



Quotation Request

Complete this form and include with all quotation requests for special pricing.

All fields are REQUIRED!
Sufficient information **MUST** be included for each field before the request will be reviewed.

Representative Name
Project/Opportunity Name
Estimated Close Date (When would SOR receive the PO?)
Customer Name (Who is the order sold to?)
End-User Name (if different from Customer) (Who will use the product?)
Geographical Install Location (Country/State)
Competition Bidding
Discount Justification (e.g. Potential for Future Business, Repeat Orders, Additional Quoting Opportunity, etc.)

In the table below, please provide the SOR Model Number, associated quantity and the discount percentage or requested sell price to the customer for each item. Commission percentage is **REQUIRED** for direct sale pricing requests.

If any item includes a special option and SOR Estimate/Quote Number is REQUIRED.

SOR Estimate/Quote Number

Type of sale Buy/Resell Direct Sale

Line	Qty.	SOR Model Number	Discount %/Sell Price	Commission %
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

Completed by _____