

General Services Agency
Copier Request
Ventura County Contract #6473
County-Wide Multifunctional Device Rental Program

To: **Copier Program Administrator**

From: _____

Date: _____

Agency _____ Department: _____

Address: _____ Floor: _____ Room #: _____

Contact: _____ Telephone No. _____

Give estimated number of copies to be produced per month. _____

Give estimated number of double-sided copies to be produced per month. _____

Give the proposed location of requested copier (complete address including building, room).

Please charge the copies as follows:

Agency	Fund	Org	Object	Activity	Project

Authorized signature

For GSA-Procurement Official Use Only

This form will act as Addendum # _____ to County of Ventura Contract #6473 and is intended to be used when adding, upgrading or moving any Segment 1 through 5 Convenience Multifunctional Device.

1. The Convenience Multifunctional Device fleet is revised as follows:
 - a. The following Equipment _____ is **added** as indicated above.
 - b. Pricing and Configuration per Contract 6473.
2. Except as stated in this Addendum, County of Ventura Contract #6473 shall remain fully intact.

By signing below we indicate our acceptance of this Contract Addendum:

THE COUNTY OF VENTURA:

CANON BUSINESS SOLUTIONS, INC.

Printed Name of Authorized Representative

Printed Name of Authorized Representative

Title of Authorized Representative

Title of Authorized Representative

Signature of Authorized Representative

Signature of Authorized Representative

Date

Date

