



Sales Rep Name: Jimmy Taylor 3800 E. Centre Ave ProCare Service Rep: Joshua Czekanski Portage, MI 49009

Date: 2/28/2023 ID #: 230228105519

PROCARE PROPOSAL SUBMITTED TO:

Billing Acc Num:Name:Paul SabolShipping Acct Num:1075836Title:Division ChiefAccount NameCity of Pittsburgh EMSPhone:(412) 475-3799

Account Address 700 Filbert St Email: paul.sabol@pittsburghpa.gov

City, State Zip Pittsburgh, PA 15232

PROCARE COVERAGE							
Item No.	Model Number	Model Description	ProCare Program	Qty	Yrs		Total
1	6506	Power Cots	EMS Prevent	10	2		\$32,280.00
2	6390	Power-LOAD	EMS Prevent	7	2		\$29,680.00

1	6506	Power Cots	EMS Prevent		10	2		\$32,280.00
2	6390	Power-LOAD	EMS Prevent		7	2		\$29,680.00
PROG	RAM INCLUD	DES:						
EMS P	revent:							
	es parts, labor, tra							
	es 1 annual PM in es unscheduled s	•						
	es unscheduled si es battery replaci							
*Include	es product equipi	oment checklists.						
*Replace	ement parts do n	not include mattresses, and other D	isposable or expendable parts	5.				
Unless otherwise stated on contract, payment is expected upfront.						P	roCare Total	\$61,960.00
					İ	Discount	20%	
 						FI	INAL TOTAL	\$49,568.00
						Start Date:	2/28/2023	
						End Date:	2/27/2025	•
								'
Ctendan	0:		D 1:	C. stamen	Ci atuu			Data
Stryker	Signature		Date	Customer	Signatur	е		Date
				•				
The Ter	ms and Conditio	ons of this quote and any subsequen	at purchase order of the					
		governed by the Terms and Condition						
The ter		https://techweb.stryker.com	······································					
		ons referenced in the immediately p ner and Stryker are parties to a Mas						
1100 F1	<i>y</i>	tor und out your are parties to	101 001 1100 1191 11111111			Pıı	ırchase Order Number	
	This is not a	an invoice. A physical invo	pice will be mailed.	•			reliase of act traineer	
R		ent to: P.O. Box 93308 Chic		If	contra	ct is over \$	5,000 please send har	rd copy PO
	MENTS:						,	- Control of the cont
		posal and Purchase Order to procar	recoordinators@stryker.com.					
All infor	rmation containe	ed within this quotation is considere	-	y and is not su	bject to p	public disclos	ure.	
**Quote	pricing valid for	: 30 days.						
i								

SERIAL I	NUMBER SHEET		
Item No.	Model	Serial Number	Program
1	6506	170339297	EMS Prevent
2	6506	180541496	EMS Prevent
3	6506	170339295	EMS Prevent
4	6506	140339019	EMS Prevent
5	6506	180541495	EMS Prevent
6	6506	180640889	EMS Prevent
7	6506	180640890	EMS Prevent
8	6506	1809003500652	EMS Prevent
9	6506	170339296	EMS Prevent
10	6506	140339020	EMS Prevent
11	6390	161239854	EMS Prevent
12	6390	140240024	EMS Prevent
13	6390	140240023	EMS Prevent
14	6390	161240247	EMS Prevent
15	6390	171141796	EMS Prevent
16	6390	171141795	EMS Prevent
17	6390	161239706	EMS Prevent

Purchase Order Fo	orm				<i>s</i> tryker	®
Account Manager Cell Phone			Purchase Orde Expected Deliv			
Check box if Billing	same as Shipping		Stryker Quote	Number	2302281055	19
BILL TO	CUSTO	MER#	SHIP TO		CUSTOMER #	
Company Name Contact or Department Street Address Addt'l Address Line City, ST ZIP Phone Authorized Customer Initia	ls		Company Name Contact or Department Street Address Addt'l Address Line City, ST ZIP Phone Authorized Customer Initia	City of Pittsburg Paul Sabol 700 Filbert St Pittsburgh, PA (412) 475-3799	15232	
REFERENCE QUOTE	RIPTION	QTY	TOTAL			
Accounts Payable Co Name Email Phone	ntact Information			ker Terms and Condos://techweb.stryke		

Authorized Customer Signature

Stryker Quote Number

Printed Name

Title

Date

Signature

Attachment

230228105519

^{*}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.