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**REQUEST FOR QUOTE - SALES**

* DATE		* PHONE	
* NAME		* FAX	
TITLE		* EMAIL	
* COMPANY			
* ADDRESS			
* CITY/STATE/ZIP			

\* Required fields.

LSC CONTACT	
FROM	
EXT.	

Line	QTY.	DESCRIPTION	UNIT PRICE	EXT. PRICE
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				

Pricing reflects total quantities and is valid for 30 days from the above date.  
 Delivery time may be dependent upon manufacturer's stock at time of order.

SUBTOTAL	
SALES TAX	
SHIPPING	
<b>TOTAL</b>	