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| Logo placeholder | QUOTE |
| Company Name  Company Slogan | INVOICE # No.  Date: Date |
| Street Address, City, ST ZIP Code  Phone Phone Fax Fax  Email | Expiration Date Date |

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| --- | --- | --- |
| To | Contact Name  Company Name  Street Address  City, ST ZIP Code  Phone  Customer ID No. |  |

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| --- | --- | --- | --- |
| salesperson | job | payment terms | due date |
|  |  | Due on receipt |  |

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| --- | --- | --- | --- |
| qty | description | unit price | line total |
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|  |  |  |  |
|  | | Subtotal |  |
|  | | Sales Tax |  |
|  | | Total |  |

|  |
| --- |
| Quotation prepared by:  This is a quotation on the goods named, subject to the conditions noted below: Describe any conditions pertaining to these prices and any additional terms of the agreement. You may want to include contingencies that will affect the quotation.  To accept this quotation, sign here and return: |
| Thank you for your business! |