



Quotation Form ID #: _____

PART 1
L1236 Revised

Eligible Entity Requesting Quotations:	
Date: _____	(Submitted to IT Equipment Contractor for Quote)
Date: _____	(Submitted to Lease Contractor for Quote)
Contact Person: Dan Folloni	Telephone: (617) 626-4494
Eligible Entity Name: Office of the Governor	Fax Number: (617) 727-3766
Address: State House Room 106 Boston, MA 02133	E-Mail Address: _____

BEFORE COMPLETING THIS SECTION, please read the instructions starting on page 1, and Schedules 1A, 1B and 1C of this form. The IT Equipment Contractor must provide a quote for the "Total IT Equipment Price" for IT Equipment to be leased which is listed in Schedule 1A. By executing this form, the IT Equipment Contractor agrees that, if selected, it shall provide the IT Equipment in accordance with the terms of the IT Equipment Contract.

IT EQUIPMENT CONTRACTOR IT EQUIPMENT PRICE QUOTATION (Quotes Must Be Received By Eligible Entity Within Five (5) Business Days)	
IT Equipment Contractor Name: Dell, Inc.	Contract #: ITC-16 ITC02
Vendor Code Number: 74-2616805	Telephone Number: 781-337-9583
Contact Person: Donna Gill	Fax Number: 781-331-5735
E-Mail Address: donna.gill@dell.com	

Total Number of IT Equipment Items From Schedule 1A	Total IT Equipment Price from Schedule 1A
115	\$ 108,004.55

Signature: Donna Gill
IT Equipment Contractor Authorized SignatoryDate: 6/10/05
(Quotation Submitted to Eligible Entity)Title: Account Executive

PART 2
L1236 Revised

BEFORE COMPLETING THIS SECTION, please read the instructions starting on page 1, Schedules 2A and 1B of this form. The Statewide Lease Contractor must provide a quote for the "Total IT Equipment Price" for IT Equipment to be leased which is listed in Schedule 1A. By executing this form, the Lease Contractor agrees, that if selected, it shall provide the Term Lease for the IT Equipment in accordance with the terms of the Statewide Contract.

LEASE CONTRACTOR - IT EQUIPMENT LEASE QUOTATION
(Quotes Must Be Received By Eligible Entity Within Five (5) Business Days)

ITC02 Lease Contractor Name: Ontario Investments, Inc. Vendor Code Number: 161224033 0007 Contact Person: James Marsallo, Jr.	Telephone Number: (315) 431-4676 Fax Number: (315) 431-4675 E-Mail Address: jimjr@ontinv.com
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Total Duration of Lease(s) (Months)	Total of all Lease Payments for Duration of Lease(s)
36	\$107,494.77

Signature: James Marsallo Jr.
ITC02 Lease Contractor Authorized Signatory

Date: 6/10/05
(Quotation Submitted to Eligible Entity)

Title: VICE PRESIDENT

PART 3
L1236 Revised

ELIGIBLE ENTITY ACCEPTANCE OF QUOTE AND NOTICE TO PROCEED

As of the date executed below the Eligible Entity accepts the quotes provided by the IT Equipment Contractor and the Statewide Lease Contractor identified in Part 1 and Part 2 above and authorizes the IT Equipment Contractor and Statewide Lease Contractor to commence procedures to ensure that the IT Equipment is delivered and accepted by the "Expected Delivery Date" identified in Schedule 1A.

Signature: _____

Eligible Entity Authorized Signatory

Date: 6/22/05Title: Team Leader LITN & DESKTOP

THE ACCEPTANCE DATE WILL AUTOMATICALLY OCCUR 30 DAYS AFTER THE IT EQUIPMENT SHIP DATE WITHOUT WRITTEN NOTICE TO THE LEASING COMPANY! IF THE EQUIPMENT DOES NOT ARRIVE AS EXPECTED, THE ELIGIBLE ENTITY MUST NOTIFY THE LEASING COMPANY AND IT EQUIPMENT CONTRACTOR IN WRITING!!

A Lease Commitment will be void prior to the commencement of a Lease if:

- a) the Eligible Entity notifies the Lease Contractor, in writing, of non-acceptance of the IT Equipment within the time frame for acceptance as specified in RFR Section 7.4.

The Eligible Entity is responsible for returning the IT Equipment back to the IT Equipment Contractor within five (5) days of non-acceptance of the IT Equipment and in the same condition as the Eligible Entity received the IT Equipment. Failure to do so within the timeframe stated above will result in the Lease commencing with payments due until the Eligible Entity returns the IT Equipment (proof of return will be available to the Lease Contractor upon request). The Eligible Entity will be responsible for insuring that the IT Equipment is free of any damages while under their possession.

- b) the IT Equipment is not delivered to the Eligible Entity, or
- c) the Lease Contractor conditions the Lease on the Eligible Entity's execution of additional terms and conditions or other documentation that was not approved under this RFR or by the IT PMT.

P A R T 4
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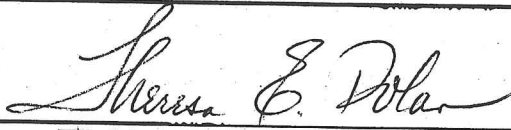
**UPON EXECUTION, THE ELIGIBLE ENTITY MUST FAX THIS NOTICE TO
THE IT EQUIPMENT CONTRACTOR AND LEASE CONTRACTOR.**

NOTE: ELIGIBLE ENTITY -- ONLY COMPLETE IF ACCEPTING THE EQUIPMENT EARLY

IT EQUIPMENT EARLY ACCEPTANCE BY ELIGIBLE ENTITY

The Eligible Entity certifies that "Expected Date of Delivery" of IT Equipment listed in Schedule 1A is amended to change the date as indicated below and is to be delivered in accordance with the IT Equipment Contractor responsibilities. The Eligible Entity certifies that the IT Equipment listed in Schedules 1A and 1C to be Term Leased under the Statewide IT Lease Contract is essential to the proper, efficient and economic operations of the Eligible Entity, that the Eligible Entity is a public body and authorized to enter into this Lease, that the Eligible Entity will comply with the terms outlined in the Statewide IT Lease Contract and that, for the current fiscal year Lease payments under the Lease, the Eligible Entity has sufficient unexhausted and unencumbered appropriations or other funds for the lease payments due in the current fiscal year.

Signature: _____



Eligible Entity Authorized Signatory

Date: _____

6/22/05

Title: _____

THELSEA E. DOLAN