

Check Applicable Box☒ Purchase☐ Lease☐ Other:

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In Process



MyKMBS.com Access Request Form

Customer Name: SAUK COUNTYBusiness Class: ☐ Corporate Acct ☒ National ☐ Government ☐ BranchNew or Existing Customer: ☐ New ☒ ExistingSAP Account #: 0004183405/0004183405
Required if existing

Serial Number(s):	1	_____	4	_____	7	_____
<small>(Include at least one)</small>	2	_____	5	_____	8	_____
	3	_____	6	_____	9	_____

USER

Role: ☒ Fleet Manager* ☐ Local Manager** ☐ Meters Only ☐ Order Supplies Only ☐ Service Calls Only

If Fleet Manager or Local Manager is selected, also check one of the following:

☐ Set-up to view all locations ☐ Set-up to view only the location(s) linked to specified serial number(s)First Name: MATTRequiredLast Name: VODAKRequiredEmail: MATT.VODAK@SAUKCOUNTYWI.GOVRequired

USER

Role: ☒ Fleet Manager* ☐ Local Manager** ☐ Meters Only ☐ Order Supplies Only ☐ Service Calls Only

If Fleet Manager or Local Manager is selected, also check one of the following:

☐ Set-up to view all locations ☐ Set-up to view only the location(s) linked to specified serial number(s)First Name: LISARequiredLast Name: VODAKRequiredEmail: LISA.VODAK@SAUKCOUNTYWI.GOVRequired

USER

Role: ☐ Fleet Manager* ☐ Local Manager** ☐ Meters Only ☐ Order Supplies Only ☐ Service Calls Only

If Fleet Manager or Local Manager is selected, also check one of the following:

☐ Set-up to view all locations ☐ Set-up to view only the location(s) linked to specified serial number(s)

First Name: _____

Required

Last Name: _____

Required

Email: _____

Required

* Fleet Manager - All capabilities of Local Managers as well as the ability to manage users and see reports.

** Local Manager - Gives user the ability to place supply orders, initiate service calls, report meter reads and pay invoices by credit card.

Have customer alert his/her IT Department to accept the following email addresses:

meterreads@kmbs.konicaminolta.us activation@kmbs.konicaminolta.us extranet@kmbs.konicaminolta.us

KMBS

Representative: NATHAN ROZEK Territory Code: 117328Sales Manager: KEVIN CRAWFORD Territory Code: 122945

Corporate Acct Mgr: _____ Territory Code: _____

If ApplicableBranch Name: 932 - WISCONSIN Branch Number: 932

Branch forms are to be submitted with your sales order to your local branch administrators

For Corporate, National, and Government accounts, email completed form to mykmbs.nad@kmbs.konicaminolta.us

COMMENTS

In Process



Order Package Acceptance Agreement

Customer Name/Address:

SAUK COUNTY
505 BROADWAY ST STE C103
BARABOO, WI 53913-2404

Customer's signature below constitutes Customer's acceptance of the preceding forms in this Order Package (as identified by Order Package ID S00533727 time stamped 12/03/19 10:53 AM).

This Order Package is governed by the terms and conditions of the Master Agreement contract between Konica Minolta Business Solutions U.S.A., Inc. and 3091- NASPO COOPERTIVE PURCHASING Through WIS. P.A. #505ENT-M15-MFDCOPIER-04, dated 01/01/2015 terms of which are incorporated into this agreement. If payment by credit card is indicated above, Customer hereby grants KMBS the authority to charge the Customer's credit card in the amount indicated (plus applicable taxes). KMBS assumes no responsibility to pick-up, return to any party, and/or resolve any financial obligations on any existing Customer equipment except as specifically stated in this Agreement or separately executed form.

Not binding on KMBS until signed by KMBS Manager.

Authorized Customer Representative

Name: Matt Vodak
(Please Print)


Signature: _____

Title: Systems Support

Date: _____

KMBS Representative


Name: NATHAN N. ROZEK
(Please Print)

Signature: 
DocuSigned by:
NATHAN N. ROZEK
328E7F0C24014B6...

Date: 12/3/2019

KMBS Manager

Name: Kevin Crawford
(Please Print)

Signature: 
DocuSigned by:
Kevin Crawford
BBBA9020BE15464...

Date: 12/4/2019