



(800) 687-0008
www.AscoEq.com



REMIT TO
ASCO EQUIPMENT
P.O. BOX 3888
LUBBOCK, TX 79452

ORDER NO ESA008675V1	DATE 06-29-2020
PAYMENT TERMS Net 30	

ASCO EQUIPMENT
2602 EAST FRONT STREET
TYLER TX 75702
(903) 593-0201

CUSTOMER NO BP0025606
CUSTOMER PO CNH Muni Lease

EQUIPMENT SALES AGREEMENT

INVOICE TO:
HOPKINS COUNTY PCT 1
ATTN COUNTY AUDITOR
PO BOX 288
SULPHUR SPRINGS TX 75483-0288

SHIP TO:
HOPKINS COUNTY PCT 1
ATTN COUNTY AUDITOR
PO BOX 288
SULPHUR SPRINGS TX 75483-0288

SALESMAN : David Drummond

DELIVERY TERMS :

Financed thru: CNH Industrial Capital America, LLC App2598200
Phone# 800-501-5711 Your CNH Cust/Note# 1660848638-61269001
Online Account Accesss www.cnhindustrialcapital.com

UNIT	QTY	UNIT PRICE	TOTAL
EQ0115388 Case 580SN Backhoe Case MODEL:580SN S/N:JJGN58SNJLC772026	1	112,750.00	112,750.00
24" Bucket	1	0.00	0.00
Standard Manufactures Warranty			
Thumb	1	0.00	0.00
Standard Manufactures Warranty			
EPG Premier Warranty 36 Mo or 3000 Hr	1	0.00	0.00
KEEP YOU GOING	1	0.00	0.00
"ASCO KEEP YOU GOING" Program Coverage applies while unit is covered under base or extended warranty up to 3 Years or 3000 Hours, whichever occurs first. Similar machine will be provided as loaner within ASCO's area of responsibility, no guarantee of special features or size (high flow, 3rd function hydraulics, cab, etc.			
TRADE EQ0118313 Case 580SL Backhoe Case MODEL:580SL S/N:JJC0268758	-1	5,000.00	-5,000.00
Customer Represents TRADE as Free & Clear of All Liens/Debts			
SUB TOTAL			107,750.00

TOTAL PURCHASE	112,750.00
LESS TRADE-IN(S)	-5,000.00
SALES TAX	0.00
TOTAL AMOUNT (USD)	107,750.00



PHYSICAL DAMAGE INSURANCE COVERAGE CONFIRMATION REQUEST

Date 06-29-2020

To: _____ Insured: _____
 Insurance Carrier TEXAS ASSOC OF COUNTIES RIS Name HOPKINS COUNTY
 Agent TEXAS ASSOCIATION OF COUNTIES Address 109 JEFFERSON ST
 Phone Number (512) 478-8753 City, St/Pr, Zip/Postal SULPHUR SPRINGS, TX 75483
 Fax Number _____ Home Phone _____
 Policy Number PR-1120-2019001-1 Business Phone (903) 438-4010

The above Insured authorizes you to furnish to the Seller/Lessor listed below with proof of insurance. **Please complete and send to the Seller/Lessor documentation (binder or policy) that confirms physical damage insurance coverage for the described Equipment and Value listed below, with the loss payable in favor of CNH Industrial Capital America LLC.** Seller/Lessor is responsible for retaining the documentation provided by the Insurance Carrier as proof of initial insurance coverage. This Request is for the benefit of the Seller/Lessor and Loss Payee only, and nothing in this document alters the Insured's obligation to obtain insurance on the Equipment as required by the underlying contract for its purchase and financing.

Seller/Lessor

Name ASSOCIATED SUPPLY COMPANY, INC
 Address 2602 EAST FRONT STREET
 City, St/Pr, Zip/Postal TYLER, TX 75702
 Business Phone (903) 593-0201
 Fax _____
 Email _____

Loss Payee

CNH Industrial Capital America LLC
 P.O. Box 1700
 New Holland, PA 17557

Equipment

New / Used	Year	Manufacturer	Description	Model	Serial Number/PIN	Value
NEW	2020	Case	Tractor Loader Backh	580SN	JJGN58SNJLC772026	\$ 110,025.00
NEW	2020	Allied	Thumb	Thumb	N/A	\$ 1,800.00
NEW	2020	Allied	_Construction Attach	24 inch buck	N/A	\$ 925.00
						\$
						\$
TOTAL						\$ 112,750.00

Attachments: _____

This authorization is for the period beginning 06-29-2020 and ending 07-01-2023 for the amount indicated above.

x
 Insured Signature

Trade-In

Year	Manufacturer	Description	Model	Serial Number/PIN
	Case	Tractor Loader Backhoe	580SL	JJCC268758

Comment from Insured (if any) to Insurance Carrier regarding trade-in