



# Quotation

Quote Number: \_\_\_\_\_

Quote Date: \_\_\_\_\_

708-756-4890 phone

708-756-4892 fax

Page: \_\_\_\_\_

Quoted To: \_\_\_\_\_

Ship To: \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Customer ID	Good Thru	Job Name/Customer PO #	Sales Rep

Qty/Footage	Gauge/ Item/ Size/Color	Description	Unit Price	Extension

Your signature below will verify all dimensions, sizes and quantities for the product we will fabricate for you. Your signature will make the company you represent responsible for payment of the invoice for the above product(s) according to our terms. Quotes are subject to change without notice and unless noted are for immediate acceptance.  
 BE ADVISED THAT FINAL WEIGHT OF YOUR ORDER MAY ALTER THE PRICE OF FREIGHT.

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

Subtotal:	
Sales Tax: (IL only)	
Freight: FOB Chicago Heights, IL	
<b>Total:</b>	