OFFICE OF THE SHERIFF WALLER COUNTY

100 Sheriff R. Glenn Smith Dr. • Hempstead, Texas 77445-4699
979 / 826-8282 • FAX 979 / 826-7781

SHERIFF TROY GUIDRY

Date: 7/29/2026

To: R.R. Schields, Chief Deputy OK MSJ 7.30.26
A. Turner, Admin Captain

Thru: P. Lillibridge, LE Captain 7-29-26

From: D. Park, Lieutenant

Re: Purchase Request – 2026 White Can-Am Defender

Request For Purchase Order

I am requesting approval to purchase one (1) 2026 Can-Am Utility Vehicle to enhance the Waller County Sheriff's Office Search and Rescue capabilities and support community engagement initiatives. This vehicle will provide increased mobility in areas inaccessible to standard patrol vehicles, allowing personnel to more effectively conduct search operations, emergency response, and public safety missions in rural, wooded, and off-road environments. In addition to Search and Rescue operations, the utility vehicle will be utilized during community outreach events, public safety demonstrations, and other department-sponsored engagements to enhance public interaction and promote the Sheriff's Office within the community.

The total purchase amount is **$38,529.74**, based on the attached vendor quote provided by Pro Powersports of Conroe.

This purchase will be charged to line item **125-516-581700 – Equipment**.

Quantity	Description	Total Cost
1	2026 Can-AM UTV	$35,736.00
1	Handling Fee	$1,295.00
1	Doc Fee	$200.00
1	Registration	$33.00
1	Accessories	$908.78
1	Labor Install	$300.00
1	VIT	$56.96
1	Shipping Fee	$0.00
1	Sales Tax	$0.00
1	Total Sales	$38,529.74

PO5556045

BILL OF SALE

No._____

PRO POWERSPORTS
13895 Hwy. 105 West
Conroe, TX 77304
Local: (936) 588-1970
Fax: (936) 588-2070
www.propowersportsofconroe.com

Date 07 / 28 / 2026 Salesperson MICHAEL J WALTER Mgr. _____

Purchaser WALLER COUNTY SHERIFF E-mail D.PARK@WALLERCOUN

Street Address _____

City _____ State _____ Zip _____

Work # _____ Home # _____

Mobile # 979-826-8282 Fax # _____

VIN	Stock #	Year	Make	Model	Color
3JBKUAX4XTK013771	013771	2026	CAN-AM	0008MTE0D	WHI

ACCESSORIES

ACCESSORIES TOTAL	$908.78

Sales Comments

Finance Comments

XX ☑ New ☐ Used

Safety Fee	$0.00
PRICE #1	$35,736.00
PRICE #2	
PRICE #3	
TRADE ALLOWANCE	$0.00
TRADE PAY OFF	$0.00
SUBTOTAL	$35,736.00
HANDLING	$1,295.00
DOCUMENTARY FEE	$200.00
STATE INSPECTION	$0.00
VEHICLE TAX	$0.00
LIC. / REGISTRATION	$33.00
ACCESSORIES	$908.78
SALES TAX	$0.00
INSTALLATION	$300.00
EXT. WARRANTY/ESC	$0.00
VIP MAINTENANCE	$0.00
THEFT/GAP	$0.00
ROAD HAZARD/Battery	$0.00
VIT	$56.96
SUBTOTAL	$38,529.74
DOWN PAYMENT	$0.00
BALANCE DUE	$38,529.74

TRADE

Year	Make	Model	Color	Mileage

VIN _____ Financed Through: _____

A DOCUMENTARY FEE IS NOT AN OFFICIAL FEE. A DOCUMENTARY FEE IS NOT REQUIRED BY LAW, BUT MAY BE CHARGED TO BUYERS FOR HANDLING DOCUMENTS RELATING TO THE SALE. A DOCUMENTARY FEE MAY NOT EXCEED A REASONABLE AMOUNT AGREED TO BY THE PARTIES THAT IS NOT MORE THAN THE MAXIMUM AMOUNT ALLOWED BY THE STATE. THIS NOTICE IS REQUIRED BY LAW.

ODOMETER MILEAGE STATEMENT - SELLING VEHICLE

Federal regulations require you to state the odometer mileage upon transfer of ownership. A inaccurate or untruthful statement may make you liable for damages to the transferee, for attorney fees, and for civil or criminal penalties, pursuant to sections 409, 412 and 413 of the Motor Vehicle Information and Cost Savings Act of 1972 (Pub. L 92-513, as amended by Pub. L 94-364).

I, _____ state that the odometer of the vehicle described above now reads _____ miles/kilometers.

Check one box only.

- ☐ (1) I hereby certify that to the best of my knowledge the odometer reading as stated above reflects the actual mileage of the vehicle described above.
- ☐ (2) I hereby certify that to the best of my knowledge the odometer reading as stated above reflects the amount of mileage in excess of designated mechanical odometer limit of 99,999 miles/kilometers of the vehicle described above.
- ☐ (3) I hereby certify that to the best of my knowledge the odometer reading as stated above is NOT the actual mileage of the vehicle described above and should not be relied upon.

Check one box only.

- ☐ (1) I hereby certify that the odometer of said vehicle was not altered, set back, or disconnected while in my possession, and that I have no knowledge of anyone else doing so.
- ☐ (2) I hereby certify that the odometer was altered for repair or replacement purposes while in my possession, and that the mileage registered on the repaired or replacement odometer was identical to that before such service.
- ☐ (3) I hereby certify that the repaired or replacement odometer was incapable of registering the same mileage, that it was reset to zero, and that the mileage on the original odometer or the odometer before repair was _____ miles/kilometers.

DISCLAIMER OF WARRANTIES: Any warranties on the products sold hereby are those made by the manufacturer. Pro Powersports of Conroe hereby expressly disclaims all warranties, either expressed or implied, including any implied warranty or merchantability or fitness for a particular purpose, and neither assumes nor authorizes any other person to assume for it any liability in connection with the sale of said products.

Lender: NONE	PAYMENTS
	60
Address:	48
	36
Phone:	24

I understand and agree that this order includes all of the terms and conditions on the face hereof. That this order cancels and supersedes any prior agreements with dealer. I certify that I am of legal age to execute binding contracts in this state. All agreements made between Pro Powersports of Conroe and Purchaser must be disclosed in writing on this Bill of Sale. All verbal agreements are considered nonbinding. I acknowledge and understand that I will read my owners manual. All unit sales are final and non-refundable. All VIP pre-paid maintenance plans can not be cancelled and are non-refundable. Not Valid unless accepted and signed by an officer of the company. **NO REFUNDS OR EXCHANGES ON PARTS/ACCESSORIES AFTER 14 DAYS - REFUNDS OR EXCHANGES ON SPECIAL ORDERS WILL BE CHARGED A 20% RESTOCKING FEE. UNIT DEPOSITS FOR ANY/ALL DEALER TRANSFERS IS NON REFUNDABLE.** AG EXEMPTION STATUS IS DICTATED BY THE STATE OF TEXAS AND PROOF THEREOF IS THE SOLE RESPONSIBILITY OF THE BUYER. ANY SALES TAX LIABILITY IS THE SOLE BURDEN OF THE BUYER AND NOT PRO POWERSPORTS OF CONROE. IF 90 DAYS AFTER A UNIT/PARTS/LABOR DEPOSIT IS TAKEN AND THE UNIT/PARTS/LABOR HAS NOT BEEN DELIVERED TO CUSTOMER THEN THE ENTIRE DEPOSIT WILL BE FORFEITED.

Buyer's Signature _____ Date _____ Accepted by: _____ Dealer or its Authorized Representative

NEW

Pro Powersports of Conroe
13895 Hwy. 105 West
Conroe, TX 77304
936-588-1970

Part Quote

Sold To: Counter Sale
Date: 07/29/2026 1:38 PM

Waller County Sheriff

Sold	S/O	Lay	P/U	Part Number	Sup	Description	Ext Price	Bin	Ava
0	1	0	0	715009158	SD	BUMPER REAR KIT UR	$406.89	700	0
1	0	0	0	715006140	SD	LUGGAGE RACK REAR KIT UR	$501.89	700	1

Subtotal	$908.78
Sales Tax	$74.98
Quote Total	$983.76

26 hd11 max ltd wht

ALL SALES QUOTES ARE GOOD FOR 10 DAYS DUE TO PRICING AND AVAILABILITY CHANGES.

THANK YOU.....

Labor $300.00

(This is not an Invoice)

Form **W-9**
(Rev. March 2024)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Go to *www.irs.gov/FormW9* for instructions and the latest information.

Give form to the requester. Do not send to the IRS.

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific Instructions on page 3.

1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)

PROFESSIONAL POWERSPORTS #1, LLP

2 Business name/disregarded entity name, if different from above.

DBA PRO POWERSPORTS OF CONROE

3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes.

☐ Individual/sole proprietor ☐ C corporation ☐ S corporation ☐ Partnership ☐ Trust/estate

☑ LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) . . . . P

Note: Check the "LLC" box above and, in this entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner.

☐ Other (see instructions)

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any)

Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any)

(Applies to accounts maintained outside the United States.)

3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions . . . . . ☐

5 Address (number, street, and apt. or suite no.). See instructions.

13895 HWY 105 W

Requester's name and address (optional)

6 City, state, and ZIP code

CONROE, TX 77304

7 List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number

			–			–				

or

Employer identification number

2	0	–	0	0	7	0	3	7	0

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here Signature of U.S. person [signature] Date 5-16-2024

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/FormW9*.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they