



Quote WTLLC00008903

Page 1 of 1
Date 8/27/2018

Warren Truck and Trailer, LLC
15768 US HIGHWAY 271 NORTH
Talco TX 75487

Phone (888) 734-4400
Fax (903) 379-4400
WarrenTruckAndTrailer.com

Bill To	Ship To	Contact
PANOLA COUNTY, TEXAS 1121 EAST SABINE CARTHAGE TX 75533	PANOLA COUNTY PCT. 3 1121 EAST SABINE CARTHAGE TX 75633	MICHAEL ATWOOD (903) 693-3763 Ext. 0000

Purchase Order No.	Customer ID	Salesperson ID	Shipping Method	Payment Terms	Req Ship Date	Master No.
	PAN633	WACK	CUSTOMER PICKUP	Net10	07/0/0000	10,014,993

QTY	Item Number	Description	UOM	Unit Price	Ext. Price
1	U-9	YARDAGE: 3/4 FLOOR MATERIAL: 3/16" A1011 FRONT / MATERIAL: 24" 10 GA A1011 SIDE / MATERIAL: 18" 10 GA A1011 VERTICAL SIDE BRACE: YES HOIST / CYLINDER: VENDO VC416SF-ED	Each	\$8,270.00	\$8,270.00
	TAILGATE	AIR OPERATED: NO PANEL: 3 MATERIAL: 10 GA A1011 HEIGHT: 24" CHAINS: 5/16" DOUBLE ACTING: YES	Each	\$0.00	\$0.00
	DE OPTIONS #1	CABSHIELD: FULL WIDTH - 1/4 (18') ASPHALT APRONE: NONE BODY LIGHTS: LED	Each	\$0.00	\$0.00
1	TOW PACKAGE	NONE	Each	\$0.00	\$0.00
1	PAINT	WARREN BLACK	Each	\$0.00	\$0.00
1	INSTALL	COMPLETE INSTALLATION BY WARREN	Each	\$0.00	\$0.00
	REMOVE EXISTING BODY		Each	\$0.00	\$0.00

Quotation reviewed and accepted by:
(signed) *[Signature]*

Please fax back to us for entry as an order
NOTE: Quotation good for 10 days only

9-4-18

Subtotal	\$8,270.00
Misc	\$0.00
Tax	\$0.00
Ship & Handling	\$0.00
Trade In Allowance	\$0.00
Total	\$8,270.00

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**

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.
 WARREN TRUCK & TRAILER, LLC
 TALCO, TX United States

Certificate Number:
 2018-403502

Date Filed:
 09/13/2018

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.
 Panola County Road and Bridge Dept.

Date Acknowledged:

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.
 2018-10
 DUMP BED

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 UNSWORN DECLARATION

My name is _____, and my date of birth is _____.

My address is _____ (street), _____ (city), _____ (state), _____ (zip code), _____ (country).

I declare under penalty of perjury that the foregoing is true and correct.

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
 (month) (year)

 Signature of authorized agent of contracting business entity
 (Declarant)