#### TRUE LEASE SCHEDULE NO. «SNO» dated as of «SNODATE»

#### to Master Lease Agreement No. «CNO» dated as of «CNODATE»

#### between the Lessee and Lessor below.

THIS TRUE LEASE SCHEDULE is entered into by and between the undersigned Lessee and Lessor pursuant to the Master Lease Agreement identified above. All terms and conditions of such Master Lease Agreement are incorporated herein and made a part of hereof, and unless otherwise specified herein, the terms used in this Schedule shall have the same meanings as used in the Master Lease Agreement. Conflicts between the provisions of the Master Lease Agreement and this Schedule are governed by the provisions hereof.

By its signature hereon, Lessee represents its has read, understands and agrees to the Terms and Conditions of the Master Lease Agreement identified above and the provisions of this Schedule.

IN WITNESS WHEREOF, Lessee and Lessor reaffirm all of the terms and conditions of the Master Lease Agreement, except as modified hereby, and cause this Schedule to be executed by their duly authorized representatives.

LESSOR: ePlus Group, inc .

RY.

Б1.				<u> </u>		
NAME:				NAME:		
TITLE:				TITLE:		
DATE:				DATE:		
1. INIT	IAL SCHEDULE TER	kM.				
		-	Pate for each Asset to and inc rred, plus «NOPMTS» months	-	e month in which the Commend	cement
2. REN	ιт.					
	on the first day of the the amount specified		owing the Commencement D	ate for the last Asset d	elivered hereunder: (I) one payr	nent of
b. Du	ue on the first day of e	each month for the remai	ning Initial Schedule Term: R	ent in the amount of \$4	RENT».	
3. FE	E					
	•		t_Mnth_Yr_Leasetrm»: Order Commencement Date to but	•	ing of Rent, prorated on the base	sis of a
4. ASS	ET LOCATION.					
«EQLO	CATION»					
5. ASS	ET DESCRIPTION.					
Otv	Mfa	Model/Feature	Description	Asset Unit Co	st Value*	

LESSEE: «LESSEE»

\*Provided solely for the purposes of caluclating proportional Casualty Values pursuant to Section 10 of the Master Lease Agreement and in conjunction with Section 6 of this Schedule.

### 6. CASUALTY VALUES.

The Casualty Value for any Asset shall be the percentage set forth below the Asset Unit Cost Value set forth in Section 5 of this Schedule. If no Asset Unit Cost Value is given for an Asset, its Casualty Value and the proportional Rent calculations for the purposes of Section 10 of the Master Lease Agreement shall be based on the ratio of Lessor's original purchase price for that Asset to Lessor's original purchase price for all Asset(s) on the Schedule. The below percentages apply from the Rent payment period listed beside the percentage to the next listed Rent payment period.

Rent Pmt#	C.V. %	Rent Pmt# C.V. %
7. FISCAL PERIOD	to	
8. EXECUTION.		

This Schedule shall not be binding on Lessor until executed and delivered by Lessee and executed by Lessor.

### **CERTIFICATE OF ACCEPTANCE**

Certificate of Acceptance under Schedule No. «SNO» dated as of «SNODATE» to Master Lease Agreement No. «CNO» dated as of «CNODATE» (collectively, the "Lease") between ePlus Group, inc. ("Lessor") and «LESSEE» ("Lessee").

1. Asset(s).	The Lessee I	hereby certifies	that the Asset	(s) set forth a	nd described	in the above	mentioned	Schedule ha	ve been del	ivered to the
location(s) s	et forth in the	Schedule, insp	pected by the L	essee, found	to be in good	d order and a	accepted, al	ll on the Date	of Accepta	nce set forth
below:										

Date of Acceptance:	, 20	
•		

- 2. Representations by the Lessee. The Lessee hereby represents and warrants to the Lessor and any Assignees that on the Date of Aceptance set forth above:
- (a) the representations and warranties of the Lessee set forth in the Lease are true and correct in all material respects as though made on and as of such Date of Acceptance; (b) the Lessee has satisfied or complied with all requirements set forth in the Lease to be satisfied or complied with on or prior to such Date of Acceptance; (c) no Default or Event of Default under this Lease has occurred and is continuing on such Date of Acceptance; and (d) the Asset(s) are insured in accordance with the provisions of the Master Lease Agreement.

LESSEE: «LESSEE»	
BY	
NAME	
TITLE	

# REQUEST FOR INSURANCE

In accordance	with Section 11 of the Master Lease Agreement No.	dated as of, we
have agreed, a	and instructed the insurance agent named below (please	fill in name, address, etc.), to provide and maintain full
insurance cove	erage for the Asset(s) per the terms of the Agreement.	
INSURANCE	COMPANY:	
II (B CTu II (CL		
ADDRESS: _		CONTACT:
		TELEDITORE
_		TELEPHONE:
POLICY NO.:		FAX:
Please issue:		
Trease issue.		
A. An Ins	surance Certificate with Liability Coverage in th	ne amount of \$1,000,000.00 total liability per
occuri	ence naming EPlus Group, inc. and its assigne	e(s) as Certificate Holder and additional
insure	d at the address listed below:	
	ePlus Group, inc. and its assigne	ee(s)
	13595 Dulles Technology Drive	
	Herndon, VA 20171	
B. Evidence	a of Property Incurance in the form of a Cartificate of	Insurance and Long Form Loss Payable Clause with the
	g statement:	misurance and Long Porm Loss Payable Clause with the
10110 1/11	g simomoniy	
	"ePlus Group, inc. and its assignee(s) are inclu	
	amount not less than the Casualty Values of t	
	Schedule No to Master Lease Agree	ement dated as of
	· "	
C. A certif	icate noting this coverage, with a 30 day notice of can	cellation or non-renewal clause should be sent to ePlus
	nc., to the attention of: INSURANCE COORDINATO	
1		
	ate(s) must reference Master Lease Agreement _	dated as of and
Schedule No.	and extend for the term of the Schedule.	
(I	Lessee name)	
BY:		
TITLE:		

Please fax this information to your Insurance carrier and forward a copy of this form to ePlus Group, inc. with the other documentation.

## **ESSENTIAL USE LETTER**

### To Be Submitted on Lessee's Letterhead

RE: That certain Schedule No. «SNO» dated as of «SNODATE» to Master Lease Agreement No. «CNO» dated as of «CNODATE» (the "Schedule") between ePlus Group, inc. ("ePlus") and «LESSEE» ("Lessee").

The following information sets forth the use of the property (herein so called) to be sold to the undersigned under the above-referenced Agreement.

1)	The property will be used by
2)	The responsibilities of the Lessee are
3)	The property is essential to the Lessee's obligation to perform the following functions:
4)	The Lessee has/has not (circle one) always provided the functions set forth above.
5)	Without the property, the Lessee would/would not (circle one) be able to perform the functions.
6)	The functions being performed with the property are/are not (circle one) permanent and non-cyclical?
7)	The property is/is not (circle one) replacing equipment which performed a similar function.
	If the property is replacing equipment which performed a similar function, what was the prior equipment, was it owned or leased, how
old wa	s it and what happened to it?
8)	The property is/is not (circle one) supplementing prior equipment.
	If the property is supplementing prior equipment, what portion is the property of the entire system (e.g., 50% of the total system in
size ar	nd function)?
9)	Would the Lessee be able to perform its functions without the property?
10)	What is the useful life of the property?
11)	What portion of the Lessee's overall function will be performed using the property?
12)	What are the chances of the Lessee replacing the property?
13)	What is the flow of appropriations for the property?
	ndersigned hereby represents that the use of the property is essential to its proper, efficient and economic operation and will not be used rate purposes.
Sincer	ely,
Ву:	
Title: _	

# SAMPLE OPINION LETTER TO BE EXECUTED ON COUNSEL'S LETTERHEAD

ePlus Group, inc. 13595 Dulles Technology Drive Herndon, Virginai 20171

Gentlemen:

We are counsel to "LESSEE" (the "Lessee") and, in that capacity, we have examined Agreement No. "CNO", dated as of "CNODATE", and all subsequence Schedules thereto (collectively the "Lease"), between the Lessee and ePlus Group, inc. ("Lessor"),

As a result of our examination of the Lease and such other examinations as we have deemed appropriate, we are of the opinion as follows:

- (a) The Lessee is a public body corporate and politic and is authorized by the Constitution and laws of the State of «STATE» to carry out its obligations under the Lease;
- (b) The Lease has been duly authorized, executed and delivered by \*\*\_\_\_, and constitutes a valid, legal and binding agreement, enforceable in accordance with its terms;
- (c) No approval, consent or withholding of objection is required from any governmental authority with respect to the entering into or performance by the Lessee of the Lease and the transactions contemplated thereby;
- (d) The entering into and performance of the Lease will not violate any judgment, order, law or regulation applicable to the Lessee or result in any breach of, or constitute a default under, or result in the creation of any lien, charge, security interest or other encumbrance upon any assets of the Lessee or on the Asset(s) subject to the Lease pursuant to any instrument to which the Lessee is a party or by which it or its assets may be bound;
- (e) Lessee has complied with any applicable public bidding requirements in connection with the Agreement and the transactions contemplated thereby;
- (f) The Asset(s) are personal property and when subject to use by the Lessee will not be or become fixtures under the law of the State of «STATE»;
- (g) There are no actions, suits or proceedings pending or to our knowledge, threatened against or affecting the Lessee in any court or before any governmental commission, board or authority which, if adversely determined, will have a material, adverse effect on the ability of the Lessee to perform its obligations under the Lease.

This opinion is delivered to the addressee for its benefit and the benefit of its assigns for the purpose contemplated by the Lease.

Very truly yours,

\*Authorized Signatory of Lessee under the Lease

### INVOICING INFORMATION FORM

Please help us provide a more efficient service to you by completing the information requested below and returning this form to us along with the Contract documentation.

Reference:	«CNO»-«SNO»
Billing Address:	
	Attn:
Primary A/P Contact:	
Name	Phone () Email
Secondary A/P Contact	ct:
Name	Phone () Email
Note: Please attach ar	ny supporting documentation you may have for the following:
Federal Tax ID Numbe	er:
Tax Exempt: Yes _	No (Attach copy of Tax Exempt Certificate for all applicable States)
Direct Pay Certificate	Number(s) (if applicable):
Purchase Order Numb	per:
Invoice Type: Eq	uipment Detail No Equipment Detail
<b>Property Tax Contact:</b>	
Phone ()	Email:
Property Tax Contact	Mailing Address:
(If different from above)	
COMMENTS:	
Confirmation: The a	bove information is complete and accurate as of the date indicated
Signature:	Date:
Title:	Contact Tel. No.:()