



Customer Agreement

FP Mailing Solutions
140 N. Mitchell Ct, Ste 200
Addison, IL 60101-5629
Tel: (800) 341-6052
www.fp-usa.com

CUSTOMER INFORMATION

Billing Address	
Customer: Labor Law Poster Service	
Department:	
Street: 5859 W SAGINAW HWY STE 343	
City: LANSING	County:
State: MI	Zip: 48917-2460
Tel: 5173214144	Fax:
E-mail: MICHAELB@LLPSINC.COM	
Contact Name: MICHAEL BISHOP	
Deliver To: <input type="checkbox"/> Dealer <input type="checkbox"/> Customer <input type="checkbox"/> Fulfilled from Dealer Inventory	
<input type="checkbox"/> Existing Customers Only: check box if Billing Address has changed.	

Shipping & Installation Address (if different than Billing)	
Customer: Labor Law Poster Service	
Department:	
Street: 6323 W SAGINAW HWY STE E	
City: LANSING	County:
State: MI	Zip: 48917-4725
Tel:	Fax:
E-mail:	
Contact Name:	
Mailing Address: <input type="checkbox"/> Same as Billing	
<input type="checkbox"/> Existing Customers Only: check box if Shipping & Install Address has changed.	

RENTAL INFORMATION

Quantity	Item #	Item Description	Monthly Rate	Rental Billing Delivery (select one)
1	P500C/PINBASE25	PostBase Insight i2 IMI Meter & Base	included	<input type="checkbox"/> Electronic Billing
1	UNL & RGPOST	Unlimited Resets & RateGuard	included	<input checked="" type="checkbox"/> Paper Billing
1	PMANSEAL	Manual Sealer	included	Rental Billing Frequency (select one)
1	FPPSUSPS	Parcel Shipping: Single User, USPS	included	<input type="checkbox"/> Annual Billing
		2 MONTHS FREE		<input type="checkbox"/> Semi-Annual
				<input checked="" type="checkbox"/> Quarterly Billing
Term of Contract: 26 months* Total Monthly Payment \$36.95				

Terms and Conditions: By signing below, I hereby acknowledge and agree that FP's standard shipping rates and the additional terms and conditions available on the FP website at www.fp-usa.com/terms-conditions are applicable to, and incorporated by reference into, this agreement. (If you do not have access to the internet, please contact FP directly at 800.341.6052 and we will provide you with a copy for your records.) * 36 Month Initial Term will apply unless otherwise indicated above.

CUSTOMER ACCEPTANCE (please complete all fields)

Customer Acceptance of Terms		Dealer Information	
Print Name of Authorized Representative: Michael Bishop		Selling Dealer Name: FP MAILING SOLUTIONS Dealer #: 4960	
Tel: 5173214144 x355		Address: 140 N MITCHELL CT SUITE 200 ADDISON, IL 60101	
Tax ID: 383468792	State: MI	Tel: 630 827-5737	Fax: 800 884-6905
Authorized Signature: 		Sales Representative Name: ERNEST DELORD HR#1714	
Date: 12/19/2023		Servicing Dealer Name:	Svc. Dealer #: 4960

DEALER & INTERNAL USE ONLY

<input type="checkbox"/> New Customer	<input type="checkbox"/> Lease Company: _____	Promo Code: _____
<input checked="" type="checkbox"/> Upgrade / Model Change	<input type="checkbox"/> Major Account: _____	Package Code: PI2A
<input type="checkbox"/> Renewal (no change of equipment)	<input type="checkbox"/> GSA / State Contract No.: _____	<input type="checkbox"/> Price or Terms Exception Approval (Form Attached)
<input type="checkbox"/> Coterminous Add-On: _____	Master Billing Acct. No.: _____	<input type="checkbox"/> USPS® Location: (CPU Letter Attached)
<input type="checkbox"/> Change of Ownership	Master Postage Acct. No.: _____	<input type="checkbox"/> Tax-Exempt (Certificate Attached)
Existing Account No.: 600052638		