General Services Agency
Copier Request
Ventura County Contract #7895
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	Unit	Activity	Function	Program

_____
Authorized signature

For GSA-Procurement Official Use Only

This form will act as Addendum # _____ to County of Ventura Contract #7895 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 7895.
2. Except as stated in this Addendum, County of Ventura Contract #7895 shall remain fully intact.

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

THE COUNTY OF VENTURA:

_____
Printed Name of Authorized Representative

_____
Title of Authorized Representative

_____
Signature of Authorized Representative

_____
Date

CANON SOLUTIONS AMERICA, INC.

_____
Printed Name of Authorized Representative

_____
Title of Authorized Representative

_____
Signature of Authorized Representative

_____
Date