



Laredo Fire 6 Yr Prevent Annual

Quote Number:10889897

Version:1

Prepared For:LAREDO FIRE DEPT

Attn:

Rep:Jordan Costello

Email:

Phone Number:

GPO:CUSTOMER CONTRACT

Service Rep:David Cruz

Quote Date:03/18/2024

Expiration Date:04/17/2024

Contract Start:10/09/2024

Contract End:10/08/2030

Email:david.cruz@stryker.com

Delivery Address		Sold To - Shipping		Bill To Account	
Name:	LAREDO FIRE DEPT	Name:	LAREDO FIRE DEPT	Name:	LAREDO FIRE DEPT
Account #:	20009634	Account #:	20009634	Account #:	20009634
Address:	616 E DEL MAR BLVD	Address:	616 E DEL MAR BLVD	Address:	616 E DEL MAR BLVD
	LAREDO		LAREDO		LAREDO
	Texas 78041-2420		Texas 78041-2420		Texas 78041-2420

ProCare Products:

#	Product	Description	Months	Qty	List Price	Disc % Off Contract	Sell Price	Total
1.0	POWERLOAD-PROCARE	PROCARE-SVC-POWER-LOAD ✓ Parts, Labor, Travel ✓ Preventative Maintenance ✓ Batteries Service	72	12	\$2,273.00	15.0%	\$11,592.30	\$139,107.60
2.0	POWERPRO-PROCARE	PROCARE-SVC-POWERPRO 10/09/2025 - 10/08/2030 ✓ Parts, Labor, Travel ✓ Preventative Maintenance ✓ Batteries Service	60	12	\$1,599.00	15.0%	\$6,795.75	\$81,549.00
ProCare Total:							\$220,656.60	
ProCare Annual Payment:							\$36,776.10	

Price Totals:

Authorized Customer Signer (Printed)Date

Stryker Authorized Signature (Printed)Date



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Authorized Customer Signature

Date

Stryker Authorized Signature

Date

Purchase Order Number

Service Terms and Conditions:
The Terms and Conditions of this quote and any subsequent purchase order of the Customer are governed by the Terms and Conditions located at <https://techweb.stryker.com> The terms and conditions referenced in the immediately preceding sentence do not apply where Customer and Stryker are parties to a Master Service Agreement.

Payment Schedule

Starting Balance: \$220,656.60

Date	Payment	Balance
10/09/2024	\$36,776.10	\$183,880.50
10/09/2025	\$36,776.10	\$147,104.40
10/09/2026	\$36,776.10	\$110,328.30
10/09/2027	\$36,776.10	\$73,552.20
10/09/2028	\$36,776.10	\$36,776.10
10/09/2029	\$36,776.10	\$ -

Equipment Service Plan

Line Item #	Model	Serial #
1.0	PROCARE-SVC-POWER-LOAD	2308012400103
1.0	PROCARE-SVC-POWER-LOAD	2309012400067
1.0	PROCARE-SVC-POWER-LOAD	2309012400074
1.0	PROCARE-SVC-POWER-LOAD	2309012400070
1.0	PROCARE-SVC-POWER-LOAD	2309012400073
1.0	PROCARE-SVC-POWER-LOAD	2309012400075
1.0	PROCARE-SVC-POWER-LOAD	2309012400072
1.0	PROCARE-SVC-POWER-LOAD	2309012400076
1.0	PROCARE-SVC-POWER-LOAD	2309012400077
1.0	PROCARE-SVC-POWER-LOAD	2309012400294
1.0	PROCARE-SVC-POWER-LOAD	2308012400117
1.0	PROCARE-SVC-POWER-LOAD	2309012400028
2.0	PROCARE-SVC-POWERPRO	2307003746
2.0	PROCARE-SVC-POWERPRO	2307003762
2.0	PROCARE-SVC-POWERPRO	2308005259
2.0	PROCARE-SVC-POWERPRO	2308005419
2.0	PROCARE-SVC-POWERPRO	2309000554
2.0	PROCARE-SVC-POWERPRO	2309000552
2.0	PROCARE-SVC-POWERPRO	2308005420
2.0	PROCARE-SVC-POWERPRO	2308005415
2.0	PROCARE-SVC-POWERPRO	2308005421
2.0	PROCARE-SVC-POWERPRO	2309000551
2.0	PROCARE-SVC-POWERPRO	2307003764
2.0	PROCARE-SVC-POWERPRO	2308005352

Purchase Order Form



Account Manager _____
Cell Phone _____

Purchase Order Date _____
Expected Delivery Date _____
Stryker Quote Number _____

Check box if Billing same as Shipping ☐

BILL TO	CUSTOMER #
Billing Account Num	
Company Name	
Contact or Department	
Street Address	
Add'l Address Line	
City, ST ZIP	
Phone	

SHIP TO	CUSTOMER #
Shipping Account Num	
Company Name	
Contact or Department	
Street Address	
Add'l Address Line	
City, ST ZIP	
Phone	

Authorized Customer Initials _____

Authorized Customer Initials _____

DESCRIPTION	QTY	TOTAL
REFERENCE QUOTE		

Accounts Payable Contact Information

Name _____
Email _____
Phone _____

Stryker Terms and Conditions

www.stryker.com/stnc

Authorized Customer Signature

Printed Name _____
Title _____
Signature _____
Date _____

Attachment Stryker Quote Number

*Sales or use taxes on domestic (USA) deliveries will be invoiced in addition to the price of the goods and services on the Stryker Quote.