



Genesis of Oklahoma Maintenance Agreement

Billing Information

Customer Name (Full Legal Name): Muskogee County Court Clerk		
Billing Address: PO Box 1350		
Billing City: Muskogee	State: OK	Zip: 74402
Billing Contact Name: Meagan Coates	Phone: 918-682-7873	
Billing Contact Title:	Fax:	
Email Address: Meagan.vanbrunt@oscn.net		
Additional Contact Names:		

Installation Information (If Different than Billing Information)

Customer Name (Full Legal Name):		
DBA:		
Installation Address: 220 State St. 2 nd floor		
Installation City: Muskogee	State: OK	Zip: 74401
Installation Contact Name:	Phone:	
Installation Contact Title:	Fax:	
Email:	PO #:	

Equipment to Be Covered by This Maintenance Agreement

Product Model #	Serial Number	Base Payment Amount	Billing Frequency	B&W Volume Covered	B&W Overage Rate	Color Volume Covered	Color Overage Rate
CS 5002i	VFB7202086	\$150.50	MO	10,000	.015	N/A	N/A

Special Maintenance Terms and Conditions:

C00000312-05
PACKET 2613

Your signature constitutes an offer to enter into the Genesis Maintenance Agreement and acknowledges that you have received, read, and agree to the Terms and Conditions (version GENMA-V03-18), which are also available at <https://www.genesisok.com/maintenance>, and that you are authorized to sign the agreements on behalf of the Customer identified above. The applicable agreements will become binding on the company (identified above) only after an authorized Genesis individual accepts your offer by signing below, or when the equipment is delivered to Installation Address.

APPROVAL		
 Authorized Customer Signature	Print Name and Title _____	Date Accepted _____
 Authorized OMECorp Genesis Signature	 Print Name and Title Office Manager	Date Accepted 06-10-2022

13 day of Jun 2022
Chairman [Signature]
Member [Signature]
Member [Signature]
Attest [Signature]
County Clerk

