

**Midway Ford Commercial**  
**Fleet and Government Sales**  
 2777 N. Snelling Ave.  
 Roseville MN 55113



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**FCCM39 Contract # 170310**  
**2020 F-550 4x4 Regular Cab- 60" CA DRW XL F5H**

**Automatic Transmission**  
**Dual Front Air Bags**  
**AM/FM Radio**  
**Tilt Wheel**  
**Upfitter Switches**

**Standard**  
**40/20/40 Vinyl Front Seat**  
**4-Wheel ABS Brakes**  
**Air Conditioning**  
**225/70r19.5 All Season Tires**

**Front Tow Hooks**  
**Rubber Floor Covering**  
**Black Bumper**  
**7.3L V8**

| Options              | Code | Price | Select | Exterior Colors       | Code | Select |
|----------------------|------|-------|--------|-----------------------|------|--------|
| 19,000 GVWR          | 68U  | \$741 | x      | Blue Jeans Metallic   | N1   | x      |
| Brake Controller     | 52B  | \$246 | x      | Race Red              | PQ   |        |
| 4.88 Limited Slip    | X8L  | \$328 | x      | Caribou Metallic      | LQ   |        |
| 225/70r19.5 Traction | TGK  | \$195 | x      | Agate Black           | UM   |        |
| Block Heater         | 41H  | \$91  | x      | Magnetic Metallic     | J7   |        |
| PTO                  | 62R  | \$254 | x      | Ingot Silver Metallic | UX   |        |
| Back-up Alarm        | 76C  | \$127 | x      | Oxford White          | Z1   |        |
| Cloth 40/20/40 seat  | 1S   | \$91  | x      |                       |      |        |
| Spare Wheel & Tire   | 512  | \$319 | x      |                       |      |        |
| Running boards       | 18B  | \$292 | x      |                       |      |        |
| Option Total         |      |       |        | \$2,684               |      |        |

| Base Price                |  | Totals      | Extended Service Contracts                                                                  |  |  |  |
|---------------------------|--|-------------|---------------------------------------------------------------------------------------------|--|--|--|
|                           |  | \$34,612.80 | 7 year/75,000 mile                                                                          |  |  |  |
| Options Price Totals      |  | \$2,684.00  | PremiumCare Warranty                                                                        |  |  |  |
| Extended Warranty         |  |             | (Bumper to Bumper)                                                                          |  |  |  |
| Transit Impr Excise Tax   |  | \$20.00     |                                                                                             |  |  |  |
| Tax Exempt Lic            |  |             |                                                                                             |  |  |  |
| 6.5% Sales Tax            |  |             |                                                                                             |  |  |  |
| Document fee              |  |             |                                                                                             |  |  |  |
| Sub total per vehicle     |  | \$37,316.80 |                                                                                             |  |  |  |
| Number of Vehicles        |  | 2           |                                                                                             |  |  |  |
| Grand Total for all units |  | \$74,633.60 |                                                                                             |  |  |  |
|                           |  |             | You must have a active FIN code to participate in this purchase contract : FIN code # QD670 |  |  |  |
|                           |  |             | Purchase Order required prior to order placement                                            |  |  |  |
|                           |  |             | PO #                                                                                        |  |  |  |
|                           |  |             | Name of Organization                                                                        |  |  |  |
|                           |  |             | Address                                                                                     |  |  |  |
|                           |  |             | City, State, Zip                                                                            |  |  |  |
| Acceptance Signature      |  |             | Contact Person/ Phone #                                                                     |  |  |  |
| Print Name and Title      |  |             | Contact's e-mail address and fax #                                                          |  |  |  |
| Date                      |  |             |                                                                                             |  |  |  |