



REQUEST FOR QUOTE

Date _____

Salesperson _____
Company Name _____
Address _____

Phone _____
Fax _____
Email _____
Contact _____

New Quote Requote Spec Change

Project Name/File Title _____

Description of Product _____

Current Vendor _____ Weight of Unit _____

Corrugated Style and Color
(RSC, FOL, DST, RETT, KRAFT OR #3 WHITE, etc...) _____

Board Strength _____ SW DW TW Special _____

Printing Required Yes No Panels _____ Colors _____ Artwork Available Yes No

Estimated Monthly Volume _____

Release Quantities (Limit 3) _____ @ _____ , _____ @ _____ , _____ @ _____

KDF Set Up Sample Required/Due Date _____ First Article Yes No

Special Instructions (Vendor Preferences, Material Preferences, Delivery Requirements, Drop-testing, etc.)

