FORM A: PROPOSAL (See B10)

1.	Contract Title	PRINT SOLUTIONS AND	RELATED SERVICES					
2.	Bidder							
		Name of Bidder						
		Street						
		City	Province	Postal Code				
		Facsimile Number						
	(Mailing address if different)	Street or P.O. Box						
		City	Province	Postal Code				
		The Bidder is:						
	(Choose one)	a sole proprietor						
		a partnership						
		a corporation						
		carrying on business und	er the above name.					
3.	Contact Person	The Bidder hereby authorizes the following contact person to represent the Bidder for purposes of the Proposal.						
		Contact Person	Title					
		Telephone Number	Facsimile Number					
4.	Definitions		ed in the Contract shall have eneral Conditions and D3	ve the meanings				
5.	Offer		s to perform the Work in acc in Canadian funds, set out or					

6.	Execution of Contract	The Bidder agrees to execute and return the Contract no later than
		seven (7) Calendar Days after receipt of the Contract, in the manner specified in C4.1.

- 7. Commencement of the Work The Bidder agrees that no Work shall commence until he is in receipt of a notice of award from the Award Authority authorizing the commencement of the Work.
- 8. Contract The Bidder agrees that the Request for Proposal in its entirety shall be deemed to be incorporated in and to form a part of this offer notwithstanding that not all parts thereof are necessarily attached to or accompany this Proposal.
- 9. Addenda The Bidder certifies that the following addenda have been received and agrees that they shall be deemed to form a part of the Contract:

No. _____ Dated _____

- 10. Time This offer shall be open for acceptance, binding and irrevocable for a period of one hundred twenty (120) Calendar Days following the Submission Deadline
- 11. Signatures The Bidder or the Bidder's authorized official or officials have signed this

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	,		

Signature of Bidder or Bidder's Authorized Official or Officials

(Print here name and official capacity of individual whose signature appears above)

(Print here name and official capacity of individual whose signature appears above)

Bid Submission Page 3 of 39

FORM B (R3): PRICES (See B11 and B13)

PRINT SOLUTIONS AND RELATED SERVICES

AWARD AS A WHOLE - SECTION A - CITY LOCATIONS OTHER THAN LIBRARIES

DESCRIPTION		SPEC. REF.	UNIT OF MEASURE	APPROXIMATE Q	UANTITY		UNIT PRI	CE
PHASE 1 - Assessment Phase								
Assessment of Organization		D2, B22.11	Lump Sum	1				
PHASE 2 - Implementation Phas	е							
Print Behaviour Software		B14.11.1						
Print Behaviour Software licenses/main	tenance	B14.11.1	Each Year	1				
Included in price/page? (Y/N)		(Y/N)						
LOW VOLUME CLASS		BLACK & WHITE				COLOUR		
DESCRIPTION	SPEC. REF.	DEVICE OPTION #1	DEVICE OPTION #2	DEVICE OPTION #3	DEVICE OPTION #	#4	DEVICE OPTION #5	DEVICE OPTION #6
LOW VOLUME CLASS								
2000 Prints/Copies per month (please indicate)								
2 Trays minimum including M.P. Tray (please indicate)								
250 capacity (please indicate)								
Letter / Legal included								-
ADF/RADF included								_
Sorting included								
PCL and Postscript included								
NOT TO EXCEED 15 AMP								
Make / Model (please indicate)	E3							
Pages Per Minute (please indicate)	E3							

Bid Submission Page 4 of 39

FORM B(R3): PRICES (See B11 and B13)

PRINT SOLUTIONS AND RELATED SERVICES

AWARD AS A WHOLE - SECTION A - CITY LOCATIONS OTHER THAN LIBRARIES (continued) UNIT PRICES

LOW VOLUME CLASS					COLOUR			
(continued)	0050							
DESCRIPTION	SPEC. REF.	DEVICE OPTION #1	DEVICE OPTION #2	DEVICE OPTION #3	DEVICE OPTION #4	DEVICE OPTION #5	DEVICE OPTION #6	
Scan to Email and USB (Y/N)	E3	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	
Networked Faxing (Y/N)	E3	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	
11 X 17 Paper Size (Y/N)	E3	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	
Duplex Printing (Y/N)	E3	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	
Duplex Scanning (Y/N)	E3	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	
Duplex Faxing (Y/N)	E3	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	
8.5 x 14 Copy/Scan off the Glass (Y/N)	E3	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	
Staggering / Offsetting (Y/N)	E3	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	
Stapling (Y/N)	E3	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	
Hole Punch (Y/N)	E3	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	
5 YEAR LEASE OPTION:				-		-	_	
Cost per Page (B&W)								
Cost per Page (Colour)								
Monthly Payment (if applicable)								
Other Proposed Payment Options								
Buy out at Contract end								
SHORT TERM RENTAL:								
Cost per Page								
Monthly Rental								

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FORM B(R3): PRICES (See B11 and B13)

PRINT SOLUTIONS AND RELATED SERVICES

AWARD AS A WHOLE - SECTION A - CITY LOCATIONS OTHER THAN LIBRARIES (continued)

MID VOLUME CLASS			BLACK & WHITE			COLOUR			
DESCRIPTION	SPEC. REF.	DEVICE OPTION #1	DEVICE OPTION #2	DEVICE OPTION #3	DEVICE OPTION #4	DEVICE OPTION #5	DEVICE OPTION #6		
MID VOLUME CLASS									
5,000-15,000 Prints/Copies per month (Please indicate)									
4 Trays minimum including M.P. Tray (Please indicate)									
250 capacity (Please indicate)									
Letter / Legal included									
ADF/RADF included									
Sorting included									
PCL and Postscript included									
NOT TO EXCEED 15 AMP									
Make / Model (please indicate)	E3								
Pages Per Minute (please indicate)	E3								
Scan to Email and USB (Y/N)	E3	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)		
Networked Faxing (Y/N)	E3	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)		
11 X 17 Paper Size (Y/N)	E3	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)		
Duplex Printing (Y/N)	E3	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)		
Duplex Scanning (Y/N)	E3	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)		
Duplex Faxing (Y/N)	E3	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)		
8.5 x 14 Copy/Scan off the Glass (Y/N)	E3	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)		
11 x 17 Copy/Scan off the glass (Y/N)	E3	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)		

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FORM B(R3): PRICES (See B11 and B13)

PRINT SOLUTIONS AND RELATED SERVICES

AWARD AS A WHOLE - SECTION A - CITY LOCATIONS OTHER THAN LIBRARIES (continued)

MID VOLUME CLASS									
(continued)			BLACK & WH	ITE		COLOUR			
DESCRIPTION	SPEC. REF.	DEVICE OPTION #1	DEVICE OPTION #2	DEVICE OPTION #3	DEVICE OPTION #4	DEVICE OPTION #5	DEVICE OPTION #6		
Staggering / Offsetting (Y/N)	E3	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)		
Stapling (Y/N)	E3	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)		
Hole Punch (Y/N)	E3	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)		
5 YEAR LEASE OPTION:									
Cost per Page (B&W)									
Cost per Page (Colour)									
Monthly Payment (if applicable)									
Other Proposed Payment Option									
Buy out at Contract end									
SHORT TERM RENTAL:									
Cost per Page									
Monthly Rental									

Bid Submission Page 7 of 39

FORM B(R3): PRICES (See B11 and B13)

PRINT SOLUTIONS AND RELATED SERVICES

AWARD AS A WHOLE - SECTION A - CITY LOCATIONS OTHER THAN LIBRARIES (continued)

HIGH VOLUME CLASS		BLACK & WHITE			COLOUR			
DESCRIPTION	SPEC. REF.	DEVICE OPTION #1	DEVICE OPTION #2	DEVICE OPTION #3	DEVICE OPTION #4	DEVICE OPTION #5	DEVICE OPTION #6	
HIGH VOLUME CLASS								
25,000 Prints/Copies per month (Please indicate)								
4 Trays minimum including M.P. Tray (Please indicate)								
250 capacity (Please indicate)								
Letter / Legal included				_				
ADF/RADF included				war and a start and a start and a start		Non Const	and the second se	
Sorting included								
PCL and Postscript included								
NOT TO EXCEED 15 AMP								
Make / Model (please indicate)	E3							
Pages Per Minute (please indicate)	E3							
Scan to Email and USB (Y/N)	E3	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	
Networked Faxing (Y/N)	E3	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	
11 X 17 Paper Size (Y/N)	E3	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	
Duplex Printing (Y/N)	E3	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	
Duplex Scanning (Y/N)	E3	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	
Duplex Faxing (Y/N)	E3	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	
8.5 x 14 Copy/Scan off the Glass (Y/N)	E3	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	
11 x 17 Copy/Scan off the glass (Y/N)	E3	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	

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FORM B(R3): PRICES (See B11 and B13)

PRINT SOLUTIONS AND RELATED SERVICES

AWARD AS A WHOLE - SECTION A - CITY LOCATIONS OTHER THAN LIBRARIES (continued)

HIGH VOLUME CLASS								
(continued)			BLACK & WH	ITE		COLOUR		
DESCRIPTION	SPEC. REF.	DEVICE OPTION #1	DEVICE OPTION #2	DEVICE OPTION #3	DEVICE OPTION #4	DEVICE OPTION #5	DEVICE OPTION #6	
Staggering / Offsetting (Y/N)	E3	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	
Stapling (Y/N)	E3	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	
Hole Punch (Y/N)	E3	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	
5 YEAR LEASE OPTION:								
Cost per Page (B&W)								
Cost per Page (Colour)					-			
Monthly Payment (if applicable)								
Other Proposed Payment Option								
Buy out at Contract end								
SHORT TERM RENTAL:								
Cost per Page								
Monthly Rental								

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FORM B(R3): PRICES (See B11 and B13)

PRINT SOLUTIONS AND RELATED SERVICES

AWARD AS A WHOLE – SECTION B – LIBRARIES (continued)

LOW VOLUME CLASS									
STAFF ACCESS			BLACK & WH	ITE		COLOUR			
DESCRIPTION	SPEC. REF.	DEVICE OPTION #1	DEVICE OPTION #2	DEVICE OPTION #3	DEVICE OPTION #4	DEVICE OPTION #5	DEVICE OPTION #6		
LOW VOLUME CLASS									
2000 Prints/Copies per month (Please indicate)									
2 Trays minimum including M.P. Tray (Please indicate)									
250 capacity (Please indicate)									
Letter / Legal included									
ADF/RADF included									
Sorting included									
PCL and Postscript included									
NOT TO EXCEED 15 AMP									
Make / Model (please indicate)	E4								
Pages Per Minute (please indicate)	E4								
Scan to Email and USB (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)		
Networked Faxing (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)		
11 X 17 Paper Size (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)		
Duplex Printing (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)		
Duplex Scanning (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)		
Duplex Faxing (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)		
8.5 x 14 Copy/Scan off the Glass (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)		

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FORM B(R3): PRICES (See B11 and B13)

PRINT SOLUTIONS AND RELATED SERVICES

AWARD AS A WHOLE – SECTION B – LIBRARIES (continued)

LOW VOLUME CLASS			BLACK & WHITE			COLOUR			
STAFF ACCESS (continued)									
DESCRIPTION	SPEC. REF.	DEVICE OPTION #1	DEVICE OPTION #2	DEVICE OPTION #3	DEVICE OPTION #4	DEVICE OPTION #5	DEVICE OPTION #6		
Staggering / Offsetting (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)		
Stapling (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)		
Hole Punch (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)		
5 YEAR LEASE OPTION:									
Cost per Page (B&W)									
Cost per Page (Colour)									
Monthly Payment (if applicable)									
Other Proposed Payment Option									
Buy out at Contract end									
SHORT TERM RENTAL:									
Cost per Page									
Monthly Rental									

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FORM B(R3): PRICES (See B11 and B13)

PRINT SOLUTIONS AND RELATED SERVICES

AWARD AS A WHOLE – SECTION B – LIBRARIES (continued)

MID VOLUME CLASS								
STAFF ACCESS			BLACK & WH	TE		COLOUR		
DESCRIPTION	SPEC. REF.	PRINTER OPTION #1	PRINTER OPTION #2	PRINTER OPTION #3	PRINTER OPTION #4	PRINTER OPTION #5	PRINTER OPTION #6	
MID VOLUME CLASS Category N1						_		
5,000-15,000 Prints/Copies per month (Please indicate)								
4 Trays minimum including M.P. Tray (Please indicate)								
250 capacity (Please indicate)								
Letter / Legal included								
ADF/RADF included								
Sorting included				-				
PCL and Postscript included			_	_		-		
11 x 17 Copy/Scan off the glass								
Duplex Printing								
Duplex Scanning						_		
11 X 17 Paper Size								
Staggering / Offsetting								
NOT TO EXCEED 15 AMP								
Make / Model (please indicate)	E4							
Pages Per Minute (please indicate)	E4							
Scan to Email and USB (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	
Networked Faxing (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	
Duplex Faxing (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	

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FORM B(R3): PRICES (See B11 and B13)

PRINT SOLUTIONS AND RELATED SERVICES

AWARD AS A WHOLE – SECTION B – LIBRARIES (continued)

MID VOLUME CLASS STAFF ACCESS (continued)			BLACK & WH	ITE	COLOUR			
DESCRIPTION	SPEC. REF.	DEVICE OPTION #1	DEVICE OPTION #2	DEVICE OPTION #3	DEVICE OPTION #4	DEVICE OPTION #5	DEVICE OPTION #6	
Hole Punch (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	
5 YEAR LEASE OPTION:								
Cost per Page (B&W)								
Cost per Page (Colour)								
Monthly Payment (if applicable)								
Other Proposed Payment Option								
Buy out at Contract end								
SHORT TERM RENTAL:								
Cost per Page								
Monthly Rental								

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FORM B(R3): PRICES (See B11 and B13)

PRINT SOLUTIONS AND RELATED SERVICES

AWARD AS A WHOLE – SECTION B – LIBRARIES (continued)

HIGH VOLUME CLASS								
STAFF ACCESS			BLACK & WH	ITE	COLOUR			
DESCRIPTION	SPEC. REF.	DEVICE OPTION #1	DEVICE OPTION #2	DEVICE OPTION #3	DEVICE OPTION #4	DEVICE OPTION #5	DEVICE OPTION #6	
HIGH VOLUME CLASS Category N2								
25,000 Prints/Copies per month (Please indicate)								
4 Trays minimum including M.P. Tray (Please indicate)								
250 capacity (Please indicate)								
Letter / Legal included								
ADF/RADF included								
Sorting included								
PCL and Postscript included								
11 x 17 Copy/Scan off the glass								
Duplex Printing								
Duplex Scanning								
11 X 17 Paper Size								
Staggering / Offsetting								
Stapling								
NOT TO EXCEED 15 AMP								
Make / Model (please indicate)	E4							
Pages Per Minute (please indicate)	E4							
Scan to Email and USB (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	
Networked Faxing (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	
Duplex Faxing (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	

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FORM B(R3): PRICES (See B11 and B13)

PRINT SOLUTIONS AND RELATED SERVICES

AWARD AS A WHOLE – SECTION B – LIBRARIES (continued)

HIGH VOLUME CLASS STAFF ACCESS (continued)			BLACK & WH	ITE		COLOUR			
DESCRIPTION	SPEC. REF.	DEVICE OPTION #1	DEVICE OPTION #2	DEVICE OPTION #3	DEVICE OPTION #4	DEVICE OPTION #5	DEVICE OPTION #6		
Hole Punch (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)		
5 YEAR LEASE OPTION:									
Cost per Page (B&W)									
Cost per Page (Colour)									
Monthly Payment (if applicable)									
Other Proposed Payment Option									
Buy out at Contract end									
SHORT TERM RENTAL:									
Cost per Page									
Monthly Rental									

Bid Submission Page 15 of 39

FORM B(R3): PRICES (See B11 and B13)

PRINT SOLUTIONS AND RELATED SERVICES

AWARD AS A WHOLE – SECTION B – LIBRARIES (continued)

LOW VOLUME CLASS									
PUBLIC AND STAFF ACCI	ESS		BLACK & WH	ITE		COLOUR			
DESCRIPTION	SPEC. REF.	DEVICE OPTION #1	DEVICE OPTION #2	DEVICE OPTION #3	DEVICE OPTION #4	DEVICE OPTION #5	DEVICE OPTION #6		
LOW VOLUME CLASS Category R				_					
2000 Prints/Copies per month (Please indicate)									
3 Trays minimum including M.P. Tray (Please indicate)									
250 capacity (Please indicate)									
Letter / Legal included									
ADF/RADF included									
Sorting included									
PCL and Postscript included									
Duplex Printing									
Staggering / Offsetting									
NOT TO EXCEED 15 AMP									
Make / Model (please indicate)	E4								
Pages Per Minute (please indicate)	E4								
Scan to USB (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)		
11 X 17 Paper Size (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)		
Scan to Email and Desktop included for staff use only (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)		
Duplex Faxing for staff use only (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)		
Duplex Scanning to USB for staff and public use (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)		

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FORM B(R3): PRICES (See B11 and B13)

PRINT SOLUTIONS AND RELATED SERVICES

AWARD AS A WHOLE – SECTION B – LIBRARIES (continued)

LOW VOLUME CLASS PUBLIC AND STAFF ACCESS (continued)			BLACK & WH	ITE		COLOUR			
DESCRIPTION	SPEC. REF.	DEVICE OPTION #1	DEVICE OPTION #2	DEVICE OPTION #3	DEVICE OPTION #4	DEVICE OPTION #5	DEVICE OPTION #6		
8.5 x 14 Copy/Scan off the Glass (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)		
5 YEAR LEASE OPTION:									
Cost per Page (B&W)									
Cost per Page (Colour)					_				
Monthly Payment (if applicable)									
Other Proposed Payment Option									
SHORT TERM RENTAL:									
Cost per Page									
Monthly Rental									

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FORM B(R3): PRICES (See B11 and B13)

PRINT SOLUTIONS AND RELATED SERVICES

AWARD AS A WHOLE – SECTION B – LIBRARIES (continued)

MID VOLUME CLASS		_						
PUBLIC AND STAFF ACCE	SS		BLACK & WH	ITE	COLOUR			
DESCRIPTION	SPEC. REF.	PRINTER OPTION #1	PRINTER OPTION #2	PRINTER OPTION #3	PRINTER OPTION #4	PRINTER OPTION #5	PRINTER OPTION #6	
MID VOLUME CLASS								
5,000-15,000 Prints/Copies per month (Please indicate)								
4 Trays minimum including M.P. Tray (Please indicate)								
250 capacity (Please indicate)								
Letter / Legal included								
ADF/RADF included								
Sorting included								
PCL and Postscript included								
Duplex Printing included								
Staggering / Offsetting								
NOT TO EXCEED 15 AMP								
Make / Model (please indicate)	E4							
Pages Per Minute (please indicate)	E4							
Duplex Scan to USB (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	
11 X 17 Paper Size (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	
8.5 x 14 Copy/Scan off the Glass (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	
11 x 17 Copy/Scan off the glass (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	

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FORM B(R3): PRICES (See B11 and B13)

PRINT SOLUTIONS AND RELATED SERVICES

AWARD AS A WHOLE – SECTION B – LIBRARIES (continued)

MID VOLUME CLASS PUBLIC AND STAFF ACCESS (continued)			BLACK & WH	ITE	COLOUR			
DESCRIPTION	SPEC. REF.	DEVICE OPTION #1	DEVICE OPTION #2	DEVICE OPTION #3	DEVICE OPTION #4	DEVICE OPTION #5	DEVICE OPTION #6	
5 YEAR LEASE OPTION:								
Cost per Page (B&W)								
Cost per Page (Colour)								
Monthly Payment (if applicable)								
Other Proposed Payment Option								
SHORT TERM RENTAL:								
Cost per Page								
Monthly Rental								

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FORM B(R3): PRICES (See B11 and B13)

PRINT SOLUTIONS AND RELATED SERVICES

AWARD AS A WHOLE – SECTION B – LIBRARIES (continued)

HIGH VOLUME CLASS									
PUBLIC ACCESS			BLACK & WH	ITE		COLOUR			
DESCRIPTION	SPEC. REF.	DEVICE OPTION #1	DEVICE OPTION #2	DEVICE OPTION #3	DEVICE OPTION #4	DEVICE OPTION #5	DEVICE OPTION #6		
HIGH VOLUME CLASS									
25,000 Prints/Copies per month (Please indicate)									
4 Trays minimum including M.P. Tray (Please indicate)									
250 capacity (Please indicate)									
Letter / Legal included			_						
ADF/RADF included									
Sorting included									
PCL and Postscript included						_			
NOT TO EXCEED 15 AMP									
Make / Model (please indicate)	E4								
Pages Per Minute (please indicate)	E4								
Scan to USB (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)		
11 X 17 Paper Size	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)		
Duplex Printing (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)		
Duplex Scanning (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)		
8.5 x 14 Copy/Scan off the Glass (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)		
11 x 17 Copy/Scan off the glass (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)		
Staggering / Offsetting (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)		

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FORM B(R3): PRICES (See B11 and B13)

PRINT SOLUTIONS AND RELATED SERVICES

AWARD AS A WHOLE – SECTION B – LIBRARIES (continued)

UNIT PRICES

HIGH VOLUME CLASS PUBLIC ACCESS (continued)			BLACK & WH	ITE		COLOUR			
DESCRIPTION	SPEC. REF.	DEVICE OPTION #1	DEVICE OPTION #2	DEVICE OPTION #3	DEVICE OPTION #4	DEVICE OPTION #5	DEVICE OPTION #6		
5 YEAR LEASE OPTION:									
Cost per Page (B&W)									
Cost per Page (Colour)									
Monthly Payment (if applicable)									
Other Proposed Payment Option									
Buy out at Contract end									
SHORT TERM RENTAL:									
Cost per Page									
Monthly Rental									

Name of Bidder

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FORM B(R3): PRICES (See B11 and B13)

PRINT SOLUTIONS AND RELATED SERVICES

AWARD BY SECTION – SECTION A – CITY LOCATIONS OTHER THAN LIBRARIES

DESCRIPTION		SPEC. REF.	10	NIT OF MEASURE	APPROXIMATE QUA	NTITY	UNIT PRIC	Œ
PHASE 1 - Assessment Phase								
Assessment of organization		D2, B22.11		Lump Sum	1			
PHASE 2 - Implementation Phas	e							
Print Behaviour Software		B14.11.1						
Print Behaviour Software licenses/maintenance		B14.11.1		Each Year	1			
Included in price/page? (Y/N)								
LOW VOLUME CLASS				BLACK & WHIT	Ē		COLOUR	
DESCRIPTION	SPEC. REF.	DEVICE OPTION #	1	DEVICE OPTION #2	I DEVICE OPTION #3	DEVIC OPTIC	DEVICE OPTION #5	DEVICE OPTION #6
LOW VOLUME CLASS								
2000 Prints/Copies per month (Please indicate)								
2 Trays minimum including M.P. Tray (Please indicate)								
250 capacity (Please indicate)								
Letter / Legal included								
ADF/RADF included								
Sorting included								
PCL and Postscript included								
NOT TO EXCEED 15 AMP								

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FORM B(R3): PRICES (See B11 and B13)

PRINT SOLUTIONS AND RELATED SERVICES

AWARD BY SECTION – SECTION A – CITY LOCATIONS OTHER THAN LIBRARIES (continued) UNIT PRICES

LOW VOLUME CLASS								
(continued)			BLACK & WH	ITE	COLOUR			
DESCRIPTION	SPEC. REF.	DEVICE OPTION #1	DEVICE OPTION #2	DEVICE OPTION #3	DEVICE OPTION #4	DEVICE OPTION #5	DEVICE OPTION #6	
Make / Model (please indicate)	E3							
Pages Per Minute (please indicate)	E3							
Scan to Email and USB (Y/N)	E3	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	
Networked Faxing (Y/N)	E3	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	
11 X 17 Paper Size (Y/N)	E3	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	
Duplex Printing (Y/N)	E3	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	
Duplex Scanning (Y/N)	E3	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	
Duplex Faxing (Y/N)	E3	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	
8.5 x 14 Copy/Scan off the Glass (Y/N)	E3	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	
Staggering / Offsetting (Y/N)	E3	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	
Stapling (Y/N)	E3	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	
Hole Punch (Y/N)	E3	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	
5 YEAR LEASE OPTION:								
Cost per Page (B&W) Cost per Page (Colour) Monthly Payment (if applicable) Other Proposed Payment Option					_			
Buy out at Contract end								
SHORT TERM RENTAL: Cost per Page Monthly Rental								

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FORM B(R3): PRICES

(See B11 and B13)

PRINT SOLUTIONS AND RELATED SERVICES

AWARD BY SECTION – SECTION A – CITY LOCATIONS OTHER THAN LIBRARIES (continued) UNIT PRICES

MID VOLUME CLASS COLOUR **BLACK & WHITE** DESCRIPTION SPEC. DEVICE DEVICE DEVICE DEVICE DEVICE DEVICE REF. OPTION #1 OPTION #2 **OPTION #3 OPTION #4 OPTION #5** OPTION #6 MID VOLUME CLASS 5,000-15,000 Prints/Copies per month (Please indicate) 4 Trays minimum including M.P. Tray (Please indicate) 250 capacity (Please indicate) Letter / Legal included ADF/RADF included Sorting included PCL and Postscript included NOT TO EXCEED 15 AMP Make / Model (please indicate) E3 Pages Per Minute (please indicate) E3 Scan to Email and USB (Y/N) E3 (Y/N)(Y/N)(Y/N)(Y/N)(Y/N)(Y/N)E3 Networked Faxing (Y/N) (Y/N) (Y/N)(Y/N) (Y/N) (Y/N) 11 X 17 Paper Size (Y/N) E3 (Y/N)(Y/N)(Y/N)(Y/N)(Y/N)(Y/N)**Duplex Printing** E3 (Y/N) (Y/N)(Y/N)(Y/N)(Y/N)(Y/N)Duplex Scanning (Y/N) E3 (Y/N) (Y/N)(Y/N)(Y/N)(Y/N)(Y/N)Duplex Faxing (Y/N) E3 (Y/N)(Y/N)(Y/N)(Y/N)(Y/N)(Y/N)8.5 x 14 Copy/Scan off the Glass E3 (Y/N) (Y/N) (Y/N)(Y/N)(Y/N)(Y/N) (Y/N)11 x 17 Copy/Scan off the glass (Y/N) E4 (Y/N) (Y/N)(Y/N)(Y/N)(Y/N)(Y/N)E3 Staggering / Offsetting (Y/N) (Y/N) (Y/N)(Y/N)(Y/N)(Y/N)(Y/N)

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FORM B(R3): PRICES (See B11 and B13)

PRINT SOLUTIONS AND RELATED SERVICES

AWARD BY SECTION – SECTION A – CITY LOCATIONS OTHER THAN LIBRARIES (continued) UNIT PRICES

MID VOLUME CLASS (continued)			BLACK & WH	ITE		COLOUR			
DESCRIPTION	SPEC. REF.	DEVICE OPTION #1	DEVICE OPTION #2	DEVICE OPTION #3	DEVICE OPTION #4	DEVICE OPTION #5	DEVICE OPTION #6		
Stapling (Y/N)	E3	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)		
Hole Punch (Y/N)	E3	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)		
5 YEAR LEASE OPTION:									
Cost per Page (B&W)									
Cost per Page (Colour)									
Monthly Payment (if applicable)									
Other Proposed Payment Option									
Buy out at Contract end									
SHORT TERM RENTAL:									
Cost per Page									
Monthly Rental									

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FORM B(R3): PRICES

(See B11 and B13)

PRINT SOLUTIONS AND RELATED SERVICES

AWARD BY SECTION – SECTION A – CITY LOCATIONS OTHER THAN LIBRARIES (continued) UNIT PRICES

HIGH VOLUME CLASS COLOUR **BLACK & WHITE** DESCRIPTION SPEC. DEVICE DEVICE DEVICE DEVICE DEVICE DEVICE REF. **OPTION #1 OPTION #2** OPTION #3 **OPTION #4 OPTION #5** OPTION #6 HIGH VOLUME CLASS 25,000 Prints/Copies per month (Please indicate) 4 Trays minimum including M.P. Tray (Please indicate) 250 capacity (Please indicate) Letter / Legal included ADF/RADF included Sorting included PCL and Postscript included NOT TO EXCEED 15 AMP Make / Model (please indicate) E3 Pages Per Minute (please indicate) E3 Scan to Email and USB (Y/N) E3 (Y/N) (Y/N)(Y/N)(Y/N) (Y/N)(Y/N)(Y/N) (Y/N) (Y/N) Networked Faxing E3 (Y/N) (Y/N)(Y/N)11 X 17 Paper Size (Y/N) E3 (Y/N)(Y/N)(Y/N)(Y/N) (Y/N)Duplex Printing (Y/N) E3 (Y/N)(Y/N)(Y/N)(Y/N)(Y/N)(Y/N)Duplex Scanning (Y/N) E3 (Y/N) (Y/N) (Y/N)(Y/N)(Y/N) (Y/N)Duplex Faxing (Y/N) E3 (Y/N)(Y/N) (Y/N)(Y/N)(Y/N) (Y/N) 8.5 x 14 Copy/Scan off the Glass (Y/N) E3 (Y/N) (Y/N)(Y/N)(Y/N)(Y/N) (Y/N)

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FORM B(R3): PRICES (See B11 and B13)

PRINT SOLUTIONS AND RELATED SERVICES

AWARD BY SECTION – SECTION A – CITY LOCATIONS OTHER THAN LIBRARIES (continued) UNIT PRICES

HIGH VOLUME CLASS			BLACK & WH	ITE	COLOUR			
(continued)								
DESCRIPTION	SPEC. REF.	DEVICE OPTION #1	DEVICE OPTION #2	DEVICE OPTION #3	DEVICE OPTION #4	DEVICE OPTION #5	DEVICE OPTION #6	
11 x 17 Copy/Scan off the glass (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	
Staggering / Offsetting (Y/N)	E3	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	
Stapling (Y/N)	E3	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	
Hole Punch (Y/N)	E3	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	
5 YEAR LEASE OPTION:								
Cost per Page (B&W)								
Cost per Page (Colour)								
Monthly Payment (if applicable)								
Other Proposed Payment Option								
Buy out at Contract end								
SHORT TERM RENTAL:								
Cost per Page								
Monthly Rental								

Name of Bidder

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FORM B(R3): PRICES (See B11 and B13)

PRINT SOLUTIONS AND RELATED SERVICES

AWARD BY SECTION – SECTION B – LIBRARIES

DESCRIPTION		SPEC. REF.	UNIT	OF MEASURE	APPROXIMATE QU	JANTITY	UNIT PRIC	CE
PHASE 1 - Assessment Phase								
Assessment of organization		D2, B22.11	Lu	ump Sum	1			
PHASE 2 - Implementation Phas	se							
Print Behaviour Software		B14.11.1						
Print Behaviour Software licenses/maintenance		B14.11.1	E	Each Year	1			
Included in price/page? (Y/N)								
LOW VOLUME CLASS								
STAFF ACCESS			B		ſE		COLOUR	
DESCRIPTION	SPEC. REF.	DEVICE O	PTION	DEVICE OPTION #2	DEVICE OPTION #3	DEVIC OPTIO	DEVICE OPTION #5	DEVICE OPTION #6
LOW VOLUME CLASS							 	_
2000 Prints/Copies per month (Please indicate)								
2 Trays minimum including M.P. Tray (Please indicate)								
250 capacity (Please indicate)								
Letter / Legal included								
ADF/RADF included								
Sorting included								
PCL and Postscript included								
NOT TO EXCEED 15 AMP								

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FORM B(R3): PRICES (See B11 and B13)

PRINT SOLUTIONS AND RELATED SERVICES

AWARD BY SECTION – SECTION B – LIBRARIES (continued)

LOW VOLUME CLASS			BLACK & WH	ITE		COLOUR	
STAFF ACCESS (continue	ed)						
DESCRIPTION	SPEC. REF.	DEVICE OPTION #1	DEVICE OPTION #2	DEVICE OPTION #3	DEVICE OPTION #4	DEVICE OPTION #5	DEVICE OPTION #6
Make / Model (please indicate)	E4						
Pages Per Minute (please indicate)	E4						
Scan to Email and USB (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)
Networked Faxing (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)
11 X 17 Paper Size (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)
Duplex Printing (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)
Duplex Scanning (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)
Duplex Faxing (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)
8.5 x 14 Copy/Scan off the Glass (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)
Staggering / Offsetting (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)
Stapling (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)
Hole Punch (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)
5 YEAR LEASE OPTION:							
Cost per Page (B&W)							
Cost per Page (Colour)							
Monthly Payment (if applicable)							
Other Proposed Payment Option							
Buy out at Contract end							
SHORT TERM RENTAL:							
Cost per Page							
Monthly Rental							

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FORM B(R3): PRICES (See B11 and B13)

PRINT SOLUTIONS AND RELATED SERVICES

AWARD BY SECTION – SECTION B – LIBRARIES (continued)

MID VOLUME CLASS							
STAFF ACCESS			BLACK & WHITE			COLOUR	
DESCRIPTION	SPEC. REF.	PRINTER OPTION #1	PRINTER OPTION #2	PRINTER OPTION #3	PRINTER OPTION #4	PRINTER OPTION #5	PRINTER OPTION #6
MID VOLUME CLASS Category N1					_		
5,000-15,000 Prints/Copies per month (Please indicate)							
4 Trays minimum including M.P. Tray (Please indicate)							
250 capacity (Please indicate)							
Letter / Legal included							
ADF/RADF included							
Sorting included							
PCL and Postscript included							
11 x 17 Copy/Scan off the glass							
Duplex Printing							
Duplex Scanning							
11 X 17 Paper Size							
Staggering / Offsetting							
NOT TO EXCEED 15 AMP							
Make / Model (please indicate)	E4						
Pages Per Minute (please indicate)	E4						
Scan to Email and USB (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)
Networked Faxing (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)
Duplex Faxing (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)

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FORM B(R3): PRICES (See B11 and B13)

PRINT SOLUTIONS AND RELATED SERVICES

AWARD BY SECTION – SECTION B – LIBRARIES (continued)

MID VOLUME CLASS			BLACK & WH	ITE		COLOUR			
STAFF ACCESS (continued)									
DESCRIPTION	SPEC. REF.	DEVICE OPTION #1	DEVICE OPTION #2	DEVICE OPTION #3	DEVICE OPTION #4	DEVICE OPTION #5	DEVICE OPTION #6		
Stapling (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)		
Hole Punch (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)		
5 YEAR LEASE OPTION:									
Cost per Page (B&W)									
Cost per Page (Colour)									
Monthly Payment (if applicable)									
Other Proposed Payment Option									
Buy out at Contract end									
SHORT TERM RENTAL:									
Cost per Page									
Monthly Rental									

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FORM B(R3): PRICES (See B11 and B13)

PRINT SOLUTIONS AND RELATED SERVICES

AWARD BY SECTION – SECTION B – LIBRARIES (continued)

HIGH VOLUME CLASS								
STAFF ACCESS			BLACK & WH	ITE	COLOUR			
DESCRIPTION	SPEC REF.	DEVICE OPTION #1	DEVICE OPTION #2	DEVICE OPTION #3	DEVICE OPTION #4	DEVICE OPTION #5	DEVICE OPTION #6	
HIGH VOLUME CLASS Category N2								
25,000 Prints/Copies per month (Please indicate)								
4 Trays minimum including M.P. Tray (Please indicate)								
250 capacity (Please indicate)								
Letter / Legal included								
ADF/RADF included								
Sorting included								
PCL and Postscript included								
11 x 17 Copy/Scan off the glass								
Duplex Printing								
Duplex Scanning								
11 X 17 Paper Size								
Staggering / Offsetting								
Stapling								
NOT TO EXCEED 15 AMP								
Make / Model (please indicate)	E4							
Pages Per Minute (please indicate)	E4							
Scan to Email and USB (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	
Networked Faxing	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	
Duplex Faxing (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	

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FORM B(R3): PRICES (See B11 and B13)

PRINT SOLUTIONS AND RELATED SERVICES

AWARD BY SECTION – SECTION B – LIBRARIES (continued)

HIGH VOLUME CLASS STAFF ACCESS (continued)			BLACK & WHI	TE	COLOUR			
DESCRIPTION	SPEC. REF.	DEVICE OPTION #1	DEVICE OPTION #2	DEVICE OPTION #3	DEVICE OPTION #4	DEVICE OPTION #5	DEVICE OPTION #6	
Hole Punch (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	
5 YEAR LEASE OPTION:								
Cost per Page (B&W)								
Cost per Page (Colour)								
Monthly Payment (if applicable)								
Other Proposed Payment Option								
Buy out at Contract end								
SHORT TERM RENTAL:								
Cost per Page								
Monthly Rental								

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FORM B(R3): PRICES (See B11 and B13)

PRINT SOLUTIONS AND RELATED SERVICES

AWARD BY SECTION – SECTION B – LIBRARIES (continued)

LOW VOLUME CLASS							
PUBLIC AND STAFF ACCI	ESS		BLACK & WH	ITE		COLOUR	
DESCRIPTION	SPEC. REF.	DEVICE OPTION #1	DEVICE OPTION #2	DEVICE OPTION #3	DEVICE OPTION #4	DEVICE OPTION #5	DEVICE OPTION #6
LOW VOLUME CLASS Category R							
2000 Prints/Copies per month (Please indicate)							
3 Trays minimum including M.P. Tray (Please indicate)							
250 capacity (Please indicate)							
Letter / Legal included							
ADF/RADF included							
Sorting included							
PCL and Postscript included							
Duplex Printing							
Staggering / Offsetting							
NOT TO EXCEED 15 AMP							
Make / Model (please indicate)	E4						
Pages Per Minute (please indicate)	E4						
Scan to USB (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)
11 X 17 Paper Size (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)
Scan to Email and Desktop included for staff use only (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)
Duplex Faxing for staff use only (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)

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FORM B(R3): PRICES (See B11 and B13)

PRINT SOLUTIONS AND RELATED SERVICES

AWARD BY SECTION – SECTION B – LIBRARIES (continued)

LOW VOLUME CLASS PUBLIC AND STAFF ACCESS			BLACK & WHI	ΓE		COLOUR			
(continued) DESCRIPTION	SPEC. REF.	DEVICE OPTION #1	DEVICE OPTION #2	DEVICE OPTION #3	DEVICE OPTION #4	DEVICE OPTION #5	DEVICE OPTION #6		
Duplex Scanning to USB for staff and public use (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)		
8.5 x 14 Copy/Scan off the Glass (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)		
5 YEAR LEASE OPTION:				_					
Cost per Page (B&W)									
Cost per Page (Colour)									
Monthly Payment (if applicable)									
Other Proposed Payment Option									
SHORT TERM RENTAL:									
Cost per Page									
Monthly Rental									

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FORM B(R3): PRICES (See B11 and B13)

PRINT SOLUTIONS AND RELATED SERVICES

AWARD BY SECTION – SECTION B – LIBRARIES (continued)

MID VOLUME CLASS				_			
PUBLIC AND STAFF ACCE	SS		BLACK & WHI	TE		COLOUR	
DESCRIPTION	SPEC. REF.	PRINTER OPTION #1	PRINTER OPTION #2	PRINTER OPTION #3	PRINTER OPTION #4	PRINTER OPTION #5	PRINTER OPTION #6
MID VOLUME CLASS							
5,000-15,000 Prints/Copies per month (Please indicate)							
4 Trays minimum including M.P. Tray (Please indicate)							
250 capacity (Please indicate)							
Letter / Legal included							
ADF/RADF included							
Sorting included							
PCL and Postscript included							
Duplex Printing included							
Staggering / Offsetting							
NOT TO EXCEED 15 AMP							
Make / Model (please indicate)	E4						
Pages Per Minute (please indicate)	E4						
Duplex Scan to USB (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)
11 X 17 Paper Size (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)
8.5 x 14 Copy/Scan off the Glass (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)
11 x 17 Copy/Scan off the glass (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)

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FORM B(R3): PRICES (See B11 and B13)

PRINT SOLUTIONS AND RELATED SERVICES

AWARD BY SECTION – SECTION B – LIBRARIES (continued)

MID VOLUME CLASS PUBLIC AND STAFF ACCESS (continued)			BLACK & WHITE			COLOUR		
DESCRIPTION	SPEC. REF.	DEVICE OPTION #1	DEVICE OPTION #2	DEVICE OPTION #3	DEVICE OPTION #4	DEVICE OPTION #5	DEVICE OPTION #6	
5 YEAR LEASE OPTION:								
Cost per Page (B&W)								
Cost per Page (Colour)								
Monthly Payment (if applicable)								
Other Proposed Payment Option								
SHORT TERM RENTAL:								
Cost per Page								
Monthly Rental								

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FORM B(R3): PRICES (See B11 and B13)

PRINT SOLUTIONS AND RELATED SERVICES

AWARD BY SECTION – SECTION B – LIBRARIES (continued)

HIGH VOLUME CLASS							
PUBLIC ACCESS			BLACK & WH	LACK & WHITE		COLOUR	
DESCRIPTION	SPE C. REF.	DEVICE OPTION #1	DEVICE OPTION #2	DEVICE OPTION #3	DEVICE OPTION #4	DEVICE OPTION #5	DEVICE OPTION #6
HIGH VOLUME CLASS							
25,000 Prints/Copies per month (Please indicate)							
4 Trays minimum including M.P. Tray (Please indicate)							
250 capacity (Please indicate)							
Letter / Legal included ADF/RADF included							
Sorting included PCL and Postscript included							
NOT TO EXCEED 15 AMP							_ [
Make / Model (please indicate)	E4						
Pages Per Minute (please indicate)	E4						
Scan To USB (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)
11 X 17 Paper Size	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)
Duplex Printing (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)
Duplex Scanning (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)
8.5 x 14 Copy/Scan off the Glass (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)
11 x 17 Copy/Scan off the glass (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)
Staggering / Offsetting (Y/N)	E4	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)	(Y/N)

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FORM B(R3): PRICES (See B11 and B13)

PRINT SOLUTIONS AND RELATED SERVICES

AWARD BY SECTION – SECTION B – LIBRARIES (continued)

UNIT PRICES

HIGH VOLUME CLASS PUBLIC ACCESS (continued)		BLACK & WHITE			COLOUR		
DESCRIPTION	SPEC. REF.	DEVICE OPTION #1	DEVICE OPTION #2	DEVICE OPTION #3	DEVICE OPTION #4	DEVICE OPTION #5	DEVICE OPTION #6
5 YEAR LEASE OPTION:							
Cost per Page (B&W)							
Cost per Page (Colour)							
Monthly Payment (if applicable)							
Other Proposed Payment Option							
SHORT TERM RENTAL:							
Cost per Page							
Monthly Rental							

Name of Bidder

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FORM N: EXISTING DEVICES (See B11 and B13)

PRINT SOLUTIONS AND RELATED SERVICES

Type of Device	Approximate Number of existing devices left in Fleet	Pricing Models (see B14.10.2)
Low Volume		
Mid Volume		
High Volume		

Name of Bidder