PRO-PAKS

Personalized Eye Tray Systems

Quotation submitted by:	
Date:	
Customer (name of the business);	
Customer contact name:	
Address:	
Phone:	
FAX:	
Email:	
Special packaging instructions:	
Pack Description:	
Estimated monthly usage:	

INSTRUCTIONS FOR USE:

1. BE AS PRECISE AS POSSIBLE. THIS WILL ALLOW US TO PRODUCE A QUICK TURNAROUND. EXAMPLES: HAVE THE RIGHT QUANTITIES. THE BEST WAY TO GET YOUR QUOTE DONE FAST IS TO SEND US AN EXAMPLE OF THE PRODUCTS THAT ARE BEING USED NOW. IF YOU JUST SAY " BLUE DRAPE" OR "27GA CANNULA" WE DO NOT KNOW WHAT YOU NEED.
2. BE NEAT. SOME ITEMS ARE VERY CLOSE TO EACH OTHER IN NAME, NUMBER, ETC.
3. INDICATE IN DESCRIPTION IF THE EXACT ITEM IS REQUIRED AND NO SUBSTITUTION IS PERMISSABLE.
4. IF YOU NEED TO, USE MORE THAN ONE SHEET.

QTY	Description of the part

SEND, FAX, OR E-MAIL TO: **PRO-PAKS, LLC** **264 Quarry Rd.** **Milford, CT 06460** **Phone: 877-876-1215, 203-876-1215** **Fax: 203-877-3762** **E-mail: info@propaks.com**	**FORM # QA-0004-2** **TITLE: External Quote Form (Outside Sales)** **Current revision: 3-19-03** **Initial revision: 1-6-03**