

PO Date: 07/16/19

Page 1

**Delivery Date:** 

Supplier:

Xerox Corporation PO Box 827598 Philadelphia PA 19182-7598

CONFIRM RECEIPT OF PURCHASE ORDER AND ACCEPTANCE OF DELIVERY DATE BY EMAILING PURCHASE@SFASU.EDU.

jennifer.mccall@sfasu.edu

Send Billing Invoice to:

Stephen F. Austin State University

P.O. Box 6085

Nacogdoches, TX 75962-6085 ATTN: Accounts Payable Ship to: Vice Pres Development

Austin Bldg 303 2102 Alumni Dr SFA Box 6092

Nacogdoches TX 75962

Terms: Net 30 PURCHASE ORDER NO. MUST APPEAR ON ALL SHIPPING DOCUMENTS AND INVOICES

Item	Description	Quantity	Unit Cost	Total Cost
1	Quantity and units shown are estimates for internal purposes only. Payment shall be made only for actual goods or services received.  This PO is for the period: XXXXX  000P98527A RENTAL/LEASE, COPIER	60.00 MTH	133.2400	7,994.40
	60 Month Lease of Xerox C8030H Copier located at Development Office - 30 ppm BW - 30 ppm Color - Office Finisher - 3-Hole Punch	CO.GO INITTI	133.2400	7,004.40

Purchaser: Jennifer McCall (936) 4684263 ADDITIONAL CHARGE:
DISCOUNT/TRADE-IN:

TOTAL: CONTINUED

Stephen F. Austin State University is a tax exempt entity under Subtitle E, Chapter 151, Section 151.309 of the Tax Code, for purchases of tangible personal property herein purchased from contractor and/or shipper listed above, as this property is being secured for the exclusive use of the State of Texas.

The University reserves the right to cancel this order if delivery is not made by agreed-upon delivery date.

ADDITIONAL TERMS & CONDITIONS LISTED ON THE UNIVERSITY WEB SITE, http://www.sfasu.edu/purchasing/721.asp

STEF	PHEN	F.	AUSTIN	STATE	UNIVERSITY
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Purchasing Officer



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Terms: Net 30 PURCHASE ORDER NO. MUST APPEAR ON ALL SHIPPING DOCUMENTS AND INVOICES

Item	Description		Quantity	Unit Cost	Total Cost
	- 1 Line Fax Includes all supplies and staples, exce Per pricing and terms of State of Texa DIR-TSO-3043 Xerox Contract Number 072719100 Remove Xerox 5845APT serial numb EX7423725 at time of delivery of new equipment Serial # XXXXXXXXXX Contract Effective Date: XXXXXXXXX	er			
Purc	chaser: Jennifer McCall	(936) 4684263	ADDIT	ONAL CHARGE:	

TOTAL: CONTINUED

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STEPHEN F.	AUSTIN ST	TATE UNIVERSITY
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DISCOUNT/TRADE-IN:

Purchasing Officer	



Nacogdoches, Texas 75962-3030 Phone (936) 468-2206 \* Fax (936) 468-4282

Supplier:

Xerox Corporation PO Box 827598 Philadelphia PA 19182-7598 PO Number: **B1900509** 

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Item	Description	Quantity	Unit Cost	Total Cost
	•	Quantity	Offic 003t	rotar oost
	Installation Date: XXXXXXXX Contract term: XXXXXXXX			
	This PO is for the period: XXXXXXXX			
2	000P98527B	50.00.54	2252	00
	RENTAL/LEASE, COPY OVERAGE Development Office	50.00 EA	.0056	.28
	Xerox Ċ8030H			
	B&W Copy Overages 20,001/mo+			
3	000P98527B			
	RENTAL/LEASE, COPY OVERAGE Development Office	2,000.00 EA	.0506	101.20
	Xerox Copier C8030H			

Purchaser: Jennifer McCall (936) 4684263 ADDITIONAL CHARGE:
DISCOUNT/TRADE-IN:

TOTAL: CONTINUED

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Item	Description	Quantity	Unit Cost	Total Cost
	Color Copies 1+			
4	000P98527A RENTAL/LEASE, COPIER	60.00 MTH	133.2400	7,994.40
	60 Month Lease of Xerox C8030H Copier located at 3034 Raguet Street for Phone Jacks30 ppm BW -30 ppm Color -Office Finisher -3 Hole Punch -1 Line Fax Includes all supplies and staples, except paper			
	Remove Xerox 3615DN Serial Number			
	-h	ADDITI	ONAL CHARCE.	

Purchaser: Jennifer McCall (936) 4684263 ADDITIONAL CHARGE:
DISCOUNT/TRADE-IN:

TOTAL: CONTINUED

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Nacogdoches TX 75962

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Item	Description	Quantity	Unit Cost	Total Cost
	A2T197199 at time of deliver of new equipment Seriel #XXXXXXXXX Contract Effective Date: XXXXXXX Installation Date: XXXXXXXXX Contract Term: XXXXXXXXXX			
5	000P98527B RENTAL/LEASE, COPY OVERAGE Phone Jacks - Raguet Street Xerox C8030H B&W Copy Overages 20,000/mo+	50.00 EA	.0056	.28
6	000P98527B RENTAL/LEASE, COPY OVERAGE	2,000.00 EA	.0506	101.20
Pur	chaser: Jennifer McCall (036) 468426	23 ADDIT	ONAL CHARGE:	

ADDITIONAL CHARGE: Purchaser: Jennifer McCall (936) 4684263 DISCOUNT/TRADE-IN:

> TOTAL: CONTINUED

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ST	EPH	HEN	F. /	AUS'	TIN	STAT	re u	NIVE	ERSIT	Ύ
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em	Description		Quantity	Unit Cost	Total Cost
Phone Jacks Xerox Copier Color Copies All work is to workmanlike protection protection protection protection protection protection improvements consistent with practices, and from date of contractor and federal or	- Raguet Street C8030H	dscaping ssible ear ate and	Quantity	Unit Cost	Total Cost
Purchaser: Jennife	· MoCall (6	036) 4684263	ADDIT	ONAL CHARGE:	

Purchaser: Jennifer McCall (936) 4684263 ADDITIONAL CHARGE:
DISCOUNT/TRADE-IN:

TOTAL: CONTINUED

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Nacogdoches, Texas 75962-3030 Phone (936) 468-2206 \* Fax (936) 468-4282 PO Number: **B1900509** 

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Item **Description** Quantity **Unit Cost Total Cost** jurisdiction over this work. All work is to be completed as mutually agreed by and between the University and the Contractor. Failure to complete work (including clean-up) by the mutually agreed date shall be deemed as a breach of contract. Liquidated damages in the amount of \$500.00 per calendar day will be assessed, not as a penalty, but as liquidated damages for such breach of contract. Safe working conditions must be maintained on and around work site at all times. Barricades and other protective devices are to be used as necessary to prevent injury to persons or property. All reasonable precautions are to be taken. Purchaser: Jennifer McCall (936) 4684263 ADDITIONAL CHARGE:

DISCOUNT/TRADE-IN:

TOTAL: CONTINUED

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Item	Description	Quantity	Unit Cost	Total Cost
	Payment will be made lump-sum upon completic or as otherwise mutually agreed between Contra and the University.  The Contractor shall not commence work under Contract until Contractor has obtained all the insurance required hereunder and certificates of such insurance have been filed with and reviewe by SFASU. Acceptance of the insurance certificates by SFASU shall not relieve or decrease the liability of the Contractor. If policies are not written for the amounts specified below (except Workers' Compensation Employer's Liability), Contractor shall carry Excess Liability insurance for any difference in	ctor this d		
Purc	haser: Jennifer McCall (936) 4	.684263 <b>ADDI</b>	TIONAL CHARGE:	<u>I</u>

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STEPHEN F.	AUSTIN ST	TATE UNIVERSITY
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**DISCOUNT/TRADE-IN:** 

TOTAL:

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Purchasing Officer	



Procurement and Property Services Nacogdoches, Texas 75962-3030 Phone (936) 468-2206 \* Fax (936) 468-4282

РО	Number:	B1900509

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Maria .				
Item	Description	Quanti	ty Unit Cost	Total Cost
is provi primary This in scop thirty (3 days fo the Uni Contrac primary Stephe arising Step officials	ts specified. If Excess Liability insurar ided, it shall follow the form of the policy.  Is insurance shall not be canceled, limit are of coverage, or non-renewed until af 30) days prior written notice, or ten (10) or non-payment of premium, has been exersity.  It is insurance shall be deemed to with respect to any insurance carried on F. Austin State University for liability out of operations under this Contract. Othen F. Austin State University, its state university its state university for liability out of operations and as additional lunteers shall be named as additional	ed ter ) given to by		
Purchaser: J	ennifer McCall (936	6) 4684263	ADDITIONAL CHARGE:	

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Item	Descripti	on	Quantity	Unit Cost	Total Cost
	insured. This is not applicable to Compensation policy. The Workers' Compensation and Liability policy will provide a waiv subrogation in favor of the Unive The Workers' Compensation ins must include the responsibility of to provide coverage for every we the Contractor's policy or under the provided by a subcontractor. The policy shall provide that, in the expusion coverage of a working insurance coverage is provided by policy.	o the Workers' d Employer's er of ersity. urance coverage f the Contractor orker either under the policy e Contractor's event that a ovide workers' rker, that such	Quantity	Unit Cost	Total Cost
Purc	chaser: Jennifer McCall	(936) 4684263	ADDI	TIONAL CHARGE:	

**DISCOUNT/TRADE-IN:** 

TOTAL: CONTINUED

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tem	Descript	ion	Quantity	Unit Cost	Total Cost
	Unless otherwise provided for Contractor shall provide and mat Work covered in this Contract is accepted by SFASU, the minimus coverage as follows:  TYPE OF COVERAGE / LIMITS Workers' Compensation Coverate Employer's Liability - \$1,000,000 Comprehensive General Liability - \$1,000,000 each occurrence -\$2,000,000 general aggregar -\$2,000,000 products/comple Comprehensive Automobile Liability -\$1,000,000 ea accident- Cor	uintain, until the completed and um insurance  S OF LIABILITY age OR occur/aggregate  te ted operations aggrepility			
Purc	chaser: Jennifer McCall	(936) 4684263	ADDIT	IONAL CHARGE:	.00

DISCOUNT/TRADE-IN: .00
TOTAL: 16,191.76

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