Format No.:

	Customers Name:																
	Contact																
1	Address																
			Г														
		(0)				(R)					_						
	Contacts		(O)				(R)				(M	obil)					
		(Fax)						Ema	iil:								
	Inquiry Received Through		ved	Tender													
				Letter													
				Personal Reference Phone													
2	Last Dat	e of su	ıbmitt	ing Quo	tation) :											
	Product	:															
		1															
3	Sr. No.	Item	size	Criteria-1		Criteria-2		Criteria-:		3	Schedule			Remarks			
												Delivery Date		9			
					-				 								
	Cost Est	imatio	n:														
	Sr. 5												Estima	te cost		Sales Price	
	No			Descr	escription				Qty.			\$. per Kg.			\$. Per kg.		
4																	

Format No.:

	Assum	ptions								
5	Sr. No	Description	on	Quantity.	Estimate cost \$ per Kg.					
6	Commo	ercial Terms		•						
	Α	Payment								
	В	Discount								
	С	Taxes								
	D	Packing Charge								
	E	Transportation Charge								
	F	Inspection Requirement	Yes / No							
	G	Name of Inspection Agency								
	Н									
	ı									
Prepare	ed by :			Approved by :						
Date :				Date :						