

Tri-Co Communications, Inc. 719 S. Otis Avenue

Lecanto, FL 34461 Phone: 352-513-3880

Fax: 352-513-5925

QUOTATION 300012611

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Date: 01/30/2025

All quotes & estimates are valid for 30 days from the above date

BIII To:
OCALA, CITY OF
POLICE DEPARTMENT FLEET DIVISION
402 S PINE AVE
OCALA, FL 34471-1174

Ship To: OCALA, CITY OF POLICE DEPARTMENT 402 S PINE AVE OCALA, FL 34471-1174

Date	: 01/30/2025	Customer Rep: DEANN L MALOY 13	Те	rms: NET 30	
Qty	Item	Description		Unit Price	Extended
50	HAF4013A	"7/8/900 MHZ WIDEBAND LOW PROFILE, 3DE THROUGH HOLE NMO MOUNT"	"7/8/900 MHZ WIDEBAND LOW PROFILE, 3DB GAIN THROUGH HOLE NMO MOUNT"		2,231.50
50	HKN4191C	"CABLE, ASSEMBLY, MM,MOBILE PWR CABL 12 AWG, 20A"	"CABLE, ASSEMBLY, MM,MOBILE PWR CABLE 10 FT, 12 AWG, 20A"		1,331.00
100	MMSU-1	MAGNETIC MIC HOLDER	MAGNETIC MIC HOLDER		3,600.00
20	HMN1090D	"ACCESSORY KIT,MODIFIED STANDARD MC MIC,GREY" XTL2500	•		1,377.00
20	HSN4031B	"SPEAKER MODULE ASSEMBLY,EXT SPKR 7	"SPEAKER MODULE ASSEMBLY,EXT SPKR 7.5W"		1,110.80
1	1 FRG	FREIGHT	FREIGHT		25.00
1	1 NOTES	-		0.00	0.00
		THIS QUOTE IS PROVIDED IN ACCORDANCE THE NASPO PRICING GUIDELINES. THE CIT OCALA HAS REQUESTED THAT WE INCLUD CITY CONTRACT NUMBER #240027, WHICH NOTIFIES FISCAL BILLING THAT THESE QUO ARE IN ALIGNMENT WITH NASPO PRICING.	Y OF E THE		

ALL CREDIT CARD PAYMENTS ARE SUBJECT TO A 3% CONVENIENCE FEE.

Subtotal: \$9,675.30 Tax: \$0.00 Total Quote: \$9,675.30

Visit us at www.tri-co.us f in

Thank you for allowing us the opportunity to serve you!

FEIN: 59-1898707



Tri-Co Communications, Inc. 719 S. Otis Avenue Lecanto, FL 34461

Phone: 352-513-3880 Fax: 352-513-5925

Purchase Order Checklist

Marked as PO/ Contract/ Notice to Proceed on Company Letterhead

Email all PO to orders@tri-co.us

PO Date/ PO Number/ Contract Number

Vendor = Tri-Co Communications, Inc.

Payment (Billing) Terms:

Bill To: OCALA, CITY OF

POLICE DEPARTMENT FLEET DIVISION

402 S PINE AVE

OCALA, FL 34471-1174

Ship To: OCALA, CITY OF

POLICE DEPARTMENT

402 S PINE AVE

OCALA, FL 34471-1174

PO Amount must be equal to or greater than Order Total

Non-Editable Format (Word/Excel templates cannot be accepted)

Bill To Contact: MIKE SCROBLE mscroble@ocalapd.gov

Ship To Contact: MIKE SCROBLE mscroble@ocalapd.gov

Tax Exemption Status

Signatures (As required)