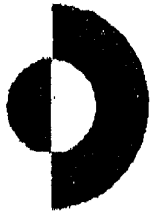


PREVENTIVE MAINTENANCE AGREEMENT



DAKOTA BUSINESS CENTER
your center for solutions

AGREEMENT NO. _____

CUSTOMER NO. 4024

EFFECTIVE THE FIRST DAY OF May 2001
MONTH YEAR

THRU THE LAST DAY OF April 2002
MONTH YEAR

AGREEMENT INVOICING _____

306 East St. Joseph, PO Box 2353, Rapid City, SD 57709-2353 605-342-8934/1-800-292-8934
102 S. Central Ave., Pierre, SD 57501 605-224-8246/1-800-454-6346; Service: 1-800-292-8934

MAKE/MODEL	SERIAL NUMBER	ZONE	ANNUAL AMOUNT	PRORATED AMOUNT	MONTHLY AMOUNT	COST/COPY	COPY ALLOWANCE	OVERAGE
Sharp AR-205 Digital		1	\$270.00				18,000	.015
Copier/Printer								
Sharp AR-PB8		1	included					
Control Printer								
Sharp AR-RP1		1	included					
Rev Doc Feeder								
	AR-2001D							
	Toner Developer							

Special Instructions: include toner/developer

Periodic Inspections Will Typically Occur _____

SUBTOTAL: \$270.00
TAX: Gov't
TOTAL: \$270.00

PARTS REPLACEMENT-Parts are checked for wear and replaced when necessary free of charge (Except for supplies and other consumable items.)
EMERGENCY SERVICE-Provided at no additional charge during Dakota Business Center's normal business hours.
REDUCED EXPENSES-One annual invoice reduces your administrative expense.
ENGINEERING IMPROVEMENTS-Applicable engineering changes designed to improve performance or reduce service time are installed at no extra cost when determined applicable by Dakota Business Center.
PERIODIC INSPECTIONS-All necessary cleaning, lubrication and adjustments performed at appropriate intervals assures maximum performance and minimum downtime.
THIS IS NOT AN INVOICE - After your signed approval, please return one signed copy to Dakota Business Center. An invoice will be mailed for your payment.

CUSTOMER AUTHORIZATION/INFORMATION

SEE TERMS ON THE REVERSE SIDE

Customer hereby orders and Dakota Business Center agrees to provide maintenance service in accord with the terms and conditions specified in this agreement.

DAKOTA BUSINESS CENTER

BY _____
AUTHORIZED SIGNATURE

BILLING INFORMATION:

PURCHASE ORDER NO. _____
City of Rapid City
NAME
300 6th Street
MAILING ADDRESS
Rapid City SD 57701
CITY STATE ZIP

SERVICE LOCATION (if different)

Sally 394-4174
CONTACT PHONE NO.
Water Reclamation
NAME
7903 South 3rd Drive
STREET ADDRESS
Rapid City SD 57703
CITY STATE ZIP

TITLE _____ DATE _____

AUTHORIZED BY _____