# quadient

## Postage Meter Rental Agreement

#### Section (A) Office Information

Company Name (Full Legal Name)  DBA  T356 Market Street  Mackinsc Island  Mil 49757  City State Zip Code + 4  Danielle Leach  Contact Name  Colerk@cityofml.org  Email Address  (906) 847-3702  Phone Number  Fax Number  Phone Number  Fax Number  Mackinac Island  49757  Mackinac Island  Mil 49757  City Clerk  Contact Name  Colerk@cityofml.org  Email Address  (906) 847-3702  Phone Number  Fax Number  Mackinac Island  49757  Mackinac Island  A49757  Manielle Leach  Contact Name  Clerk@cityofml.org  Email Address  (906) 847-3702  Phone Number  Fax Number  Mackinac Island  49757  Main Post Office  Post Office Zip Code  Section (E) Postage Meter and Services  Addrinac Island  Mil 49757  City Gerk  Contact Name  Clerk@cityofml.org  Email Address  (906) 847-3702  Phone Number  Mackinac Island  Nil 49757  City Gerk  Contact Name  Clerk@cityofml.org  Email Address  (906) 847-3702  Phone Number  Mackinac Island  Nil 49757  City Gerk  Contact Name  Clerk@cityofml.org  Email Address  Section (E) Postage Meter Rental Favouries  Mackinac Island  Nil 49757  City Gerk  Contact Name  Clerk@cityofml.org  Email Address  Section (E) Postage Meter Rental Reservation Certificate  Mackinac Island  Nil 49757  City Gerk  Contact Name  Clerk@cityofml.org  Email Address  Section (E) Postage Meter Rental Reservation Certificate  Mackinac Island  Nil 49757  City Gerk  Contact Name  Clerk@cityofml.org  Email Address  Section (E) Postage Meter Rental Reservation Certificate  Mackinac Island  Nil 49757  Mackinac Island  Nil 49757  City Gerk  Contact Name  Clerk@cityofml.org  Email Address  Section (E) Postage Meter Rental Reservation Certificate  Mackinac Island  Nil 49757	Office Number	Office Name			Phone Number Date				
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Quadient, Inc. 478 Wheelers Farms Rd Milford CT 06461

www.quadient.com

# Sales Quotation



6002 Municipal Street, Weston WI 54476 Office: 800-236-5545 / Fax: 715-359-8893

Sales Person: Marcia Schumacher Date: 4/3/2025

Company Name	City of Mackinac Island					Equ	ip Contact Da	nielle Leach
Address	7358 Market Street	*,						erk@cityofmi.org
City	Mackinac Island	ŠT	. MI	Zip	49757	Phone 906-847-3702		
Billing Informat	tion							
Company Name	Same as Above					Billi	ng Contact	
Billing Address							Email	
Billing City		ST		Zip			Phone	
Model			Descri	ption			Qty	Extended Price
X3	IX-3 Series Base w/5lb II	ntegrated	Weigh Pla	atform, Mo	istener & Catch T	ray	1	\$2,030.00

#### **Special Conditions:**

- 1) Product ships to "Equipment Site Information" address listed above.
- 2) Equipment condition New.

Total (Plus Freight & Tax)

\$2,030.00

#### TERMS:

- 1) Tax & Freight: Any applicable tax and freight will be applied at time of invoicing.
- 2) Invoice Payment Terms: Due upon receipt
- 3) Payments outstanding are subject to a surcharge of 1.5% per month (18% APR) on all unpaid amounts thereafter until paid in full.
- 4) Payments outstanding requiring Office Enterprise, Inc. (OEI) collection efforts, or legal actions to collect amounts Customer owes to OEI, Customer shall pay all costs of collection, including attorney fees.
- 5) Orders exceeding \$ 10,000.00, OEI requires payment of 50% of purchase price at time of order.
- 6) There is a \$50.00 charge for checks that are returned for NSF.
- 7) OEI accepts payments via VISA, MasterCard, and Purchase Cards. There is a 3.75% management fee for all payments made by credit card.
- 8) Pricing is subject to change with or without notice based on manufacturer product price changes outside the control of OEI, or subject to change after 30 days post quotation date.
- 9) All items carry the Manufacturer's Standard Warranty.
- 10) Customer is responsible to review product specifications to validate that the equipment/technology meets requirements.
- 11) Any additional product(s) and services outside the scope of this Sales Quotation will be subject to additional charges.

#### **PAYMENT REMITTANCE:**

Office Enterprises, Inc., 6002 Municipal Street, Weston, WI 54476 Attn: Accounts Receivable

#### RETURNED MERCHANDISE POLICY:

Merchandise may not be returned unless authorized in writing by OEI. No unauthorized returns will be accepted. Returns are subject to a restocking charge. All returns must be shipped prepaid.

### **Customer Acceptance**

Your signature below acknowledges, accepts and agrees to the Terms and Conditions listed on this Sales Quotation and confirms that you have the authority to approve this order on behalf of the Company.

Signature:	Fed Tax ID#:				
Print Name & Title:	Date:				