 Totals	20,385.66	687.46	19,698.20	
Grand Totals	101,928.30	6,928.30	95,000.00	

M.S.T. Government Leasing, LLC.

Lease Number: 551

Schedule B - ACKNOWLEDGEMENT AND ACCEPTANCE OF EQUIPMENT

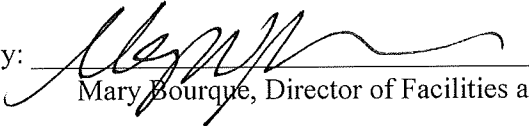
Equipment: See Schedule F

Lessee hereby acknowledges that the Equipment described above has been received in good condition and repair, has been properly installed, tested, and inspected and is operating satisfactorily in all respects for all of Lessee's intended uses and purposes, excluding latent or unknown defects. Lessee hereby accepts the Equipment unconditionally and irrevocably from Lessor but waives no rights against supplier or manufacturer.

By signature below, Lessee specifically authorizes and requests Lessor to make payment to the supplier of the Equipment. Lessee agrees that said Equipment is not being leased on any type or form of trial or rental basis.

Lessee: Sullivan County NH

By:


Mary Bourque, Director of Facilities and Operations

Date:

7/6/2022

Request for Certificate of Insurance

TO:

Insurance Company: Primex
46 Donovan Street
Concord, NH 03301

Contact Name:
Telephone Number:
Fax Number:

FROM:

Customer/Lessee Name: Sullivan County NH
14 Main Street

Newport, NH 03773

Contact Name: Mary Bourque, Director of Facilities and Operations
Telephone Number: (603) 542-9511
Fax Number:

Sullivan County NH ("Lessee") is in the process of financing certain equipment from M.S.T. Government Leasing, LLC ("Lessor"). In order to facilitate **this transaction, please submit a Certificate of Insurance to:**

M.S.T. Government Leasing, LLC
Attn: Kelly Fortier
1491 East Side River Road
Dummer, New Hampshire 03588

Norway Savings Bank
Attention: Jack Day
Fax Number: (207) 743-5377
Phone Number: (888) 725-2207 x1040

Lessee requests that M.S.T. Government Leasing, LLC and Norway Bank be listed as INSUREDS as to public liability coverage and CO-LOSS PAYEES as to property coverage. A copy of said certificate should be forwarded to M.S.T. Government Leasing, LLC and Norway Savings Bank as described below.

NOTE: Coverage is to include (1) insurance against all risks of physical loss or damage to the Equipment (including theft) and (2) commercial general liability insurance (including blanket contractual liability coverage and products liability coverage) for personal and bodily injury and property damage. In addition, M.S.T. Government Leasing, LLC and Norway Bank are to receive 30 days' prior written notice of cancellation or material change in coverage.

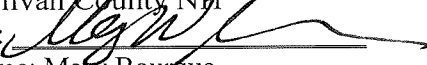
Please email this completed information to:

M.S.T. Government Leasing, LLC
Attn: Kelly Fortier

Fax Number: (603) 262-1931
Phone Number: 800-750-1538 x1

Please contact the person above if you have any questions. Thank you!

Sullivan County NH

By: 

Name: Mary Bourque

Title: Director of Facilities and Operations

M.S.T. Government Leasing, LLC.

Sullivan County NH

Lease Number: 551**Schedule C – INSURANCE VERIFICATION**

Paragraph 15 of the Lease states that you must carry insurance on the Equipment. Your insurance company shall name M.S.T. GOVERNMENT LEASING, LLC, 1491 EASIDE RIVER ROAD, DUMMER, NH 03588, its successors and/or assigns as the loss payee to the extent of its interest if the equipment is damaged. Please fillout the information below to ensure this takes place. You are responsible for contacting your insurance agent to set this up. Please have a binder sent to us.

This is to confirm that the Equipment under Lease Purchase Agreement No.551 is or will be insured for all risks of loss or damage from every cause whatsoever. and the Lessee shall also carry public liability insurance, person injury insurance and property damage insurance covering the Equipment.

All such insurance shall be provided in accordance with the requirements of paragraph 15 of the Lease. M.S.T. Government Leasing, LLC and/or its Assignee shall be named to the extent of its interest "LOSS PAYEE" on the loss or damage coverage and "ADDITIONAL INSURED" on the liability coverage.

A binder describing the insurance will be sent to M.S.T. GOVERNMENT LEASING, LLC and/or its Assignee by mail and/or Fax: 603-262-1931

Address: 46 Donovan Street, Concord, NH 03301

Agent's Name: Toni Flewelling

Phone: (603) 225-2841

Insurance Co. Primex

Policy No. 606

Expiration Date: 7/1/2022

WE MUST HAVE A CERTIFICATE OF INSURANCE IN HOUSE PRIOR TO FUNDING

CERTIFICATE OF COVERAGE

The New Hampshire Public Risk Management Exchange (Primex³) is organized under the New Hampshire Revised Statutes Annotated, Chapter 5-B, Pooled Risk Management Programs. In accordance with those statutes, its Trust Agreement and bylaws, Primex³ is authorized to provide pooled risk management programs established for the benefit of political subdivisions in the State of New Hampshire.

Each member of Primex³ is entitled to the categories of coverage set forth below. In addition, Primex³ may extend the same coverage to non-members. However, any coverage extended to a non-member is subject to all of the terms, conditions, exclusions, amendments, rules, policies and procedures that are applicable to the members of Primex³, including but not limited to the final and binding resolution of all claims and coverage disputes before the Primex³ Board of Trustees. The Additional Covered Party's per occurrence limit shall be deemed included in the Member's per occurrence limit, and therefore shall reduce the Member's limit of liability as set forth by the Coverage Documents and Declarations. The limit shown may have been reduced by claims paid on behalf of the member. General Liability coverage is limited to Coverage A (Personal Injury Liability) and Coverage B (Property Damage Liability) only, Coverage's C (Public Officials Errors and Omissions), D (Unfair Employment Practices), E (Employee Benefit Liability) and F (Educator's Legal Liability Claims-Made Coverage) are excluded from this provision of coverage.

The below named entity is a member in good standing of the New Hampshire Public Risk Management Exchange. The coverage provided may, however, be revised at any time by the actions of Primex³. As of the date this certificate is issued, the information set out below accurately reflects the categories of coverage established for the current coverage year.

This Certificate is issued as a matter of information only and confers no rights upon the certificate holder. This certificate does not amend, extend, or alter the coverage afforded by the coverage categories listed below.

Participating Member: Sullivan County 14 Main Street Newport, NH 03773		Member Number: 606	Company Affording Coverage: NH Public Risk Management Exchange - Primex ³ Bow Brook Place 46 Donovan Street Concord, NH 03301-2624	
---	--	-----------------------	---	--

Type of Coverage	Effective Date (mm/dd/yyyy)	Expiration Date (mm/dd/yyyy)	Limits - NH Statutory Limits May Apply	
<input checked="" type="checkbox"/> General Liability (Occurrence Form) Professional Liability (describe) <input type="checkbox"/> Claims Made <input type="checkbox"/> Occurrence	7/1/2021	7/1/2022	Each Occurrence	\$ 325,000
	7/1/2022	7/1/2023	General Aggregate	\$ 325,000
			Fire Damage (Any one fire)	
			Med Exp (Any one person)	
<input type="checkbox"/> Automobile Liability <input type="checkbox"/> Any auto			Combined Single Limit (Each Accident)	
<input type="checkbox"/> Workers' Compensation & Employers' Liability			<input type="checkbox"/> Statutory	
			Each Accident	
			Disease – Each Employee	
			Disease – Policy Limit	
<input type="checkbox"/> Property (Special Risk includes Fire and Theft)			Blanket Limit, Replacement Cost (unless otherwise stated)	

Description: Lease of photocopiers & printers. The certificate holder is named as an Additional Covered Party, but only to the extent liability is based solely on the negligence or wrongful acts of the member, its employees, agents, officials or volunteers. This coverage does not extend to others. Any liability resulting from the negligence or wrongful acts of the Additional Covered Party/Loss Payee, or their employees, agents, contractors, members, officers, directors or affiliates is not covered.

CERTIFICATE HOLDER:	<input checked="" type="checkbox"/>	Additional Covered Party	<input type="checkbox"/>	Loss Payee	Primex ³ – NH Public Risk Management Exchange
Norway Savings Bank & MST Government Leasing, LLC 1491 East Side River Rd Dummer, NH 03588					By: <i>Mary Beth Purcell</i>
					Date: 6/15/2022 mpurcell@nhprimex.org
					Please direct inquires to: Primex³ Claims/Coverage Services 603-225-2841 phone 603-228-3833 fax

M.S.T. Government Leasing, LLC.

Lease Number: 551

Schedule D – ESSENTIAL USE STATEMENT

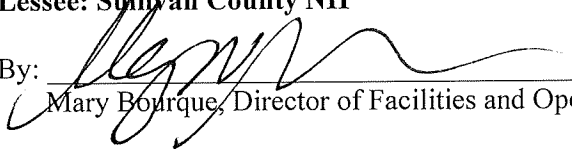
It is represented to Lessor that the Equipment will be used by Lessee for the Following Purposes:

Reprographic Equipment and the use of the Equipment is essential to its proper, efficient and economic operation. The expense is an ordinary and necessary expense of the Lessee and the use of the Equipment is essential to the proper, efficient and economic operation of the Lessee.

Appropriation Certificate

The Lessee hereby certifies that all payments due for the fiscal year ending June 30, 6/2/2022 are within such fiscal year's budget for Lessee and within an available, unexhausted and unencumbered appropriation.

Lessee: Sullivan County NH

By: 
Mary Bourque, Director of Facilities and Operations

Date: 7/6/2022

M.S.T. Government Leasing, LLC.

Lease Number: 551

Schedule E – Tax Statement

Lessee further covenants to Lessor as follows:

Lessee is a state or a political subdivision thereof, within the meaning of Section 103 of the Internal Revenue Code of 1986, as amended, and regulations thereunder (the "Code").

The Equipment will be used for a governmental or proprietary purpose of Lessee and will not be used in a trade or business of any person or entity other than the Lessee.

The Equipment will have a useful life in the hands of the Lessee that is in excess of the term of the Lease.

Lessee will comply with all applicable provisions of the Internal Revenue Code of 1986 (the "Code"), including without limitation Section 103 and 148 thereof, and the applicable regulations of the U.S. Treasury Department in order to maintain the exclusion of the interest components of the Lease Purchase Payments from gross income for the purpose of Federal Income Taxation.

Lessee will use the Equipment as soon as practicable and with all reasonable dispatch for the purpose for which this Lease has been entered into. No part of the proceeds of this Lease shall be invested in any securities, obligations or other investments or used, at any time, directly or indirectly, in a manner which, if such use had been reasonably anticipated on the date of this Lease, would have caused any portion of the Lease to be or become "arbitrage bonds" within the meaning of Section 103(b)(2) or Section 148 of the Code, as amended, and the applicable regulations of the U.S. Treasury Department.

Lessee hereby designates the Lease as a "qualified tax-exempt obligation" as defined in Section 265 (b)(3)(B) of the Code, as amended. The aggregate face amount of all tax-exempt obligations (excluding private activity bonds other than qualified 501 (c)(3) bonds) issued, or to be issued, by Lessee and all subordinate entities thereof during the calendar year of commencement of this Lease (the "Issuance Year") is not reasonably expected to exceed \$10,000,000. Lessee and all subordinate entities thereof will not issue in excess of \$10,000,000 of qualified tax-exempt obligations (including this Lease, but excluding private activity bonds other than qualified 501 (c)(3) bonds) during the Issuance Year without first obtaining an opinion of recognition bond counsel acceptable to Lessor that the designation of this Lease as a "qualified tax-exempt obligation" will not be adversely affected.

Lessee represents and warrants that it is a governmental unit under the laws of the State with general taxing powers, this Lease is not a private activity bond as defined in Section 141 of the Code, as amended: 95% or more of the net proceeds of this Lease will be used for local governmental activities of Lessee; and the aggregate face amount of all tax-exempt obligations (other than private activity bonds) issued, or to be issued by the Lessee and all subordinate entities thereof during the Issuance Year is not reasonably expected to exceed \$5,000,000. Lessee and all subordinate entities thereof will not issue in excess of \$5,000,000 of tax-exempt bonds (including this Lease, but excluding private activity bonds) during the Calendar Year without first obtaining an opinion of recognized bond counsel acceptable to Lessor that the excludability of the interest on the Lease from gross income for federal tax purposes will not be adversely affected.

Upon Lessor's request, Lessee shall, at its own expense, provide an opinion of recognized bond counsel acceptable to Lessor as to the above representations prior to acceptance of Equipment.

Lessee: Sullivan County NH

By: _____

Mary Bourque, Director of Facilities and Operations

Date: _____

7/6/2000

Sullivan County, NH			
Schedule F			
Building	Room	1st Year Equipment	Serial Number
Attorney's Office	Attorney's Office	Konica Minolta BH550i 55 CPM ~ RADF Duplex (LCT if under 1,500 Capacity) Finisher 3-Hole Punch CIF-Print-Scan-Post Script-Hard Drive for Secure Print-Airprint	AC75011700443
Attorney's Office	Legal Secretaries	Konica Minolta BHC550i 55 CPM~ RADF Duplex LCT-Paper 11 X 17 Finisher 3-Hole Punch-Scan-Fax-Post Script-Hard Drive for Secure Print-Airprint	AA7P011701174
Commissioners Office	Main Office	Konica Minolta BHC550i 55 CPM~ RADF Duplex LCT-Paper 11 X 17 Internal Finisher 3-Hole Punch-Scan-Fax-Post Script-Hard Drive for Secure Print-Airprint	AA7P011701098
Corrections	Admin	Konica Minolta BH550i 55 CPM ~ RADF Duplex (LCT if under 1,500 Capacity) Finisher 3-Hole Punch CIF-Print-Scan-Fax-Post Script-Hard Drive for Secure Print-Airprint	AC75011700452
Corrections	Cassey Hoyt	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort-Post Script-Airprint	ACET011008299
Corrections	CCC Reception	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort-Post Script-Airprint	ACET011008286
Corrections	Chad Perron	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort-Post Script-Airprint	ACET011006556
Corrections	Clinicians Office	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort-Post Script-Airprint	ACET011006537
Corrections	Donna Magee	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort-Post Script-Airprint	ACET011006550
Corrections	John Miliiken	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort-Post Script-Airprint	ACET011006552
Corrections	Male Treatment	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort-Post Script-Airprint	ACET011006553
Corrections	Matt Lockhart	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort-Post Script-Airprint	ACET011006554
Corrections	Nursing	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort-Post Script-Airprint	ACET011008294
Corrections	Office Manager	Konica Minolta BHC3300i 35 PPM ~ Duplex Sort 300 Paper Supply-Post Script-Airprint	AAJT011201976
Corrections	Old Jail	Konica Minolta BH550i 55 CPM ~ RADF Duplex (LCT if under 1,500 Capacity) Finisher 3-Hole Punch CIF-Print-Scan-Fax-Post Script-Hard Drive for Secure Print-Airprint	AC75011700465
Corrections	Sean Coughlin	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort-Post Script-Airprint	ACET011008301
Corrections	SPOTS	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort-Post Script-Airprint	ACET011006558
Corrections	Witney Davis	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort-Post Script-Airprint	ACET011008303
Nursing Home	Activities	Konica Minolta BHC550i 55 CPM~ RADF Duplex LCT-Paper 11 X 17 Finisher 3-Hole Punch-Scan-Post Script-Hard Drive for Secure Print-Airprint	AA7P011701203
Nursing Home	Admin Assistant	Konica Minolta BHC3300i 35 PPM ~ Duplex Sort 300 Paper Supply-Post Script-Airprint	ACER011003335
Nursing Home	Central Supply	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort-Post Script-Airprint	ACET011007861
Nursing Home	Classroom	Konica Minolta BHC550i 55 CPM~ RADF Duplex LCT-Paper 11 X 17 Finisher 3-Hole Punch-Scan-Fax-Post Script-Hard Drive for Secure Print-Airprint	AA7P011701220
Nursing Home	Dietary Asst. Director	Konica Minolta BH4000i 42 PPM ~ Duplex 2nd Paper Drawer-Sort-Post Script-Airprint	ACET011007859
Nursing Home	MacConnell	Konica Minolta Bizhub 4020i 42 CPM~ RADF Duplex 500 Sheets Max paper 8 1/2 X 14 Sort Scan-Fax-Post Script-Airprint	ACER011003494
Nursing Home	Mailroom	Konica Minolta BHC550i 55 CPM~ RADF Duplex LCT-Paper 11 X 17 Finisher 3-Hole Punch-Scan-Fax-Post Script-Hard Drive for Secure Print-Airprint	AA7P011701128
Nursing Home	Reception	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort-Post Script-Airprint	ACET011007858
Nursing Home	Social Services	Konica Minolta BHC3300i 35 PPM ~ Duplex Sort 300 Paper Supply-Post Script-Airprint	AAJT011201984
Nursing Home	Staffing Coordinator	Konica Minolta Bizhub 4020i 42 CPM~ RADF Duplex 500 Sheets Max paper 8 1/2 X 14 Sort Scan-Fax-Post Script-Airprint	ACER011003374
Nursing Home	Stearn 1 Copy Room	Konica Minolta BH550i 55 CPM ~ RADF Duplex (LCT if under 1,500 Capacity) Finisher 3-Hole Punch CIF-Print-Scan-Fax-Post Script-Hard Drive for Secure Print-Airprint	AC75011700461
Nursing Home	Stearns 1	Konica Minolta Bizhub 4020i 42 CPM~ RADF Duplex 500 Sheets Max paper 8 1/2 X 14 Sort Scan-Fax-Post Script-Airprint	ACER011003467
Nursing Home	Stearns 2	Konica Minolta Bizhub 4020i 42 CPM~ RADF Duplex 500 Sheets Max paper 8 1/2 X 14 Sort Scan-Fax-Post Script-Airprint	ACER011003364
Nursing Home	Stearns 3	Konica Minolta Bizhub 4020i 42 CPM~ RADF Duplex 500 Sheets Max paper 8 1/2 X 14 Sort Scan-Fax-Post Script-Airprint	ACER011003453
Sheriff's Office	Chief Deputy	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort-Post Script-Airprint	ACET011008196
Sheriff's Office	Deputy	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort-Post Script-Airprint	ACET011008277
Sheriff's Office	Sheriff's Office	Konica Minolta BHC550i 55 CPM~ RADF Duplex LCT-Paper 11 X 17 Finisher 3-Hole Punch-Scan-Fax-Post Script-Hard Drive for Secure Print-Airprint	AA7P011701109
Sheriff's Office	Sheriff's Office	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort-Post Script-Airprint	ACET011008285
Sheriff's Office	Sheriff's Office	Konica Minolta BH4000i 42 PPM ~ Duplex 2nd Paper Drawer-Sort-Post Script-Airprint	ACET011008351



State of New Hampshire

Department of State

Filed
Date Filed: 07/20/2022 11:52:33 AM
File Number: 2207200000853
Page Count: 4
David M. Scanlan
Secretary of State
State of New Hampshire

UCC FINANCING STATEMENT

A. NAME & PHONE OF CONTACT AT FILER (optional)
MST Government Leasing,LLC 800-750-1538
B. E-MAIL CONTACT AT FILER (optional)
kfortier@spccopypro.com
C. SEND ACKNOWLEDGMENT TO: (Name and Address)
MST Government Leasing,LLC 1491 East Side river Road, Dummer, NH, 03588, USA

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

OR	1a. ORGANIZATION'S NAME				
	Sullivan County. NH				
	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
1c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
14 Main Street		Newport	NH	03773	USA

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

OR	2a. ORGANIZATION'S NAME				
	2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

OR	3a. ORGANIZATION'S NAME				
	Norway Savings Bank				
	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
3c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
261 Main Street		Norway	ME	04268	USA

4. COLLATERAL: This financing statement covers the following collateral:

Description	File Name * See Attached
Sullivan County NH Collateral List	Sullivan County NH Schedule F COMPLETE.pdf

5. Check only if applicable and check only one box:

Collateral is ☐ held in a Trust (see UCC1Ad, item 17and instructions) ☐ being administrated by a Decedent's Personal Representative



State of New Hampshire

Department of State



6a. Check only if applicable and check only one box:

☒ Public-Finance transaction ☐ Manufactured-Home Transaction ☐ A Debtor is a Transmitting Utility

6b. Check only if applicable and check only one box:

☐ Agricultural Lien ☐ Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable):

☐ Lessee/Lessor ☐ Consignee/Consignor ☐ Seller/Buyer ☐ Bailee/Bailor ☐ Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA:

Sullivan County, NH			
Schedule F			
Building	Room	1st Year Equipment	Serial Number
Corrections	Male Treatment	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort-Post Script-Airprint	ACET011006553
Corrections	Matt Lockhart	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort-Post Script-Airprint	ACET011006554
Corrections	Nurse Office	Konica Minolta Bizhub 4020i 42 CPM~ RADF Duplex 500 Sheets Max paper 8 1/2 X 14 Sort Scan-Fax-Post Script-Airprint	ACER011003272
Corrections	Nursing	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort-Post Script-Airprint	ACET011008294
Corrections	Office Manager	Konica Minolta BHC3300i 35 PPM ~ Duplex Sort 300 Paper Supply-Post Script-Airprint	AAJT011201976
Corrections	Old Jail	Konica Minolta BH550i 55 CPM ~ RADF Duplex (LCT if under 1,500 Capacity) Finisher 3-Hole Punch CIF-Print-Scan-Fax-Post Script-Hard Drive for Secure Print-Airprint	AC75011700465
Corrections	Sean Coughlin	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort-Post Script-Airprint	ACET011008301
Corrections	SPOTS	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort-Post Script-Airprint	ACET011006558
Corrections	Witney Davis	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort-Post Script-Airprint	ACET011008303
Nursing Home	Activities	Konica Minolta BHC550i 55 CPM~ RADF Duplex LCT-Paper 11 X 17 Finisher 3-Hole Punch-Scan-Post Script-Hard Drive for Secure Print-Airprint	AA7P011701203
Nursing Home	Admin Assistant	Konica Minolta BHC3300i 35 PPM ~ Duplex Sort 300 Paper Supply-Post Script-Airprint	ACER011003335
Nursing Home	Central Supply	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort-Post Script-Airprint	ACET011007861
Nursing Home	Classroom	Konica Minolta BHC550i 55 CPM~ RADF Duplex LCT-Paper 11 X 17 Finisher 3-Hole Punch-Scan-Fax-Post Script-Hard Drive for Secure Print-Airprint	AA7P011701220
Nursing Home	Dietary Asst. Director	Konica Minolta BH4000i 42 PPM ~ Duplex 2nd Paper Drawer-Sort-Post Script-Airprint	ACET011007859
Nursing Home	Human Resources	Konica Minolta Bizhub 4020i 42 CPM~ RADF Duplex 500 Sheets Max paper 8 1/2 X 14 Sort Scan-Fax-Post Script-Airprint	ACER011005023
Nursing Home	MacConnell	Konica Minolta Bizhub 4020i 42 CPM~ RADF Duplex 500 Sheets Max paper 8 1/2 X 14 Sort Scan-Fax-Post Script-Airprint	ACER011003494
Nursing Home	Mailroom	Konica Minolta BHC550i 55 CPM~ RADF Duplex LCT-Paper 11 X 17 Finisher 3-Hole Punch-Scan-Fax-Post Script-Hard Drive for Secure Print-Airprint	AA7P011701128
Nursing Home	Reception	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort-Post Script-Airprint	ACET011007858
Nursing Home	Social Services	Konica Minolta BHC3300i 35 PPM ~ Duplex Sort 300 Paper Supply-Post Script-Airprint	AAJT011201984
Nursing Home	Staffing Coordinator	Konica Minolta Bizhub 4020i 42 CPM~ RADF Duplex 500 Sheets Max paper 8 1/2 X 14 Sort Scan-Fax-Post Script-Airprint	ACER011003374
Nursing Home	Stearn 1 Copy Room	Konica Minolta BH550i 55 CPM ~ RADF Duplex (LCT if under 1,500 Capacity) Finisher 3-Hole Punch CIF-Print-Scan-Fax-Post Script-Hard Drive for Secure Print-Airprint	AC75011700461
Nursing Home	Stearns 1	Konica Minolta Bizhub 4020i 42 CPM~ RADF Duplex 500 Sheets Max paper 8 1/2 X 14 Sort Scan-Fax-Post Script-Airprint	ACER011003467
Nursing Home	Stearns 2	Konica Minolta Bizhub 4020i 42 CPM~ RADF Duplex 500 Sheets Max paper 8 1/2 X 14 Sort Scan-Fax-Post Script-Airprint	ACER011003364
Nursing Home	Stearns 3	Konica Minolta Bizhub 4020i 42 CPM~ RADF Duplex 500 Sheets Max paper 8 1/2 X 14 Sort Scan-Fax-Post Script-Airprint	ACER011003453
Sheriff's Office	Chief Deputy	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort-Post Script-Airprint	ACET011008196
Sheriff's Office	Deputy	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort-Post Script-Airprint	ACET011008277
Sheriff's Office	Sheriff's Office	Konica Minolta BHC550i 55 CPM~ RADF Duplex LCT-Paper 11 X 17 Finisher 3-Hole Punch-Scan-Fax-Post Script-Hard Drive for Secure Print-Airprint	AA7P011701109
Sheriff's Office	Sheriff's Office	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort-Post Script-Airprint	ACET011008285
Sheriff's Office	Sheriff's Office	Konica Minolta BH4000i 42 PPM ~ Duplex 2nd Paper Drawer-Sort-Post Script-Airprint	ACET011008351
Attorney's Office	Attorney's Office	Konica Minolta BH550i 55 CPM ~ RADF Duplex (LCT if under 1,500 Capacity) Finisher 3-Hole Punch CIF-Print-Scan-Post Script-Hard Drive for Secure Print-Airprint	AC75011700443
Attorney's Office	Legal Secretaries	Konica Minolta BHC550i 55 CPM~ RADF Duplex LCT-Paper 11 X 17 Finisher 3-Hole Punch-Scan-Fax-Post Script-Hard Drive for Secure Print-Airprint	AA7P011701174
Commissioners Office	Main Office	Konica Minolta BHC550i 55 CPM~ RADF Duplex LCT-Paper 11 X 17 Internal Finisher 3-Hole Punch-Scan-Fax-Post Script-Hard Drive for Secure Print-Airprint	AA7P011701098
Corrections	Admin	Konica Minolta BH550i 55 CPM ~ RADF Duplex (LCT if under 1,500 Capacity) Finisher 3-Hole Punch CIF-Print-Scan-Fax-Post Script-Hard Drive for Secure Print-Airprint	AC75011700452
Corrections	Cassey Hoyt	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort-Post Script-Airprint	ACET011008299

Sullivan County, NH			
Schedule F			
Building	Room	1st Year Equipment	Serial Number
Corrections	CCC Reception	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort-Post Script-Airprint	ACET011008286
Corrections	Chad Perron	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort-Post Script-Airprint	ACET011006556
Corrections	Clinicians Office	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort-Post Script-Airprint	ACET011006537
Corrections	Donna Magee	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort-Post Script-Airprint	ACET011006550
Corrections	John Miliken	Konica Minolta BH4000i 42 PPM ~ Duplex Standard Paper Drawer-Sort-Post Script-Airprint	ACET011006552

Information Return for Tax-Exempt Governmental Bonds

► Under Internal Revenue Code section 149(e)

► See separate instructions.

Caution: If the issue price is under \$100,000, use Form 8038-GC.

► Go to www.irs.gov/F8038G for instructions and the latest information.

OMB No. 1545-0720

Part I Reporting Authority

If Amended Return, check here ☐

1 Issuer's name Sullivan County, New Hampshire		2 Issuer's employer identification number (EIN) 02-6000870	
3a Name of person (other than issuer) with whom the IRS may communicate about this return (see instructions) Kelly Fortier		3b Telephone number of other person shown on 3a 800-750-1538	
4 Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	5 Report number (For IRS Use Only) 3	
14 Main Street			
6 City, town, or post office, state, and ZIP code Newport, NH 03773		7 Date of issue 07/01/2022	
8 Name of issue Sullivan County, New Hampshire		9 CUSIP number None	
10a Name and title of officer or other employee of the issuer whom the IRS may call for more information (see instructions) Mary Bourque, Director of Facilities and Operations		10b Telephone number of officer or other employee shown on 10a 603-542-9511	

Part II Type of Issue (enter the issue price). See the instructions and attach schedule.

11 Education	11	95000	00
12 Health and hospital	12		
13 Transportation	13		
14 Public safety	14		
15 Environment (including sewage bonds)	15		
16 Housing	16		
17 Utilities	17		
18 Other. Describe ►	18		
19a If bonds are TANs or RANs, check only box 19a <input type="checkbox"/>			
b If bonds are BANs, check only box 19b <input type="checkbox"/>			
20 If bonds are in the form of a lease or installment sale, check box <input checked="" type="checkbox"/>			

Part III Description of Bonds. Complete for the entire issue for which this form is being filed.

	(a) Final maturity date	(b) Issue price	(c) Stated redemption price at maturity	(d) Weighted average maturity	(e) Yield
21	08/01/2026	\$ 95000.00	\$ 95000.00	5 years	3.490 %

Part IV Uses of Proceeds of Bond Issue (including underwriters' discount)

22 Proceeds used for accrued interest	22		
23 Issue price of entire issue (enter amount from line 21, column (b))	23	95000	00
24 Proceeds used for bond issuance costs (including underwriters' discount)	24		
25 Proceeds used for credit enhancement	25		
26 Proceeds allocated to reasonably required reserve or replacement fund	26		
27 Proceeds used to refund prior tax-exempt bonds. Complete Part V	27	2883	00
28 Proceeds used to refund prior taxable bonds. Complete Part V	28		
29 Total (add lines 24 through 28)	29	2883	00
30 Nonrefunding proceeds of the issue (subtract line 29 from line 23 and enter amount here)	30	92117	00

Part V Description of Refunded Bonds. Complete this part only for refunding bonds.

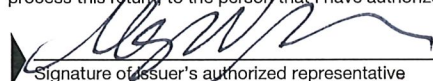
31 Enter the remaining weighted average maturity of the tax-exempt bonds to be refunded	0	years
32 Enter the remaining weighted average maturity of the taxable bonds to be refunded		years
33 Enter the last date on which the refunded tax-exempt bonds will be called (MM/DD/YYYY)	6/15/2022	
34 Enter the date(s) the refunded bonds were issued (MM/DD/YYYY)	6/12/2018	

Part VI Miscellaneous

- 35** Enter the amount of the state volume cap allocated to the issue under section 141(b)(5) **35**
- 36a** Enter the amount of gross proceeds invested or to be invested in a guaranteed investment contract (GIC). See instructions **36a**
- b** Enter the final maturity date of the GIC ► (MM/DD/YYYY) _____
- c** Enter the name of the GIC provider ► _____
- 37** Pooled financings: Enter the amount of the proceeds of this issue that are to be used to make loans to other governmental units **37**
- 38a** If this issue is a loan made from the proceeds of another tax-exempt issue, check box ► ☐ and enter the following information:
- b** Enter the date of the master pool bond ► (MM/DD/YYYY) _____
- c** Enter the EIN of the issuer of the master pool bond ► _____
- d** Enter the name of the issuer of the master pool bond ► _____
- 39** If the issuer has designated the issue under section 265(b)(3)(B)(i)(III) (small issuer exception), check box ► ☒
- 40** If the issuer has elected to pay a penalty in lieu of arbitrage rebate, check box ► ☐
- 41a** If the issuer has identified a hedge, check here ► ☐ and enter the following information:
- b** Name of hedge provider ► _____
- c** Type of hedge ► _____
- d** Term of hedge ► _____
- 42** If the issuer has superintegrated the hedge, check box ► ☐
- 43** If the issuer has established written procedures to ensure that all nonqualified bonds of this issue are remediated according to the requirements under the Code and Regulations (see instructions), check box ► ☐
- 44** If the issuer has established written procedures to monitor the requirements of section 148, check box ► ☐
- 45a** If some portion of the proceeds was used to reimburse expenditures, check here ► ☐ and enter the amount of reimbursement ► _____
- b** Enter the date the official intent was adopted ► (MM/DD/YYYY) _____

Signature and Consent

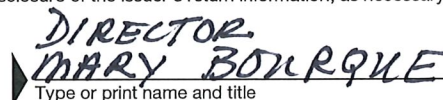
Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that I consent to the IRS's disclosure of the issuer's return information, as necessary to process this return to the person that I have authorized above.



Signature of issuer's authorized representative

7/5/2022

Date



Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name Kelly Fortier	Preparer's signature 	Date 7/5/22	Check <input type="checkbox"/> if self-employed	PTIN
Firm's name ► MST Government Leasing, LLC	Firm's EIN ► 30-0136199			
Firm's address ► 1491 Eastside River Road Dummer, NH 03588	Phone no. 800-750-1538			

**Sullivan County, NH
Board of Commissioners
Monday, May 2, 2022, 3:00 PM
Regular Business Meeting Minutes**

Physical Location: 14 Main Street, Newport, NH, 03773

This meeting was open to the public through Zoom:

T. 1-312-626-6799 | Webinar ID: 910 7090 7758 | URL:

<https://zoom.us/j/91070907758?pwd=dkhOQzVFN1U3d255NmdUMXkxZXFEUT09>

County Officials, Administration, Staff and guests at 14 Main Street, Newport, NH, 03773: Commissioners George Hebert, *Chair*, Bennie Nelson, *Vice Chair*, and Joe Osgood, *Clerk*; Derek R. Ferland, *County Manager (CM)*; Janet Gibson, *Registrar of Deeds*; Mary Bourque, *Facilities & Operations Director*; Sara Rouillard, *F&O Administrative Assistant*; Ted Purdy, *Sullivan County Health Care (SCHC) Administrator*; Supt. Dave Berry, *Department of Corrections*; Hilary Snide, *Human Resources Director*; and Lewis Thibodeau, *SCHC Business Office Manager*.

County Officials, Administration, Staff & Public on Zoom: John Lunn, *NCTV Executive Director*; CCTV Josh Nelson; Kate Kirkwood, *SC Lead Abatement & Healthy Homes Program Manager*; and Sharon Callum, *Administrative Assistant/Minute Taker (at 14 Main Street, Newport, NH, 03773)*.

1. **COVID19 Update, Administration:** *SCHC Administrator* Ted Purdy (TP) reported that they are testing residents and staff twice a week as a result of positive tests that occurred a couple weeks ago; since then, two (2) additional staff and residents tested positive, but, as of Fri. 29-Apr. there have been no new positive tests - encouraged by these results! He confirmed most symptoms have been very minimal. County Manager (CM) Derek Ferland reported that all the maple syrup [15-gallons from the sugaring lease on County property in Unity] arrived last week. TP confirmed that there are no plans to hold the Annual Pancake Breakfast, at this time due to positive tests.
2. **Registry of Deeds Equipment Account \$15,911 Withdrawal Request, Per RSA 478:17-j:** All viewed *Registrar* Janet Gibson's Equipment Account withdrawal request with backup¹. Additionally, she indicated: they have 14 boxes there, they'll need to bring one box over and take one out; she discussed the \$3/month fee increase and how the facility is temperature controlled; she noted that 57,500 is an estimate to cover up to 6/30/2022; that the laptop will replace a 17-year-old computer that the former Registrar used and would be used in office or available for remote use; and noted that the original copier was purchased in 2016. She explained that performing all in one motion allows her to purchase a copier without reconvening the Delegation at a later date in the year. **Nelson, moved, and Osgood seconded, a motion at 3:12 p.m. per RSA 478:17-j that, we the Board of Commissioners, authorize Sullivan County Registrar of Deeds to transfer a total of \$15,911 from the Deed's Equipment Bank Account to pay for the items presented today, as noted: microfilm storage \$972; microfilm estimated 57,500 images 7/1/21-6/30/22 of \$3,433; cover estimated film & storage \$500; the Fidler Contract (if needed)**

¹ All documents shared at these meetings, unless in draft or confidential status, may be accessed through the Sullivan County's website: www.sullivancounty.nh.gov. If you have any questions finding these documents, please contact the Commissioner's Office M-F 8-4 at 1-603-863-2560. Thank you.

\$5,000, laptop \$2,376, and copier \$3,630. A roll call vote was taken, with all 3-commissioners voting 'Yes.' The motion carried, unanimously.

- 3. Facilities & Operations (F&O): Copier & Printer Contract Award, Mary Bourque, Director:** *Facilities & Operations Director* Mary Bourque (MB) explained they contracted with Specialized Purchasing Consultants (SPC) to handle the copier/printer bid project and ultimately received bids from 3-companies: 1) Symquest for Konica Minolta equipment, 2) KMBS for Konica Minolta, and 3) Ricoh for Ricoh equipment. She confirmed that Cannon did not submit a bid. MB reviewed the PPT [Footnote¹]. Additionally, she noted that Alex from SPC Corp. discussed eliminating individual or shared desktop printers, as they're not supported by CCI; and how many were discovered during the review process. MB explained departments volunteered to eliminate 33 desktop printers, great feedback was received from each, and how good teamwork recognized the potential savings! She discussed how they should return to replacing office printers on a 5-year cycle; and the benefits to be seen with the recommended equipment. She recommended moving forward with Symquest and performing the two (2) motions proposed that allow them to contract with Symquest leasing company: MST Government Leasing; and for her to execute the contract. MB confirmed she'd be looking into what Sheriff Simonds discussed during this morning's FY23 budget reviews. She confirmed their office has standalone equipment due to security reasons for different systems and offices; the same is with the Attorney's Office as a result of a grant funded position; therefore, some desktop printers will remain. MB confirmed it will be the responsibility of F&O to ensure the new printer/copiers are secure. MB reiterated that MST Government Leasing is paid by Symquest.

Nelson moved, and Osgood seconded a motion at 3:28pm in accordance with the Procurement and Vendor Management Policy Section D1, I move that the Board approve the proposed tax-exempt lease with M.S.T. Government Leasing, LLC, for the purposes of leasing, refinancing, and funding photocopy equipment leases including consultant fees, and related costs of issuances of such leases in an amount not to exceed \$95,000.00 and an interest rate of 3.490% per year through August 1, 2027 with an annual payment of approximately \$20,300.00 and for the amount to be split accordingly based on usage across departments under 12029 Contract Services. A roll call vote was taken, with all 3-commissioners voting in favor of the motion. The motion carried, unanimously.

Nelson moved, and Osgood seconded, a motion at 3:29 p.m. to move that the Board authorizes the Director of Facilities & Operations to execute and deliver the tax-exempt lease with M.S.T. Government Leasing, LLC on such terms and conditions discussed today and provided to the Board and to execute and deliver any such documents required to execute the contract with Specialized Purchasing Consultants, Inc. A roll call vote was taken, with all voting in favor of the motion. The motion carried, unanimously.

MB pointed out this project was a team effort as CM made the connection with SPC Corp at a conference, shared the info, and Rouillard did all the footwork.

- 4. County Manager's Report, Derek Ferland**

- a. Employee 'Shout Out': County Manager (CM) Ferland gave a *shoutout* to Sara Rouillard, of *Facilities & Operations*, for all the work she did on the copier/printer bidding project, as well as for all the work she performed with the Sullivan House [19 Sullivan Street Claremont] project that included: cleaning, setting up and moving furniture around and working with DOC Supt. Berry to coordinate the inmate labor.
- b. HUD Lead Abatement & Healthy Homes Update
 - i. Monthly Report, Kate Kirkwood, Program Manager: All viewed the report [See Footnote¹]. Kate Kirkwood (KK) explained she reformatted her report and data reflects that they've exceeded projections. They are coming into the Q6 period well ahead, must 'clear' three (3) units by 30-June 2022 and she expects to meet that goal! KK reported that the Chellis Street project is on hold until the contractor has the capacity to perform the work and the Laurel Street project is on hold until the Governor & Council sign off on additional funding for the NH Housing Finance Authority; this sign-off is anticipated to occur in July 2022, but she expressed concern that the money is not available for owners needing it now. In response to CM's question related to the orange shaded projects, KK indicated that the Redwater Brook Road project cleared. She reported they lost one contractor working on the Knight Street project, but the second bidder accepted the project.
 - ii. CDFA Tax Incentive Program Pledge & Receipt Summary: All viewed the *NH CDFA: Sullivan county Lead Abatement & Health Homes Program Investment Tax Credit Donor Management* report [See Footnote¹]. CM reported that the summary shows no changes; they are still looking for \$19k.
- c. April 2022 Monthly Financials: CM briefly reviewed the reports [Footnote¹]
- d. FY23 Budget Timeline/Schedule & Any Updates: CM noted most of the members were available during the afternoon. After a brief discussion BOC members concurred to add Fri. 13-May to the schedule. CM explained, primarily, they'll discuss wages.
- e. Delegation May 17, 2022, 6:30PM Meeting Planned: All viewed the draft agenda.

CM reminded all about the 1:00 p.m. Mon. 9-May GOFERR meeting in Concord.
- f. Sullivan House Sober Housing Project Update: CM provided a draft event script of the 17-May Sullivan House event and requested BOC feedback, especially related to the first page timeline. He explained if it was a good day, they can hold the event outdoors, but if not, they may need to hold it in the basement kitchen area; the ceremony begins at 12noon, then tours for invited guests, 2pm dedication and he invited Archie Mountain (AM), then more tours after. Nelson suggested they invite Harvey Hill to the dedication as AM worked for him at the Eagle for years. CM noted that NH CDFA CDBG program has \$1.5 million that could be used for delays due to covid that will be discussed during BOC new business and added that he wants to revise the motion, as it was based on MB's cursory Change Orders.

- g. Sullivan County Health Care Renovation Project Update: CM reported that he and MB attended a webinar related to the Congressional Direct Spending \$2 million. They have a window that opens from 5-May to 6-June 2022 to upload their application and provide justification and he and MB will collaborate on the items to upload. He hopes to have it completed in May prior to the deadline but will be meeting 9-May to prepare.
- h. ARPA Update: CM reported that reports were submitted to the Treasury by the deadline; that they met their obligations and there should be no further items needed!
- i. NH Association of Counties Updates
 - i. Legislative Items: CM reported that HB1417 was tabled, but that there's a Senate version that will make it.
- j. Sullivan County Economic Development Updates (SCEDU)
 - i. Sugar River Region (SRR) Destination Development: No new updates.
 - ii. Workforce Development Task Force: As it relates to the adult education classes, CM has been trying to connect with Jen Opalinski, Newport Sugar River Region Technical Center *Executive Director* (ED), who is prepping for a new Director to take over for her in June.
 - iii. SRR Trails Project: No updates.
 - iv. Comprehensive Economic Development Strategy (CEDS): nothing new to report.
- k. Greater Sullivan Strong Covid19 Assistance: Balance Disbursed, Closing 25,735 Fund/Dept, Final Report of Monies and Awards. All viewed the report [See Footnote¹]. CM explained that this is the final report and shows the account closure.
- l. Welcome to Sullivan County NH Region video: Comm. Osgood noted that CCTV has been regularly airing a county video that would be beneficial to share with new businesses looking to relocate to the area - it's a very good promotional item! CM explained that the video was created for the 2018 NHAC conference Sullivan hosted. [minute taker additional note: this video can be seen on the Sullivan County YouTube channel https://www.youtube.com/channel/UC_iMLOHgUP-Fnv7ZvBV2Ow/videos and was shared on Facebook (FB) @SullivanCountyNewHampshireGovernment and, as a response to Comm. Osgood's comment, shared on 3-May 2022 from FB and into FB groups the County participates in.]

5. Board of Commissioner Business, George Hebert, Ben Nelson & Joe Osgood

a. Any Old Business: none noted.

b. New Business:

- i. Treasurer Recommended Deputy Treasurer Appointment, Per NH RSA 29:15: Motion made by Nelson, and second by Osgood, at 4:02pm, pursuant to NH State 29:15, and as recommended by County Treasurer C. Michael Sanderson, to reappoint Arlene Adams as Deputy Treasurer. A roll call vote

was taken, with all 3-commissioners voting 'Yes.' The motion carried, unanimously.

- ii. Per NH RSA 30-B:12 Apr. 18, 2022, DOC Compliance Tour Ltr to Attorney General. CM suggested removing his name. **Nelson moved, and Osgood seconded, a motion at 4:05 p.m. pursuant to NH State 30-B:12 to approve the May 2nd memo with tour notes of findings and resolutions or proposed solutions, as presented. A roll call vote was taken, with all 3-commissioners voting 'Yes.' The motion carried, unanimously.**

- iii. CDBG Gap Funds Available for the CDBG Housing & Public Facilities: TRAILS Sullivan House 19-410-CDPF Award Project. CM reported that the application amount may be more and recommended they do a motion without a specific dollar amount, to allow him to submit the amendment and time to get more info from B&B. **Nelson moved, and Osgood seconded, a motion at 4:06 to authorize the County Manager to submit an amendment to the NH CDFA CDBG 19-410-CDPF \$500,000 award, to increase the amount to cover the excess costs due to increasing costs during covid. A roll call vote was taken, with all 3-commissioners voting 'Yes.' The motion carried, unanimously.** CM explained that once the public hearing is held, as the application will exceed a specific percent, it will go to the NH CDFA Director, then the CDFA Board, then to the Governor & Council; this process could take 6-8 weeks.

c. Upcoming meetings/events:

- i. Mon. May 16, 2022, 12Noon Sullivan House Dedication Ceremony, 2PM Regular Business Meeting & 3PM CDBG Public Hearing. Location: 19 Sullivan Street Claremont NH. CM recommended they update the 'notice' for the event to accommodate BOC members arriving earlier to prep, suggesting 11:30 a.m. and will discuss this further with Ms. Callum.

- 6. **Public Participation:** Rep. Walt Stapleton (WS) reported he had no questions and was just hearing about the SCHC project. He pointed out that Rep. Spilsbury met with Governor Sununu during Sununu's Charlestown visit and that Spilsbury asked the Governor for funding help with the project cost, to reduce the tax impact for citizens; to which the Governor said, *'You've got it!'*. Rep. WS noted that Stapleton feels it was a positive exchange but he's unsure the results. He added that the Concord finance dept was approached by the SCHC Remodel Project Work Group and the Sullivan County Executive Finance committees with the same request; plus, Rep. WS spoke directly to Councilor Kenney. Rep WS noted that facility funding requests go through GOFERR, then the Governor & Council, and he's waiting for news from the State Finance. Nelson noted that Rep. Spilsbury received more feedback to say Sullivan county project is 'in the hopper' but feels their response was less enthusiastic compared to last week.

7. Draft Meeting Minutes Review

- a. Feb. 22, 2022, 2PM Public Meeting: not in typed format.

- b. Apr. 4, 2022, 4:33PM Nonpublic Session Per RSA 91-A:3.II.a. (complete version): Ms. Callum explained that the version viewed and approved on April 18 was not complete, but this version is. **Nelson moved, and Osgood seconded, a motion to accept the Apr. 4, 2022, 4:33p.m. nonpublic minutes as printed.** Discussion: these will remain sealed until the FY23 budget is approved. **A roll call vote was taken, with all 3-commissioners voting 'Yes.' The motion carried, unanimously**
- c. Apr. 18, 2022, 3:00PM Regular Business Meeting: not in typed format.
- d. Apr. 18, 2022, 2:35PM Nonpublic Session Per RSA 91-A:3.II.b.: **Nelson moved, and Osgood seconded, a motion to accept the Apr. 18, 2022, 2:35pm nonpublic minutes as printed and to release them. A roll call vote was taken, with all 3-commissioners voting 'Yes.' The motion carried, unanimously.**
- e. Apr. 18, 2022, 4:55PM Nonpublic Session Per RSA 91-A:3.II.b.: **Nelson moved, and Osgood seconded, a motion to accept the Apr. 18, 2022, 4:55 p.m. nonpublic minutes as printed and to release them. A roll call vote was taken, with all 3-commissioners voting 'Yes.' The motion carried, unanimously.**
- f. Apr. 22, 2022, FY23 Budget Review Day: **Nelson moved, and Osgood seconded, a motion to accept the Apr. 22, 2022, FY23 Budget Review day meeting minutes as printed. A roll call vote was taken, with all 3-commissioners voting 'Yes.' The motion carried, unanimously**
- g. Apr. 22, 2022, Non-public Session Per RSA 91-A:3.II.b.: **Nelson moved, and Osgood seconded, a motion to accept the minutes as printed and to release them. A roll call vote was taken, with all 3-commissioners voting 'Yes.' The motion carried, unanimously.**

Nelson moved, and Osgood seconded, a motion at 4:15 p.m. to adjourn the public meeting to enter a nonpublic session per 91-A:3.II. (a) for the dismissal, promotion, or compensation of a public employee. A roll call vote was taken, with all 3-commissioners voting 'Yes.' The motion carried, unanimously. Those in nonpublic included: the three commissioners, and County Manager Ferland.

Respectfully submitted,



Joe Osgood, Clerk
Board of Commissioners
Sullivan County NH

JO/sjc/df

Date minutes ratified: June 6, 2022