



3665 Park Central Blvd North
Pompano Beach, FL 33064
Toll-Free 1-800-949-0018 ext 206
Fax 1-954-725-3325

Allstate Capital Quotation

Prepared for City of Killeen

Thank you for giving Allstate Capital the opportunity to provide leasing for your future equipment acquisition. The quotation below is subject to credit approval. If you have not already completed our credit application, please complete the attached application and fax or mail it back to us as soon as possible.

We are pleased to offer you the following lease option(s) for your Equipment from **Marathon Fitness**

Lease Option 1: Equipment Cost: \$109,837.70

Terms: Term: Annual Payments
\$1.00 Residual
1st Payment Required In Advance

Stream of Payments: 1st Payment of \$9,400.00 - Due July 1st, 2016
Followed by: 2nd Payment of \$36,342.13 - Due October 1st, 2016
3rd Payment of \$36,342.13 - Due October 1st, 2017
4th Payment of \$36,342.13 - Due October 1st, 2018

If the installation date changes, we can modify the payment stream so we can keep your main billing date of October 1st. After you have made the payment on October 1st, 2018 you will take ownership of the equipment.

The above quote(s) are valid for thirty days. Payment amount does not include applicable sales tax. Processing the credit approval normally takes two to three business days from receipt of the application. To expedite matters, please fax the completed application as soon as possible. Pricing is valid for 30 days and based on final credit approval.

You will find that we work very efficiently in our effort to provide the leasing services you require. I look forward to working with you and being of service. Please give us a call if you any questions.

Sincerely,

Marco Ramazio
800-949-0018 x206

Property Schedule 1 to Municipal Lease and Option Agreement

This **Property Schedule** is entered into pursuant to Municipal Lease and Option Agreement dated as of April 19, 2016 between Lessor and Lessee.

1. **Interpretation.** The terms and conditions of the Municipal Lease and Option Agreement (the "Agreement") are incorporated herein.
2. **Property Description.** The Property subject to this Property Schedule is described in Exhibit A, attached hereto.
3. **Term and Payments.** Lease Term and Lease Payments are per the table below. Lessee shall have the option to prepay the Lease Payments due under this Property Schedule on any Payment Date by paying the Purchase Price shown in the table below, plus any other amounts due and owing at the time of prepayment.
4. **Property Cost.** The total acquisition cost of the Property is \$109,837.70.

Pmt #	Payment Date	Principal Balance	Total Payment	Interest Portion	Principal Portion	Purchase Price *
		109,837.70				
1	At Closing	100,437.70	9,400.00	0.00	9,400.00	Not Available
2	8-Oct-16	65,851.66	36,342.13	1,756.09	34,586.04	69,288.44
3	8-Oct-17	34,014.92	36,342.13	4,505.39	31,836.74	35,198.19
4	8-Oct-18	0.00	36,342.13	2,327.21	34,014.92	0.00
TOTALS			118,426.39	8,588.69	109,837.70	

* Purchase Price after the current lease payment has been made.

IN WITNESS WHEREOF, Lessor and Lessee have caused this Property Schedule to be executed in their names by their duly authorized representatives.

Lessor: Municipal Asset Management, Inc.
By:
Name: Paul E. Collings
Title: President

Lessee: City of Killeen
By:
Name:
Title:

Attest:
By:
Name:
Title:

EXHIBIT B
Certificate of Acceptance to Municipal Lease and Option Agreement

This **Certificate of Acceptance** is pursuant to Municipal Lease and Option Agreement dated as of April 19, 2016 and the related Property Schedule, between Lessor and Lessee (the "Agreement").

1. Property Acceptance. Lessee hereby certifies and represents to Lessor that the Property referenced in the Agreement has been acquired, made, delivered, installed and accepted as of the date indicated below. Lessee has conducted such inspection and/or testing of the Property as it deems necessary and appropriate and hereby acknowledges that it accepts the Property for all purposes. Lessee will immediately begin making Lease Payments in accordance with the times and amounts specified herein. LESSOR MAKES NO (AND SHALL NOT BE DEEMED TO HAVE MADE ANY) WARRANTIES, EXPRESS OR IMPLIED, AS TO ANY MATTER WHATSOEVER, INCLUDING, WITHOUT LIMITATION, THE DESIGN, OPERATION OR CONDITION OF, OR THE QUALITY OF THE MATERIAL, EQUIPMENT OR WORKMANSHIP IN, THE PROPERTY, ITS MERCHANTABILITY OR ITS FITNESS FOR ANY PARTICULAR PURPOSE, THE STATE OF TITLE THERETO OR ANY COMPONENT THEREOF, THE ABSENCE OF LATENT OR OTHER DEFECTS (WHETHER OR NOT DISCOVERABLE), AND LESSOR HEREBY DISCLAIMS THE SAME; IT BEING UNDERSTOOD THAT THE PROPERTY IS LEASED TO LESSEE "AS IS" ON THE DATE OF THIS AGREEMENT OR THE DATE OF DELIVERY, WHICHEVER IS LATER, AND ALL SUCH RISKS, IF ANY, ARE TO BE BORNE BY LESSEE.

2. Bank Qualification. Lessee designates this Property Schedule as a "qualified tax-exempt obligation" as defined in Section 265(b)(3)(B) of the Internal Revenue Code of 1986, as amended. Lessee reasonably anticipates issuing tax-exempt obligations (excluding private activity bonds other than qualified 501(c)(3) bonds and including all tax-exempt obligations of subordinate entities of the Lessee) during the calendar year this Property Schedule was funded, in an amount not exceeding \$10,000,000.
_____ Lessee initial here, only if Bank Qualification is applicable.

IN WITNESS WHEREOF, Lessee has caused this Certificate of Acceptance to be executed by their duly authorized representative.

Acceptance Date:
Lessee: City of Killbuck
By:
Name:
Title:

MUNICIPAL ASSET MANAGEMENT, INC.

25288 FOOTHILLS DRIVE NORTH
GOLDEN, CO 80401
PHONE: 303-273-9494
FAX: 303-273-9505
EMAIL: PECOLLINGS@MAMGT.COM

INVOICE

INVOICE NO: 04192016W1
DATE: April 19, 2016

To: City of Killeen
1700 East Stan Schlueter Loop
Killeen, TX 76542

TERMS
Due At Closing

DESCRIPTION	AMOUNT
First Payment for Municipal Lease and Option Agreement dated as of April 19, 2016 between Municipal Asset Management, Inc., Lessor and City of Killeen, Lessee.	\$9,400.00

SUBTOTAL	\$9,400.00
TOTAL DUE	\$9,400.00

Please make check payable to Municipal Asset Management and mail it to the following address:

25288 Foothills Drive North
Golden, CO 80401

IF YOU HAVE ANY QUESTIONS CONCERNING THIS INVOICE, CALL: MUNICIPAL ASSET MANAGEMENT, PAUL COLLINGS, 303-273-9494

THANK YOU FOR YOUR BUSINESS!

EXTRAORDINARY



Marathon Fitness

P.O. Box 17705
 www.MarathonFitness.com
 Sugar Land, TX 77496
 Tel:(800) 391-9496 Fax:(888) 240-9360

Sales Proposal

Date Jun 6, 2016	Page Page 1 of 2
Proposal Number QT0006772	

Marathon Fitness

Fitness Center Specialists

Bill To:

M0142-City of Killeen
 P.O. Box 1329
 Killeen, TX 76540

Ship To:

Killeen Lions Club (PM)
 1700 E. Stan Schleuter Loop, Bldg. A
 Killeen, TX 76540
 Ryan Long

Salesperson	Proposal Valid Until	Terms
Demariee Anderson	8/5/2016	Net 30

Qty.	Item Number	Description	Unit Retail	Sales Price	Extended Price
9	TRM 835 V2	TRM 835 Treadmill, 120v - P30 Console, Version 2	\$ 8,755.00	\$ 6,128.50	\$ 55,156.50
2	RBK 835	RBK 835 Recumbent Bike, P30 Console	\$ 4,175.00	\$ 2,866.50	\$ 5,733.00
1	UBK 835	UBK 835 Upright Bike, P30 Console	\$ 3,865.00	\$ 2,656.50	\$ 2,656.50
3	EFX 835	EFX 835 - Dual action w/adjustable Crossramp® - P30 Console	\$ 7,495.00	\$ 5,246.50	\$ 15,739.50
2	AMT 835 - OS	AMT 835 - Adaptive Motion Trainer- P30 Console OPEN STRIDE30 Console	\$ 9,395.00	\$ 6,576.50	\$ 13,153.00
17	PHTCLCAP3210XX105	Audio Entertainment Cap - 900 MHz integrated wireless audioreceiver for P30 &P20 consoles	\$ 199.00	\$ 159.20	\$ 2,706.40
9	XTRM P10/30 TRMP3L3	Extended Warranty Treadmill P10/30 Console with 915MHZ Receiver 3 Years Parts/3 Years Labor	\$ 999.00	\$ 999.00	\$ 8,991.00
3	XBIKE P10/30 BIKEP3L3	Extended Warranty RBK/UBK P10/30 Console with 915MHZ Receiver 3 Years Parts/3 Years Labor	\$ 499.00	\$ 499.00	\$ 1,497.00
3	XEFX P10 /30 EFXP3L3	Extended Warranty EFX P10/30 Console with 915MHZ Receiver 3 Years Parts/3 Years Labor	\$ 549.00	\$ 549.00	\$ 1,647.00
2	XAMT P10/30 AMTP3L3	Extended Warranty AMT P10/30 Console with 915MHZ Receiver 3 Years Parts/3 Years Labor	\$ 549.00	\$ 549.00	\$ 1,098.00
2	9-5250-8G-LCD	8-Series Gauntlet w/LCD Display (no TV)*** 3 years parts/labor warranty	\$ 7,260.00	\$ 5,501.20	\$ 11,002.40
2	PGR9XTL020100GEN	Cardio Theater xTV Receivers 900 MHz External Wireless Receiver includes 1 power cord per receiver; specify 1 option below for C-Safe Cord)...[CXECSS101 (Short CSAFE cable)]...or...[CXECSS101 (Long CSAFE cable)]...or...[CXKIT008101 (12V power cable)]	\$ 139.00	\$ 111.20	\$ 222.40
1	FREIGHT	Freight	\$ 2,860.00	\$ 2,860.00	\$ 2,860.00
1	EQUIP INSTALL	Equipment Installation	\$ 1,875.00	\$ 1,875.00	\$ 1,875.00

Quotation continued on next page ...



EXHIBIT 7



Marathon Fitness

P.O. Box 17705
 www.MarathonFitness.com
 Sugar Land, TX 77496
 Tel:(800) 391-9496 Fax:(888) 240-9360

Sales Proposal

Date Jun 6, 2016	Page Page 2 of 2
Proposal Number QT0006772	

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 Killeen, TX 76540
 Ryan Long

Salesperson Demarree Anderson	Proposal Valid Until 8/5/2016	Terms Net 30
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Qty.	Item Number	Description	Unit Retail	Sales Price	Extended Price
-1	TRADE - EQUIPMENT	Trade In Equipment: Delivered July 2013 - Price valid until July 2016 9 - TRM833 (AMWZF12130021, 006,005,012,011,007,017,016,010) 1 - CLM835 (AB34F17130003) 2 - RBK835 (AXHGE22130013, 014) 1 - UBK835 (AYZGE15130008) 3 - EFX835 (ADFXH06120008, 001, ADFH02120051) 3 - AMT835 (AJTEG26120032, 037, 040)	\$ 14,500.00	\$ 14,500.00	\$ -14,500.00
	NOTE	Client replacing 1 climber and 1 amt with 2 stepmills Client keeping 3 - EFX833 (AEXXF1113008, AEXXG09120012, AEXXH6120008)			
	BUY BOARD	BUY BOARD INFORMATION Vendor: Team Marathon Fitness, Address: PO Box 17705, Sugar Land, TX 77496 Phone: (281) 565-2307, Contact: Paul Croegaert, Email: paul@marathonfitness.com Federal ID: 68- 05446644, Contract: Athletic, PE & Gym. Supplies H.D. Exercise Eq. & Accessories #502-16, Effective Date: 4/1/2016			
	NOTE	***Open Market			

Subtotal	\$ 109,837.70
Sales Tax 0.00%	\$ 0.00
Total	\$ 109,837.70

I accept the terms and conditions of this proposal. Prices are valid for 30 days. Equipment remains the property of Marathon Fitness until paid in full.

Signature: _____ PO# _____

Printed Name: _____ Title: _____

DELIVERY INSTRUCTIONS:

Must arrive by ___ / ___ / _____ Loading Dock: Yes ___ No ___
 Elevator: Yes ___ No ___
 Frame: _____ Upholstery: _____

