





Vanguard Truck Center of Houston

5216 N. McCarty Houston TX 77013

Ph (713) 673-1444 Fax (713) 673-7354

New Vehicle Quotation Form

3/23/2016

(DATE)

FORT BEND COUNTY

(PURCHASER)

201 PAYNE LANE

(ADDRESS)

CRABB, TX. 77469

(CITY, STATE, ZIP)

DON MASSEY

(Contact)

281-342-4513

(Telephone)

0

(Fax)

2018 MACK GU713

Sales Price	\$	<u>124,914.24</u>
Federal Retail Excise Tax	\$	<u>0.00</u>
Net Trade Allowance	( \$	<u>0.00</u> )
Sales Tax (Includes Emission Surcharge)	\$	<u>0.00</u>
Ad Valorem Tax	\$	<u>263.94</u>
License Fee: Type _____ Wt. _____	\$	<u>0.00</u>
Title and Transfer Fees		<u>113.50</u>
Total Price	\$	<u>125,291.68</u>
Total Del. Price for <u>1</u> Vehicles	\$	<u>125,291.68</u>

VIN #	<u>TBA</u>
Engine	<u>MACK MP7-395HP</u>
Transmission	<u>MACK 10 SPEED</u>
Fr. Axle	<u>12000 LBS</u>
Rr. Axle	<u>38000 LBS</u>
Suspension	<u>38000 LBS</u>
Ratio	<u>3.98</u>
Wheelbase	<u>215"</u>
Color	<u>BLUE</u>

Additional Comments:

- ALUM. FRONT WHEELS
- 1X 88 GAL FUEL TANK
- ENGINE BRAKE
- 11R24.5 WHEELS
- 14 CY. DUMP BODY (HOU-FAB)
- 
- 
- 



Thank you for allowing me to quote your trucking needs!

DUAINE NEWMAN

# CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

Complete Nos. 1 - 4 and 6 if there are interested parties.  
Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.

## OFFICE USE ONLY CERTIFICATION OF FILING

Certificate Number:  
2016-127976

Date Filed:  
10/24/2016

Date Acknowledged:

**1 Name of business entity filing form, and the city, state and country of the business entity's place of business.**

VED Heritage Properties Ltd dba Volvo & Mack Trucks of Waco  
Robinson, TX United States

**2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.**

Fort Bend County

**3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.**

19214  
Dump Truck

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary

5 Check only if there is NO Interested Party.

**6 AFFIDAVIT**



I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.

Marilyn Brooks  
Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Tarissa Lawhon, this the 24 day of October, 2016, to certify which, witness my hand and seal of office.

Tarissa Lawhon      Tarissa Lawhon      Accounting Administrator  
Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath

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\_\_\_\_\_  
 Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

\_\_\_\_\_  
 Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath