



SUPPLEMENT

MASTER AGREEMENT NO. 1037679	APPLICATION NO. 1066396	CONTRACT/SUPPLEMENT NO. 1037679-001
---------------------------------	----------------------------	--

CUSTOMER ("YOU" OR "YOUR")
 FULL LEGAL NAME: **Idaho Falls School District #1**

ADDRESS: **690 John Adams Pkwy** **Idaho Falls, ID 83401-4073**

MASTER AGREEMENT
 REFERS TO THE AGREEMENT BETWEEN CUSTOMER AND OWNER IDENTIFIED IN OWNER'S RECORDS BY THE MASTER AGREEMENT NO. ABOVE.

DESCRIPTION OF EQUIPMENT
 TYPE, MAKE, MODEL NUMBER, SERIAL NUMBER, AND INCLUDED ACCESSORIES: SEE ATTACHED SCHEDULE

EQUIPMENT LOCATION: **As Stated Above**
DESCRIPTION OF EQUIPMENT REMOVED
 MAKE, MODEL NUMBER, INCLUDED ACCESSORIES & SERIAL NO.

PAYMENT (CHECK ONE PAYMENT OPTION)
 MONTHLY PAYMENT AMOUNT: **365.89** (PLUS TAX) (INCLUDES AMOUNTS DUE UNDER THIS SUPPLEMENT ONLY)
 TOTAL CONSOLIDATED MONTHLY PAYMENT AMOUNT: _____ (PLUS TAX) (INCLUDES AMOUNTS DUE UNDER THIS SUPPLEMENT, THE MASTER AGREEMENT, AND ANY OTHER APPLICABLE SUPPLEMENT(S) DURING THE TERM THEREOF)

TERM (CHECK ONE TERM OPTION)
 TERM: THE END OF THE TERM OF THIS SUPPLEMENT IS THE END OF TERM OF THE MASTER AGREEMENT (COTERMINOUS)
 TERM IN MONTHS: **60** (APPLIES TO THIS SUPPLEMENT ONLY)

AGREEMENT
 If this Supplement relates to Equipment not subject to the Master Agreement (i.e., additional Equipment), this Supplement, together with the preprinted terms of the Master Agreement (as amended), constitutes an agreement between Customer and Owner with respect to the Equipment referenced herein, separate and distinct from the Master Agreement. Customer agrees to be bound by the terms of this Supplement, which includes the preprinted terms of the Master Agreement (as amended) and agrees this Supplement shall commence on the date of Owner's acceptance. The original of this Supplement shall be that copy which bears a facsimile or original of Customer's signature and which bears Owner's original signature. If any provision in this Supplement conflicts with a provision in the Master Agreement, the provision in this Supplement shall control.
 If this Supplement relates to Equipment subject to the Master Agreement (i.e. replaced or removed Equipment and/or payment modifications), the Master Agreement shall be modified or supplemented as set forth above as of the date Owner accepts this Supplement. Except as specifically modified by this Supplement, all other terms and conditions of the Master Agreement (as amended) remain in full force and effect.

CUSTOMER'S AUTHORIZED SIGNATURE
 ONCE YOU SIGN THIS SUPPLEMENT AND OWNER ACCEPTS IT, THIS SUPPLEMENT WILL BE NON-CANCELABLE FOR THE FULL TERM.

(As Stated Above)
 CUSTOMER SIGNATURE: *George Edmond* PRINT NAME & TITLE: **George Edmond, Supt** DATE: **10-14-15**

OWNER ("WE", "US", "OUR")
 Yost Inc OWNER SIGNATURE: *[Signature]* PRINT NAME & TITLE: **HAARON JENSEN** DATE: **10-14-15**

UNCONDITIONAL GUARANTY
 The undersigned unconditionally guarantees that the Customer will timely perform all obligations under the above Supplement. The undersigned also waives any notification if the Customer is in default and consents to any extensions or modifications granted to the Customer. In the event of default, the undersigned will immediately pay all sums due under the terms of the Supplement without requiring us or our assignee to proceed against Customer or any other party or exercise any rights in the Equipment. The undersigned, as to this guaranty, agrees to the designated forum and consents to personal jurisdiction, venue, and choice of law as stated in the Master Agreement, agrees to pay all costs and expenses, including attorney fees, incurred by us or our assignee related to this guaranty and the Supplement, waives a jury trial and transfer of venue, and authorizes obtaining credit reports.
 SIGNATURE: INDIVIDUAL: _____ DATE: _____

CERTIFICATE OF DELIVERY AND ACCEPTANCE
 The Customer hereby certifies that all the equipment referenced herein: 1) has been received, installed, and inspected, and 2) is fully operational and unconditionally accepted.
 SIGNATURE: *Carrie Smith* NAME & TITLE: **Director HR & Finance** DATE: **10/14/2015**

